

7 Service use

This chapter sets out the changing demand for health and social care services across Oxfordshire. A small amount of summary information is included on the quality of services. Further resources are available online, by visiting the [JSNA – Service Use webpage](#).

The Oxfordshire Clinical Commissioning Group (OCCG) is responsible for commissioning the vast majority of the healthcare provided to patients registered at Oxfordshire-based General Practitioners (GP) practices.

[Reports published by Healthwatch Oxfordshire](#) provide more information about the quality of services from a patient perspective.

7.1 Service use – key findings

This section highlights the key messages from the review of data on Service Use (data sources and research references are provided with the detailed data in the remainder of this chapter).

Use of health services

Use of health services is increasing overall and per person. The number of times people visit their doctor or are treated in hospital has increased significantly in Oxfordshire (and nationally), especially in the older age group.

- Data from a sample of GP practices in Oxfordshire shows that the number of consultations per person aged 80+ doubled between 2009-10 and 2013-14.
- Over the past 10 years, there has been a growth in the number of Hospital (consultant) episodes overall in the NHS Oxfordshire Clinical Commissioning Group area and a growth in the number of hospital episodes per person, particularly in the older age group.

As of 2014-15 Oxfordshire had statistically higher (worse) than the England average rates of injuries due to falls in people aged 65 and over and in people aged 80 and over.

National data shows that people with mental health conditions are more likely to discuss their mental health with a GP and more likely to access treatment

- One person in three with common mental disorders (mainly depression or anxiety) reported current use of mental health treatment in 2014, an increase from the one in four in 2007.

In the past year, there has been an increase in the number of people referred for treatment to Oxford Health mental health services, particularly children and young people.

- Between 2011-12 and 2015-16, the number of patients referred to Oxford Health mental health services overall increased by 19%. The number of patient referrals aged 10-14 increased by 70% and aged 15-19 increased by 77%

Use of social care services

- Older people are the primary users of short term and long term social care services.
- There has been an increase in the number and proportion of long term social care clients who are supported at home: from 58% of clients in 2012 to 71% in 2016. The greatest increase has been in the number of older social care clients supported at home.
- Demand for services is expected to continue to grow in the future as a result of:
 - the predicted growth in the older population in Oxfordshire (see chapter 2) and

- an increase in the number of people with a learning disability needing social care support.

Community safety, Citizens Advice, Troubled families

- The vast majority of victims of doorstep crime and rogue traders were older people and Oxfordshire Trading Standards has seen a repeat targeting of elderly and vulnerable victims.
- A higher than average proportion of clients of Oxfordshire's Citizens Advice services were disabled (26% compared with 14% with activities limited by health or disability in Oxfordshire in 2011).
- Of Citizens Advice clients with disabilities, just over a third had a long term health condition, a quarter had a physical or sensory impairment and one in five (21%) had a mental health problem. The district with the greatest number of clients with multiple health impairments was Oxford.
- Over 1,000 families have been identified in Oxfordshire for the second phase of the Troubled Families (Think Families) programme. The majority (80%) met the national criteria on worklessness, over half (57%) met the criteria on education and half (50%) were families where children need help (in need or subject to a child protection plan).

Access to services

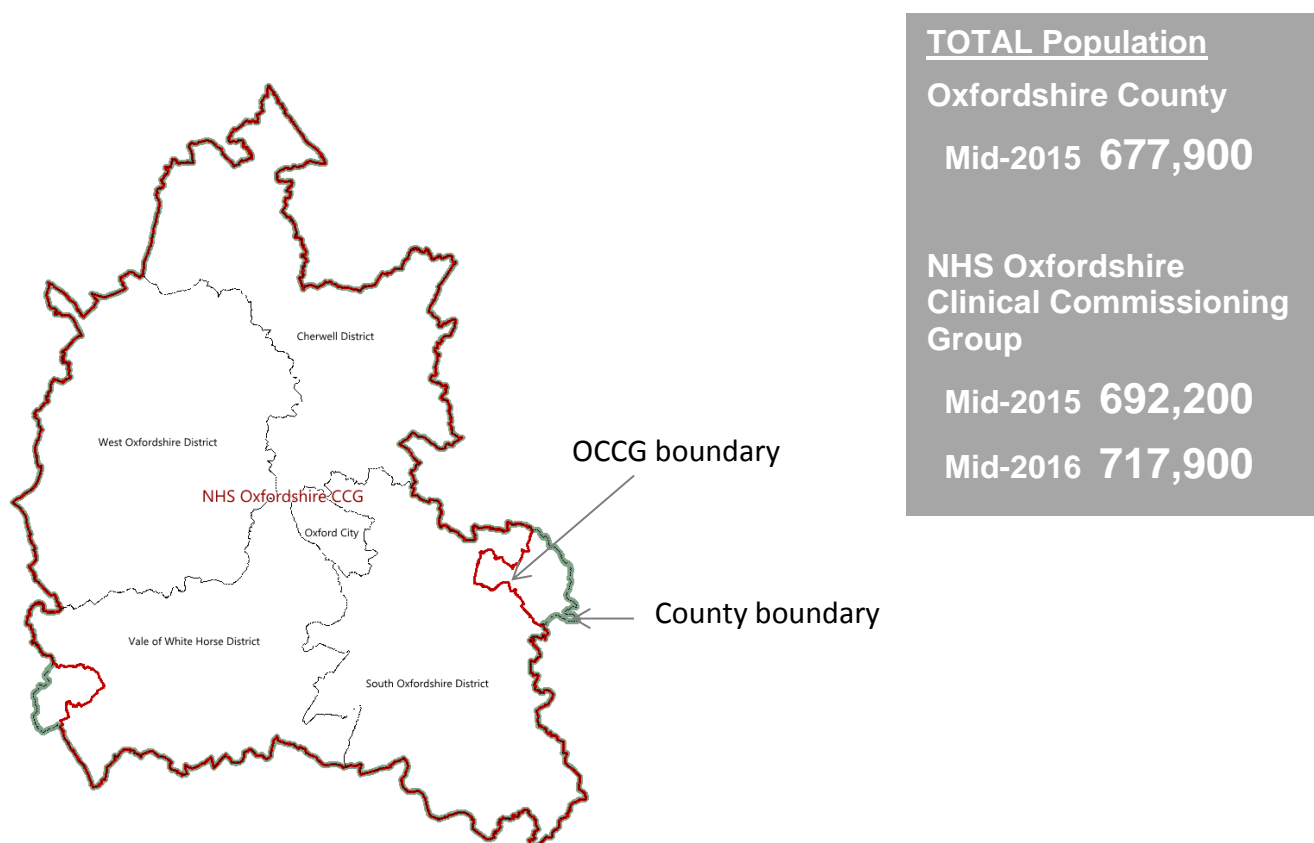
- National data shows that a significantly lower proportion of disabled people used the internet to find information about goods and services (57% disabled compared with 80% not disabled).
- Looking for health information online is a less popular use of the internet than many other activities – including for older people.
- Areas of rural Oxfordshire classified as 2 miles or more from a GP surgery cover almost a third of the younger population (aged 0-15, 32%) and a third of the older population (aged 65+, 34%) in rural districts.

7.2 Primary health care

Oxfordshire Clinical Commissioning Group area

As of 1 July 2015 there was a total of 78 GP practices¹ within the Oxfordshire Clinical Commissioning Group with a total practice population of **692,200**. This was 14,300 above the population of Oxfordshire as a result of (a) slightly different geographical boundaries and (b) that some residents of neighbouring counties are registered with Oxfordshire GPs.

Figure 1 Map of Oxfordshire, Districts and Oxfordshire Clinical Commissioning Group



Source: Map from NHS South, Central and West Commissioning Support Unit (January 2016)

By 1st July 2016 the number of GP practices had fallen from 78 to 75 and the GP practice population had increased to 717,900, a growth of 25,600 (+4%).

The latest data (as of January 2017) on GP rates show that in September 2014 there were 75.6 GPs per 100,000 people in the Oxfordshire CCG area.² This rate has remained reasonably similar over the past few years. It was above the England average of 66.5.

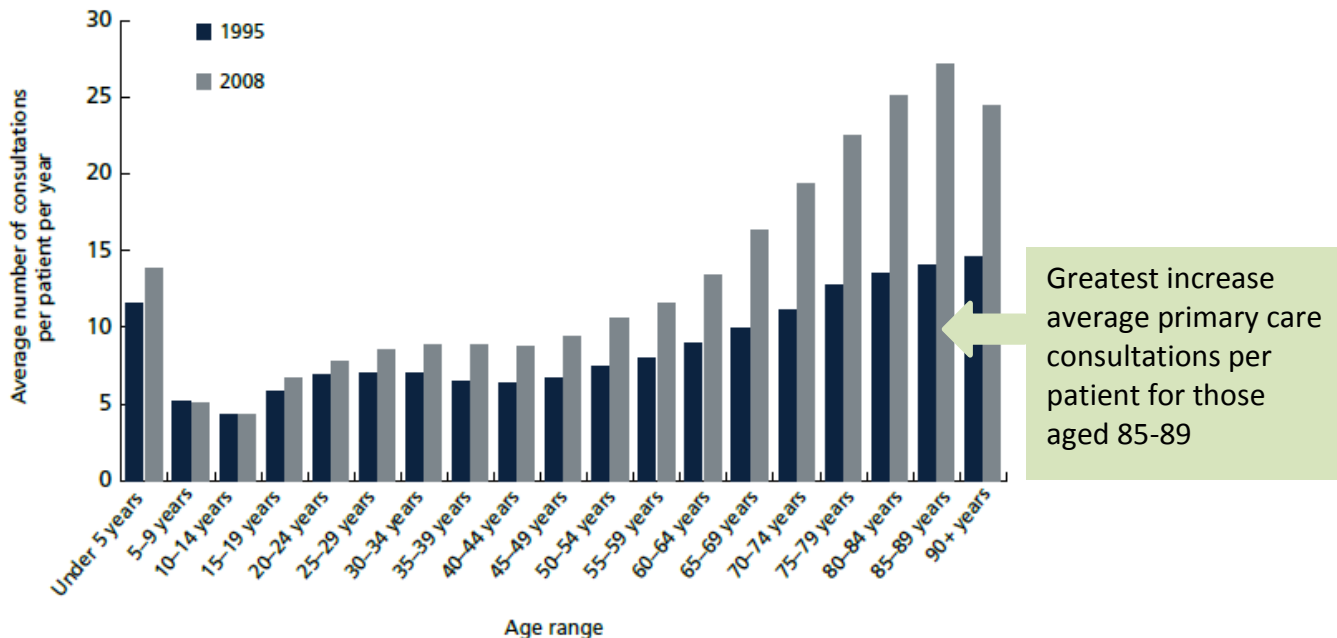
¹ https://data.gov.uk/dataset/numbers_of_patients_registered_at_a_gp_practice; NHS Oxfordshire NHS code10Q; ONS code E38000136

² Health and Social Care Information Centre LBOI Indicator 8.1: <https://indicators.ic.nhs.uk/webview/>

Contact with GPs

National data suggests that the number of primary care consultations per patient per year has increased significantly, especially in the older age groups.

