Milton Keynes
City Council

Population, health and healthcare use in Milton Keynes, 2021 to 2043

Director of Public Health Report 2024

Contents

Executive Summary

The Bedfordshire, Luton and Milton Keynes (BLMK) Integrated Care System has been, and is expected to continue to be, among the fastest growing areas in England. The BLMK Integrated Care Board has invested in the development of a Population Health Intelligence Unit in order to develop local analytical capacity and foster data-driven decision making. A core part of the PHIU's initial focus has been on developing our ability to look ahead. This Annual Report shares some of the outputs of this work for Milton Keynes: how do we expect the population to change, what do we know about changing patterns of disease, and how might we expect healthcare use to change in the future? Predictions of this sort will inevitably never be 'right' but they can provide a helpful sense of the scale of change we are faced with.

Based on plans to build an average of 1,943 dwellings per year to 2043, Milton Keynes's population could increase from around 294,200 in 2023 to around 372,400 by 2043. This is 72,200 more people – a 27% increase. The highest percentage increase is likely to be in older people, with a 105% rise in people aged 85 and over and a 72% rise in those aged 75 and over. The ethnic diversity of the population is also expected to continue to grow.

In 2023, the four most common recorded health conditions were: anxiety (15.6% of the population), hypertension (14.3%), depression (11.3%) and musculoskeletal conditions (9.5%). The rising number of older adults in the population means that by 2043 the prevalence of hypertension will increase to 17.4%, overtaking anxiety (15.5%), followed by musculoskeletal conditions (12.0%) and then depression (11.2%). Furthermore, although cardiovascular disease, cancer and chronic kidney disease are less common, they will show notable increases in prevalence over this time.

While the population is forecast to grow by 27%, if people carry on making use of healthcare at the same age- and sex-specific rates as today, by 2043 Milton Keynes's population will generate:

- 37% (around 510,000) more primary care consultations per year
- 36% (around 215,000) additional outpatient attendances per year
- 32% (around 26,000) more visits to A&E per year
- 43% (around 16,000) more elective (planned) admissions per year
- 42% (around 13,000) more emergency admissions per year

While overall population growth is contributing to this increase, the ageing population is a crucial factor. The majority of people driving this increase are already resident in our population. Population ageing means that the use of healthcare in the future will increase more than the population overall and that the types of healthcare activity that are most commonly used by older people will see the greatest rise.

Activity increases on this scale will be a significant challenge for a healthcare system that is already over-stretched. This reinforces the need for transformation, both to take a more preventative approach to build a healthier population and to make the healthcare system more efficient. Even if both these are achieved, however, it is difficult to see how they could mitigate activity increases on this scale, without also requiring investment in additional healthcare staffing capacity and infrastructure.

Introduction from Vicky Head

Bedfordshire, Luton and Milton Keynes Integrated Care System (BLMK ICS) has been, and is expected to continue to be, among the fastest growing areas in England. At a time when the health and care system is already under pressure, the scale of population change across BLMK has already created additional challenges in terms of healthcare needs and demand. Continued population growth will add to these challenges over the next decades.

The BLMK Integrated Care Board (which funds our local NHS services) is committed to using insight from data on patients and healthcare use to ensure the best possible services for local people. It has invested in establishing a Population Health Intelligence Unit (PHIU) in order to increase the capacity across the ICS to understand patterns of health, disease, and healthcare use in the population, focus on health inequalities, and identify opportunities to improve health and services. The PHIU is hosted in Bedford Borough Council as part of the shared Public Health team across Bedford Borough, Central Bedfordshire and Milton Keynes and it works closely with our Public Health colleagues in Luton.

In my annual report this year, I have chosen to highlight some of the initial work led by the PHIU, specifically the development of local population forecasts that are informed by planned levels of housing growth, and our first insights into how we can expect health and healthcare needs to change in the future.

This report presents a summary of a wealth of data for BLMK that is being made available online here: Population Forecasts 2023-2043 Dashboard. More detailed information on the assumptions and methodology behind the forecasts can also be found here.

The work in this report has to rely on assumptions about population change, including the rate of births, rate of deaths and age at death, and migration, as well as assumptions about health and healthcare use across the area. These represent the best of our knowledge at present, but the results of our work can only ever be 'best guess' rather than a perfect prediction of the future.

The work to date is just the beginning but it is already providing valuable insights to inform our planning and decision-making locally. Poor health is often preventable, but the best-case prevention efforts will not fully mitigate the increasing future demand which will be driven by a growing and ageing population; we need to acknowledge the likely levels of need which our system will have to manage.

Vicky Head
Executive Director of Public Health

4

The Population of Milton Keynes – then, now and into the future

Summary

The population of Milton Keynes grew 15% in the ten years between 2011 and 2021 and became more ethnically diverse. In the twenty years between 2023 to 2043, it is forecast to grow 27% more and increase further in ethnic diversity.

Figure 1: Actual and forecast population change in Milton Keynes, 2011 to 2043
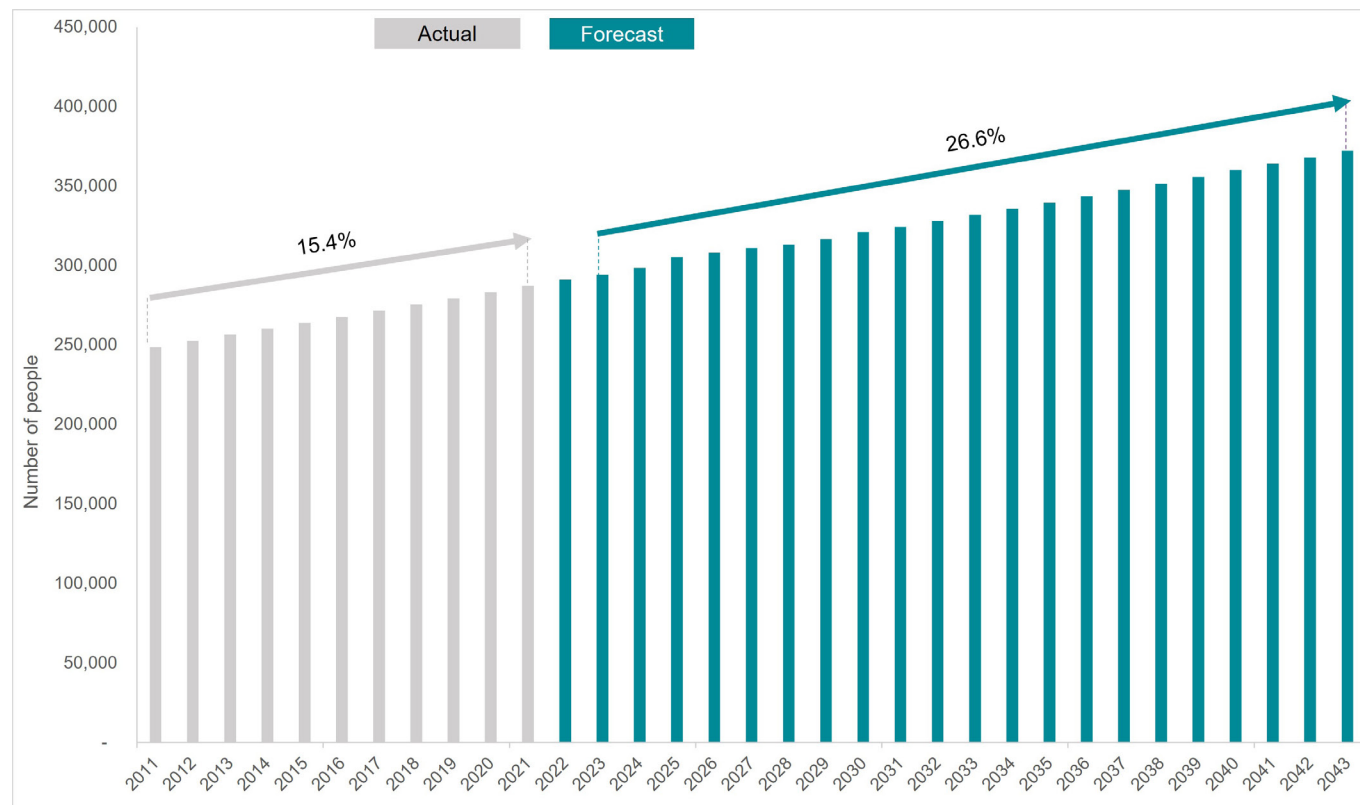
Sources: 2011 and 2021 Censuses and local population forecasts
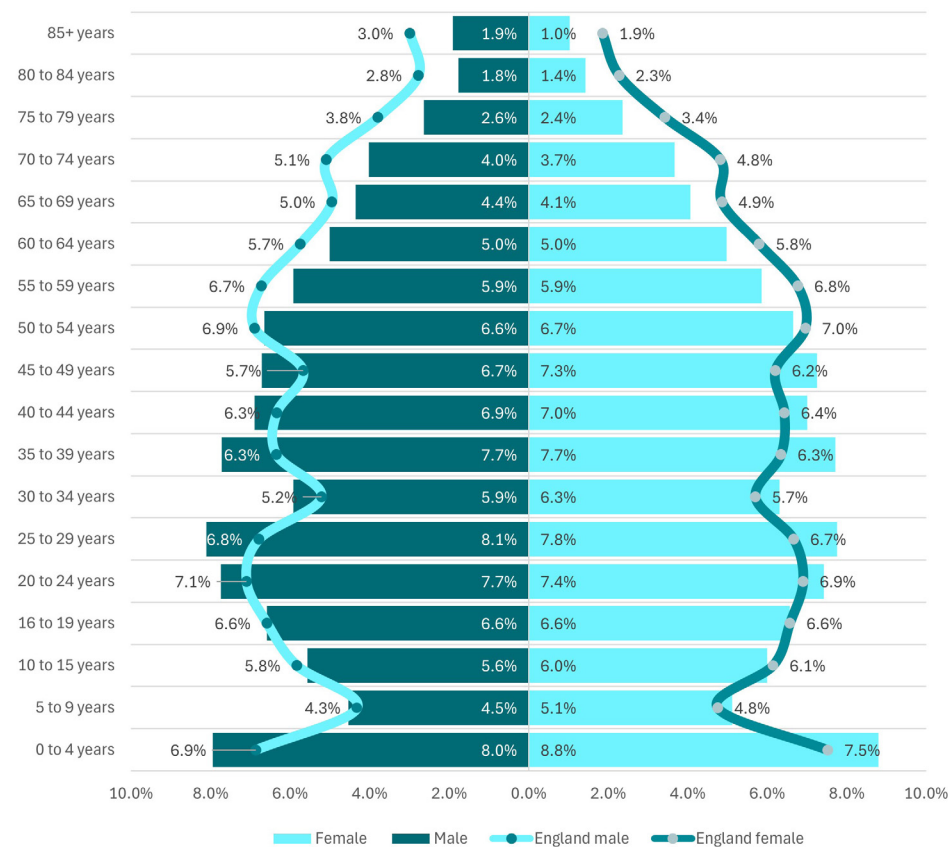
How the population has changed

Between the censuses of 2011 and 2021, Milton Keynes's population grew from 248,800 to 287,100, which was an increase of 15.4%. This was very high growth when compared to the 6.3% on average for the same time period across England and Wales.

