YORK'S CHANGING POPULATION

Projections up to 2035

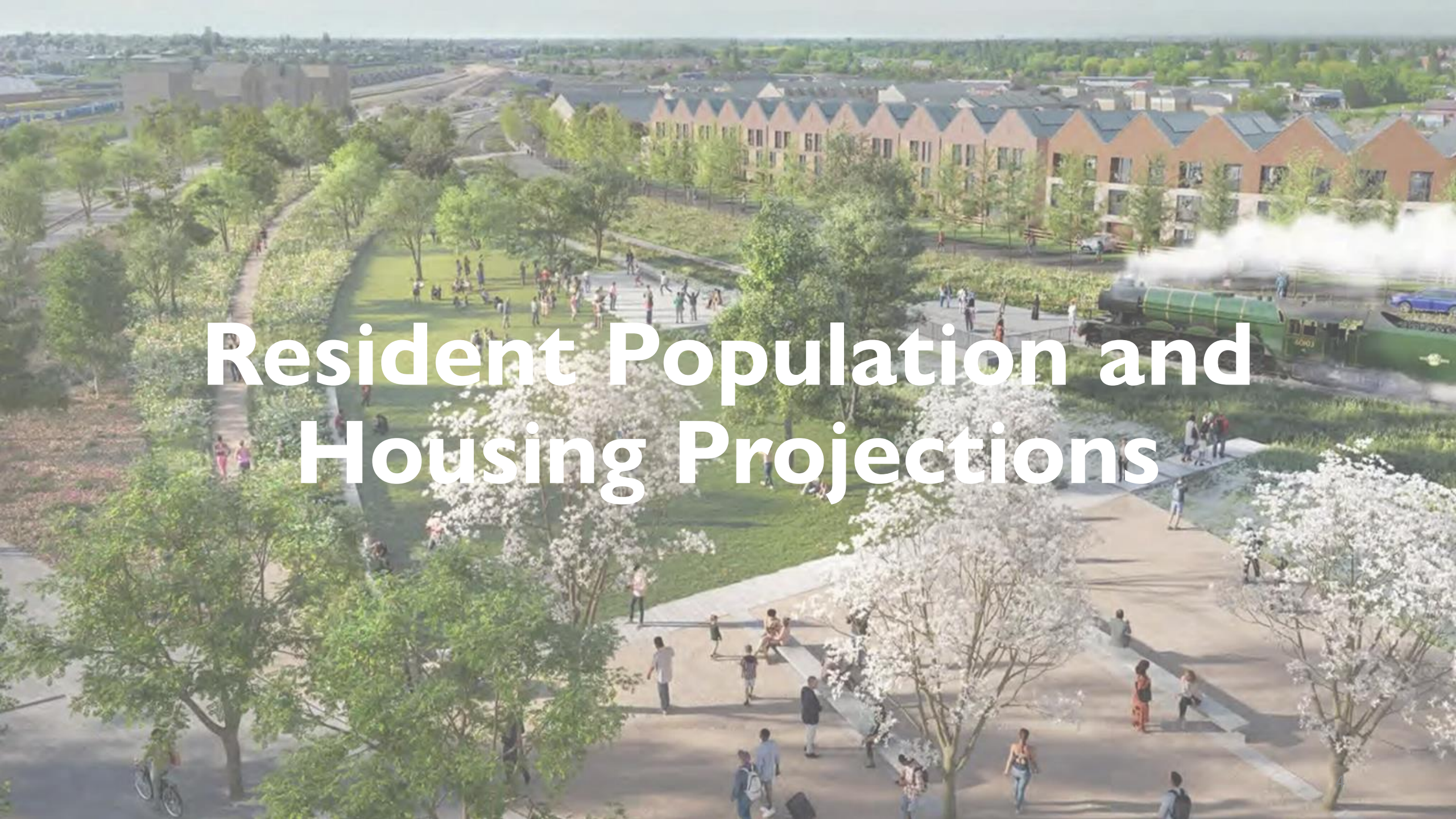
UPDATED FEB 2026

Introduction

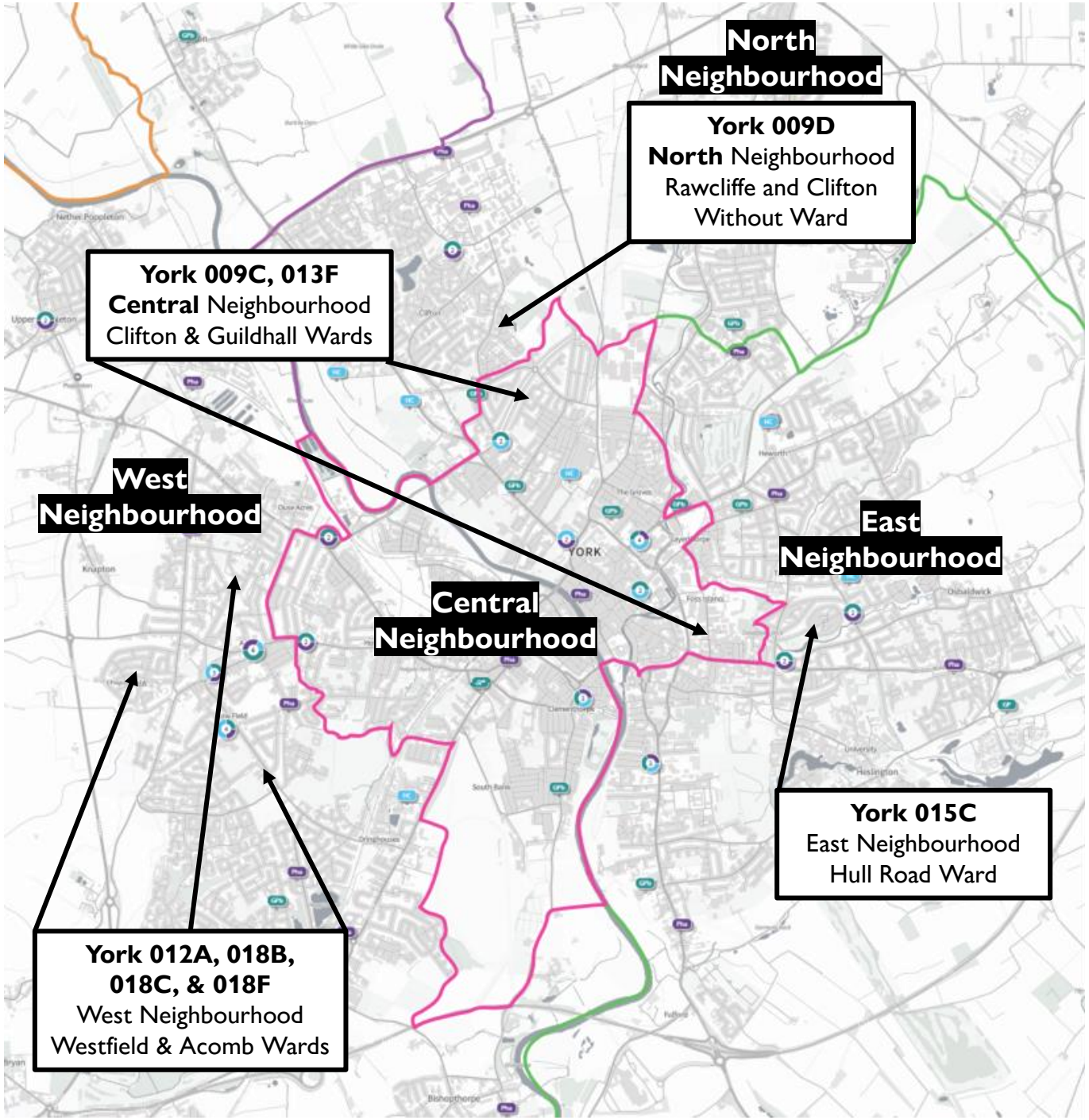
- The city of York is growing rapidly and there is a need to understand changes in population size and profile, which sections of the population are most affected, and what health and care service impacts there may be.
- 'Demographic change' has been identified as a Key Corporate Risk (KCR4) for City of York Council (CYC) and the health and care system in York. CYC is required to report on, and to plan for, pending population changes. The health and care system will need to adapt services to meet the needs of York's changing demographic.
- York Population Health Hub, a collaboration between CYC Public Health, CYC/NHS Business Intelligence and York Place (Humber and North Yorkshire Integrated Care Board), was tasked to review and update Population Projections, first produced in 2019 and again in 2023. In line with the NHS 10-year Plan, estimates are calculated from 2025 until 2035, wherever possible.
- This report provides baselines and forecasts for both residential and registered patient populations of York, based on historic and current demand and population data, taking planned housing developments into consideration.
- The report does not seek to offer solutions or alternative approaches to meeting changing demand such as workforce capacity; only to illustrate the likely overall impact of housing growth and a growing and ageing population in York on health and care services in the future.