Figure 2 Change in the average number of primary care consultations per patient per year in England 1995 to 2008



Source: The 2022 GP Compendium of evidence, Royal College of General Practitioners; data from Hippisley-Cox J, Vinogradova Y. Trends in consultation rates in general practice 1995/96 to 2008/9. Datasets are available from https://data.gov.uk/dataset/trends_in_consultation_rates_in_general_practice

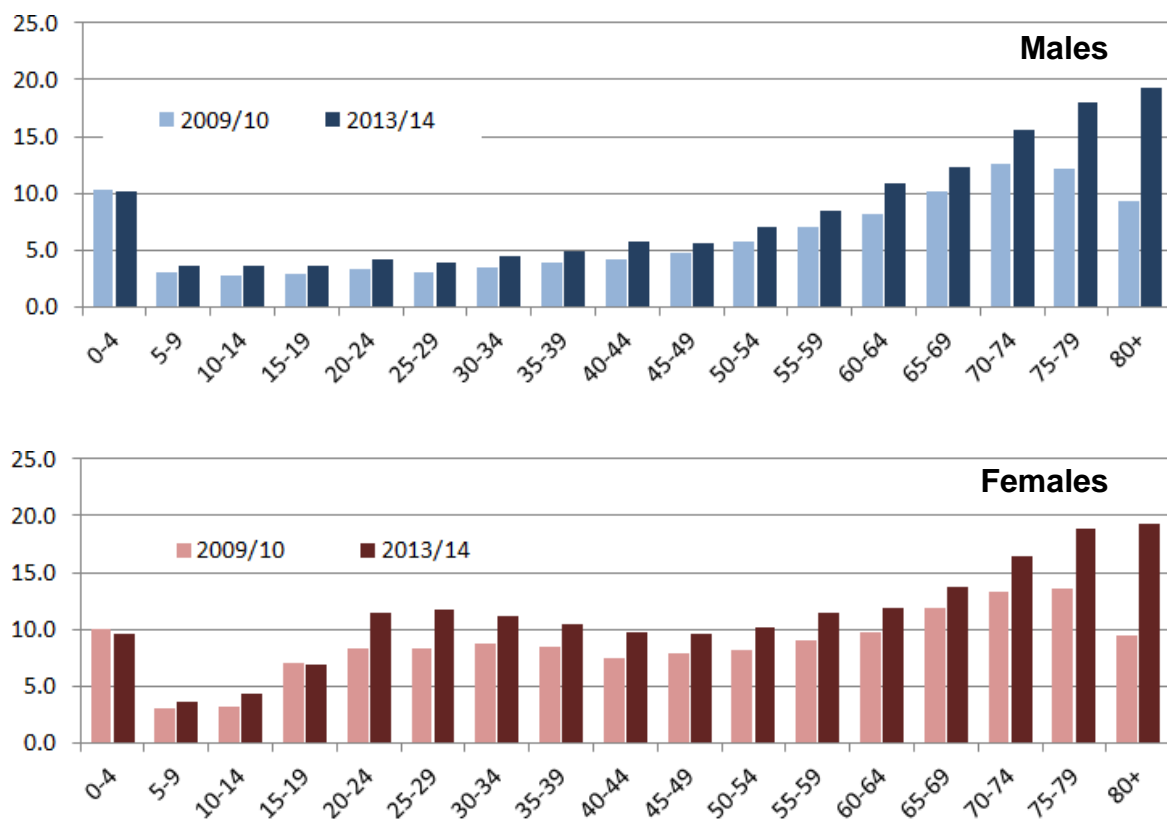
More recent analysis comparing 2007 to 2014 primary care consultations³ has shown this trend continuing.

A study carried out by the Oxfordshire Clinical Commissioning Group, based on data from 12 (self-selecting) OCCG Practices, shows an increase in consultation rates in the older age bands, similar to the national trend.

- The number of consultations per person aged 80 and over doubled between 2009-10 and 2013-14.

³ Clinical workload in UK primary care: a retrospective analysis of 100 million consultations in England, 2007–14 [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)00620-6/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)00620-6/abstract)

Figure 3 Number of primary care consultations per person by age and gender, Oxfordshire CCG (12 GP practices)



Source: NHS South, Central and West Commissioning Support Unit; includes consultations and administrative tasks including repeat prescriptions.

GP Patient Survey

The GP Patient Survey takes place twice a year and asks patients about experiences of their local GP surgery and other local NHS services.

About the GP Patient Survey

The GP Patient Survey (GPPS) is an England-wide survey, providing practice-level data about patients' experiences of their GP practices.

Ipsos MORI administers the survey on behalf of NHS England.

The survey measures patients' experiences across a range of topics, including:

- Making appointments
- Waiting times
- Perceptions of care at appointments
- Practice opening hours
- Out-of-hours services

The GP Patient Survey provides data at practice level using a consistent methodology, which means it is comparable across organisations and over time.

The survey has limitations:

- Sample sizes at practice level are relatively small.

- The survey does not include qualitative data which limits the detail provided by the results.
- The data are provided twice a year rather than in real time.

The July 2016 GPPS results combine two waves of fieldwork, from July to September 2015 and January to March 2016. In NHS OXFORDSHIRE CCG, 20,571 questionnaires were sent out, and 8,718 were returned completed. This represents a response rate of 42%.

<http://gp-patient.co.uk>

Use of GP services

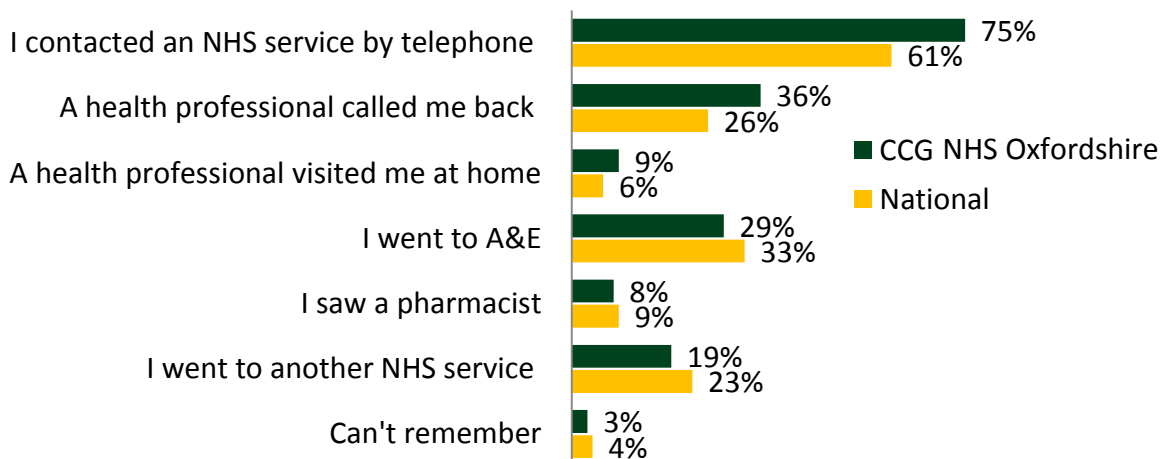
The 2016 GP Patient survey shows that 68% of respondents in the Oxfordshire Clinical Commissioning Group area had seen or spoken to a GP within the last six months. This was similar to the England rate (69%) and similar to Oxfordshire CCG rate in 2015 (69%).

Satisfaction with GP services overall in Oxfordshire has increased and was significantly higher than for England. 90% rated their GP surgery as good (up from 88% in 2015) compared with 85% nationally.

Out of hours contact

According to the 2016 GP Patient Survey, when contacting an NHS service outside of GP surgery hours, a higher proportion than average of Oxfordshire respondents made contact by telephone (75% in Oxfordshire CCG compared with 61% across England) and a slightly lower than average proportion went to A&E (29% in Oxfordshire CCG compared with 33% nationally).

Figure 4 Services contacted out of hours (Q: Considering all of the services you contacted, which of the following happened on that occasion?) 2016



Source: GP Patient Survey 2016 (waves July-Sept 2015 and Jan-Mar 2016)

Base: All those who tried to contact an NHS service when GP surgery closed in past 6 months: National (130,950); CCG (1,347)

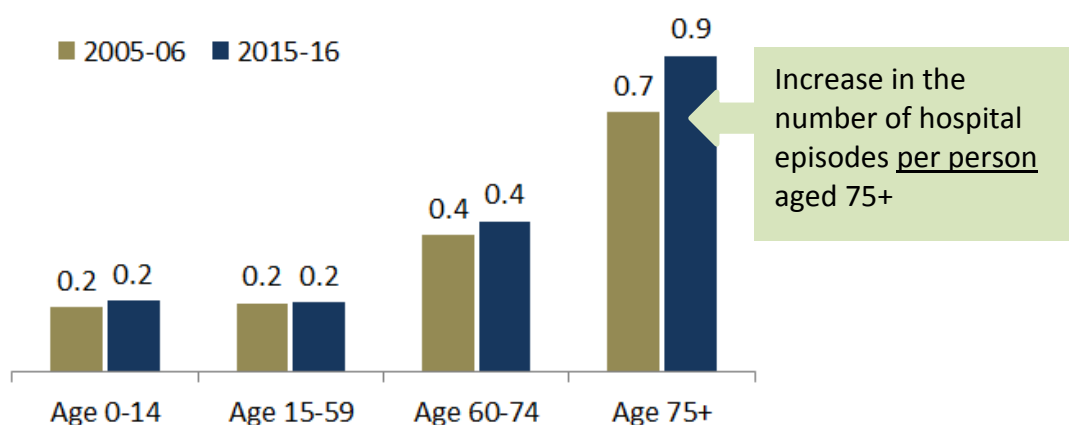
7.3 Secondary Health Care

Hospital episodes

Over the past 10 years, there has been a growth in the number of Hospital (consultant) episodes⁴ overall in the NHS Oxfordshire Clinical Commissioning Group area and a growth in the number of hospital episodes per person, particularly in the older age group.

- Between 2005-06 and 2015-16 the number of hospital episodes in Oxfordshire⁵ increased by almost a quarter (23%). This was below the growth in the number of episodes across England (+33%).
- The number of episodes per person in the age group 75+ in Oxfordshire increased from 0.7 per person to 0.9.

