

# National End of Life Care Profiles for Local Authorities

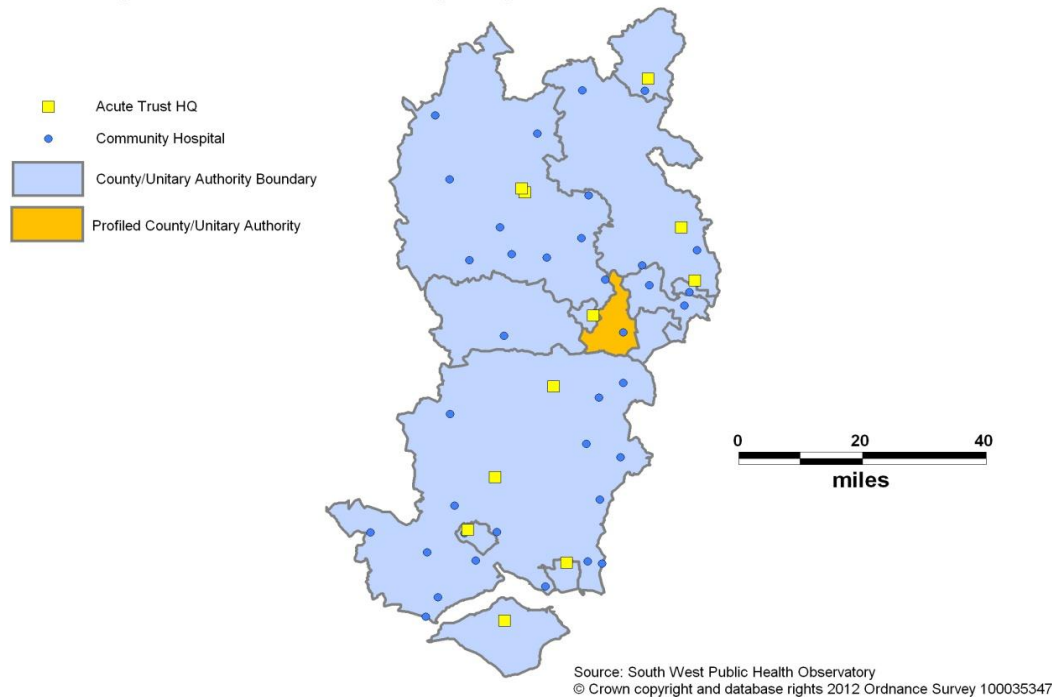
## Wokingham

### Introduction

This end of life care profile provides a snapshot of this upper tier local authority's position compared to England and its Strategic Health Authority (SHA). It can be used to benchmark and review the local authority's position over time. Commissioners and providers of end of life care can use the profile when discussing service need. If you would like to see how this local authority compares with others, then please use the End of Life Care Profiles interactive tool on the National End of Life Care Intelligence Network website: [www.endoflifecare-intelligence.org.uk/profiles.aspx](http://www.endoflifecare-intelligence.org.uk/profiles.aspx)

Local authority population: **163,222**  
SHA population: **4,145,485**

### Acute hospital trusts and community hospitals in NHS South Central



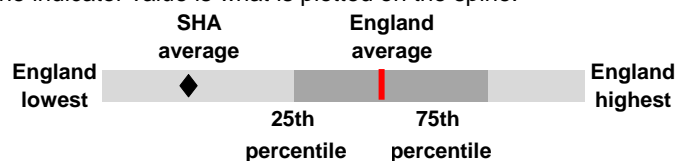
Note: Based on the best available data from the following sources: NHS Connecting for Health, Organisational Data Service, May 2012 and Community Hospitals Association, December 2011, with some modifications by the NEoLGIN. Mapped sites are shown in: [List of Acute Hospital Trust HQs and Community Hospitals](#)

## How to read the indicator spine chart

See the spine chart on the next page. This summarises the local authority position compared to England.

- Each indicator is numbered. Each number corresponds to a definition on the next page. The definitions give you more information about the indicator and its data source. More detailed definitions are given in the [Indicators Metadata Guide](#). It is especially important to read these for the social care indicators, which are included in these profiles for the first time.
- The two columns immediately to the right of the indicator name give **i)** the underlying number for that indicator, from which **ii)** the 'indicator value' (highlighted in grey) is calculated. The indicator value is what is plotted on the spine.