Glossary

Term	Meaning
ASC	Adult Social Care
CMS	Cambridge Multimorbidity Score
CYC	City of York Council
ETS AAA	Exponential Triple Smoothing is a forecasting technique for time series data that includes both a trend and a seasonal component.
GPAD	General Practice Appointment Data – data held by NHS England giving monthly insight into appointment volumes and registered patient counts.
IMD	Index of Multiple Deprivation – a method to rank small areas across England from most to least deprived. The approach measures statistics across 7 domains: income, employment, education, health, crime, barriers to housing & services, and the living environment
JSNA	Joint Strategic Needs Assessment
KCR	Key Corporate Risk
LA	Local Authority
LSOA	Lower Super Output Area – small areas across England used for statistical purposes. There are 32,844 LSOAs across England. They are made up of between 400 and 1,200 households and have a usually resident population of 1,000-3,000 people.
MYE	Mid-Year Estimates
ONS	Office for National Statistics
Pansi	Projecting Adult Needs and Service Information
Poppi	Projecting Older People Population Information
ST (housing)	Allocated strategic housing sites, generally larger developments
H (housing)	Allocated non-strategic housing sites, generally smaller developments
Windfall	Development of land which has not been specifically identified as available in the local plan process. Windfall sites typically comprise previously-developed sites or infill sites which become unexpectedly available



Resident Population and Housing Projections



Health Inequalities in York - Core20PLUS

York has 13,040 people (6.23% of the population) who live in **Core20** LSOAs, these are amongst the 20% most deprived in England (IMD 2025). The figure has increased from 4.61% in IMD 2019. Also, across the city the deprivation domain of 'Health/disability' has got worse compared to 2019.

The 20% most deprived areas are highlighted on the map to the left. The map also highlights the four Neighbourhoods which will serve as the footprint for health and care service delivery in York.

PLUS groups are identified at local level based on poorer than average access, experience, and/or health outcomes, and who would not be captured in the Core20 alone. In York these are:

People with drugs and/or alcohol dependency, Gypsy, Roma, and Traveller communities, Minoritised ethnic communities, People experiencing homelessness, People leaving care, People with learning disabilities, Potentially vulnerable migrants (inc. Asylum seekers), Sex workers, and Transgender & Non-binary people.