Figure 5 Hospital episodes per person by age – Oxfordshire, 2005-06 to 2015-16



Source: NHS Digital, Hospital Episode Statistics for England. Admitted Patient Care statistics; ONS mid-year population estimates. Note that data for 2005-06 is for the five Primary Care Trusts in Oxfordshire at that time and data for 2015-16 is for the NHS Oxfordshire Clinical Commissioning Group, there are differences in the geographical boundaries between these areas and the Oxfordshire county population denominator.

⁴ A Consultant Episode (Hospital Provider) is the time a patient spends in the continuous care of one consultant using Hospital Site or Care Home bed(s) of one Health Care Provider or, in the case of shared care, in the care of two or more consultants.

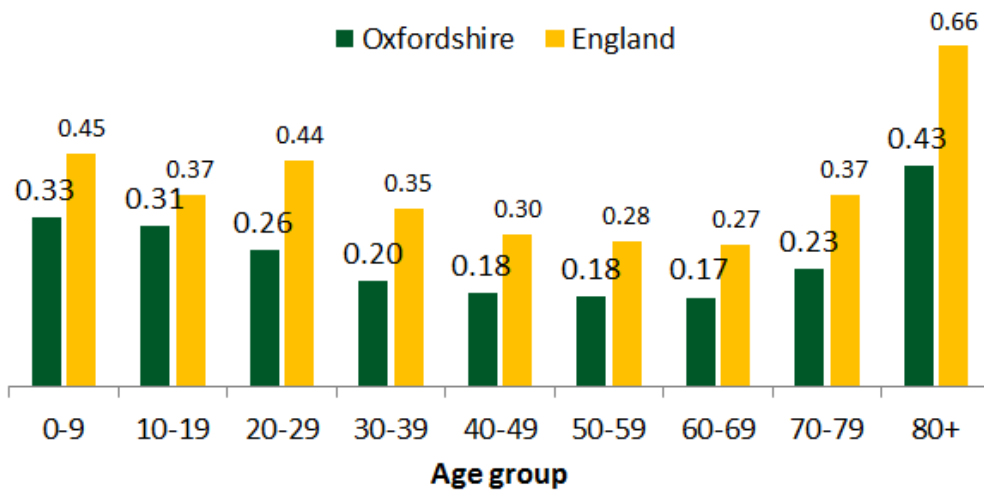
⁵ NHS Digital, Hospital Episode Statistics for England. Data for 2005-06 is for the five Primary Care Trusts in Oxfordshire at that time and data for 2015-16 is for the NHS Oxfordshire Clinical Commissioning Group, there are differences in the geographical boundaries between these areas

Emergency Hospital Admissions

The number of Accident and Emergency attendances at hospitals in Oxfordshire increased from 160,000 in 2014-15 to 164,100 in 2015-16, up by 4,100 or +2.6%. This was below the one year increase across England as a whole of 4.6%.

The number of emergency hospital admissions per person was highest for those aged 80 and over. Oxfordshire was below the England per person average in each age group.

Figure 6: A&E attendances per person by age, Oxfordshire vs England 2015-16



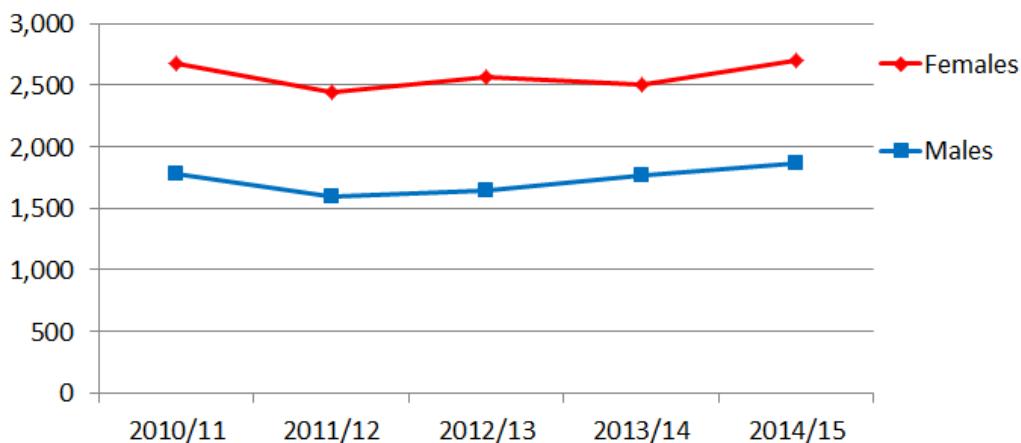
Source: NHS Digital, Hospital Episode Statistics for England. Hospital Accident and Emergency Activity data for Oxford Health NHS Foundation Trust and Oxford University Hospitals NHS Trust. ONS mid-year estimate (2015), note that there is a difference in the area served by Oxfordshire-based NHS Trusts and Oxfordshire county used as the population denominator.

Emergency admissions for injuries due to a fall

As of 2014-15 Oxfordshire had statistically higher (worse) than the England average rates of:

- Injuries due to falls in people aged 65 and over (statistically higher for all people and females; for males the rate for Oxfordshire was statistically similar to England).
- Injuries due to falls in people aged 80 and over (statistically higher for all people, males and females).

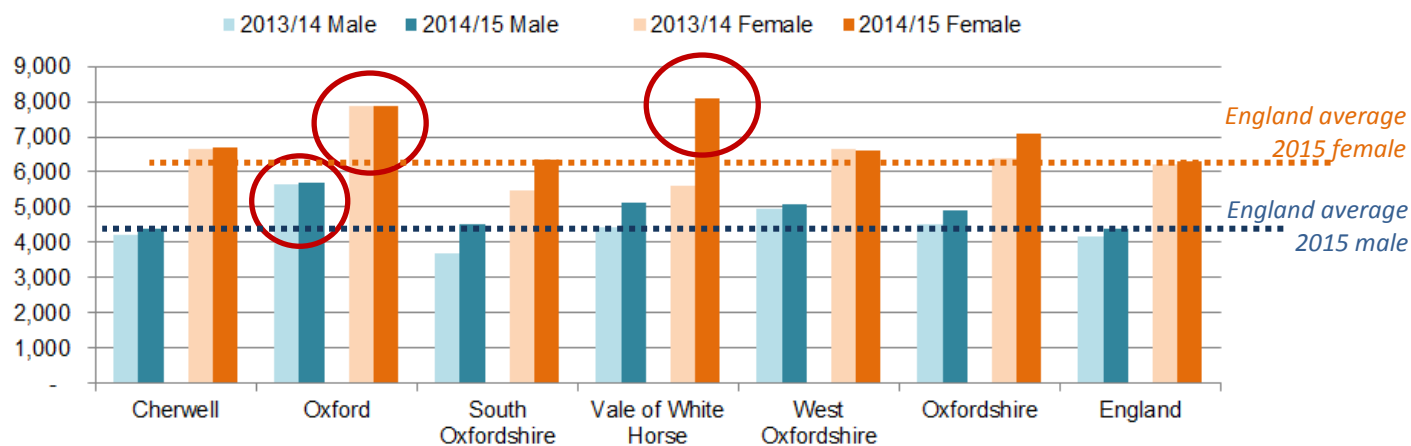
Figure 7 Emergency hospital admissions for falls injuries in males and females aged 65 and over - directly age-sex standardised rate per 100,000.



Source: Public Health Outcomes Framework

Within the districts, Oxford City rates for males and females aged 80+ were significantly higher than England rates and Vale of White Horse rate for females was significantly higher than the England rate.

Figure 8 Emergency admissions for injuries due to falls in males and females aged 80+ years - directly standardised rate per 100,000



Source: Public Health Outcomes Framework; note that data by district is not available prior to 2013/14

Hospital Discharge and Delayed Transfers of Care

A delayed transfer of care occurs when a patient is deemed medically fit to depart from their current care, but is unable to do so because of non-clinical reasons, for example because the patient is awaiting a care package in their own home, or further non-acute care.

In 2015-16 the average daily rate of delayed transfers of care within Oxfordshire was 29.7 people aged 18 and over per 100,000.⁶ This was similar to the figure for the previous two years and down from 30.6 in 2011-12. The rate for Oxfordshire in 2015-16 was significantly higher than the reported average rate for England, of 12.3 per 100,000 people.

7.4 Mental Health Services

National data

Adults accessing mental health treatment

The national survey of mental health and wellbeing⁷ has found that an increasing proportion of adults with mental health conditions, such as anxiety or depression, were accessing mental health treatment and more likely to discuss their mental health with a GP.

- One person in three with common mental disorders (mainly depression or anxiety) reported current use of mental health treatment in 2014, an increase from the one in four who reported this in 2000 and 2007. This was driven by steep increases in reported use of psychotropic medication. Increased use of psychological therapies was also evident among people with more severe mental disorder symptoms.
- Since 2007, people with common mental disorders had become more likely to use community services and more likely to discuss their mental health with a GP.

Detentions in hospital under the Mental Health Act

The number of people in England formally detained in hospitals under the Mental Health Act 1983 has continued to rise⁸, increasing by 9 per cent to 63,622 in 2015-16 compared with 58,399 detentions in 2014-15.

Oxford Health Mental Health Referrals

There has been an increase in the number of patients referred to mental health services in Oxfordshire.

- In 2015-16, 11,700 Oxfordshire residents were referred to Oxford Health NHS Foundation Trust mental health services and seen at least once.⁹ This represents an increase of around 1,500 (15%) since 2014-15.
- Some patients were referred more than once during the year and the number of referrals was around 15,900 an increase of 18% since 2014-15.

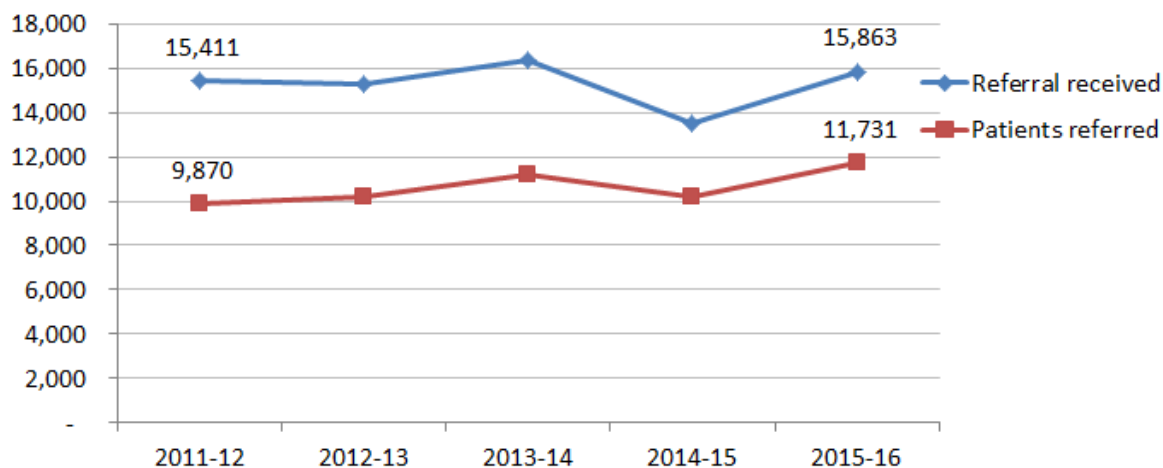
⁶ NHS Delayed Transfers of Care Statistics: <http://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/>

⁷ Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2014 <http://content.digital.nhs.uk/catalogue/PUB21748>

⁸ *Inpatients formally detained in hospitals under the Mental Health Act 1983 and patients subject to Supervised Community Treatment: 2015/16*, Annual figures. Publication date: November 30 2016 <http://www.content.digital.nhs.uk/catalogue/PUB22571>

⁹ Data in this section has been provided by Oxford Health NHS Foundation Trust

Figure 9: Number of Oxfordshire residents referred to Oxford Health NHS FT mental health services and number of referrals (2011-12 to 2015-16)



Source: Oxford Health NHS Foundation Trust

Of the patients referred to Oxford Health mental health services in 2015-16, there were more females (58%) than males (42%).