- Significantly lower than England average
- Not significantly different from England average
- Significantly higher than England average
- Significance not tested



- On the spine, the light grey bar shows the range of values found in England. The dark grey sections mark out the range within which the middle half of the observed values lie (25th to 75th percentile).

# End of Life Care Local Authority Profile - Wokingham

## Indicator spine chart

Domain	Indicator	LA number	LA indicator value	England average	England lowest	England range	England highest
Population	1. Percentage aged 65+ (persons)	22,601	14.0%	16.3%	7.0%		25.1%
	2. Percentage aged 65+ (males)	10,266	12.7%	14.5%	6.3%		23.0%
	3. Percentage aged 65+ (females)	12,334	15.2%	18.0%	7.7%		27.1%
	4. Percentage aged 75+ (persons)	10,137	6.3%	7.8%	3.4%		12.7%
	5. Percentage aged 75+ (males)	4,252	5.3%	6.3%	3.0%		10.8%
	6. Percentage aged 75+ (females)	5,884	7.3%	9.3%	3.8%		14.5%
	7. Percentage aged 85+ (persons)	2,836	1.8%	2.2%	0.9%		4.0%
	8. Percentage aged 85+ (males)	966	1.2%	1.5%	0.7%		2.8%
	9. Percentage aged 85+ (females)	1,870	2.3%	3.0%	1.0%		5.2%
	10. Percentage increase in population aged 85+ (projected to 2033)	9,300	227.9%	142.1%	24.5%		233.7%
	11. Percentage of resident population who are Black and Minority Ethnic	9,177	6.1%	9.1%	0.7%		60.6%
	12. Percentage resident in urban settlements	133,577	82.7%	81.1%	0.0%		100.0%
	13. Percentage resident in the most deprived quintile	0	0.0%	20.0%	0.0%		89.7%
Deaths	14. Crude death rate (persons) as a percentage	1,021	0.6%	0.9%	0.4%		1.3%
	15. Crude death rate (males) as a percentage	491	0.6%	0.9%	0.4%		1.4%
	16. Crude death rate (females) as a percentage	530	0.7%	0.9%	0.4%		1.4%
	17. Percentage of deaths aged 75+ (persons)	681	66.7%	66.7%	50.2%		75.3%
	18. Percentage of deaths aged 75+ (males)	293	59.7%	58.6%	42.2%		69.1%
	19. Percentage of deaths aged 75+ (females)	388	73.2%	74.2%	59.3%		82.4%
	20. Percentage of deaths aged 85+ (persons)	388	38.0%	36.2%	23.1%		46.4%
	21. Percentage of deaths aged 85+ (males)	139	28.2%	26.2%	14.8%		36.0%
Place of death	22. Percentage of deaths aged 85+ (females)	249	47.0%	45.5%	31.2%		55.4%
	23. Percentage of deaths in hospital*	519	50.8%	54.5%	42.2%		70.2%
	24. Percentage of deaths in own home	213	20.9%	20.3%	15.9%		27.2%
	25. Percentage of deaths in hospice*	80	7.8%	5.2%	0.1%		12.6%
Cause of death	26. Percentage of deaths in care home	192	18.8%	17.8%	3.7%		32.1%
	27. Percentage of deaths from respiratory disease (underlying cause)	145	14.2%	13.8%	11.2%		17.8%
	28. Percentage of deaths from respiratory disease (mentions)	360	35.2%	34.2%	27.9%		41.3%