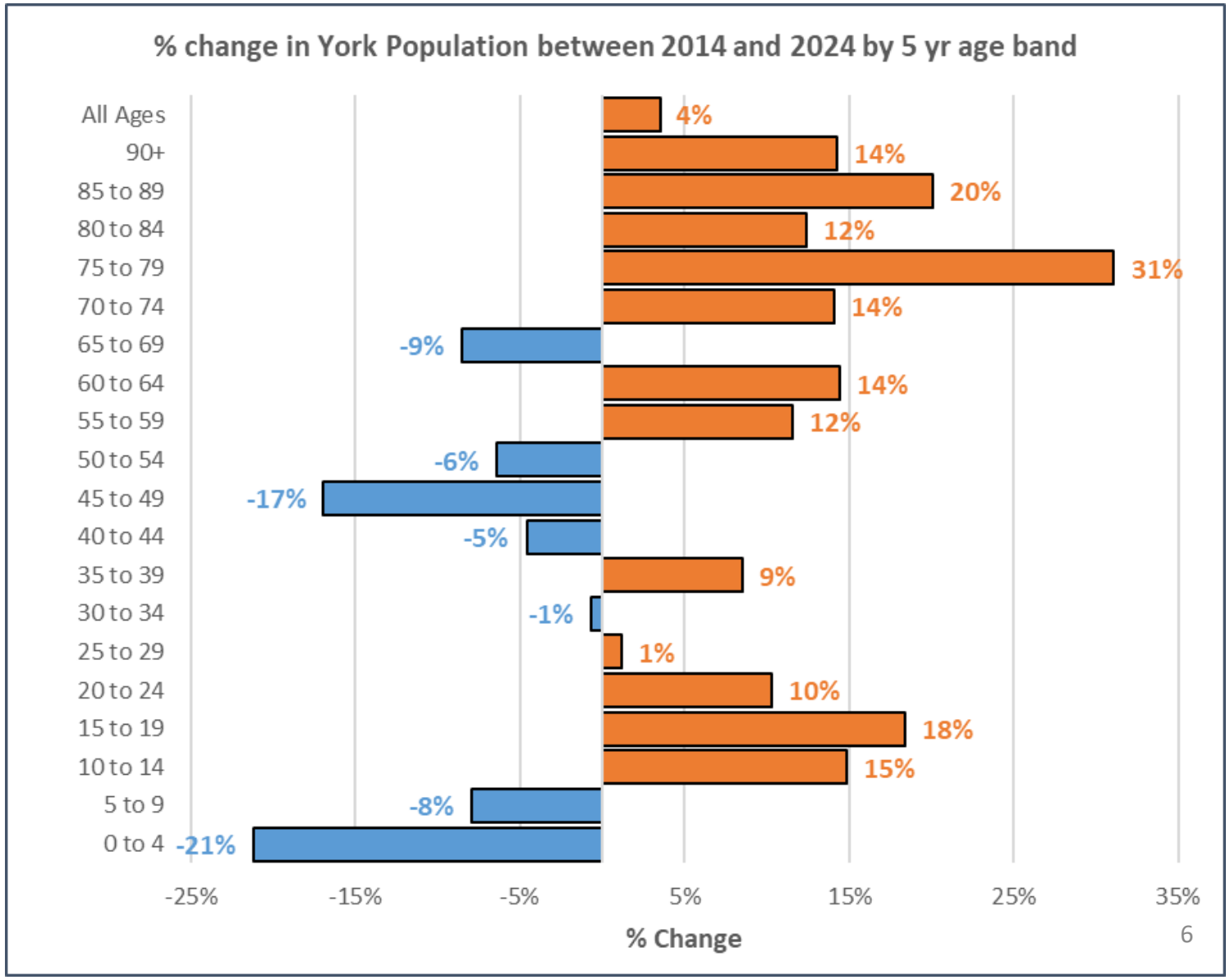
The number of people in PLUS groups per York Neighbourhood vary significantly, with East and Central Neighbourhoods recording the highest numbers on GP clinical information systems (8051 in East and 6729 in Central).

Whereas the West Neighbourhood has the highest number of residents living in the most deprived 20% LSOAs, it has a relatively low number of people from PLUS groups recorded (2561). North Neighbourhood has 2393 people from PLUS groups.

% change in York population between 2014 - 2024

The overall population of York increased by 3.5% between 2014 and 2024.
For some broad age groups there was an increase in population e.g. there was a 14% rise in people aged 10 to 24 and a 19% rise in people aged 70+.
For other broad age groups there was a decrease in population e.g. there was a 15% fall in children aged 0-9 and a 9% fall in adults aged 40-54.

In summary, York has an increasingly ageing population. Higher education facilities mean a larger than average population of young adults. However, these young adults frequently do not stay to start families in York.