13% of patient referrals with a recorded ethnic group were from ethnic minority backgrounds in 2015-16. The largest ethnic minority group was “white other” including Irish and other European (5%).

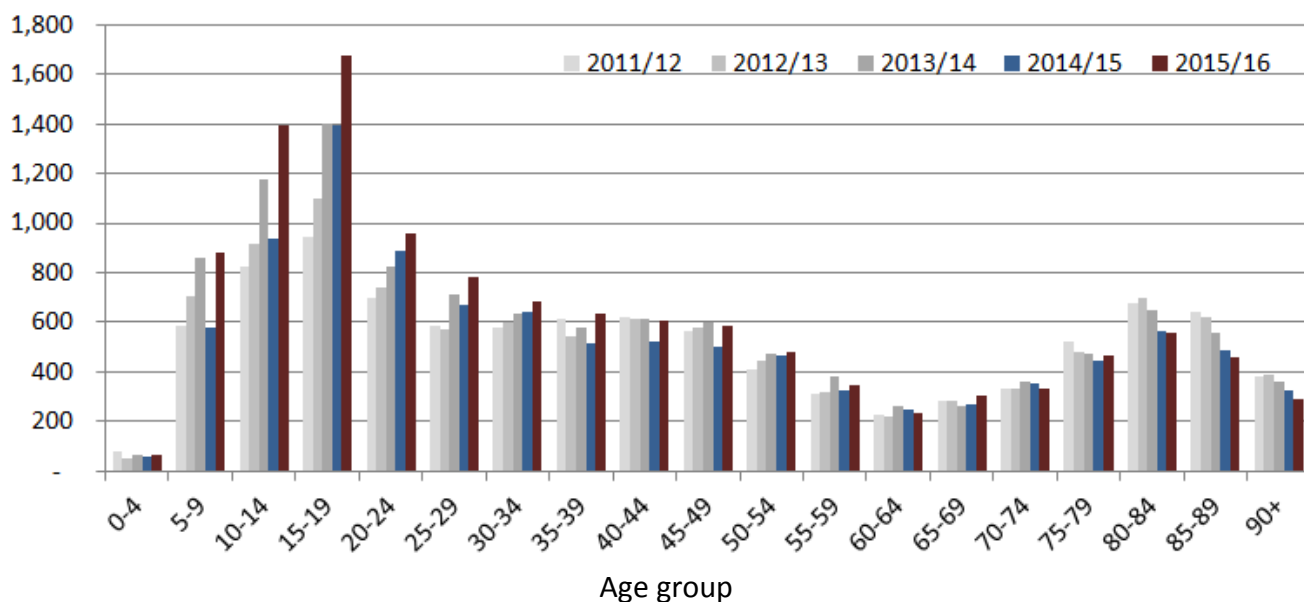
The 15-19 age group continued to make up the largest proportion and number of patients referred to Oxford Health mental health services in 2015-16 and has seen the biggest increase since 2011-12

- Between 2011-12 and 2015-16, the number of patients referred overall increased by 3%. The number of patient referrals aged 15-19 increased by 77%

In the latest year of data there was a significant increase of referrals of patients in the younger age groups, aged 5-9 and aged 10-14.

As a result of this increase in the younger age group, the mental health speciality with the greatest increase in referrals was Child and Adolescent Mental Health services (CAMHS Oxfordshire). Between the 2011-12 and 2015-16 patient referrals to CAMHS increased from 2,600 to 4,600 (+2000, 74%).

Figure 10 Number of Oxfordshire residents referred to Oxford Health mental health services (2011-12 to 2015-15)



Source: Oxford Health NHS Foundation Trust

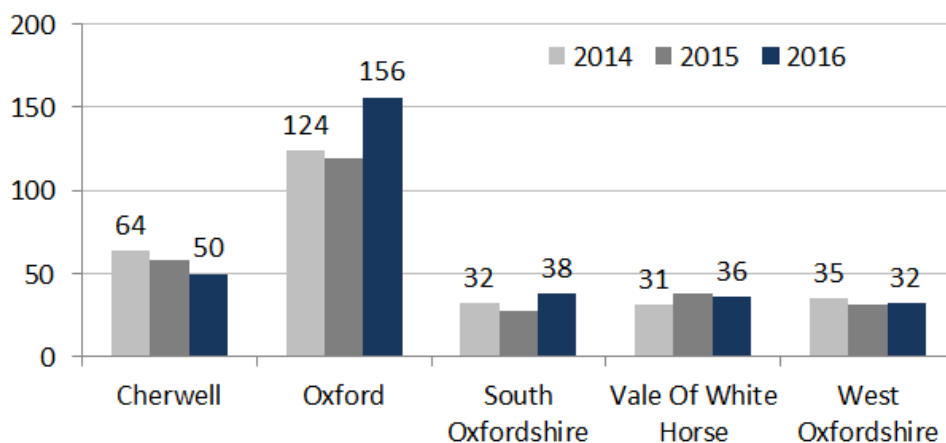
Detentions under Section 136

Section 136 of the Mental Health Act enables the police to act if they believe that someone is suffering from a mental illness and is in need of immediate treatment or care. The police may take that person from a public place to a place of safety, either for their own protection or for the protection of others. This is known as a Section 136 detention.

During the three years from January 2014 to December 2016, there was a total of **872** Section 136 detentions in Oxfordshire of which 399 (46%) were in Oxford.

Oxfordshire’s rural districts have seen a similar number of detentions in each of the three years. There was an increase in Oxford in 2016 compared with the previous year of an additional 37 detentions.

Figure 11 Number of Section 136 detentions 2014 to 2016

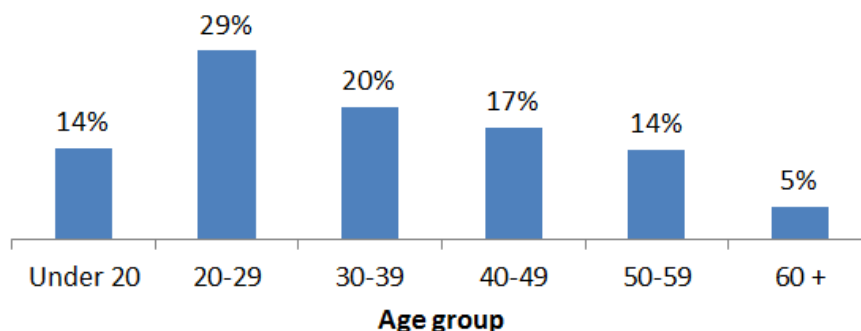


Source: Thames Valley Crime Recording System - NICHE RMS & Mental Health Master, extracted Jan17

Over the full three-year period:

- Over half of the detainees were male (around 58%).
- Just under a third (29%) were aged 20-29 (see following chart).

Figure 12 Individuals sectioned under 136 recorded within Oxfordshire broken down by age range for the period Jan14 - Dec16



TOTAL = 865

Source: Thames Valley Crime Recording System - NICHE RMS & Mental Health Master, extracted Jan17

7.5 Drug and Alcohol Treatment Services

In 2015-16 there were around 2,350 adults (aged 18 and over) in drug and/or alcohol treatment in Oxfordshire¹⁰. This was an increase of 31% (+550) on the previous year (1,800 in 2014-15).

The number of adults in treatment for alcohol only was 482 (up from 433 in 2014-15).

The number of young people (aged under 18 years) in specialist substance misuse services in Oxfordshire in 2015-16 was 71 (up from 58 in 2014-15).

- 41 began using their main substance before they reached 15 years of age (42 in 2014-15)
- 20 were using more than one substance (34 in 2014-15)
- 10 reported being affected by others' substance misuse (14 in 2014-15)

Referrals were predominantly from education services and children and family services

¹⁰ Source: NDTMS - Adult Successful Completions and Re-presentations Partnership (Period Apr15-Mar16) and JSNA support pack – Young people (Period: Apr15-Mar16)

7.6 Social care

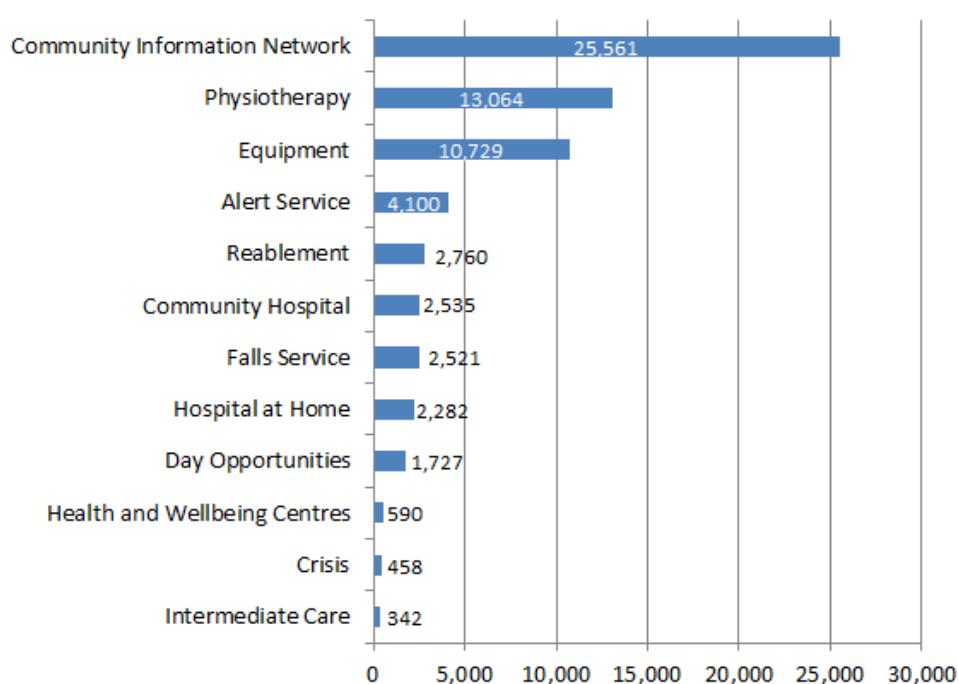
Many people with care needs require both health and social care and the distinction between health and social care is not always clear. Therefore the County Council and the Clinical Commissioning Group have pooled some of their money together to provide more efficient commissioning of care and better integration of health and social care services.