In Milton Keynes, there was growth across all age groups except for 0- to 4-year-olds and 24-to 29-year-olds. The highest percentage increase was for people aged 65 to 84 (47%) and this group also accounted for the greatest increase in numbers, closely followed by those aged 5 to 19 years.

Milton Keynes has a younger population than England overall with a median age of 37, 3 years younger than England, although it had risen by two years from 35 in 2011. The spread of ages of Milton Keynes residents was markedly different to England in 2021. Overall, there were statistically significantly lower proportions of the population aged 55 years and over. There were significantly higher proportions aged 0 to 15 years and 30 to 49 years.


Figure 2: Proportion of people per five-year age group, Milton Keynes and England, 2021

Unlike many other areas including Bedford Borough and Central Bedfordshire, natural change from births outnumbering deaths is a significant contributor to population growth in Milton Keynes. In the decade between 2011 and 2021, 48% of population growth was a result of natural change. Furthermore, people moving into the area from elsewhere in the UK accounted for just 1% of the overall change, with more people moving out of the area to elsewhere in the UK from 2016 to 2020. People migrating to Milton Keynes from abroad did, however, contribute considerably to the growth in Milton Keynes's population, accounting for 29% of growth. Over the ten years from 2010/11 2021/21, over 18,000[1] additional dwellings were built in Milton Keynes.

Figure 3: Elements of population change for Milton Keynes's residents, 2012 to 2021
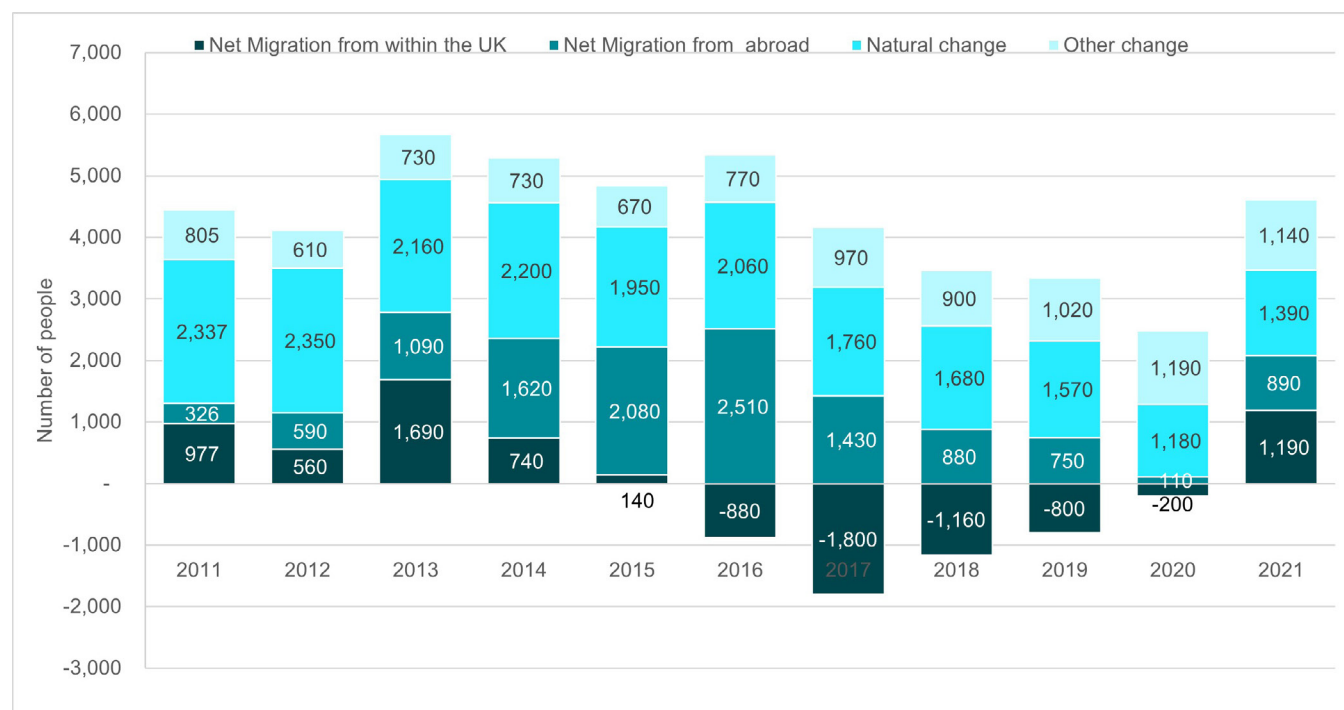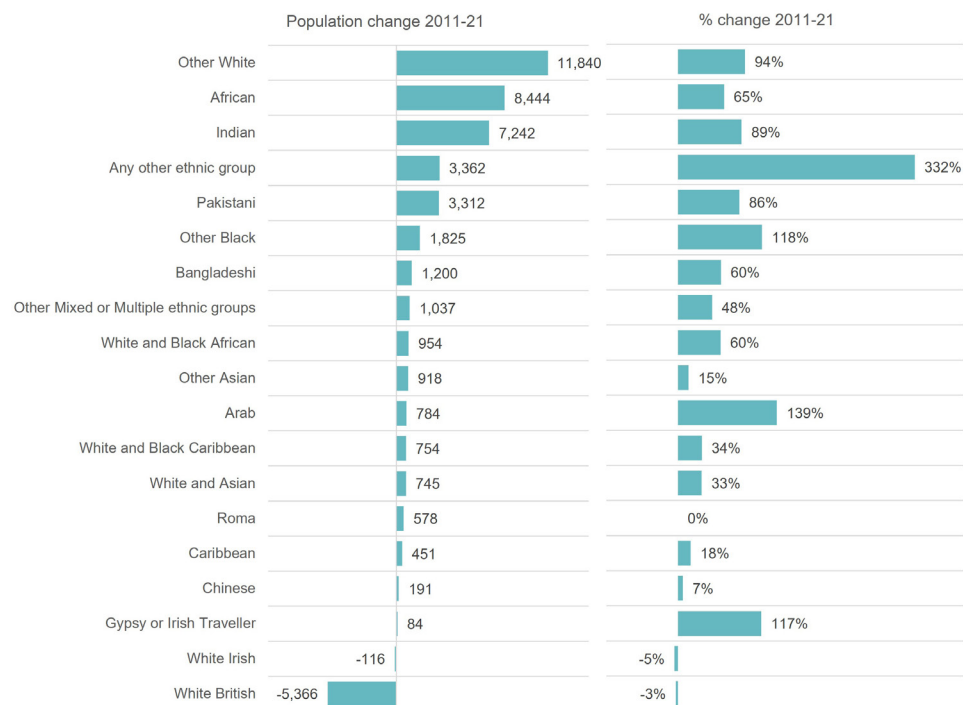
1. Based on financial years 2010/11 to 2020/21 Annual monitoring reports 2010/11 to 2020/21

Ethnic diversity change

Milton Keynes is more ethnically diverse than the country overall. In 2021, 62% of the population was White British, compared to 74% across England and Wales overall. Ethnic diversity has been increasing and the proportion of White British[2] decreased from 74% in 2011. The net increase in the Milton Keynes population came entirely from people from ethnic minority groups, with fewer White British people being born or moving to the area than leaving or dying across the period.

The largest growth in numbers were in the Other White, African and Indian ethnic groups, which grew 11,800, 8,400 and 7,200 respectively. The highest percentage change was in the 'Other ethnic group' category, which more than tripled. This group includes people from Afghanistan. The number of people from three other ethnic groups more than doubled, including those who identify as Black Other (i.e. not identifying as Black British, African or Caribbean), Arab, and Gypsy Roma or Traveller, although the latter is a tiny proportion of the population.

Figure 4: Milton Keynes population change in ethnic group populations 2021 to 2021

Ethnic group	Population change 2011-21	% change 2011-21
Other White	11,840	94%
African	8,444	65%
Indian	7,242	89%
Any other ethnic group	3,362	332%
Pakistani	3,312	86%
Other Black	1,825	118%
Bangladeshi	1,200	60%
Other Mixed or Multiple ethnic groups	1,037	48%
White and Black African	954	60%
Other Asian	918	15%
Arab	784	139%
White and Black Caribbean	754	34%
White and Asian	745	33%
Roma	578	0%
Caribbean	451	18%
Chinese	191	7%
Gypsy or Irish Traveller	84	117%
White Irish	-116	-5%
White British	-5,366	-3%

2. English, Welsh, Scottish, Northern Irish or British

Source: 2011 and 2021 Censuses

How the population is expected to change

Looking forward

Based on housing plans that would see an average of 1,943 dwellings built per year, it is estimated that the population of Milton Keynes could increase from approximately 294,000 in 2023 to around 332,000 in 2033 and exceed 372,000 by 2043. This equates to over 78,000 more people by 2043 – a 27% increase from 2023 to 2043.

The level of growth seen between 2011 and 2021 was greater than had been projected by the Office for National Statistics (ONS). The ONS sub-national projections are trend-based, which means they project into the future based on what has happened in the past. In areas of high house building, the ONS projections can underestimate future population growth. To provide a more appropriate basis for planning, we have therefore developed a new set of forecasts that are consistent with local house building plans.

