## **NHS** Wolverhampton Clinical Commissioning Group

### Wolverhampton End of Life care Population Profile

#### 1. Population of Wolverhampton

This needs analysis covers both the registered and resident population of Wolverhampton. The registered population figures are based on data collected on a quarterly basis and are a snapshot of the population of Wolverhampton at a particular date. It is not generally used to predict or project future population figures.

Resident population figures are based on the most recent census data (2011 Census) which is then used by the Office of National Statistics to generate "projected" or predicted populations for Wolverhampton for specific years.

#### 1.1 Local Population

Table 1 : Wolverhampton CCG Registered population as at April 2016

Age Band	Male	Female	Total
0-4	8,988	8,464	17,452
5 to 9	8,989	8,722	17,711
10 to 14	7,981	7,548	15,529
15-19	8,032	7,671	15,703
20-24	8,823	8,707	17,530
25-29	9,982	10,066	20,048
30-34	9,968	9,784	19,752
35-39	9,384	8,832	18,216
40-44	9,688	8,515	18,203
45-49	10,213	9,371	19,584
50-54	9,246	8,845	18,091
55-59	7,836	7,575	15,411
60-64	6,638	6,518	13,156
65-69	6,119	6,172	12,291
70-74	4,730	5,157	9,887
75-79	3,964	4,632	8,596
80-84	2,788	3,700	6,488
85+	2,373	4,151	6,524

(source - Health & Social Care Information Centre)





Source : Health and Social care information Centre July 2016

#### Table 2: Projected resident population of Wolverhampton 2016

Age Band	Male	Female	Total
0-4	9,093	8,625	17,719
5 to 9	8,663	8,387	17,051
10 to 14	7,505	7,171	14,676
15-19	7,695	7,254	14,950
20-24	9,008	8,773	17,781
25-29	9,203	9,494	18,698
30-34	8,843	8,989	17,832
35-39	7,949	8,025	15,975
40-44	8,343	7,916	16,260
45-49	8,770	9,020	17,790
50-54	8,275	8,743	17,018
55-59	7,153	7,354	14,507
60-64	6,199	6,341	12,541
65-69	5,949	6,158	12,107
70-74	4,721	5,215	9,936
75-79	3,806	4,570	8,377
80-84	2,762	3,652	6,415
85+	2,255	4,018	6,274

(source : Office for National Statistics Mid-Year Estimates 2016)





(source : Office for National Statistics(ONS) Mid-Year Estimates 2016)

There are some relatively minor differences between the two sets of data – the number of patients of both sexes aged 65 and above registered with Wolverhampton GPs is slightly higher than the number projected by ONS, but this difference is less than 2% of the total in that age group.

#### 1.2 Older Population of Wolverhampton

#### 1.2.1 Over 65 Population of Wolverhampton by Wards

The chart below shows where the highest percentages of older people (those aged 65 and over) live across the various council wards. This information is taken from the 2011 census but the overall pattern is expected to be similar.



Chart 3 – Source : ONS 2016

#### 1.2.2 Projected resident population of Wolverhampton aged 65 and over for 2021 and 2026

The tables below indicate the projected change in the number of people in the 65yrs and over population of Wolverhampton for 2021 and 2026 from those projected for 2016. The vast majority of deaths in 2014 (79% of men and 86% of women, 82% overall) were in the over 65yrs age group, so it is likely that any increases in that population would lead to an increase in the numbers requiring end of life care. This information is not available at council ward level so local changes cannot be calculated.

The projected changes between 2016 and 2021 are not particularly large, with an overall increase of only 5% in the over 65yrs population as a whole. However, one of the largest increases are predicted to be in the 85yrs and over population, which has made up about a third of all deaths for the past 10 years.

		2016-2021		2016-2026			
	Male	Female	Total	Male	Female	Total	
65-69	-250	-193	-443	237	490	727	
70-74	628	531	1,159	441	368	809	
75-79	270	134	404	887	662	1,549	
80-84	239	143	382	549	343	892	
85 and over	394	287	681	915	768	1,683	

 Table 3 : Projected changes in the population of Wolverhampton aged 65 and over

(Source ONS 2016)

Table 4 : Projected percentage changes in the population of Wolverhampton aged 65 and over

		2016-2021		2016-2026			
	Male	Female	Total	Male	Female	Total	
65-69	-4	-3	-4	4	8	6	
70-74	13	10	12	9	7	8	
75-79	7	3	5	23	14	18	
80-84	9	4	6	20	9	14	
85 and over	17	7	11	41	19	27	
Total	7	4	5	16	11	13	

Source : ONS 2016

#### **1.3 Ethnicity in Wolverhampton**

According to the 2011 census, which is the most recent reliable data available, almost a third of Wolverhampton's population (32%) was from black and minority ethnic groups.