Short-Term Adult Health and Social Care

Older people are the primary users of health and adult social care services.

The figure below shows their use of short-term services in Oxfordshire during 2014-15. The numbers relate to episodes, or contacts, rather than unique individuals: individuals may have accessed multiple services, and may have accessed them more than once.¹¹

Figure 13: Older People’s Use of Short-Term Social Care Services (2014-15)



Source: Oxfordshire County Council/Oxford Health (from JSNA 2016)

‘Reablement’ is a social care service aimed at supporting people to regain independence that may have been reduced or lost through illness or disability. Guidance from the Department of Health states that a medium-performing reablement service would see between 2-5% of its older population in reablement, and a high performing service over 5%. It is expected that 50% of these would come from hospital and 50% from their own home.

On this basis, a medium-performing reablement service in Oxfordshire could be expected to support just over 4,000 people aged 65 and over, and a high-performing service would support around 6,000 people. As can be seen from the chart above, Oxfordshire’s reablement service supports fewer older people than this. However, the number of older people offered reablement services following discharge from *hospital* is similar to what would be expected for a medium-performing service, and reflects national rates. Therefore,

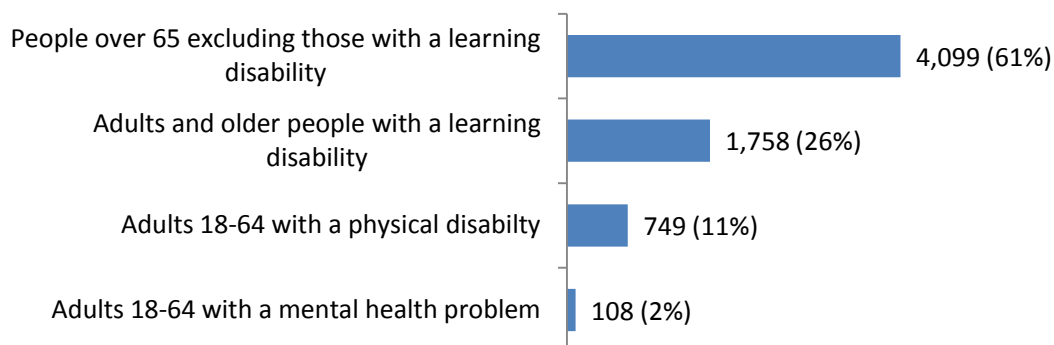
¹¹ Oxfordshire County Council data

the difference relates primarily to older people being offered reablement services from *home*.

Long-Term Adult Social Care

At the end of March 2016 there were **6,714** adults in Oxfordshire receiving long-term social care funded by the county council, up from 6,494 in March 2015 (+3.4%). The majority (61%) of Oxfordshire's social care clients are older people, aged 65 and over, see chart below.

Figure 14 Recipients of local authority funded, long-term, adult social care in Oxfordshire (March 2016)



Source: Oxfordshire County Council

There has been an increase in the number and proportion of long term social care clients who are supported at home: from 58% of clients in 2012 to 71% in 2016. The greatest increase has been in the number of older social care clients supported at home.

Table 1 Social care clients supported by Oxfordshire County Council 1 Apr 2012 to 1 Apr 2016

		2012	2016	2012 to 2016	
Older social care clients	Care Home	1,733	1,570	-163	-9%
	At Home	1,389	2,529	1,140	82%
	Total	3,122	4,099	977	31%
Physically disabled	Care Home	92	85	-7	-8%
	At Home	294	664	370	126%
	Total	386	749	363	94%
Learning disabled	Care Home	304	282	-22	-7%
	At Home	1,298	1,476	178	14%
	Total	1,602	1,758	156	10%
TOTAL	Care home	2,129	1,937	-192	-9%
	At home	2,981	4,669	1,688	57%
	Total	5,110	6,606	1,496	29%

Source: Oxfordshire County Council

Currently 1 in 8 people over 85 in Oxfordshire is receiving on-going long term support funded by the council.

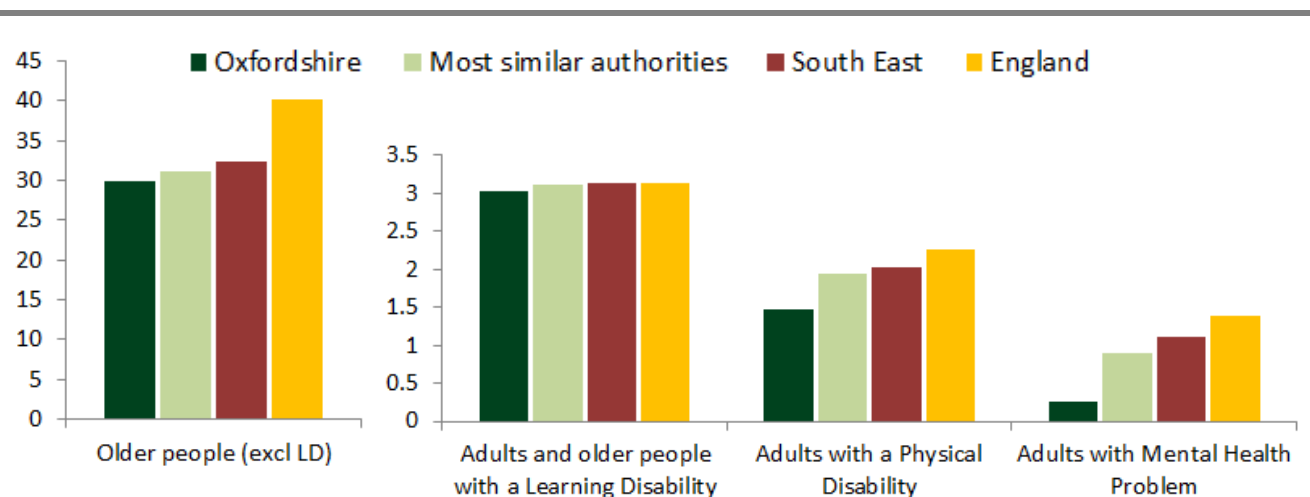
Demand for services is expected to continue to grow in the future as a result of:

- the predicted growth in the older population in Oxfordshire (see chapter 2) and
- an increase in people with a learning disability needing social care support.
 - 30% of people in Oxfordshire with a learning disability first approach the council for services after their 25th birthday. For many this is because their parents can no longer provide all their care. The average age of a service user with learning disability is 44 and over a third are over 50.

In 2015-16, the rate per 1,000 population of local authority funded, long-term adult social care provision in Oxfordshire was below the national and regional averages and below the rate of the group of the most similar local authorities (Oxfordshire’s ‘statistical neighbours’¹²).

Note that this comparison may be affected by the definition of long-term versus short-term support: support that is considered short-term in Oxfordshire may be classed as long-term elsewhere.

Table 2 Rates per 1,000 population of local authority funded, long-term, adult social care provision, by client group, Oxfordshire, similar authorities, South East and England (2015-16)



(note that charts have different scales)

Source: Oxfordshire County Council

¹² The set of local authorities that are Oxfordshire’s statistical neighbour authorities for adult social care are: Buckinghamshire, Cambridgeshire, Essex, Gloucestershire, Hampshire, Hertfordshire, Leicestershire, North Yorkshire, Northamptonshire, Somerset, Suffolk, Surrey, Warwickshire, West Sussex, and Worcestershire.

Adult Social Care User Survey

About the Adult Social Care User Survey

For the last six years, councils have surveyed users of social care aged 18 and over as part of a national survey. The survey is run each February for people receiving social care funded wholly or in part by councils in the previous September. Its purpose is to learn more about whether or not the services are helping them to live safely and independently in their own home, and to understand the impact on their quality of life. In the 2015-16 survey, 704 adult social care users in Oxfordshire responded.

The headline measure produced by the survey is an overarching view of the 'quality of life for users of social care'. This is a composite measure of eight questions in the survey. The measure identifies whether, after care has been provided, people still have needs in any of the following areas: control over their daily life; being clean and presentable; having enough food and drink; having a clean and comfortable home; feeling safe; having adequate social contact; spending time as they wish and being treated with dignity.

<http://www.hscic.gov.uk/socialcare/usersurveys>

In 2015-16, social care-related quality of life in Oxfordshire remained at a similar level to the previous five years. It also remained above the national average, with Oxfordshire ranking 53rd of 152 local authorities in England on this measure.

Further analysis of survey responses suggests that Oxfordshire's relatively high quality of life score may be driven by social care users feeling they have control over their lives, feeling safe, and feeling that they have enough social contact.

In 2015-16, the proportion of care users who were very satisfied with their care and support was 66.7% again above the national average of 64.4% and the 45th highest ranking of the 152 authorities. In total 90% of people reported being satisfied with services, including those who are quite satisfied). This has been consistent over a number of years

The national outcome framework for adult social care brings together data from the adult social care survey and other sources to measure the overall performance of the adult social care system.¹³ Oxfordshire performs above average on 68% of the measures in the framework.

Adult Social Care, Sexual Orientation and Gender Identity

National research has been conducted with adult social care users who are lesbian, gay, bisexual and trans (LGB&T), and their carers.¹⁴ This suggests that these groups may have distinct needs, for example they may be more at risk of social isolation and loneliness; and they may face distinct issues, including discrimination. However, the data on sexual orientation and gender identity of the social care community is currently limited.