No forecast is exact. The assumptions behind these forecasts may prove to be inaccurate and there will be wider societal and economic shifts that will have unpredictable influences on health and healthcare in the future that are not accounted for in these forecasts. However, we do need to plan ahead, and the forecasts presented here provide a sense of the likely direction of travel and magnitude of change we could reasonably expect to see, if levels of house building currently anticipated are realised. For more on the assumptions and methodology used in the forecasts, please see the Population Forecasts 2023-2043 Dashboard.
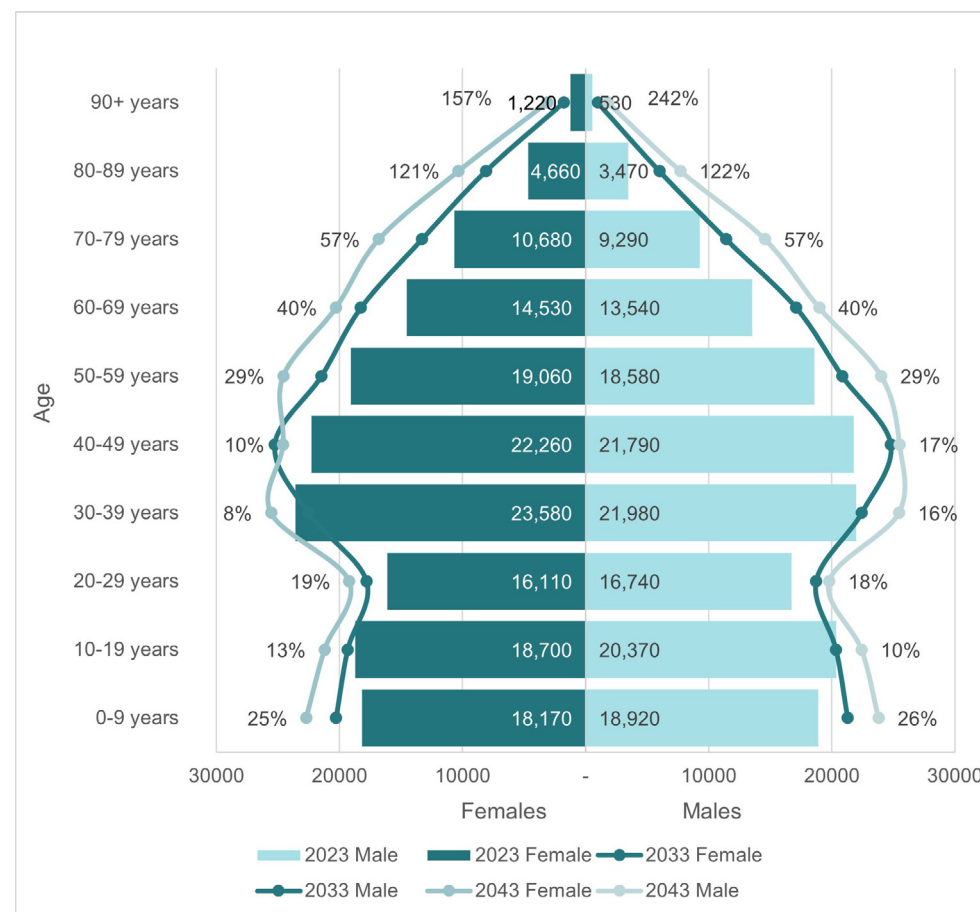
Implications of population growth on the age profile

Going forward, the expectation for Milton Keynes is that the growth in families and babies that drove growth from 2011 to 2021 will continue. By 2043, the number of births per year is forecast to increase 42%, reaching a total over 4,400. At the same time, the number of people over 70 will rise steadily. The 70 and over population is forecast to grow by 82% from 2023 to 2043, meaning there could be expected to be around 24,500 additional people aged 70 and over, taking the total to around 54,300.

Figure 5: MK population pyramid showing changes in age structure 2023, 2033 and 2043


NB: Percentages shown are for change between 2023 and 2043.
Source: Local population forecasts

Implications of population growth on ethnic diversity

Looking forward

By 2043 there are forecast to be 29,700 more people aged 65 years and over and 7,000 more aged 85 years and over, meaning there are forecast to be 72,200 people aged 65 and over and 12,000 aged 85 and over respectively in 2043.

Going forward, it is expected that ethnic diversity will continue to increase. Between 2023 and 2043 it is forecast that the fastest growing ethnic group will be people from mixed ethnic backgrounds, which is expected to see a 73% increase from around 20,700 people to 35,800. This equates to a rise in the share of the population from 7.0% to 9.7% by 2043. The Asian ethnic group is forecast to remain the largest other than White British in Milton Keynes with a 42% increase in number from around 38,700 in 2023 to 54,900 by 2043. Growth in both the White British and Other White ethnic groups is lower than the population overall at 15% and 22% respectively.

Figure 6: Milton Keynes population change by ethnic group, 2023 to 2043
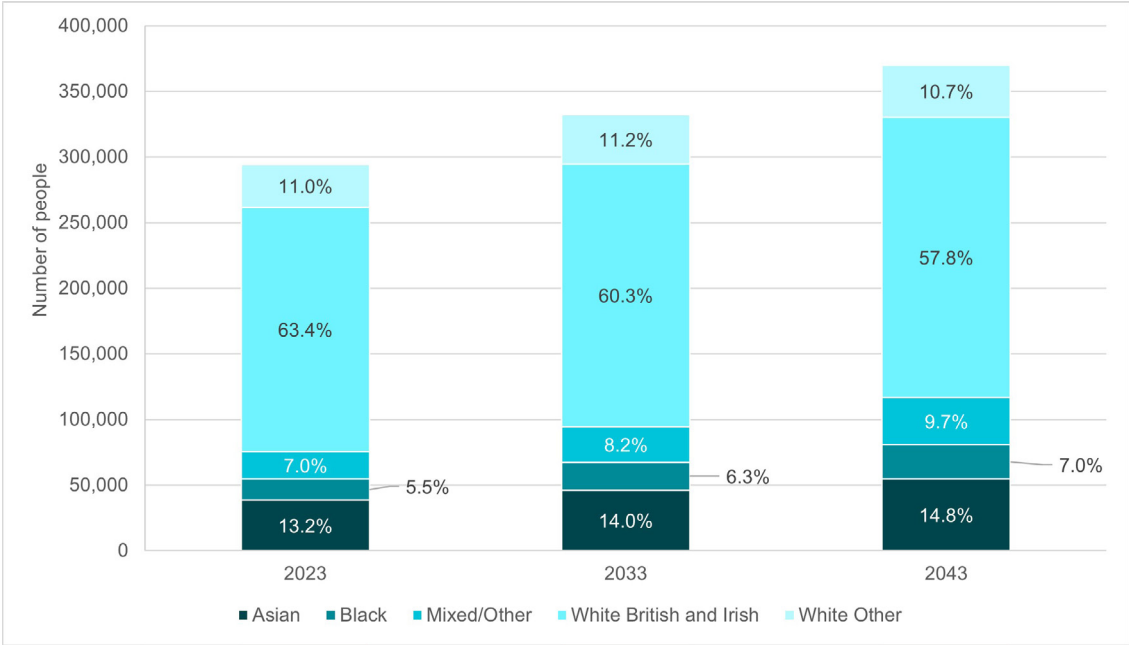
Major health conditions, now and in the future

As the population increases, so too will the number of people in Milton Keynes with health conditions. This is partly just because there will be more people overall, but, more importantly, there will be more people in older age groups and older age groups are more likely to experience ill health, which will increase the overall proportion of the population with a condition (also known as the prevalence of ill health).
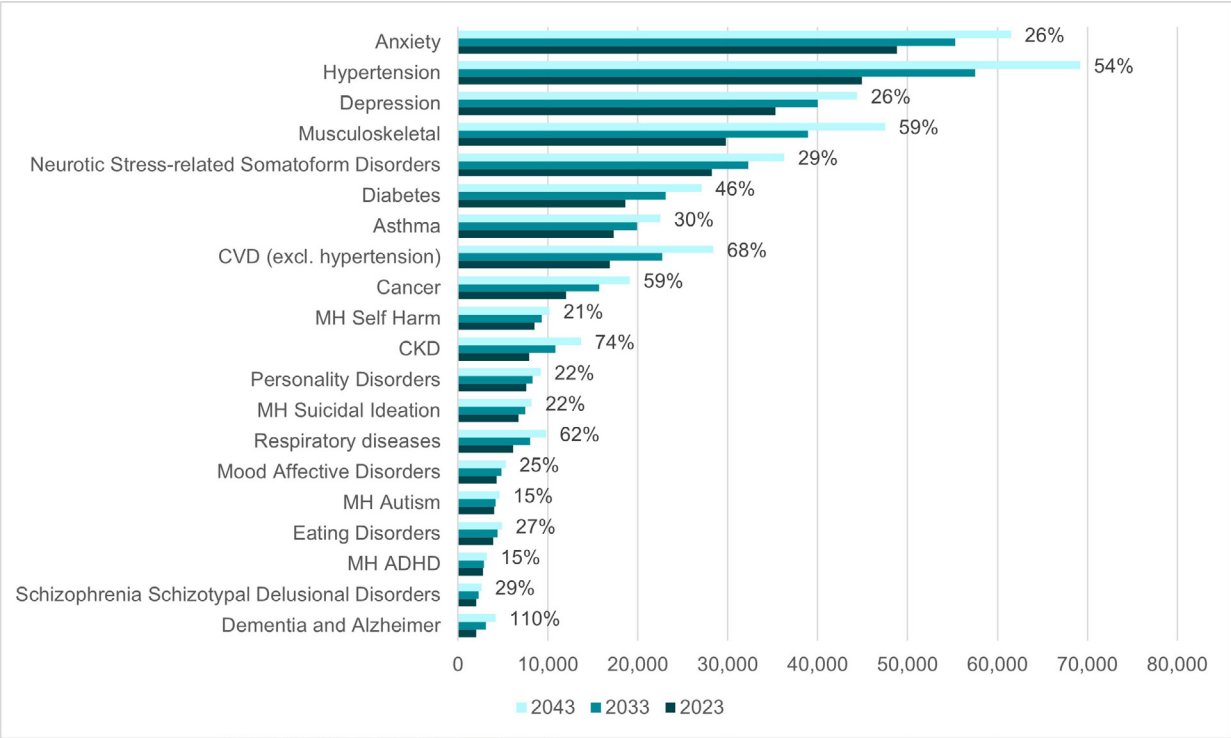

The analysis presented below looks at the twenty most common diagnosed health conditions. In 2023, anxiety was the most commonly identified condition in Milton Keynes, followed by high blood pressure (hypertension), then depression. In total, poor mental health accounted for three of the five most common conditions. It is tempting to add these together to suggest that approaching 37% of the population has a mental health condition, however, it these numbers represent the number of diagnoses and some people will have multiple conditions. For example, it is very common for people to experience both anxiety and depression and for people with physical conditions to also have poorer mental health. The co-occurrence of multiple health conditions is called multimorbidity. Future analyses will look at patterns of multimorbidity in the population, as this has implications for prevention, self-management (i.e. the actions individuals can take to manage their own health conditions) and patient-centred provision of healthcare.