 Table 5 : Population of Wolverhampton by Ethnic Group (percentages)

White	68
Mixed/multiple ethnic group	5
Asian/Asian British	18
Black/African/Caribbean/Black British	7
Other ethnic group: Any other ethnic group	2
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Source : ONS 2016

If you analyse the above figures in more detail, it is notable that a significant majority (71%) of the Asian population identifies as "Indian" in ethnic origin.





#### Source: ONS 2016

There are a number of significant differences in the ethnic makeup of the population of Wolverhampton. There are distinct differences between age groups within the population.

Table 6 and Chart 5 below give the ethnic breakdown for the population aged 65 and over :

Table 6: Population of Wolverhampton aged 65 and over by Ethnic Group (percentages), 2011 Census

White	86
Mixed/multiple ethnic group	1
Asian/Asian British	8
Black/African/Caribbean/Black British	5
Other ethnic group: Any other ethnic group	1
Courses ONG 2016	

Source : ONS 2016





Source ONS 2016

It is noticeable that the over 65 population reported in the 2011 census is much less ethnically diverse than the population as a whole, and the percentage of people from black and minority ethnic communities reduces further in the oldest age groups as the table below shows.

**Table 7:** Population of Wolverhampton by Ethnic Group and Age Group (Percentages)

 2011 Census

Ethnic Group	70-74	75-79	80-84	85+
White	83	84	87	91
Asian/Asian British	10	9	5	4
Black/African/Caribbean/Black British	5	6	5	3
Any other ethnic group	2	1	2	2

Source: ONS 2016

In all the age groups across the population, the largest proportion of people from Black and Minority Ethnic Groups identify as Indian in ethnic origin, but in the older age groups there is an almost equal percentage of people from the Black Caribbean ethnic group.

In addition to differences between age groups, there are also quite significant geographical differences in the ethnic makeup of the population. The city's minority ethnic communities are concentrated in a relatively small number of areas, as the charts below indicate. Both charts show the breakdown of population by ethnic community in each of the City Council's electoral wards. The first (Chart 5) shows the breakdown of the population as a whole, the second (Chart 6) shows the same breakdown for those aged 65 and over, which is the age group in which death is most likely to occur.

#### Chart 6



Source : ONS 2016

#### Chart 7



#### 1.4 Faith and Religion in Wolverhampton

A person's religion, faith and spirituality can be very important to them when they are approaching the end of their life.

Different faiths and belief systems have different attitudes to death and dying,.

There will be different ways of managing bereavement and different rituals following someone's death and these attitudes and approaches can have quite a significant impact on how peoples choices at end of life. –It is important that end of life care services are provided in a way that is culturally appropriate, that recognises differences arising from different faiths and that they are accessible to those of all faiths.

The table and chart below show the stated faiths / religions of the population of Wolverhampton according to the 2011 Census.

This mirrors to some extent the ethnic makeup of the city, with the majority of the Asian population also being Sikh. A small minority (less than 1%) stated a belief in Buddhism or the Jewish faith. These have been omitted. Percentage stated Religion/ Faith within the population of Wolverhampton

Table 8 : Stated Religion in Wo	verhampton 2011 Ce	ensus, All age groups
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Christian	Hindu	Muslim	Sikh	Other religion	No religion	Religion not stated
55	4	4	9	1	20	6

Source : ONS 2016

#### Chart 8



There are significant differences between the population as a whole and the older population of Wolverhampton. The chart and table below show the same breakdown for the ver 65yrs population.

The percentage of people stating they had no religion is very much lower, as is the percentage of people with religions other than Christianity.

This shows an increase of 24% compared with the population as a whole.

This data requires recognition in the commissioning and provision of multi cultural end of life care services.