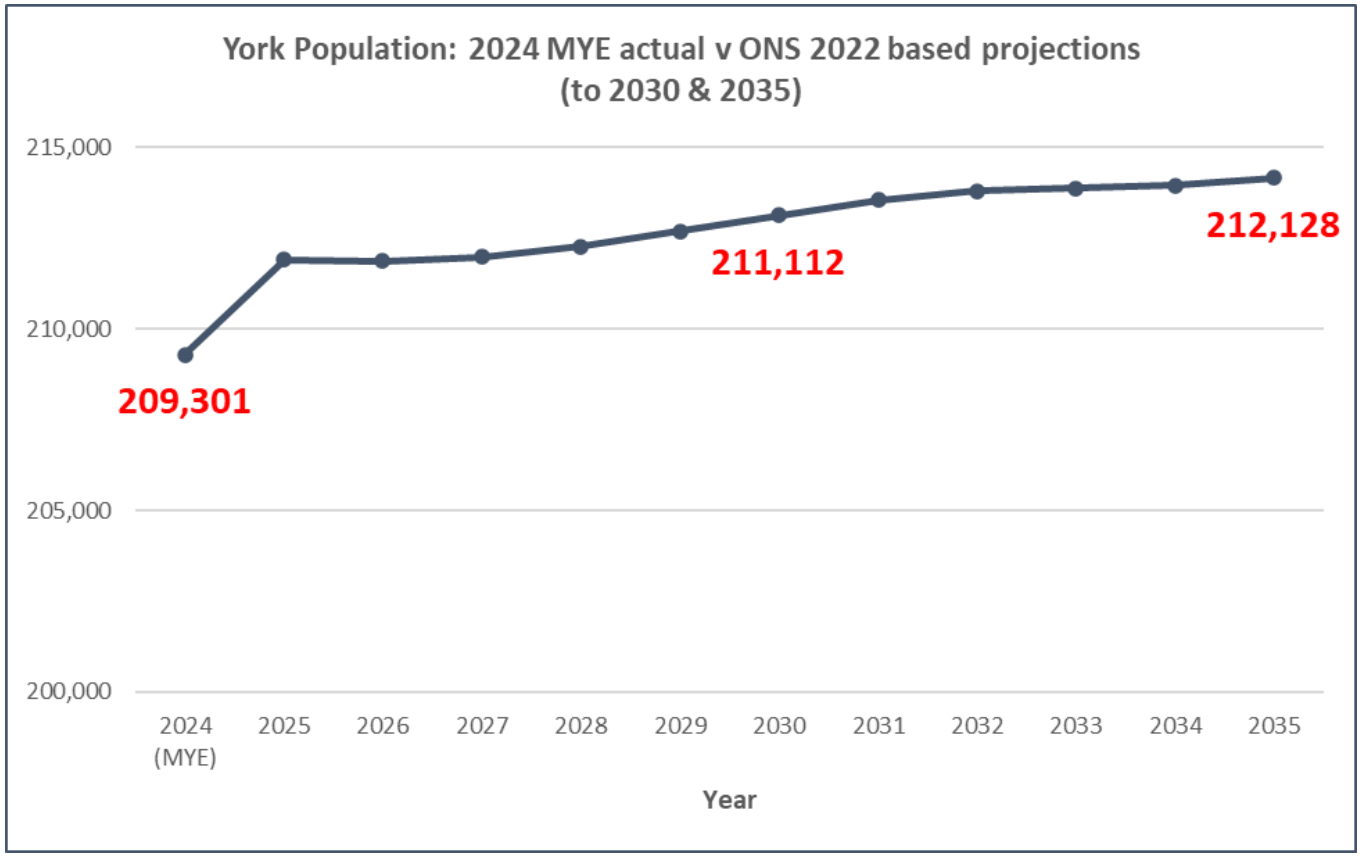


York Population: ONS 2022 based projections (2025-2035)

The current population of York (based on 2024 mid-year estimates (MYE)) is **209,301**.