Looking forward, the 2023 prevalence rates for five-year age groups were applied to the population forecasts to understand how the changes in the size and structure of the population would affect the number of cases of common conditions. In other words, if our future population experiences the same age-specific rates of disease as we see at present, how many people with each condition should we expect? It should be noted that, at this point, we have avoided assumptions about other future changes to disease patterns; for example, cancer and cardiovascular disease rates may fall in future due to falling smoking rates, or diabetes rates may rise due to increases in obesity. Over time we plan to develop our ability to incorporate changes in disease prevalence into our forecasts.

While anxiety is currently the most common health condition in Milton Keynes, hypertension is forecast to overtake anxiety to become the most prevalent condition by 2033. Based on current rates, the number of people with hypertension is forecast to grow by 54% by 2043. Musculoskeletal conditions are forecast to grow 59% to overtake depression as the third most prevalent condition group, while diabetes will leapfrog asthma to become the sixth most prevalent condition with a 46% increase between 2023 and 2043. Several other conditions see similar or even greater increases (Figure 7), for example, a 110% increase in the number of people with dementia or Alzheimer's disease, a 74% increase in the number of people with chronic kidney disease (CKD), and a 68% increase in patients with cardiovascular disease other than hypertension.

Figure 7: The number and change in number of Milton Keynes residents with common health conditions in 2023 and forecast for 2033 and 2043

Based on these factors, the changes in population size and age structure are projected to lead to increased prevalence in many physical conditions (Table 1), because these conditions become increasingly common with age and there will be proportionately more older people in future.

In contrast, mental health conditions, autism and ADHD are forecast to remain at similar prevalence levels (though the numbers of people affected will rise in line with the increasing size of the population). These conditions tend to be less common in older people and so the increase in the ageing population does not have the same effect on overall prevalence. We may find, however, that the older adults of the future retain patterns of mental health that are more similar to working-age adults at present, in which case their mental health in older age would be significantly worse than the mental health of today's older adults.

Table 1: All-age prevalence rates of common health conditions in Milton Keynes in 2023 and forecast for 2033 and 2043

Condition	2023	2033	2043
Anxiety	15.6%	15.6%	15.5%
Hypertension	14.3%	16.2%	17.4%
Depression	11.3%	11.3%	11.2%
Musculoskeletal	9.5%	11.0%	12.0%
Neurotic, Stress-related & Somatoform Disorders	9.0%	9.1%	9.1%
Diabetes	5.9%	6.5%	6.8%
Asthma	5.5%	5.6%	5.7%
CVD (excl. hypertension)	5.4%	6.4%	7.2%
Cancer	3.8%	4.4%	4.8%
Self-Harm	2.7%	2.6%	2.6%
CKD	2.5%	3.0%	3.4%
Personality Disorders	2.4%	2.4%	2.3%
Suicidal Ideation	2.1%	2.1%	2.1%
Respiratory diseases	1.9%	2.3%	2.5%
Mood Affective Disorders	1.4%	1.4%	1.3%
Autism	1.3%	1.2%	1.2%
Eating Disorders	1.2%	1.2%	1.2%
ADHD	0.9%	0.8%	0.8%
Dementia and Alzheimer	0.7%	0.7%	0.7%
Schizophrenia Schizotypal Delusional Disorders	0.6%	0.9%	1.1%

Source: Arden & Gem report based on reported cases and local population forecast

Change in use of health services

How often people make use of healthcare depends on a number of factors, some of which are more predictable than others. While a larger population will – in broad terms – generate more demand for healthcare, the age structure of the population is also critical. Using what we know about healthcare utilisation at present, along with our understanding of how the population will change in the future, we can get a sense of the likely impact on healthcare use in the future.

Our work has assumed that current (2023) patterns of healthcare use by each age group will continue into the future, and takes into account predicted population growth and an increasing proportion of older people in our area. We have not included potentially significant changes in the way that people access healthcare, changing levels of ill-health in the population or changes to the way that healthcare is delivered. In reality, efforts are being made all the time to make healthcare more efficient, for example by increasing the use of technology, being more preventative in our approach, or tackling the wider factors that drive ill health such as poverty. At the same time, we know that shifts in societal expectations of healthcare and experience of ill health also change populations' healthcare-seeking behaviours, as will advances in the medical treatments that are available.

Attempting to model and predict the impact of all these factors is complicated. In future, as the PHIU's work develops, we intend to model a range of scenarios including the impact of new policies and healthcare transformation initiatives. As a starting point, however, it is important to understand the most likely 'baseline' scenario. If the population changes as expected and continues to use healthcare at today's age-specific rates, what will that mean for healthcare use in the future? This is our 'best guess' at present and gives a feel for the potential magnitude of change that the local system is facing, and the amount of activity that would need to be averted in order to maintain the status quo in terms of healthcare capacity.

Between 2023 and 2033, the population of Milton Keynes is forecast to grow by over 37,000, the equivalent of the populations of the Central Milton Keynes and Broughton wards combined and another 40,400 people are forecast to live in Milton Keynes in the decade between 2033 to 2043. This represents a 27% increase overall between 2023 and 2043.

Based on the forecast changes in the number of people, their age and sex, and assuming that rates of healthcare use for each age/sex band remain constant, it is forecast that by 2043, the people of Milton Keynes per year will generate:

- 37% (around 510,000) more primary care consultations per year
- 36% (around 215,000) additional outpatient attendances per year
- 32% (around 26,000) more visits to A&E per year
- 43% (around 16,000) more elective (planned) admissions per year
- 42% (around 13,000) more emergency admissions per year

Proportionally these increases are higher than the growth of the population overall, with only the increases in A&E attendances close to the growth of the population (figure 8).

Figure 8: Percentage changes in population and healthcare activity, for Milton Keynes residents, 2023 to 2043
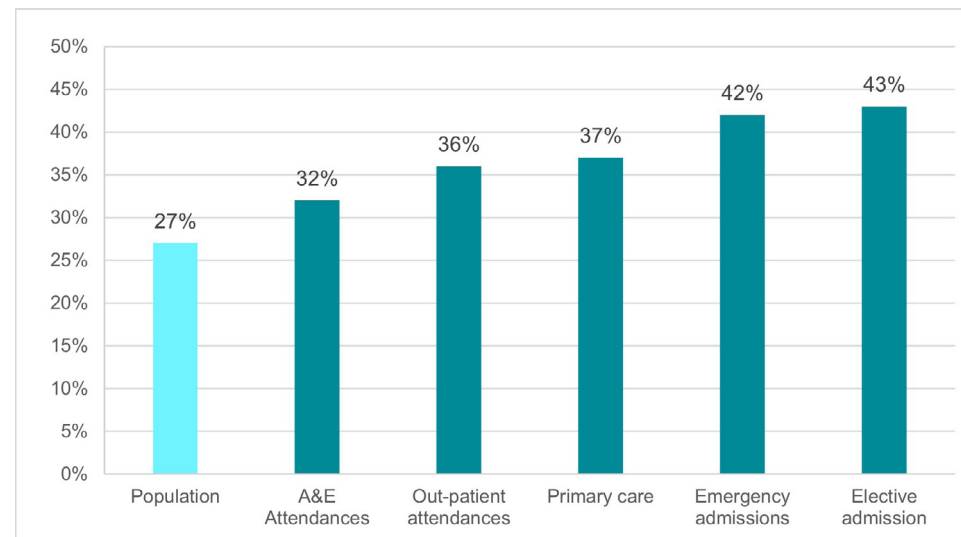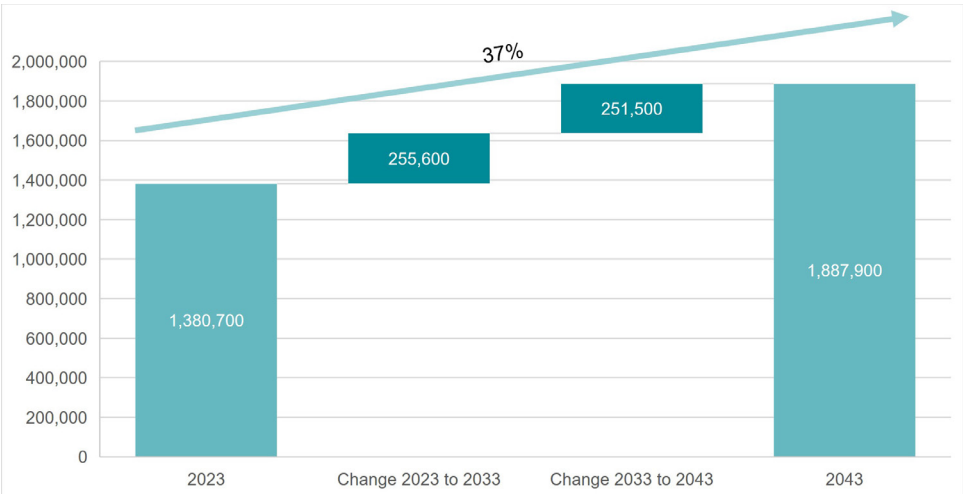

Source: Arden & GEM health activities report and local population forecasts

Primary care consultations

From 2023 to 2043, the number of primary care consultations[3] is forecast to rise by well over a third (37%), reaching nearly 1.9 million consultations per year across Milton Keynes.

**Figure 9: Forecast increase in primary care consultations for MK residents, 2023 to 2043**

Source: Arden & GEM health activities report and local population forecasts

The growth in primary care consultations to 2043 is forecast to be ten percentage points higher than the rate of growth for the overall population, a difference that is mainly due to the increasing numbers and proportion of older people, who typically use primary care services more often.

3. Primary care consultations here include all appointments with GPs and practice nurses, as well as with a small number of other medical therapists, such as physiotherapists, when they are attached to primary care rather than hospitals. It includes any kind of clinical interaction including face-to-face and phone consultations. The data do not include pharmacy or dental appointments.

In 2023, adults aged 65 and over accounted for 29% of primary care consultations, although they made up just 15% of the population. By 2043, adults aged 65 and over are expected to comprise 19% of the population but will account for 37% of primary care consultations. The number of consultations each year for people aged 65 and over will grow by 76% to 2043, whereas for people under 65 the number of consultations will grow by 19%.