# Table 9 : Percentage stated Religion/ Faith within the population of Wolverhampton Over 65 age group, 2011 Census,

Christian	Hindu	Muslim	Sikh	Other religion	No religion	Religion not stated
79	2	1	5	1	5	7
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Source : ONS 2016

Chart 9:



Source: ONS 2016

#### 2. Deaths in Wolverhampton

Information on Deaths in Wolverhampton is taken from Public Health England's End of Life Intelligence Network. This provides information on the number of deaths, place and cause of death, broken down by age groups. The analysis – tables and charts – that follow are based on the data available to Clinical Commissioning Groupss. More detailed analysis of this data could be provided by Wolverhampton's Public Health Directorate if required.

It has not been possible to identify whether there are any significant differences in the age profile, place or cause of death between the male and female population of Wolverhampton, or whether the trends and patterns in the overall population are reflected in the two sexes.

#### 2.1 Number of deaths

The table and chart below show the number of reported deaths in Wolverhampton for the years 2004-2014, which is the most recent data available.

Age	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Band											
<65	424	451	476	430	479	403	411	401	404	391	412
65-74	469	478	472	389	376	397	422	375	388	383	406
75-84	919	881	859	843	822	765	818	694	709	766	704
85+	709	759	767	825	803	805	804	852	873	920	909

Table 10 - Number of deaths in Wolverhampton 2004-2014 by age group -

	TOTAL	2521	2569	2574	2487	2480	2370	2455	2322	2374	2460	2431
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Source : Public Health England (PHE) 2016

Chart 10 – Age profile of deaths in Wolverhampton 2004-2014.



Source : PHE 2016

#### 2.1.1 Estimating death rates in different age groups

The table below uses the projected mid-year population for Wolverhampton for 2014 and the reported deaths in Wolverhampton in 2014 (which is the latest data available) to calculate the estimated percentage of deaths in each age group of the population.

As the table shows, the overall percentage death rate for Wolverhampton in 2014 was 0.96% which is very close to the national estimated rate of 1%.

#### Table 11

Death rate for age groups in Wolverhampton based on 2014 figures.

Number of recorded deaths in Wolverhampton

	Projected Population	Reported Deaths	%ge of people who died in age group
under 65	210,614	412	0.20
65-74	21,527	406	1.89
75-84	14,801	704	4.76
85 and above	6,045	909	15.04
All ages	252,987	2,431	0.96

Source : Calculated from PHE and ONS data

As expected, the death rate increases with older age

#### 2.1.2 Estimating the predicted number of deaths in future years

The estimated rates of death in each age group could be used, in conjunction with published population projections, to estimate the likely number of deaths in any given year.

The table below shows the above percentage death rates applied to the projected population of Wolverhampton for 2021 and 2026 to estimate the number of deaths in each age group in those years.

	2021	2026
under 65	426	433
65-74	429	445
75-84	741	820
85 and over	1,046	1,197
TOTAL	2,642	2,894

 Table 12: Estimated number of deaths in Wolverhampton 2021 and 2026

By age group, based on 2014 estimated death rates and ONS projected populations

Source: Calculated from PHE and ONS data

The percentage increase in deaths across all age groups is about 9% for 2021 and about 19% for 2026 – but the individual age groups show a wide variation in percentage increases.

The table below shows the estimated numbers and percentage increases for each age group for 2021 and 2026 compared with the 2014 figures.

Table 13: Estimated number and percentage increases in deaths by age group

	2021		2026	
under 65	14	3%	21	5%
65-74	23	6%	39	10%
75-84	37	5%	116	16%
85 and above	137	15%	288	32%
All ages	211	9%	463	19%

Source : Calculated from PHE and ONS data

These figures suggest that there may be a significant increase in need for end of life support.

#### 2.2 Place of death

Table 14

This is another important measure of the quality of end of life care.

The number of people who have died in their own home (or usual place of residence) is seen as a good indicator of people receiving choice at end of life.

There are two alternative measures – one provides data on places of death – Home, Hospital, Care Home, Hospice and Other.

The second provides data on deaths in what is described as someone's "Usual Place of Residence" (DIUPR) which includes both people's own homes and care homes.

The data on deaths used to produce these statistics is slightly different, so the number of deaths can't be directly compared – although the percentages are very similar for both sets of data.