¹³ Adult Social Care Outcomes Framework: <http://www.hscic.gov.uk/article/3695/Adult-Social-Care-Outcomes-Framework-ASCOF>

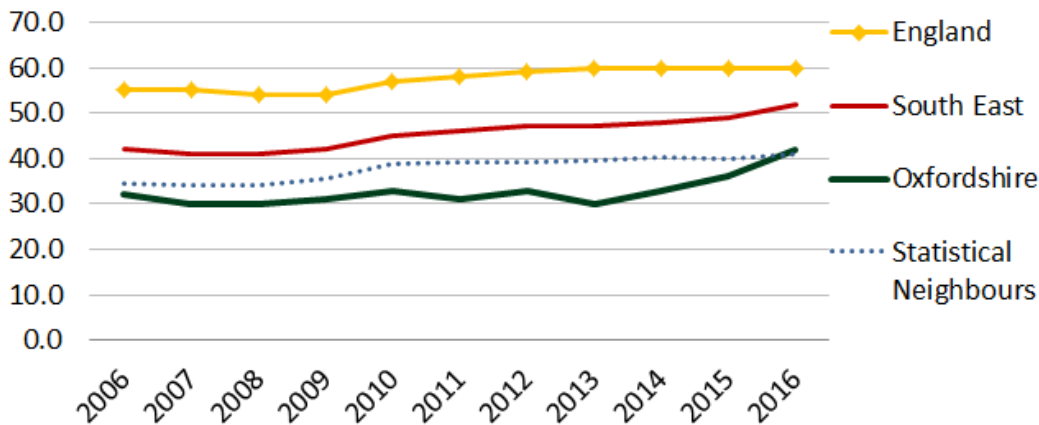
¹⁴ The LGBT ASCOF Companion Document (LGBT Foundation, 2015): <http://lgbt.foundation/get-support/downloads/detail/?downloadid=365>

Children’s Social Care

Looked After Children

As of the end of March 2016 there were **592** children in Oxfordshire who were in care (also known as ‘looked after children’), up from 515 in March 2015. The rate of looked after children in Oxfordshire remains below the national average but the number of cases has generally been rising over recent years and is now at the rate of similar authorities.

Figure 15 Rates of Looked After Children



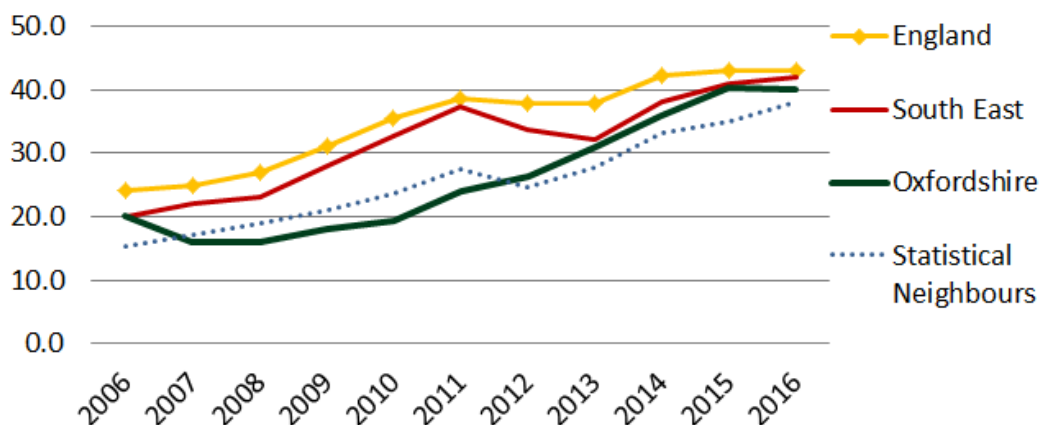
Source: Department for Education

Child Protection Plans

As of the end of March 2016 there were **571** children in Oxfordshire who were the subject of a child protection plan, up from 569 in March 2015. In slightly over half of cases (54%) this was because of neglect.

Overall, the rate of children on protection plans has tended to be lower locally than nationally but above most of our statistical neighbours. However, the number of children on protection plans in Oxfordshire has been rising in recent years, and it has been rising at a faster rate than in England overall.

Figure 16 Rate of Children on Protection Plans



Source: Department for Education

Factors such as parental mental health, drug abuse or domestic violence increase the risk of children becoming subject to a child protection plan.

Care Leavers

Young people leaving care tend to be particularly vulnerable to poor health and wellbeing. For example, national research shows that they are at greater risk of social exclusion, unemployment, health problems, and offending.¹⁵

7.7 Community safety services

Victims of dwelling fires

In 2015-16 there was a total of 65 people injured and 3 people killed as a result of a dwelling fire in Oxfordshire. This was an increase on the number of injuries and fatalities recorded in 2014-15.

Table 3 Injuries due to dwelling fires 2010-11 to 2015-16

	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Total number of fires	550	504	517	432	423	480
Accidental or unknown cause	528	475	497	416	407	463
Deliberate or other cause	22	29	20	16	16	17
Injuries due to fire	50	47	64	49	49	65
Fatalities	3	3	3	3	1	3

Source: Oxfordshire County Council

Between 2010 and 2016, of the victims where age was recorded, a third were aged in their 20s and 30s and just under a third (30%) were people aged 60 and over.

Fires at non domestic and commercial premises

Across Oxfordshire there are over 30,000 non domestic and commercial premises, this includes some special risks like RAF bases, hospitals, prisons and power stations.

Premises that process or store waste / recycling products can present a fire hazard and, due to the large quantities of materials stored, fires can have a damaging effect on the environment and take a large amount of resources to extinguish.

Some notable recent incidents involving commercial building's in Oxfordshire include:

- South Oxfordshire District Council Offices, fire – January 2015
- Carluccio's Restaurant, Bicester Village, fire – April 2015
- Randolph Hotel, Oxford, fire – April 2015
- Magdalen College School, fire – June 2015
- Recycling Site, Finmere, fire – February 2016

¹⁵ See, for example, Care leavers' transitions to adulthood: <https://www.nao.org.uk/report/care-leavers-transitions-to-adulthood/>; *Finding Their Feet: Equipping care leavers to reach their potential* (The Centre for Social Justice, January 2015): <http://www.centreforsocialjustice.org.uk/publications/finding-their-feet>

Victims of doorstep crime and rogue traders

In 2015-16 there were **379** people who were victims of doorstep crime or rogue traders in Oxfordshire, the majority of which were ‘selling’ building/roofing or gardening work.

The vast majority of victims were older people and Oxfordshire Trading Standards has seen a repeat targeting of elderly and vulnerable victims.

- Between 2012-13 and 2015-16, 87% of victims of doorstep crime and rogue traders (where age was recorded) were aged over 60.

A similar level of doorstep crime occurs in each district of Oxfordshire with slightly higher numbers in Cherwell and Oxford and slightly lower in West Oxfordshire.

Table 4 Victims of doorstep crime and rogue traders

District	2012-13	2013-14	2014-15	2015-16
Cherwell	78	99	80	83
Oxford City	67	66	115	85
South Oxfordshire	83	97	42	63
Vale of White Horse	97	89	56	80
West Oxfordshire	48	79	50	49
SUM of districts	373	430	343	360
<i>District not recorded</i>	20	197	34	19
TOTAL Oxfordshire	393	627	377	379

Source: Oxfordshire County Council

7.8 Citizens Advice services

Oxfordshire has open-door Citizens Advice services based in offices in Abingdon, Banbury, Bicester, Didcot, Henley, Thame, Oxford and Witney plus outreach and specialist services.

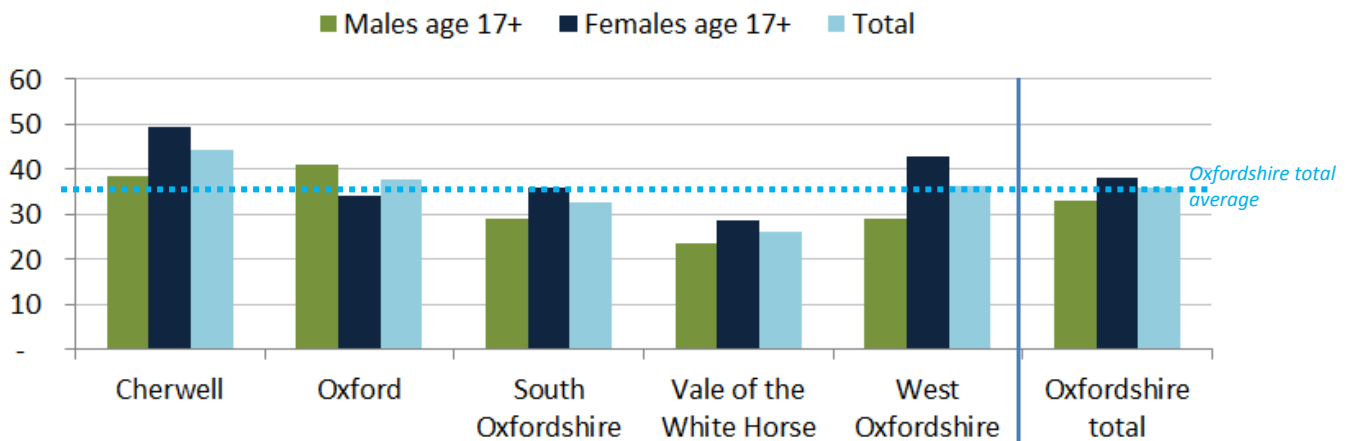
In 2015-16, a total of 25,600 clients accessed Citizens Advice services in Oxfordshire.

Of these, the majority (19,440, 76%) of clients accessed housing, employment, benefits and debt services with the remainder (24%) accessing consumer services.

Clients by gender

In rural districts in Oxfordshire females were more likely than males to access housing, employment, benefits and debt services. In Oxford, these services were more likely to be accessed by males.

Figure 17 Citizens Advice clients* by gender per 1,000 population (crude rate) 2015-16



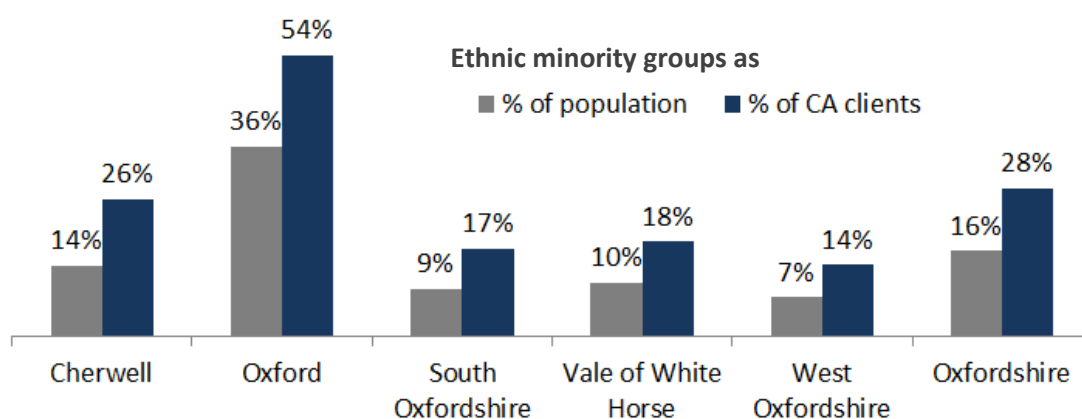
Source: Citizens Advice Agencies Oxfordshire, ONS 2015 population estimates; * not including clients of Consumer services

Clients by ethnicity

The proportion of ethnic minority groups accessing Citizens Advice services was well above the proportion of ethnic minority groups in the general population.