Figure 10: The proportion of the population and primary care consultations by age group, for Milton Keynes residents, 2023 to 2043
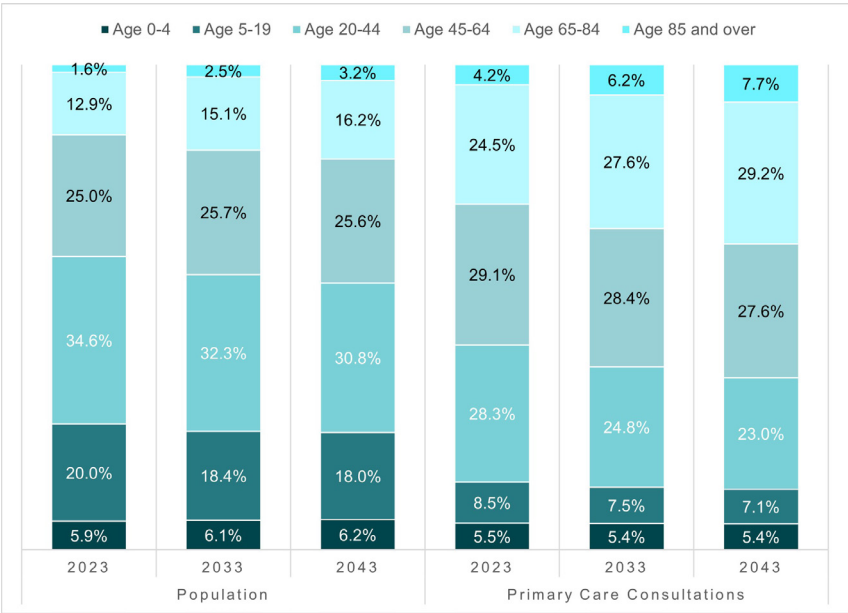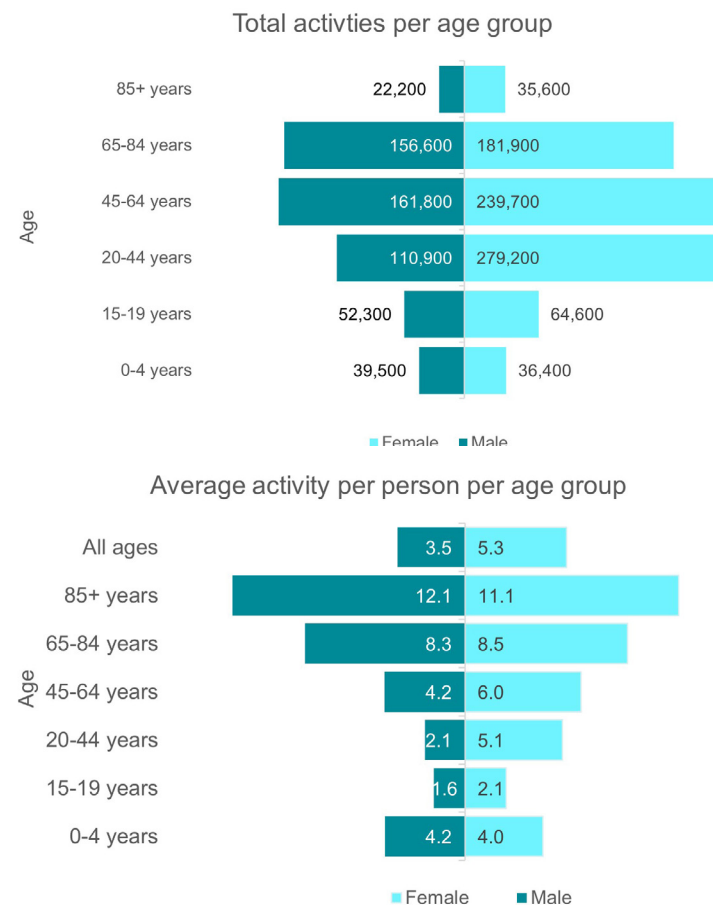

Source: Arden & GEM analysis and local population forecasts

Primary care use varies considerably by age and by sex (see figure 11). On average in 2023, female Milton Keynes residents visited their GP practice 5.3 times per year, and male residents visited 3.5 times; much of this difference is probably linked to maternity in younger women. Differences by age are even greater: women aged over 85 had 11.1 consultations per year and males 12.1, compared to 5.1 and 2.1 respectively for younger working age adults (aged 20 to 44 years). The nature of consultations tends to change with age; older adults often have more complicated health conditions requiring more time per consultation.[4]

Figure 11: Total and average primary care consultations per person by age group and sex, Milton Keynes residents, 2023

Total activties per age group

Age	Male	Female
85+ years	22,200	35,600
65-84 years	156,600	181,900
45-64 years	161,800	239,700
20-44 years	110,900	279,200
15-19 years	52,300	64,600
0-4 years	39,500	36,400

■ Female ■ Male

Average activity per person per age group

Age	Male	Female
All ages	3.5	5.3
85+ years	12.1	11.1
65-84 years	8.3	8.5
45-64 years	4.2	6.0
20-44 years	2.1	5.1
15-19 years	1.6	2.1
0-4 years	4.2	4.0

■ Female ■ Male

Source: Arden & GEM health activities report analysis

4. Gopfert, A, Deeny, S, R, Fisher, R & Stafford, M (2021), Primary care consultation length by deprivation and multimorbidity in England: an observational study using electronic patient records

Patients per GP

In 2023/24, the BLMK ICB area had among the highest number of patients per fully qualified GP (FQGP) in the country, meaning that GPs and other practice staff in our areas are managing many more patients than average. Over the previous seven years, the number of FQGPs in Milton Keynes has changed very little, increasing from 110 FQGPs in 2017 to 113 in 2023/24.

Of the four local authorities in BLMK, Milton Keynes had the second highest (worst) number of registered patients per FQGP – 2,826 patients per FQGP in August 2024. Given the anticipated population growth, maintaining this very stretched number of 2,826 patients per fully qualified GP into 2043 would require an additional 28 fully qualified GPs (taking us to 141 FQGPs overall). This forecast of patients per GP is based solely on overall population growth and does not take into account the ageing population; and, as discussed above, older people tend to use primary care more frequently and so further additional demand is likely.

The number of patients per FQGP in Milton Keynes is considerably higher (worse) than the England average, which was 2,301 per FQGP in August 2024. There would need to be 138 Milton Keynes GPs in 2024 to meet the current England average, and 173 in total in 2043.

This analysis has only considered the number of GPs; we acknowledge that a lot of primary care is delivered by other clinical staff. We have not yet analysed how the capacity of other staff groups may need to change to meet future population needs.

Hospital settings

In hospital settings, the impact of the ageing population is expected lead to increases in activity beyond the forecast 27% growth in the population. The age profile of the population means that the proportion of activity accounted for by people aged over 65 years is forecast to shift from a little over a third to closer to half of all hospital activities, except in A&E.

Accident & Emergency

The number of attendances at A&E by people registered with a Milton Keynes GP is forecast to rise 32% by 2043, 5 percentage points higher than the population growth. This reflects an increase of nearly 26,000 new attendances, which would take the total to over 105,000 for the year – approximately 294 a day, or one attendance every 5 minutes.[5]

Figure 12: Forecast increase in Accident and Emergency attendances for Milton Keynes residents, 2023 to 2043
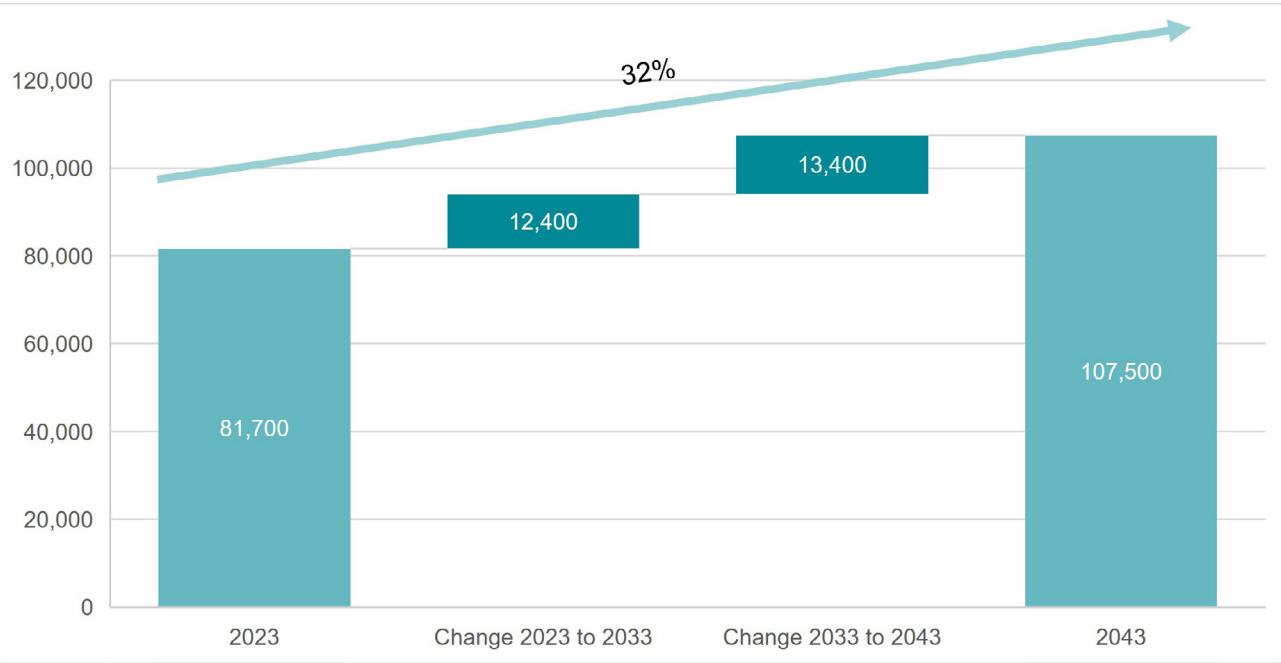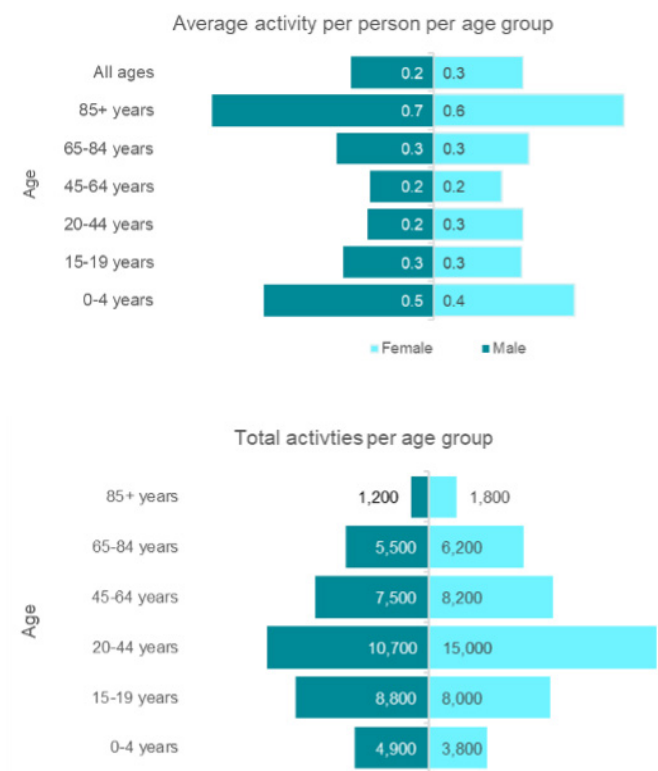

Source: Arden & GEM health activities report and local population forecasts

5. Assuming an even spread of attendances over 24 hours 365 days a year.

On average, Milton Keynes residents attend A&E less than once every three years (see figure 13). Attendances are most likely among the City's oldest and youngest residents, with the latter more than twice as likely as average to visit A&E.