	29. Percentage of deaths from cancer (underlying cause)	308	30.1%	27.7%	23.1%		31.4%
	30. Percentage of deaths from cardiovascular disease (underlying cause)	278	27.2%	29.6%	25.3%		35.3%
	31. Percentage of deaths from liver disease (mentions)	38	3.7%	3.8%	2.6%		6.7%
	32. Percentage of deaths from renal disease (mentions)	51	5.0%	5.8%	3.6%		8.2%
Deaths in hospital	33. Percentage of deaths from Alzheimers, dementia & senility (mentions)	150	14.7%	17.3%	7.9%		26.9%
	34. Percentage of terminal admissions that are emergencies	428	83.9%	89.7%	76.1%		97.0%
	35. Percentage of terminal admissions aged 85+	182	35.7%	37.8%	27.5%		49.4%
	36. Percentage of terminal admissions that are 8 days or longer	254	49.8%	48.8%	37.6%		57.8%
Care homes	37. Average number of bed days per admission ending in death	5,917	12.0	12.9	8.0		16.0
	38. Number of care homes per 1,000 population aged 75+	71	7.0	4.4	1.2		8.2
	39. Number of care home beds per 1,000 population aged 75+	1,324	130.6	114.1	35.7		169.6
Social care (SC)	40. Percentage of care homes achieving Gold Standard Framework	0	0.0%	1.6%	0.0%		14.7%
	41. Persons (aged 65+) discharged from hospital per 100,000 aged 65+	65	277	425	47		2,715
	42. Average user experience score (max. score 24), persons aged 65+	2,435	18	19	17		20
	43. Persons (65+) receiving Self Directed Support (per 100,000 aged 65+)	415	1,766	2,935	238		7,619
	44. Delayed transfers of care: persons (all ages) (per 100,000 aged 65+)	48	204	568	21		2,026
	45. Delayed transfers of care: days (all ages) (per 100,000 aged 65+)	1,550	6,594	15,956	239		60,629
	46. Persons (65+) with completed assessment (per 100,000 aged 65+)	985	4,190	5,054	1,343		11,209
	47. Persons (65+) with care package delivered (per 100,000 aged 65+)	655	2,787	3,186	768		8,683
	48. Carers (65+) who received social care support (per 100,000 aged 65+)	385	1,637.9	2,003.3	400.6		5,977.1
	49. Persons (65+) who received social care support (per 100,000 aged 65+)	1,580	6,722	8,297	4,819		20,543
SC Expenditure (Avg annual £'000s per 100,000 aged 65+)	50. Persons (65+) entitled to Carer's Allowance (per 100,000, aged 65+)	400	1,701.7	3,470.1	946.7		9,194.4
	51. Gross residential and nursing care (£'000s per 100,000 aged 65+)	£11,897	£50,612	£59,849	£33,157		£116,154
	52. As indicator 51, less NHS section 256 (£'000s per 100,000 aged 65+)	£11,152	£47,442	£57,239	£32,754		£115,930
	53. Home care (£'000s per 100,000 aged 65+)	£4,124	£17,543	£25,765	£12,518		£92,012
	54. Direct payments (£'000s per 100,000 aged 65+)	£719	£3,060	£3,420	£273		£15,457
	55. Day care or day services (£'000s per 100,000 aged 65+)	£938	£3,989	£4,246	£793		£21,608
	56. Meals (£'000s per 100,000 aged 65+)	£229	£975	£905	£0		£7,497