- In 2015-16, just over a quarter (28%) of Citizens Advice clients of housing, employment, benefits and debt services in Oxfordshire were from ethnic minority groups (non-white British). This was well above the proportion of the total population with ethnic minority backgrounds as at 2011 of 16% (Census 2011).
- In Oxford in 2015-16, over half (54%) of Citizens Advice clients of housing, employment, benefits and debt services were from ethnic minority groups. Ethnic minority groups made up 36% of Oxford’s total population in 2011.

Figure 18 Proportion of people with ethnic minority backgrounds - Census 2011 population vs Citizens Advice clients* 2015-16



Source: Citizens Advice Agencies Oxfordshire, ONS Census 2011; * not including clients of Consumer services

Clients by age

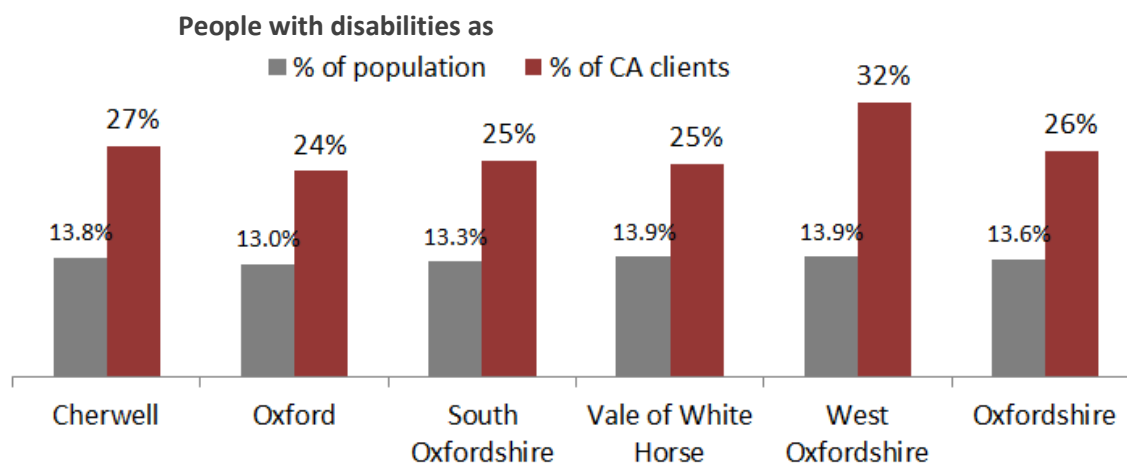
The age profile of Citizens Advice clients has a higher proportion of people in the age range 25 to 64 than average for the population.

- 77% of Citizens Advice clients of housing, employment, benefits and debt services in 2015-16 were aged 25 to 64 compared with 64% of the population of Oxfordshire (ONS mid-2015).

Clients recorded as disabled

Around a quarter (5,000, 26%) of Citizens Advice clients of housing, employment, benefits and debt services in Oxfordshire were recorded as disabled. This was almost double the proportion of people in households with disabilities in the general population in 2011 (Census 2011, 13.6%).

Figure 19 Proportion of people with disabilities - Census 2011 population vs Citizens Advice clients* 2015-16



Source: Citizens Advice Agencies Oxfordshire, ONS Census 2011; * not including clients of Consumer services

Of Citizens Advice clients with disabilities, just over a third had a long term health condition, a quarter had a physical or sensory impairment and 21% (count=1,080) had a mental health problem. The district with the greatest number of clients with a disability was Cherwell. The district with the greatest number of clients with multiple health impairments was Oxford.

Figure 20 Citizens Advice clients* recorded as disabled by disability type 2015-16

	Cherwell	Oxford	South Oxfordshire	Vale of White Horse	West Oxfordshire	Oxfordshire total	
Long term health condition	447	416	342	214	329	1,748	34%
Mental health problem	290	263	197	148	182	1,080	21%
Physical or sensory impairment	328	235	238	185	312	1,298	26%
Learning difficulty or cognitive impairment	57	43	30	29	52	211	4%
Multiple impairments	72	118	33	27	66	316	6%
Other	167	100	54	50	62	433	9%
Total with disability	1,361	1,175	894	653	1,003	5,086	100%

Source: Citizens Advice Agencies Oxfordshire;* not including clients of Consumer services

Advice and health services

A study by Citizens Advice¹⁶ into non-health demands on GPs found that 80% of the 824 GPs interviewed reported that dealing with non-health queries resulted in decreased time available to treat other patients' health issues, with almost a fifth (19%) of their consultation time being spent on non-medical matters. The most common issues raised were personal relationships, housing, employment, welfare & benefits and debt.

84% of GPs said that they refer patients to an advice agency in the community and only 31% reported that they were able to advise patients adequately themselves.

¹⁶ Caper, K & Plunkett, J (2015), A very general practice: How much time do GPs spend on issues other than health? Citizens Advice <https://www.citizensadvice.org.uk/about-us/policy/policy-research-topics/health-and-care-policy-research/public-services-policy-research/a-very-general-practice-how-much-time-do-gps-spend-on-issues-other-than-health/>

Benefits in Practice programme

The 'Benefits in Practice' programme in Oxfordshire places welfare rights advisors from the Citizens Advice Bureau in GP practices where debt and other financial problems are contributing to poor mental health and wellbeing. The aim of the service is to improve mental wellbeing by providing advice and information to help patients resolve their legal, financial and other problems.

For the financial year reported (2015-16) there were 8 participating GP practices in Oxford, 2 participating GP practices in Banbury and 2 participating GP practices in West Oxfordshire.

Demographic data for people helped by the *Benefits in Practice* scheme in 2015-16 shows that:

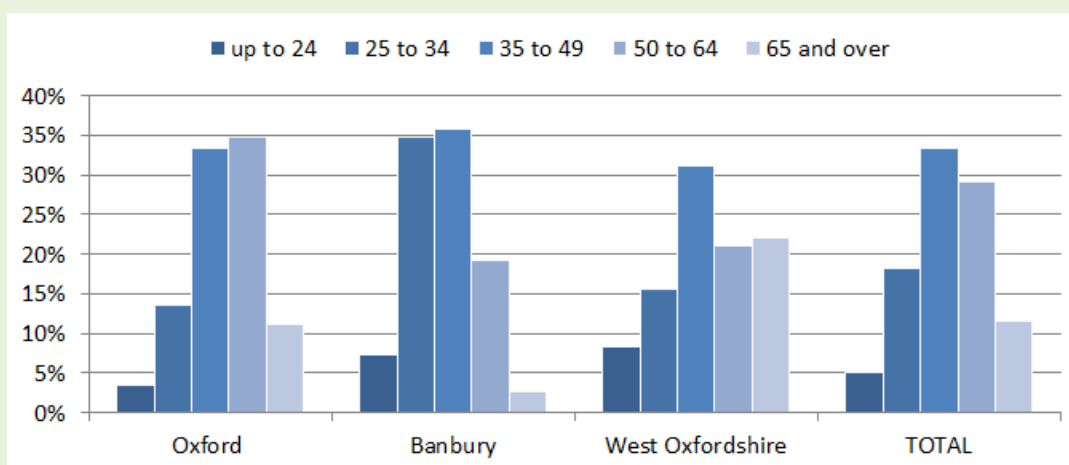
- 61% were female.
- The age profile varied by area with Oxford and West Oxfordshire seeing a higher proportion in the older age groups (50+).
- Just under two thirds of cases (62%) had either a disability or a long term health condition.

Table 5 Clients helped by *Benefits in Practice* programme by gender (2015-16)

	Oxford	Banbury	West Oxfordshire	TOTAL	
Female	212	64	69	345	61%
Male	132	45	39	216	38%
Transsexual	0	0	1	1	0%
TOTAL	344	109	109	562	100%
	61%	19%	19%	100%	

Source: Citizens Advice services Oxfordshire

Figure 21 Proportion of clients helped by *Benefits in Practice* programme by age (2015-16)



Source: Citizens Advice services Oxfordshire. Base: Oxford 344; Banbury 109, West Oxfordshire 109

7.9 Troubled families programme

Oxfordshire’s *Troubled Families – Think Families* programme identifies families most in need of intensive support through a combination of measures including:

- Parents or children involved in crime or anti-social behaviour.
- Children who have not been attending school regularly.
- Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan.
- Adults out of work or at risk of financial exclusion or young people at risk of worklessness.
- Families affected by domestic violence and abuse.
- Parents or children with a range of health problems.

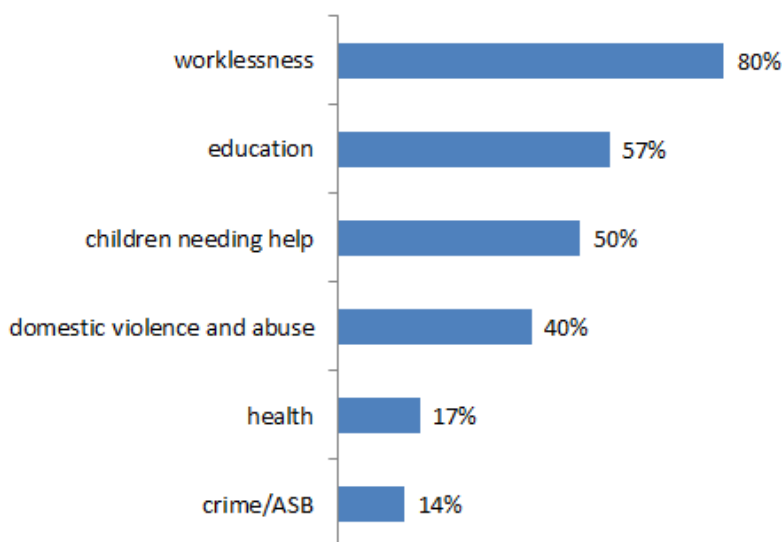
About the Troubled Families Programme

- The first phase of the Troubled Families programme ran from 2012 to 2015
- It set a target to work with, and ‘turn around’, families with multiple problems
- Problems included crime, anti-social behaviour, truancy and unemployment
- Local authorities ran the programme and received payment-by-results from central Government
- Programme was expanded for 2015-2020 to work with 400,000 additional families
- Second phase targeted additional problems, including domestic violence, health, drug abuse, mental health and children at risk

The Troubled Families programme (England) House of Commons briefing paper 20 Oct 2016

As of October 2016 there was a total of 1,154 families identified in Oxfordshire, 80% of which met the national criteria on worklessness, 57% met the criteria on education and 50% were families where children need help (in need or subject to a child protection plan).