	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Hospital	62	63	63	59	59	57	60	57	56	56	55
Home	18	18	18	19	19	20	20	23	22	21	22
Care Home	13	14	13	16	16	17	15	16	16	17	16
Hospice	4	4	5	4	5	4	3	2	5	4	5

Percentage of deaths in Wolverhampton 2004-2014 by place of death - all age groups

Other	2	1	2	2	2	2	2	2	2	1	2
Source: PHE 2	2016										

Table 15

Percentage of deaths in Wolverhampton reported to be in "Usual Place of Residence" – all age groups

	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
DIUPR	32	31	30	35	35	37	36	39	38	39	38

Source: PHE 2016

Analysing these figures in more detail, there are different patterns across different age groups. For example, the percentages of people who die aged over 85yrs in the various places identified is different from those in other age groups.

The table and chart below show these different percentages for the most recent year, 2014.

Table 16

Percentage of deaths in Wolverhampton 2014 by place of death and age band

	All Ages	Under 65	65-74	75-84	85 and over
Hospital	55	56	57	59	51
Home	22	31	26	22	16
Care Home	16	1	6	14	29
Hospice	5	7	9	4	3
Other	2	5	1	1	0

Source: PHE 2016

#### Chart 11



Source: PHE 2016

#### 2.3 Changes in place of death over time

#### 2.3.1 Previous 10 years :

Over the 10 year period between 2004 and 2014 there have been some changes in where people in Wolverhampton end their lives.

There has been a consistent decrease in the percentage of people dying in hospital and an increase in those dying at home or in a care home, but there are some years where those overall trends are much less pronounced. Here is a quick summary :

- 6.6% fewer people died in hospital
- 3.7% more people died at home
- 2.6% more people died in a care home
- 0.7 % more people died in a hospice.

This pattern of change differs between different age groups – the biggest reduction in deaths in hospital is in the 75-84 and 85 and above age groups, where the reduction was between 6.9% and 7.4%, while the reduction in younger age groups was much lower, around 4% overall.

The increase in deaths at home was greatest in the 75-84 age group (6.7%) and in the under 65 age group (6.1%) while the increase in over 85 age group was much smaller (3%) and there was very little increase (0.1%) for the 65-74 age group. Those figures are balanced to some extent by the increase in deaths in care homes in the 85 and over age group (2.9%).

#### 2.3.2 Previous 5 years

Over the 5 years between 2009 and 2014 the changes in place of death were slightly different. There was an overall increase of 2% in deaths at home, and an equivalent reduction in deaths in hospital, but the scale of change was generally much smaller across age groups.

The biggest change was an increase of nearly 5% in the percentage of people aged 85 and over dying at home, together with almost 3% reductions in the percentage of the same age group dying in a care home or in hospital.

#### 2.3.3 Previous 2 years :

Over the most recent two years (2013-2014) there was little or no change in the overall percentages of people dying in hospital or at home. There was actually an increase in the percentages of those aged 65 -74 and 75-84 dying in hospital and a reduction in those in the same age groups dying at home, but this was matched by a much bigger reduction in the percentage of deaths in hospital among the 85 and over age group, together with increases in those dying at home or in a care home.

#### 2.4 Causes of death

The statistics produced by Public Health England allow some analysis by cause of death – however, this is limited to 4 disease areas – Cancer, Circulatory, Respiratory and, by exclusion, Other.

While these causes of death are recognised as the most frequent causes of death in Wolverhampton, and equally elsewhere in the UK, the data available does not identify anything beyond the direct cause of death and does not indicate whether people had any Life-Limiting Long Term conditions that may have contributed to their death.

The table and chart below shows the percentage of each cause of death in Wolverhampton across all age groups between the years 2004 and 2014.

Table 17:

Percentage recorded Cause of Death in Wolverhampton, all age groups 2004-2014

	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Cancer	25	25	27	26	26	28	27	28	27	29	28
Circulatory	37	34	33	34	32	32	34	29	29	26	30

Respiratory	14	14	13	13	14	13	15	14	15	14	12
Other	25	26	27	27	28	27	25	30	29	32	30

#### Source PHE 2016

#### Chart 12



Source : PHE 2016

As with many other statistics, the recorded causes of death differ across different age groups. The table below shows these differences for deaths reported in Wolverhampton in 2014.