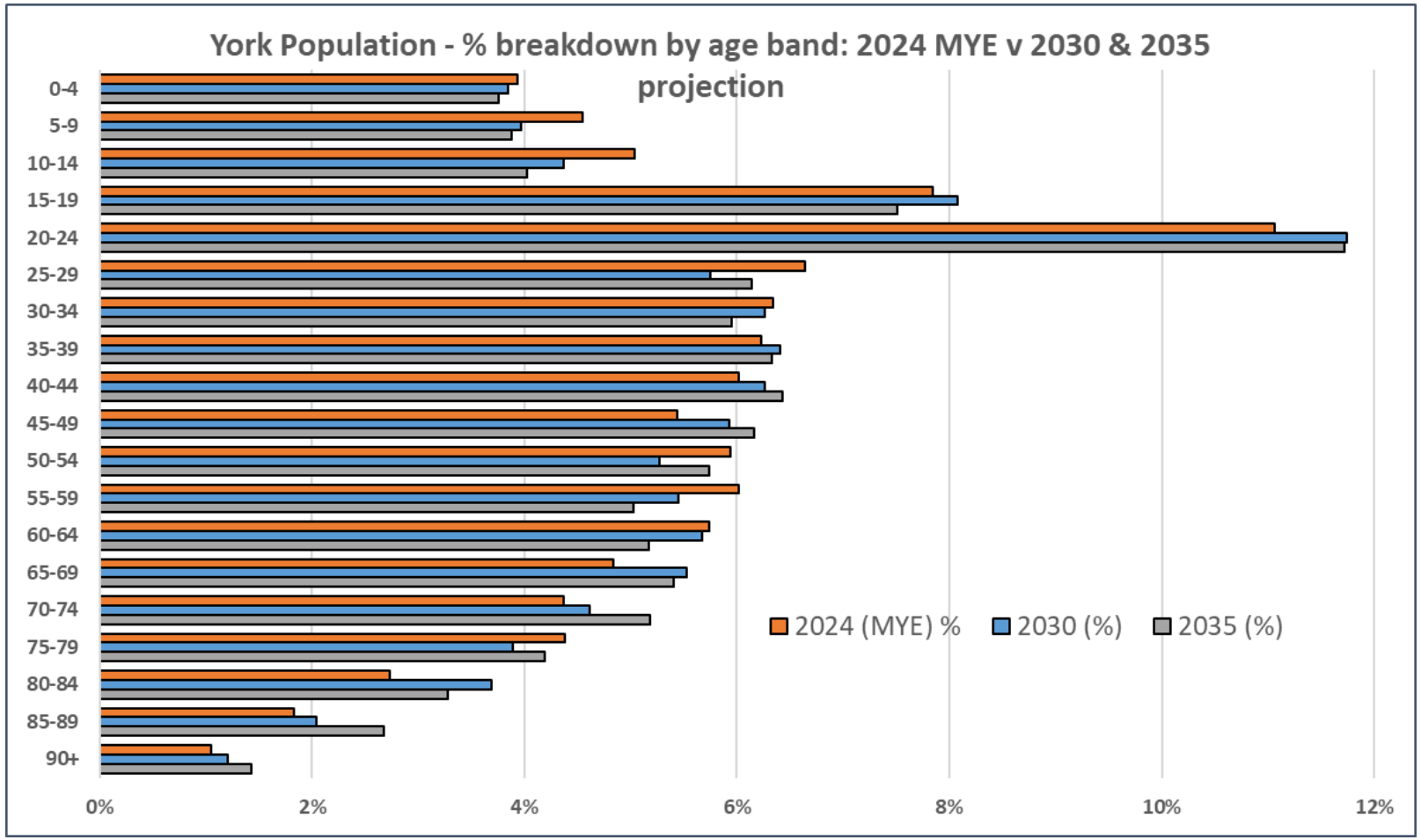
The ONS 2022 based population projections predict that this will rise to **211,112** by 2030 (a 0.9% increase) and **212,128** by 2035 (a 1.4% increase).

Estimates are based on assumptions of future fertility, mortality and migration.