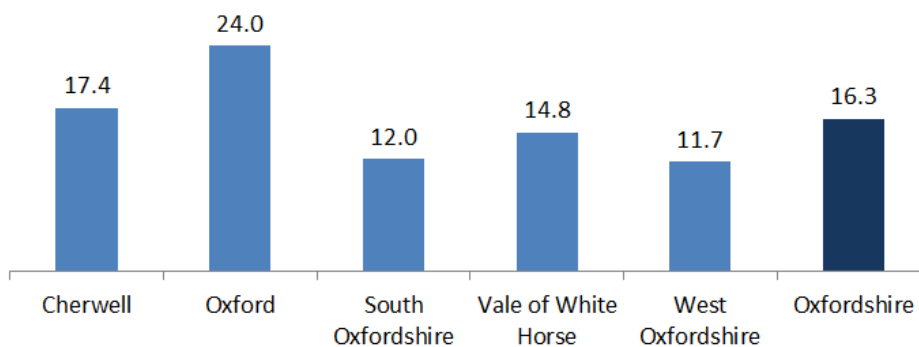
Figure 22 Troubled families identified in Oxfordshire by criteria (October 2016)



Source: Oxfordshire County Council

The rate per 1,000 families of those identified by the Troubled Families programme was highest in Oxford (24 per 1000) and lowest in West Oxfordshire (11.7).

Figure 23 Troubled Families rate per 1,000 families by district (October 2016)



Source: Oxfordshire County Council

Table 6 Troubled Families count and rate (October 2016)

	Troubled Families (count)	% of total in Oxfordshire	TF rate per 1,000 families
Cherwell	300	26%	17.4
Oxford	355	31%	24.0
South Oxfordshire	176	15%	12.0
Vale of White Horse	194	17%	14.8
West Oxfordshire	129	11%	11.7
Oxfordshire	1,154	100%	16.3

Source: Oxfordshire County Council

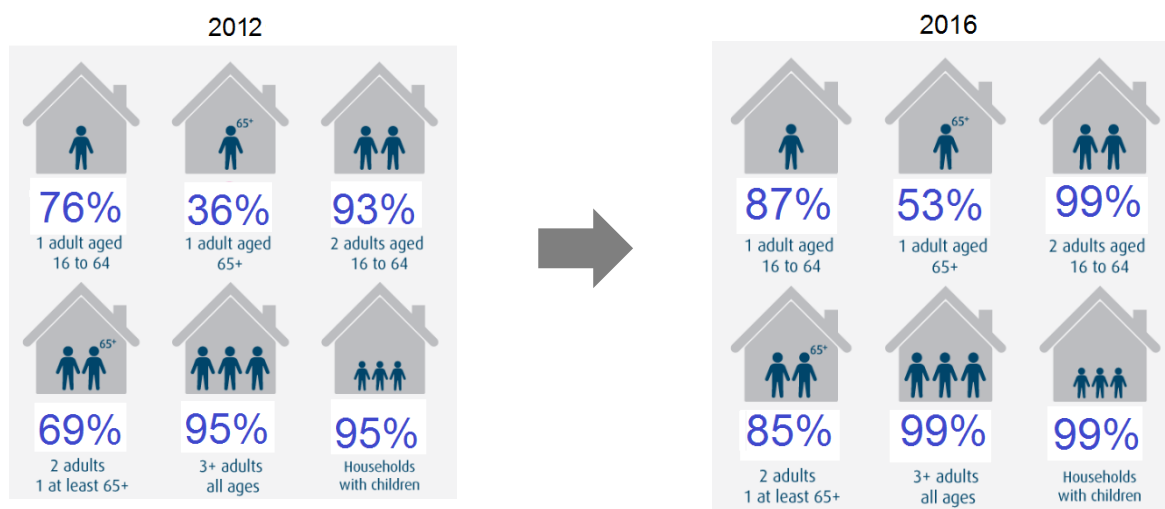
7.10 Access to services

Use of the internet

Data on internet use is limited. The statistics in this section are from the ONS Opinions and Lifestyle survey.

Between 2012 and 2016, the proportion of internet-connected households increased for each household type in Great Britain. Households occupied by a single older person (aged 65+) remained the household type with the lowest proportion of internet-connected households (53% in 2016).

Figure 24 Internet connection by household type



Source: ONS Opinions and Lifestyle survey, ONS infographic

<https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/bulletins/internetaccesshouseholdsandindividuals/2016#quality-and-methodology>

A significantly lower proportion of disabled people used the internet to find information about goods and services (57% disabled compared with 80% not disabled).

Table 7 Using the internet to find goods and services (95% confidence intervals) 2016

	Lower limit	Survey estimate	Upper limit
Disability status			
Equality Act disabled ¹	52	57	61
Not Equality Act disabled	78	80	82

Base: Adults (aged 16+) in Great Britain.

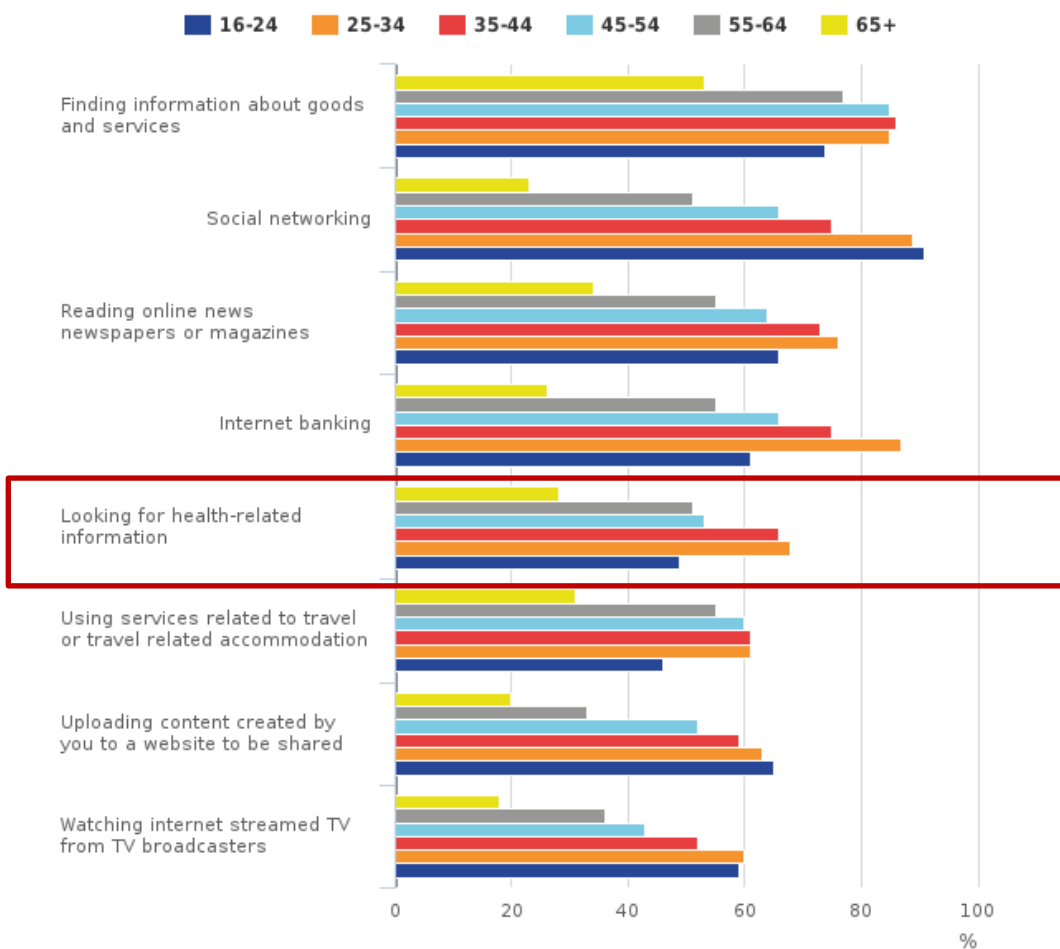
Source: Office for National Statistics

1. Equality Act disabled refers to those who have a health condition or illness in line with the Equality Act definition of disability.

Looking for health information online is a less popular use of the internet than many other activities – including for older people.

- Older people were less likely to use the internet to look for health-related information than find information about goods and services, read news or look for travel services.

Figure 25 Internet activities by age group, 2016, Great Britain



Source: ONS Opinions and Lifestyle survey, ONS chart
<https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/bulletins/internetaccesshouseholdsandindividuals/2016#quality-and-methodology>

Distance to health services

Distance to GPs

The Indices of Deprivation 2015 includes an indicator of the average road distance to a GP surgery indicator.

Out of the total of 407 Lower Super Output Areas¹⁷ (LSOAs) in Oxfordshire, 101 (31%) were 2 miles or more (3.2km) from the nearest GP surgery, covering a total population of 157,000 (25%) as of 2011.

There were no areas of Oxford classified as 2 miles or more from a GP surgery.

Areas classified as 2 miles or more from a GP surgery in rural districts in Oxfordshire covered:

- 3,700 households with no car (23% of total households in rural districts)
- 30,300 people aged 0-15 (32% of the total in rural districts)
- 28,800 people aged 65 and over (34% of the older population in rural districts).

Table 8 Households with no car and population in areas of Oxfordshire (LSOAs) with IMD indicator greater than 2 miles to nearest GP surgery

Greater than 2 miles to GP surgery (count)	Count of Lower Super Output Areas >2 miles to GP surgery	Households with no car	Census 2011 population in households	Age 0 to 15 in households	Age 65 and over in households
Cherwell	28	862	41,398	8,390	6,412
Oxford	0	0	0	0	0
South Oxfordshire	31	1,075	46,849	8,973	8,924
Vale of White Horse	22	1,022	38,182	7,359	7,375
West Oxfordshire	20	756	30,625	5,606	6,110
Oxfordshire	101	3,715	157,054	30,328	28,821
<i>Rural districts</i>	<i>101</i>	<i>3,715</i>	<i>157,054</i>	<i>30,328</i>	<i>28,821</i>
Greater than 2 miles to a GP surgery as % of total	% Lower Super Output Areas >2 miles to GP surgery	% Households with no car	% Census 2011 population in households	% Age 0 to 15 in households	% Age 65 and over in households
Cherwell	30%	18%	30%	30%	31%
Oxford	0%	0%	0%	0%	0%
South Oxfordshire	35%	26%	36%	35%	38%
Vale of White Horse	29%	25%	32%	33%	35%
West Oxfordshire	30%	23%	30%	29%	33%
Oxfordshire	25%	17%	25%	25%	29%
<i>Rural districts</i>	<i>31%</i>	<i>23%</i>	<i>32%</i>	<i>32%</i>	<i>34%</i>

Source: IMD 2015 and Census 2011 (tables LC4109, LC1104)

¹⁷ Lower Super Output Areas have an average of roughly 1,500 residents and 650 households. Measures of proximity (to give a reasonably compact shape) and social homogeneity (to encourage areas of similar social background) are also included.