

Extra 71,000 care home places needed in eight years, study warns

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Credit: Newcastle University

An extra 71,000 care home places will be needed in England in just eight years to cope with rising numbers of older people unable to live independently, new research has revealed.

A study led by experts at Newcastle University, published today in *The*

Lancet, shows that as [life expectancy](#) increases so too have the number of years older adults spend with substantial care needs.

While care is increasingly provided in the community placing a significant burden on families, the study warns tens of thousands of care home places will be needed by 2025 at the cost of millions of pounds.

The authors raise concerns over implications for health and social care services due to the increase in care needs. It is estimated that within just four years £940m will be required for social care in England.

Increase in care needs

Professor Carol Jagger, from Newcastle University's Institute for Ageing, led the study which is the first to analyse the extent the current care crisis is due to greater levels of dependency rather than higher numbers of older people.

She said: "If dependency prevalence remains constant, we estimate that by 2025 there will be an additional 353,000 older people with substantial care needs.

"While many of these people will live in the community, at current rates of provision, this will mean a shortfall of more than 71,000 care home places by 2025.

"Our findings have considerable implications for relatives as older people will have complex needs, requiring sustained input from family carers or social care teams to support independent living.

"Meanwhile, Age UK projections to 2021 of the service costs to maintain the current level of social care in England suggest an additional £940m will be required, assuming a constant health profile of the older

population."

The Cognitive Function and Ageing Study (CFAS) compared levels of dependency for those aged 65 years and over in England in 1991 and 2011 – 15,000 adults in total.

Adults were classed as high dependency if requiring 24 hour care, medium if they needed care at regular times each day, low if they required care less than daily or were independent.

The authors estimate that if rates of dependency remain constant, there will be an additional 190,000 older people with medium care needs, and 163,000 with high by 2025 compared to 2015.

Additionally, the study projects an increase in the number of people with low dependency – generally looked after in the community – of 885,000 by 2025.

Life expectancy

The research also revealed that between 1991 and 2011, life expectancy increased for both men, from age 77.9 to 82.6, and women, from 81.5 to 85.6.

Over this time, the proportion of years that an adult aged 65 could expect to live independently declined from 73.6% to 63.5% for men, and from 58.0% to 47.3% for women. By contrast, the proportion of years living with low, medium or high dependency increased.

In 2011, [average life expectancy](#) for men aged 65 was 17.6 years. Of this, an average of 11.2 years was spent independent, 4 with low dependency, 1.1 with medium and 1.3 with high.

For women, average life expectancy at age 65 was 20.6 years in 2011. Of this, an average of 9.7 years was spent independent, 7.8 with low dependency, 1.1 with medium and 1.9 with high.

The number of years spent with substantial care needs for adults aged over 65 has nearly doubled between 1991 and 2011, increasing from 1.1 years to 2.4 for men, and from 1.6 years to 3.0 for women.

Professor Jagger said: "The past 20 years have seen continued gains in life expectancy, but not all of these years have been healthy.

"This finding, along with the increasing number of older adults with higher rates of illness and disability, is contributing to the current social care crisis."

The study highlights the need for adequately trained professionals to care for [older adults](#) with complex needs.

Early interventions

For people with low dependency, early interventions such as structured exercise and rehabilitation, could potentially slow down the decline and ensure fewer years are spent with higher care needs.

The study compared data on cognitive function and ageing in people aged 65 or over from three areas in England – Newcastle, Cambridgeshire and Nottingham.

A total of 7,635 people were included in the study in 1991, and 7,796 in 2011. Levels of dependency were assessed via interviews in their place of residence, for example, their own home or a care home.

The authors note that there was little ethnic diversity in the two studies

and therefore the results may not be generalizable to non-white populations in the UK.

Sir Andrew Dilnot, University of Oxford, who is an expert in economics, comments: "Expenditure on the care of older people will need to increase substantially and quickly.

"It will be important to ensure that this expenditure is managed efficiently, and in particular that the boundary between health care and social care is well handled.

"In England, for example, there is substantial difficulty in so-called delayed discharges, where patients remain in (more expensive) hospital care, despite being fit to leave, because it has not been possible to arrange social care for them, which is less expensive and also more appropriate.

"Although the overall amount of care needed will increase substantially, this increase does not mean that every individual will need large amounts of care."

The study was funded by the Medical Research Council, with support from the National Institute for Health Research Comprehensive Local Research Networks in West Anglia and Trent, and the Neurodegenerative Disease Research Network in Newcastle.

More information: Andrew Kingston et al. Is late-life dependency increasing or not? A comparison of the Cognitive Function and Ageing Studies (CFAS), *The Lancet* (2017). [DOI: 10.1016/S0140-6736\(17\)31575-1](https://doi.org/10.1016/S0140-6736(17)31575-1)

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