Figure 13: Total and average A&E attendances per person by age group and sex, 2023

Source: Arden & GEM health activities report analysis

However, in numerical terms, the majority of A&E attendances are made by working age adults (51% in 2023 but forecast to reduce to 46% in 2043). At present, 18% of attendances are older adults (65 and over), and in 2043 this is forecast to increase to 25%.

Figure 14: The proportion of population and A&E attendances by age group for Milton Keynes residents in 2023 and forecast to 2043.
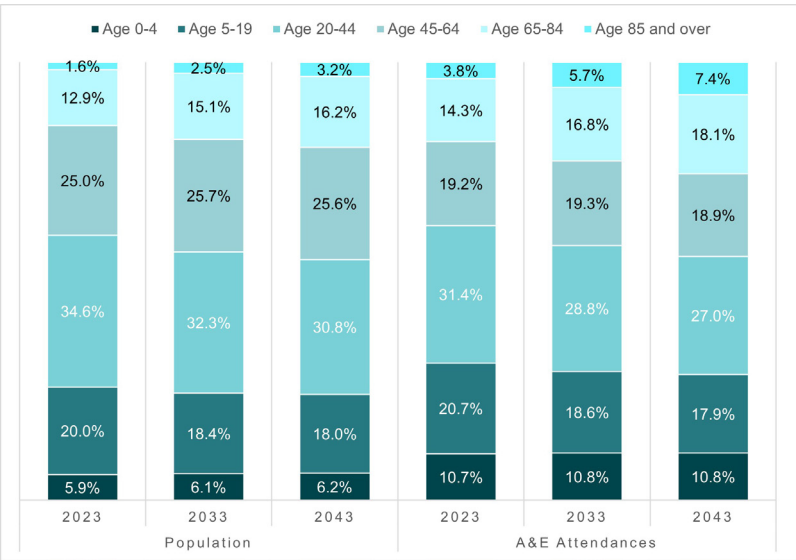
Source: Arden & GEM health activities report and local population forecasts

Hospital admissions

There are two main categories of admissions to hospital: elective (planned) and non-elective (unplanned). Non-elective admissions can be further classified into emergency admissions and others, the majority of which are for maternity services. All types of admission will increase as the population grows but the rates of increase will differ depending on how each type of admission is affected by the changing age profile of the population.

Emergency admissions

By 2043, there are forecast to be about 42,300 emergency admissions, an increase of 42% from 2023 (Figure 15). This significant increase reflects the change in population demographics previously outlined and particularly the growth in older people.
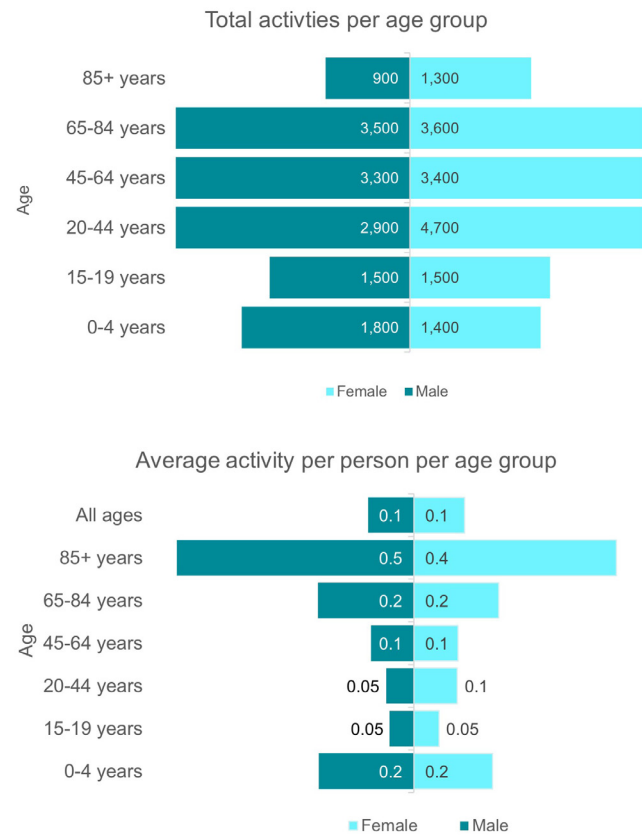
Figure 15: Forecast increase in emergency admissions for Milton Keynes residents, 2023 to 2043
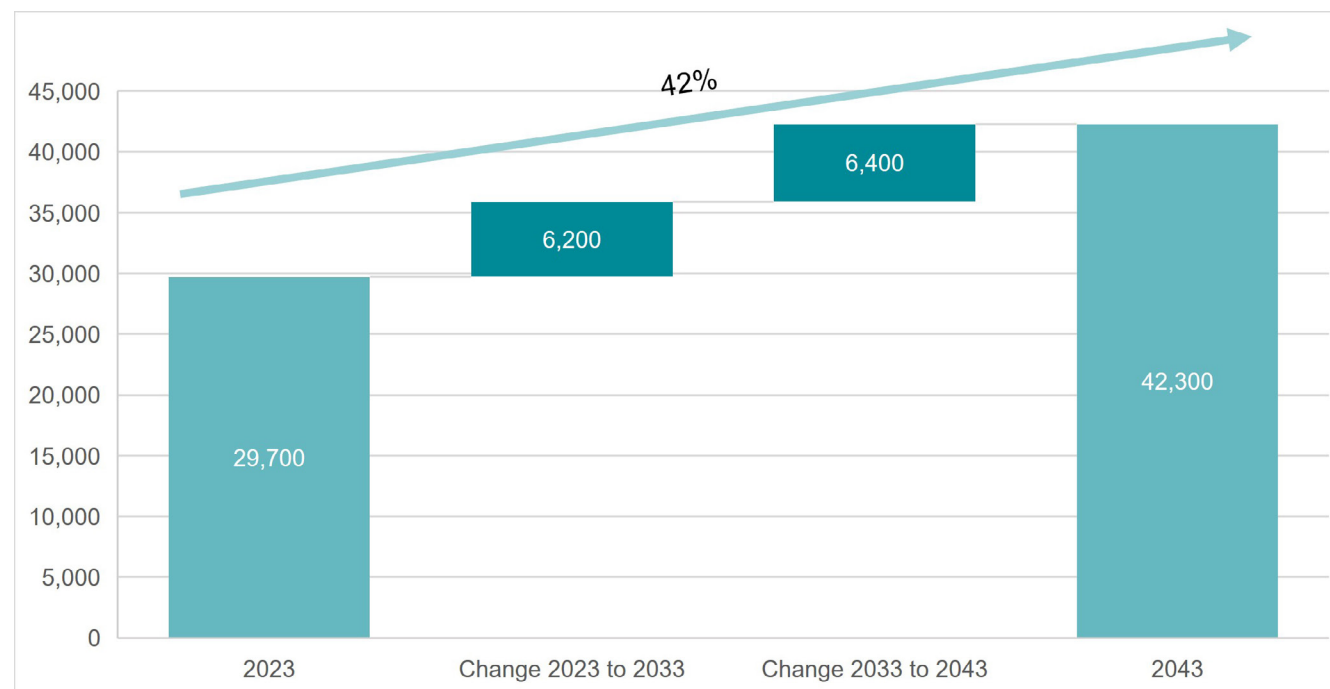
Source: Arden & GEM health activities report and local population forecasts

In 2023, the average emergency admissions per person aged 65 and over was at least double that of any other age group.

Figure 16: Total and average emergency admissions per person by age group and sex, Milton Keynes residents, 2023

Total activties per age group

Average activity per person per age group

Source: Arden & GEM health activities report analysis

This age group accounted for 31% (9,200) of all emergency admissions. Going forward the proportion of emergency admissions for people aged 65 and over is forecast to rise to 41% (around 17,400 admissions) in 2043. Figure 17 shows how the age profile of emergency admissions is forecast to change over the next twenty years, with an increasing proportion of older adults and a smaller proportion of working age adults.