Notes: The totals for males and females combined may not equal the 'persons' total, due to rounding. \* It is not possible to distinguish between hospital deaths and deaths in specialist palliative care units/hospices that are based in hospitals, so hospital deaths may be an over-count and hospice deaths an under-count.

## Indicator notes and definitions

1. Percentage of persons who are aged 65 and over, average annual for 2008-10. ONS
2. Percentage of male population who are aged 65 and over, average annual for 2008-10. ONS
3. Percentage of female population who are aged 65 and over, average annual for 2008-10. ONS
4. Percentage of persons who are aged 75 and over, average annual for 2008-10. ONS
5. Percentage of male population who are aged 75 and over, average annual for 2008-10. ONS
6. Percentage of female population who are aged 75 and over, average annual for 2008-10. ONS
7. Percentage of persons who are aged 85 and over, average annual for 2008-10. ONS
8. Percentage of male population who are aged 85 and over, average annual for 2008-10. ONS
9. Percentage of female population who are aged 85 and over, average annual for 2008-10. ONS
10. Percentage increase in the population aged 85 and over, projected to 2033, 2008-based national population projections. ONS
11. Percentage of resident population who are BME, 2001. NCHOD
12. Percentage of residents in urban settlements (population over 10,000), average annual for 2008-10. ONS
13. Percentage of residents in the most deprived quintile average annual for 2008-10. DCLG.
14. Crude death rate (persons) as a percentage, average annual for 2008-10. ONS
15. Crude death rate (males) as percentage, average annual for 2008-10. ONS
16. Crude death rate (females) as percentage, average annual for 2008-10. ONS
17. Percentage of all deaths that are aged 75 and over, average annual for 2008-10. ONS
18. Percentage of male deaths that are aged 75 and over, average annual for 2008-10. ONS
19. Percentage of female deaths that are aged 75 and over, average annual for 2008-10. ONS
20. Percentage of all deaths that are aged 85 and over, average annual for 2008-10. ONS
21. Percentage of male deaths that are aged 85 and over, average annual for 2008-10. ONS
22. Percentage of female deaths that are aged 85 and over, average annual for 2008-10. ONS
23. Percentage of all deaths that occur in hospital, average annual for 2008-10. ONS
24. Percentage of all deaths that occur in own home, average annual for 2008-10. ONS
25. Percentage of all deaths that occur in a hospice average annual for 2008-10. ONS
26. Percentage of all deaths that occur in a care home, average annual for 2008-10. ONS
27. Of all deaths, percentage that die from respiratory disease as the underlying cause of death, average annual for 2008-10. ONS
28. Of all deaths, percentage that die from respiratory disease listed as either the underlying cause of death or as a contributory cause of death (mentions), average annual for 2008-10. ONS
29. Of all deaths, percentage that die from cancer as the underlying cause of death, average annual for 2008-10. ONS
30. Of all deaths, percentage that die from cardiovascular disease as the underlying cause of death, average annual for 2008-10. ONS
31. Of all deaths, percentage that die from liver disease listed as either the underlying cause of death or as a contributory cause of death (mentions), average annual for 2008-10. ONS
32. Of all deaths, percentage that die from renal disease listed as either the underlying cause of death or as a contributory cause of death (mentions), average annual for 2008-10. ONS
33. Of all deaths, percentage that die from Alzheimer's disease, dementia or senility listed as either the underlying cause of death or as a contributory cause of death (mentions), average annual for 2008-10. ONS
34. Percentage of hospital admissions ending in death (terminal admissions) that are emergencies, 2010/11. HES
35. Percentage of hospital admissions ending in death (terminal admissions) that are aged 85+ and over, 2010/11. HES
36. Percentage of hospital admissions ending in death (terminal admissions) with a stay of 8 days or longer, 2010/11. HES
37. Average (mean) number of bed days per admission that end in death, 2010/11. HES
38. Number of care homes per 1,000 population aged 75 and over (average 2008-10). CQC data extract Feb 2012 and ONS
39. Number of care home beds per 1,000 population aged 75 and over (average 2008-10). CQC data extract Feb 2012 and ONS
40. Percentage of care homes achieving Gold Standard Framework (GSF). GSF data extract Feb 2012 and CQC extract Feb 2012.
41. Persons (aged 65+) discharged from hospital for rehabilitation. per 100,000 aged 65+. From NI 125, Q3 2010-11, HSCIC. & ONS.
42. Average user experience score (aged 65+), (max score 24) From NI 127, 2010/11, HSCIC.
43. Persons (65+) receiving Self Directed Support, per 100,000, 65+. From NI 130, 2010/11, HSCIC. 2010, ONS.
44. Delayed transfers of care: persons (all ages), per 100,000, 65+. From NI 131\*, 2010/11 HSCIC. 2010, ONS.
45. Delayed transfers of care: days per month (all ages), per 100,000, 65+. From NI 131\*, 2010/11 HSCIC. 2010, ONS.
46. Persons (65+) with completed assessment, per 100,000, 65+. From NI 132\*, 2010/11 HSCIC. 2010, ONS.
47. Persons (65+) with care package delivered, per 100,000, 65+. From NI 133\*, 2010/11 HSCIC. 2010, ONS.
48. Carers (65+) who received social care support, per 100,000, 65+. From NI 135, 2010/11 HSCIC. 2010, ONS.
49. Persons (65+) who received social care support, per 100,000, 65+. From NI 135, 2010/11 HSCIC. 2010, ONS.
50. Persons (65+) entitled to Carer's Allowance, per 100,000, 65+. Aug 2011, DWP caseload. 2011, ONS.
51. Residential and nursing care, average annual gross expenditure (£'000s per 100,000, 65+ ), 2010/11 HSCIC. 2010, ONS.
52. Residential and nursing care, average annual gross expenditure less NHS Section 256 (£'000s per 100,000, 65+), 2010/11 HSCIC. 2010, ONS.
53. Home care expenditure (£'000s per 100,000, 65+), 2010/11, HSCIC. 2010, ONS.
54. Direct payments expenditure (£'000s per 100,000, 65+), 2010/11, HSCIC. 2010, ONS.
55. Day care/day services expenditure (£'000s per 100,000, 65+) 2010/11, HSCIC. 2010, ONS.
56. Meals expenditure (£000's per 100,000, aged 65+) 2010/11, HSCIC. 2010, ONS.