 Table 18: Percentage recorded Cause of Death in Wolverhampton in 2014, by age group

	All ages	under 65	65-74	75-84	85 and above
Cancer	28	34	45	27	18
Circulatory	30	23	26	34	32
Respiratory	12	7	9	13	13
Other	30	36	19	25	37

Source : PHE, 2016

Analysing this data reveals the following trends,:

- The percentages of deaths from circulatory conditions increases in the older population groups.
- The percentages of deaths from respiratory conditions increases in the older population groups
- The percentage of deaths from cancer reduce significantly in the older population groups.

It is significant that the percentages of deaths from "Other" causes is highest in the under 65 and over 85 populations, and makes up the largest percentage of deaths in both these age groups, but without more detailed information it is not possible to explain what underlies these figures.

#### 2.4.1 Causes of death from 2004-2014

During the period 2004-2014, there have been some changes in the causes of death in the population of Wolverhampton. Although there are variations from year to year, there are some general trends that can be identified :

- An increase in the percentage of people dying from cancer
- A decrease in the percentage of people dying from circulatory problems
- An increase in the percentage of people dying from "other" causes
- No real change in the percentage of people dying from respiratory problems

Looking at the trends in causes of death across different age groups, there have been the following changes in percentages over the 10 years:

- Cancer
  - $\circ$   $\,$  No significant change for the under 65 age group  $\,$
  - A slight increase for the 65-74 and 75-84 age groups
  - $\circ~$  A more significant increase for the 85 and over age group
- Circulatory problems
  - A reduction for the under 65, 65-74 and 75-84 age groups
  - $\circ$   $\,$  A smaller reduction for the 85 and over age group  $\,$
- Respiratory problems
  - An increase for the under 65 age group
  - $\circ$  An overall increase for the 65-74 age group, but a very significant reduction in the last few years
  - $\circ~$  A slight reduction for the 75-84 and over 85 age groups

#### 2.4.2 Causes of death and different age groups

An alternative way of looking at how different causes of death affect different age groups is to look in more detail at how each age group is represented (as a percentage) in the causes of death data and comparing that percentage with the proportion of deaths among that age group in the overall number of deaths.

For example, in 2014, 27% of the people who died of cancer were aged between 65 and 74, where that age group only made up 17% of deaths, but only 25% of deaths from cancer were people aged 85 and over, where that age group made up 37% of deaths in the year. The table below shows these comparisons for the four identified causes of death in the PHE data for 2014.

Table 19:

Causes of Death by Age group

Age Group	%ge of		Causes of Death							
	all deaths	Cancer	Respiratory	Circulatory	Other					
under 65	17	20	10	13	20					
65-74	17	27	13	14	11					
75-84	29	28	34	33	24					
85 and over	37	25	43	40	45					

Source : PHE 2016

This analysis shows that the older age groups are more heavily represented in deaths from Respiratory and Circulatory problems and in deaths from Other causes than would be predicted and that the younger age groups are much more heavily represented in deaths from Cancer.

#### 3. Emergency admissions and deaths in Hospital

In Wolverhampton, a number of people are admitted to hospital in an emergency and die there after a relatively short stay, with no clinical intervention beyond treatment of their existing health needs.

The information available on this group of patients gives details of their ages, the amount of time they spent in hospital, the main condition they had on admission and their ethnicity, where that is recorded. The paragraphs, tables and charts that follow are based on the most recent information available, which covers the period from April 2014 up to and including March 2016.

#### 3.1 Age and length of stay

In the two years from April 2014 to March 2016, over a thousand patients were identified as emergency admissions with very short lengths of stay before they died – about the same number (approx. 500) in each year. Of these, two thirds were aged 80 and over, and a further fifth were aged between 70 and 79, making a total of 85% aged 70 and over.

The table below shows the number of people in each age group analysed by the number of nights they were in hospital after admission.

		2014-15			2015-16				
Age	0-2 nights	3 to 7 nights	7 or more nights	0-2 nights	3 to 7 nights	7 or more nights			
under 60	5	11	7	13	12	12	60		
60-69	17	11	18	18	14	15	93		
70-79	36	35	34	34	23	41	203		
80 and over	83	117	145	99	97	148	689		
Total	141	174	204	164	146	216	1045		

#### Table 20: Length of stay in hospital – emergency admissions

Source: Midlands and Lancashire CSU, July 2016

Over the two years for which we have data, 29% of all patients were in hospital for 2 nights or less, 31% for between 3 and 7 nights and 40% for 7 nights or more before they died.