Figure 17: The proportion of the population and emergency admissions by age group for Milton Keynes residents in 2023 and forecast for 2043
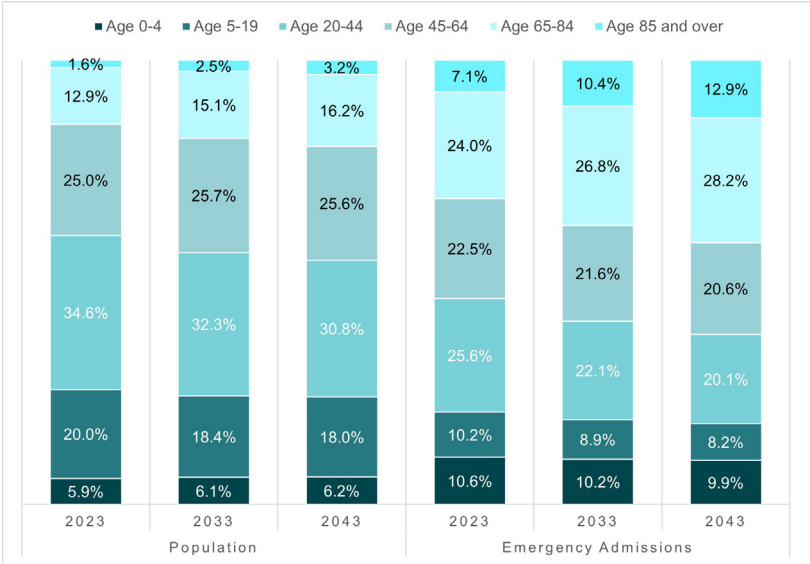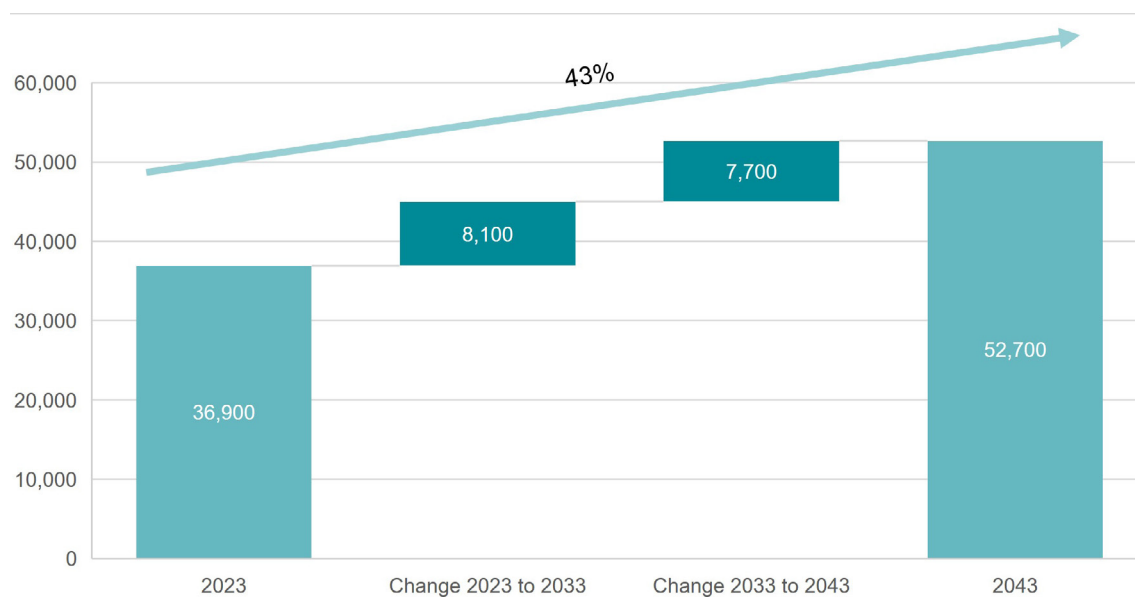

Source: Arden & GEM health activities report and local population forecasts

Elective admissions and procedures

Elective (planned) admissions and outpatients appointments similarly reflect the additional pressure on health services expected from the ageing population. An additional 15,800 elective admissions are forecast annually by 2043, a 43% increase from 2023.

Figure 18: Forecast increase in elective admissions for MK residents, 2023 to 2043
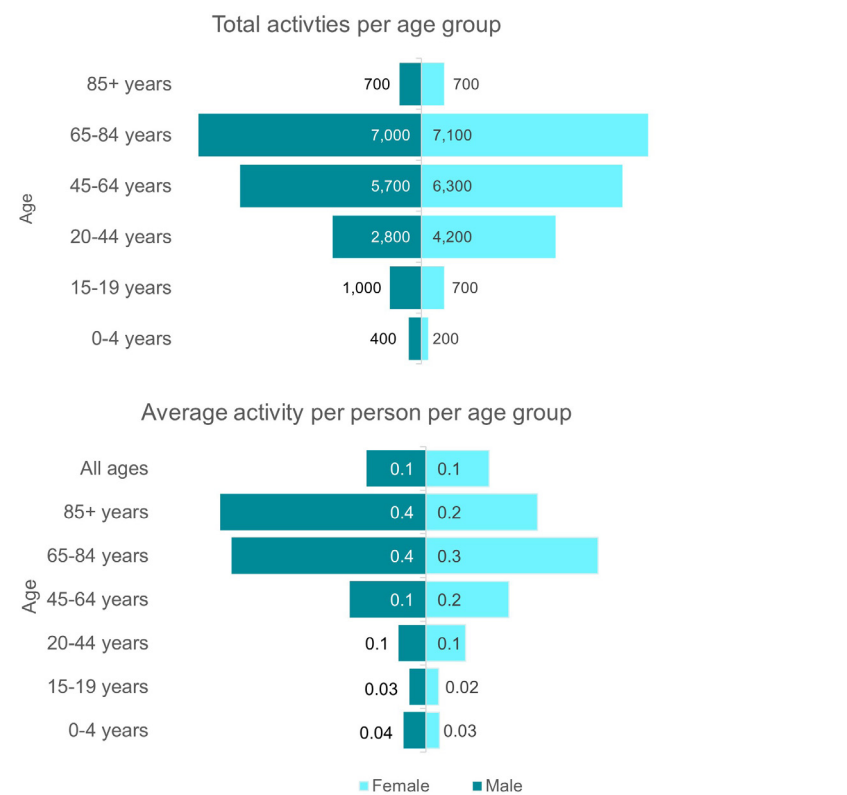

Source: Arden & GEM health activities report and local population forecasts

This increase is expected to be driven by older adults aged between 65 and 84, who will increase in number and are also more likely to have a planned admission. This age group has both the highest number of elective admissions and the highest rate of elective admissions per person.

Figure 19: Total and average elective admissions per person by age group and sex, Milton Keynes residents, 2023

Total activties per age group

Average activity per person per age group

In 2023 people aged 65 and over accounted for 42% (15,500) of all elective admissions in 2023 and that proportion is forecast to reach 50% in 2043. Figure 20 shows how the age profile of elective admissions is likely to change over time with an increasing proportion of older patients.

Figure 20: The proportion of the population and elective admissions by age group for Milton Keynes residents in 2023 and forecast for 2043
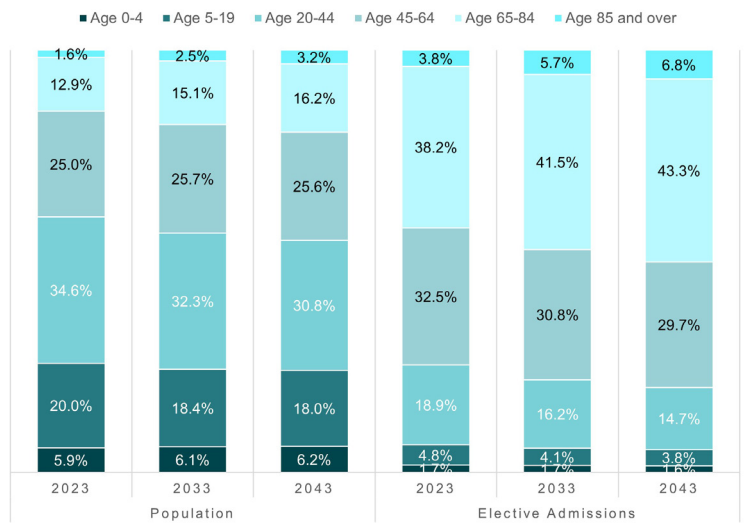
In MK, cancer-related treatments are the most common reasons for elective admissions, with chemotherapy accounting for the highest proportion of procedures, followed by the continuous infusions of therapeutic substances. Non-cancerous gastrointestinal conditions accounted for over a quarter of elective admissions of the top 20 causes and associated endoscopic examinations were similarly prominent in procedures. Cataract surgery also features in the top five procedures.[6]

6. Please note that hospitals across BLMK do not code cancer treatments and other procedures consistently – in some areas these would be included as an elective admission, in other areas as an outpatient appointment. As cancer treatment is quite common, these differences in coding will affect overall rates of elective admissions and outpatient care, and so our areas should not be compared. We have not attempted to impose a consistent approach to these procedures to ensure they are categorised in the same way across BLMK.

Other non-elective admissions

Other non-elective admissions largely relate to the use of maternity services. The fertility rate locally is expected to rise only very slowly, and as such the forecast for other non-elective admissions is forecast to grow more slowly than the population – in contrast to the increasing demand that is forecast for other types of health service activity.

However, the building planned to 2043 is expected to attract younger adults, resulting in more births (figure 21) that will increase demand for services, especially in the second decade, resulting in a 23% increase overall from 2023 to 2043 (figure 22)
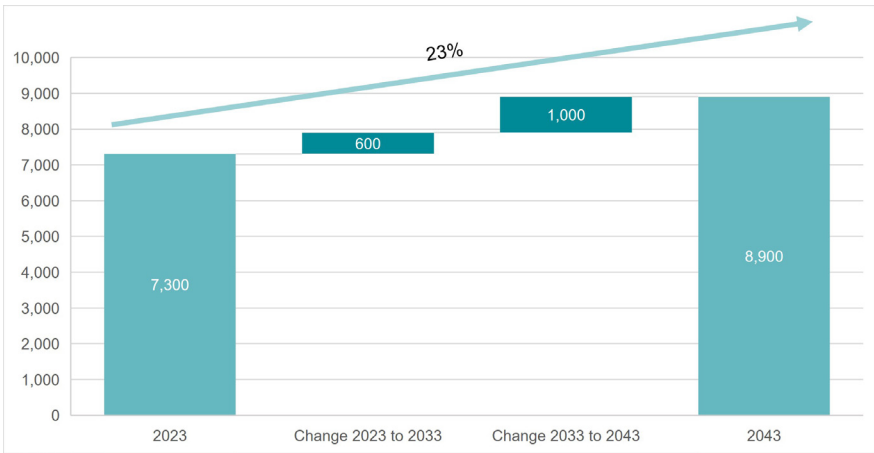
Figure 21: All births to Milton Keynes residents, forecasts for 2023 to 2043
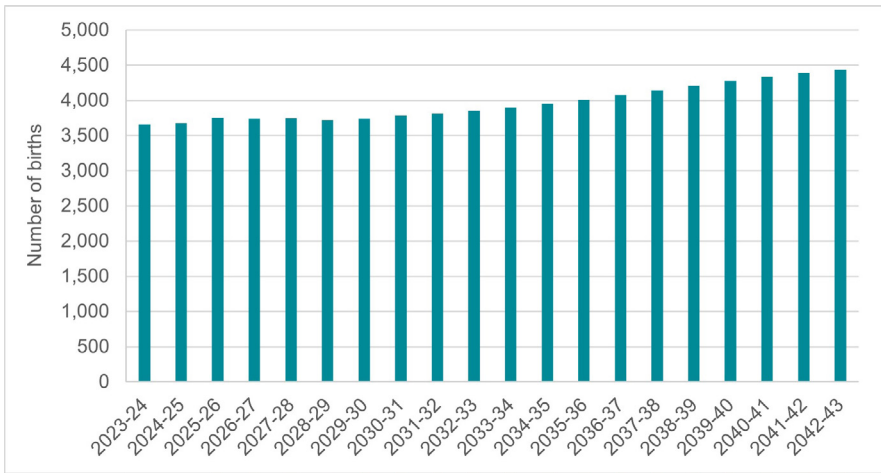
Source: Local population forecasts