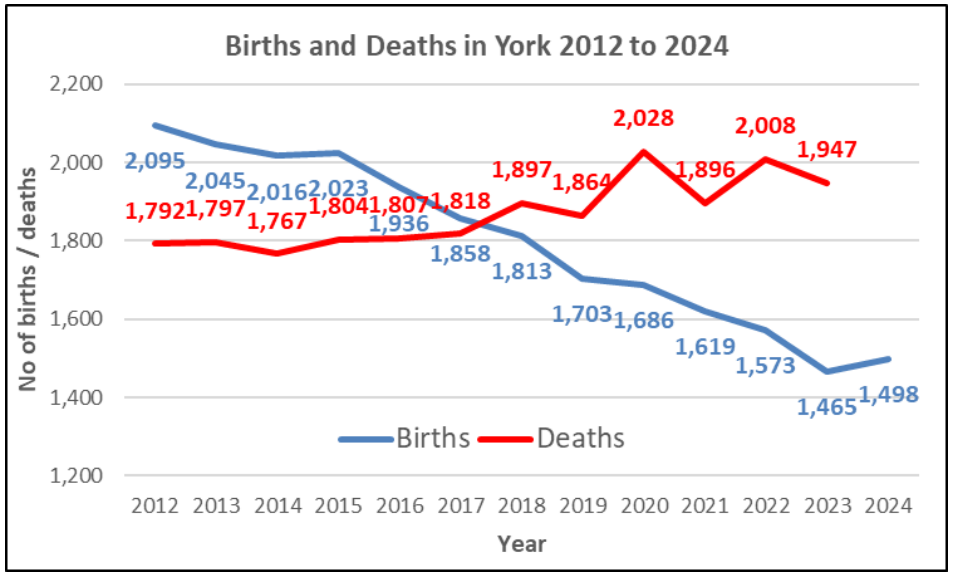
York % breakdown by age band: 2024 (MYE) v 2030/35 projection

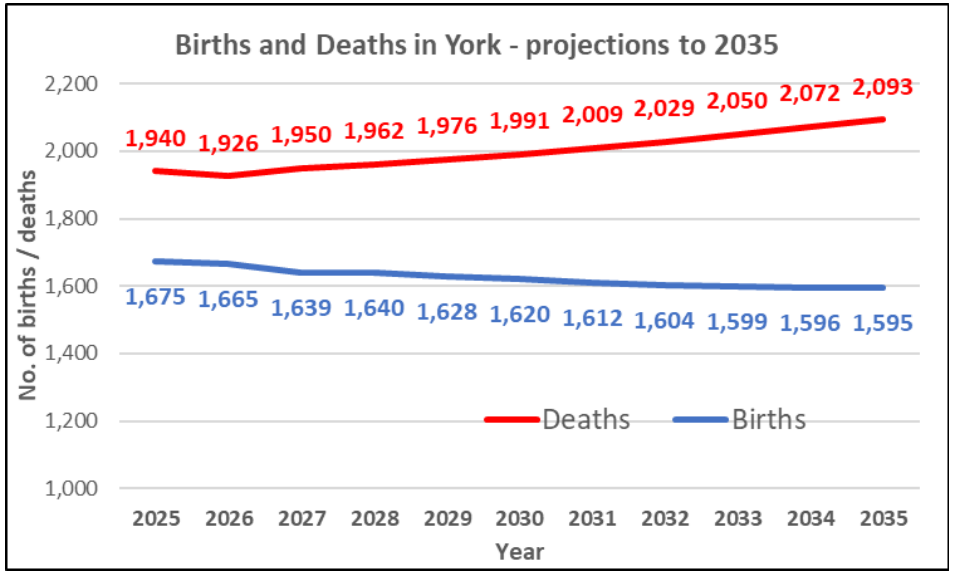
ONS predict changes to the age structure of York's population. For example, residents aged 0-14 will form 11.7% of the population by 2035 compared with 13.5% at present and residents aged 80+ will form 7.4% of the population by 2035 compared with 5.6%, the 2024 mid-year estimate.