### Abbreviations

**BME** - Black and Minority Ethnic, **CQC** - Care Quality Commission, **DCLG** - Department for Communities and Local Government, **DH** - Department of Health, **DWP** - Department of Work and Pensions, **GSF** - Gold Standard Framework, **HES** - Hospital Episode Statistics, **NCHOD** - National Clinical and Health Outcomes Knowledge Base, **NI** - National Indicator, **HSCIC** - Health and Social Care Information Centre, **ONS** - Office for National Statistics, **SC** - Social Care, **SPC** - Specialist Palliative Care.

\* Discontinued National Indicator

## Place and cause of death

Source: ONS Mortality Data 2008-10

	All causes	Underlying cause of death			Causes mentioned on death certificate			
		Cancer	Cardiovascular disease	Respiratory disease	Alzheimer's/ Dementia/Senility	Liver disease	Renal disease	Respiratory disease
Home	213	83	68	20	14	6	6	45
Care home	191	25	55	35	96	1	6	84
Hospital	519	124	148	87	37	29	38	222
Hospice	80	73	2	2	1	3	1	6
<b>Total</b>	<b>1,021</b>	<b>308</b>	<b>278</b>	<b>145</b>	<b>150</b>	<b>38</b>	<b>51</b>	<b>360</b>

Notes: i) 'Underlying cause' of death is the main cause of death recorded on a death certificate. 'Causes mentioned' include the underlying cause and any contributory causes recorded. We have selected the most common underlying causes of death and the most common 'mentioned' causes that are demanding of end of life care. ii) While an individual will have only one recorded underlying cause, they may have more than one contributory cause recorded. iii) Numbers are annual averages.

## How to interpret your profile

- Be open about what the profile might be telling you.
- Focusing on individual indicators can be misleading, consider the full range of indicators.
- Read the notes on the indicator spine chart to aid interpretation.
- Understanding the context is essential: use the demographic and geographic information at the beginning of the profile to provide context.
- Triangulate the information in the profiles with information from other sources. For example, End of Life Care Quality Assessment (ELCQuA) tool, the local Joint Strategic Needs Assessment, a clinical or organisational audit.
- Recognise the limitations of the data (see the **Indicators Metadata Guide** on the National End of Life Care Intelligence Network)
- This is the first time these profiles have been produced and, despite our best endeavours, some of the data may be out of date, incorrect or missing. Please send us your comments about the data (see 'Feedback' at the end of this profile).
- Use the profiles to identify further questions that may need to be asked.

## Related resources

The National End of Life Care Intelligence Network (NEoLCIN) coordinates statistical information and commissions research on end of life care. It also brings all this data together in one place, enabling commissioners and people working in end of life care to use it to plan, deliver and improve end of life care services. For more information please visit the NEoLCIN website at

[www.endoflifecare-intelligence.org.uk](http://www.endoflifecare-intelligence.org.uk)

- **End of Life Care Profiles** provide data and statistics on end of life care, by PCT and Local Authority areas in England broken down by age, gender, place of death and cause of death. Available in both PDF and Instant Atlas formats.
- **Resources** includes information on research, links to other sources of information and publications produced by the NEoLCIN and other organisations.
- **Data sources** provides a guide and links to key sources of data relating to end of life care.

We are currently developing PDF profiles for Acute Trusts in England. These will be made available on the NEoLCIN website in due course. Please **sign up to email alerts** to keep up-to-date with developments.

The **National End of Life Care Programme** works with health and social care services across all sectors in England to improve end of life care for adults by implementing the Department of Health's End of Life Care Strategy. Its website ([www.endoflifecareforadults.nhs.uk](http://www.endoflifecareforadults.nhs.uk)) is designed to support health and social care staff working, in any capacity, with people nearing the end of life. It has information on policy and strategy, education and training, research and evaluation and commissioning, as well as case studies, information on care pathways and care settings, news, publications and events.

## Feedback

Please let us know:

- If the data is incorrect due to the sources we are using.
- How the profiles have assisted you in identifying changes in policy/practice.
- How we can improve the profiles.
- If you have suggestions for other indicators that we could include in future.
- Any other comments you may have.

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