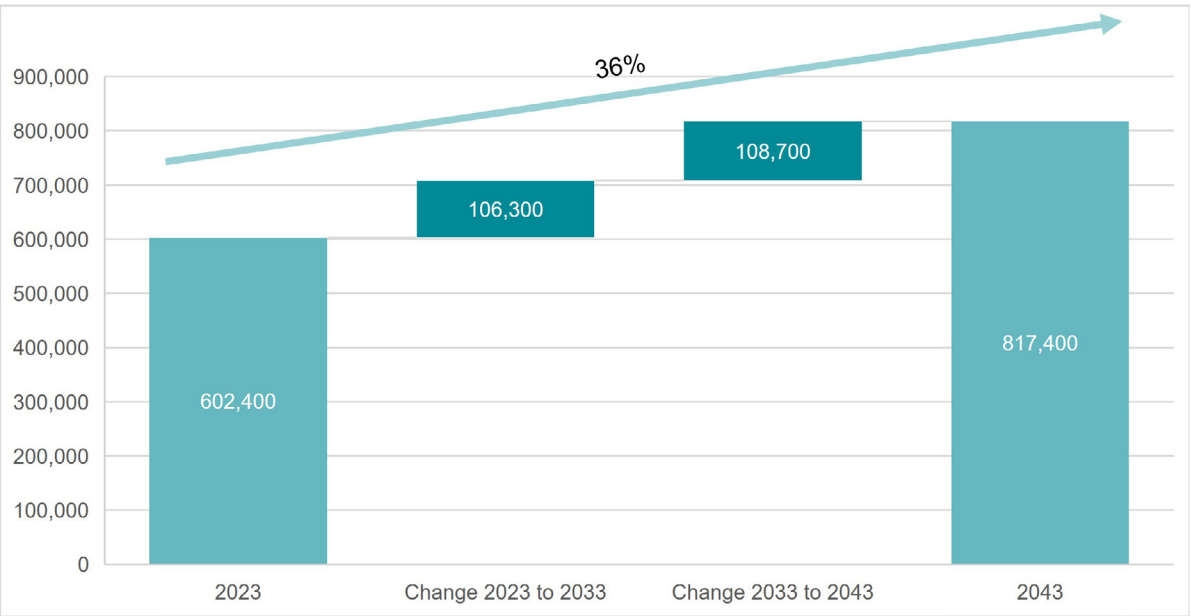**Figure 22: Forecast increase in other non-elective admissions for MK residents, 2023-2043**

Source: Arden & GEM health activities report and local population forecasts

Outpatient attendances

Outpatient appointments follow a similar pattern to other services except other non-elective admissions, with a growth rate of 36% forecast by 2043 (approximately 215,000 additional outpatient appointments per year).

Reasons for outpatient appointments are complex and not reported here. As with elective admissions, there appear to be differences between hospitals locally in whether certain procedures are coded into the outpatient or elective admission categories, and this means that comparing rates in Milton Keynes with other areas may not be meaningful.

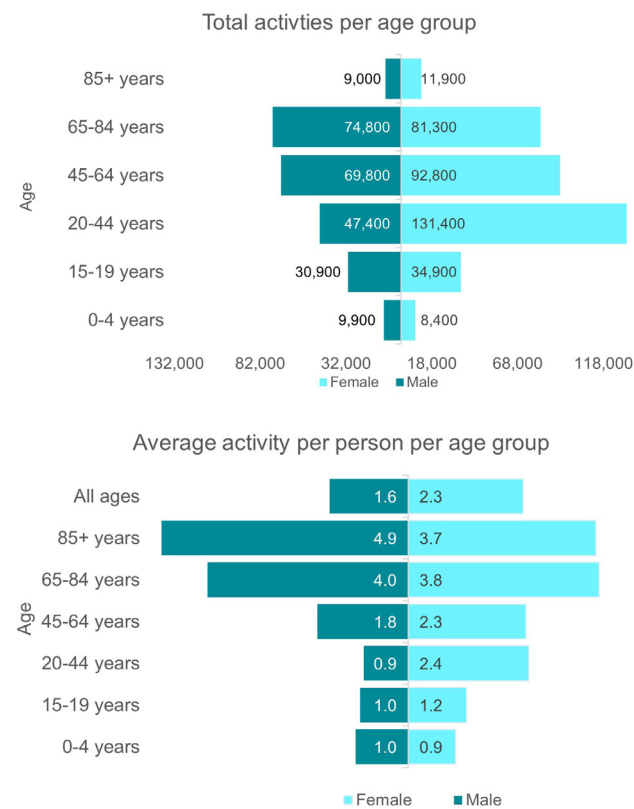**Figure 23: Forecast increase in outpatient attendances for MK residents, 2023 to 2043**

Source: Arden & GEM health activities report and local population forecasts

For outpatients it is older adults, those aged 65 and over, particularly males, who are most likely to require outpatient services, although females aged 20 to 44 accounted for the most appointments (likely to be driven by maternity care).

Figure 24: Total and average outpatient attendances per person by age group and sex, Milton Keynes residents, 2023

Again, this is linked to the ageing of Milton Keynes's population. In 2023, 29% of outpatient appointments were for people aged 65 and over (177,000 appointments) but by 2043 this is forecast to increase considerably and 38% of all appointments will be for older adults (306,600 appointments).

Figure 25: The proportion of the population and outpatient attendances by age group for Milton Keynes residents in 2023 and forecast for 2043

Total activties per age group

Average activity per person per age group

Source: Arden & GEM health activities report analysis
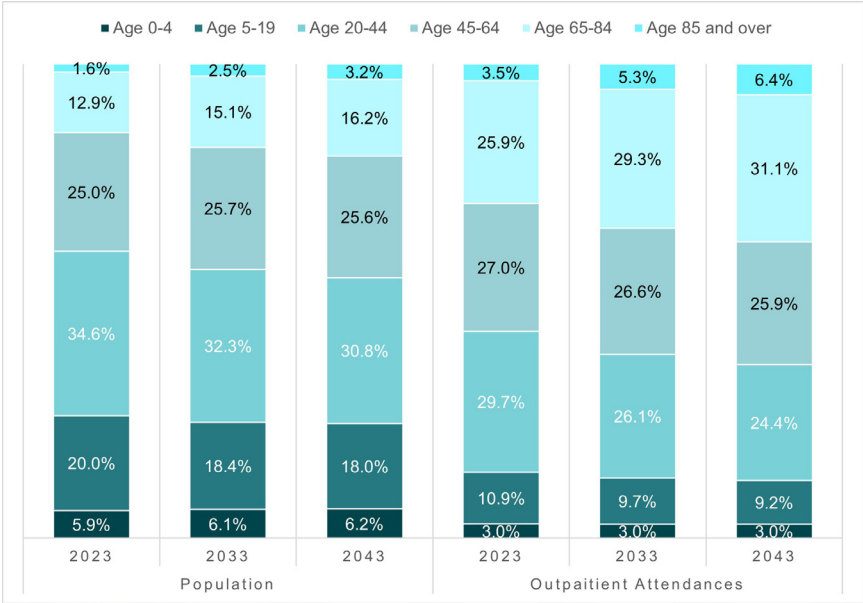
Source: Arden & GEM health activities report and local population forecasts

Conclusions and next steps

This work takes what we know about health, disease, and healthcare use at present in Milton Keynes, and combines it with our understanding of likely population change and growth, to predict potential health and healthcare need over the next twenty years.

These forecast show that while the population of Milton Keynes is likely to grow by over a quarter by 2043, the use of nearly all types of healthcare will grow much more rapidly, with very significant additional demands on our already-stretched healthcare services. The scale of additional activity is not something that can be met just by 'doing more with less'; for example, a 37% increase in primary care activity will require substantial primary care staff recruitment and infrastructure, and a 42% increase in emergency admissions will require additional A&E and hospital capacity and staffing. The impacts of population growth clearly reach beyond the NHS, as the same pressures will affect social care and other public services, though this is not the focus of this report.

The number of Milton Keynes residents with health conditions will rise, as will the prevalence of many conditions across the population. The number of people with a cancer diagnosis is forecast to rise by 59%, and cardiovascular disease by 68%. The increase in disease and healthcare use is partly due to overall population growth but is also driven by the ageing population. Life expectancy gains and falling mortality rates are welcome, but as people age, healthcare needs tend to increase and become more complex. As such, healthcare activity will rise faster than population growth.

We have not yet looked at how disease or service use vary with ethnicity, however, with increasing ethnic diversity in the next 20 years, services will need to ensure they are accessible and culturally appropriate.

As we have made clear, these are forecast figures, but the population of Milton

Keynes is very likely to grow and age significantly even if it does not closely follow the predicted housing trajectories. The assumptions and forecasts can be scrutinised and revised, but the overall message is likely to remain the same: Milton Keynes faces a steep increase in the numbers of people in poorer health and this means a very substantial additional need for health and care services over the next 20 years.

The scale of additional health and care need means that a combination of approaches will be required to meet or mitigate the need. It is increasingly critical that we are more preventative in our approach to health and healthcare, and there is considerable scope to reduce disease prevalence if we can invest to improve the social and economic conditions that cause ill health and make it easier for people to lead healthier lives. We will, however, never prevent all illness. And when illness does occur, better management of disease is important but will not prevent all decline. Similarly, the efficiency of healthcare services can always be improved, but people will continue to need hospitals and primary care, and we will not be able to redirect all of the additional demand. We hope that this analysis will inform long-term thinking about the health and care needs of our local community.

The next steps for the PHIU are to look at condition-specific forecasts of patient numbers and healthcare need. In depth work on cancer, musculoskeletal conditions, and mental health conditions is underway and seeks to inform health planning with the best possible information currently available.

Finding out more

If you would like further copies, a large-print copy or information about us and our services, please contact us at our address below.

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✉ **Public Health** A shared service across Bedford Borough, Central Bedfordshire and Milton Keynes

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