There are different percentages for each age group, as shown in the table and chart below.

#### Table 21: Percentages of each age group and length of hospital stay

	0-2 nights	3 to 7 nights	7 or more nights
under 60	30	38	32
60-69	38	27	35
70-79	34	29	37
80 and over	26	31	43
All ages	29	31	40

Source: Midlands and Lancashire CSU, July 2016



Source: Midlands and Lancashire CSU, July 2016

This indicates that the older groups of patients tend to be in hospital for slightly longer after admission before their death than the comparatively younger age groups.

#### 3.2 Primary Diagnoses on admission

Each person in this group has a "primary diagnosis" which describes the main health problem that led to their admission in an emergency.

The patient group is defined as those who die "with no intervention" which means that they continue to be treated for their existing health needs, but that no "additional" intervention is carried out by the hospital.

There are nearly 200 individual "Primary Diagnoses" identified in the data, many of them only having one or two patients admitted over the two year period, but there are about 20 where there have been a significant number of admissions.

An analysis of the primary diagnoses using the four "Causes of Death" identified in the PHE data show the following :

- 43% are a result or Respiratory conditions
- 16% are a result of Circulatory conditions
- 10% are a result of Cancer in some form
- 32% are caused by "Other" causes

Of the respiratory conditions, the most common is pneumonia – in various forms – making up over 60% of the deaths.

Of the "Other" conditions, the most commonly identified is Urinary Tract Infection (UTI) which makes up 18% of the "Other" conditions with the second most common being Septicaemia (15%).

Looking at the primary diagnoses in the older age groups, there are no real differences between those for all ages and for those aged 70 and above. The most common condition among the respiratory problems is pneumonia, and the most common conditions in "other" are UTIs, Septicaemia and kidney disease.

#### 3.3 Ethnicity among this patient group

An analysis of these patients by ethnic group (as recorded by the hospital) provided the following information. The classifications used for ethnicity are not exactly the same as those used by the 2011 census, but it is still possible to identify whether certain ethnic groups are more heavily represented in this group of patients than they are in the wider population.

Ethnic Group	Number of Px	%ge	%ge in 2011 Census (All ages)	%ge in 2011 Census (Over 65s)
White	877	84	68	85
Indian	65	6	13	- 8
Other Asian	8	1	5	
Black Caribbean	41	4	7	5
Any other ethnic group	6	1	2	1
Mixed / multiple	N/A		5	1
Not stated / not known	48	5	N/A	N/A
Total	1045			

Table 22 : Recorded Ethnicity of patients admitted to hospital who die with no further intervention compared with percentages from 2011 Census (all ages)

Source: Source: Midlands and Lancashire CSU, July 2016 and ONS 2016

If the percentage figures are compared with the all age population recorded in the 2011 census it would appear that the white ethnic group are significantly over-represented in this patient group.

It is, however important to note that over 90% of those in this patient group are aged 60 and above, and that the percentage of people recorded as being in the white ethnic groups in the 2011 Census increases quite significantly in the older age groups.

Using the 65 and over percentages from the 2011 Census (as shown in the same table) for the comparison indicates that there is a much closer correlation, with no real differences between the two sets of figures.

#### 4. Palliative Care Registers in primary care

Under the Quality and Outcome Framework (QOF) GP Practices are expected to keep a register of the number of patients who have been identified as needing palliative or end of life care, and to undertake multidisciplinary team (MDT) reviews of their care needs every 3 months.

The most recent data on these registers (which is for the period 2014-15) indicates there were 709 patients identified, compared with a figure of 731 for the period 2013-14.

These indicate a prevalence of 0.27 and 0.28 respectively, which is significantly lower than would be expected from the number of deaths in Wolverhampton over the same periods – approximately 2,400 - which suggests that only 30% of people who died were on the register.

More detailed analysis of the register figures for GP Practices across the city indicates very significant variations in the percentage of patients on the register – ranging from a prevalence of 1.63% in one practice in 2014-15 (105 patients) to 0.03% in another (2 patients).

Some GP practices only had 1 patient recorded on their register in either year. In most practices the recorded percentage in 2014-15 had reduced from the figures reported in 2013-14. In some practices the number of patients recorded as being on the register was the same in both years.

This suggests there may be under-recording in GP practices of patients approaching end of life