‘Natural’ changes to population - births and deaths

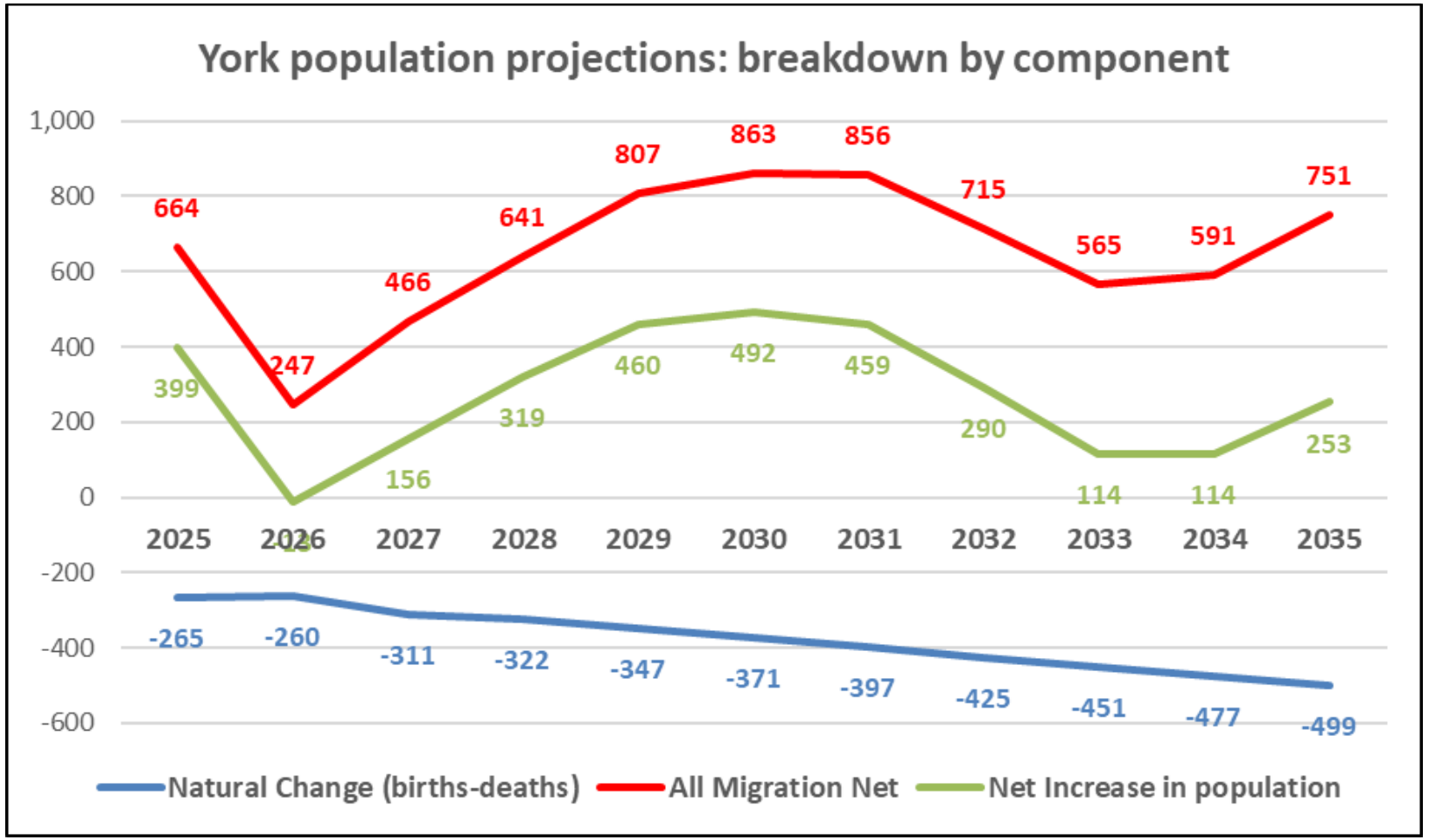
There has been a **falling** trend in the number of **births** and a **rising** trend in the number of **deaths** in York. Since 2018 there have been more deaths than births in the City. This provides a natural downward pressure on the population of York and this pattern is predicted to continue to 2035. The next slide shows how this is expected to be offset by net migration into the City.





Projected natural population changes v net migration in York

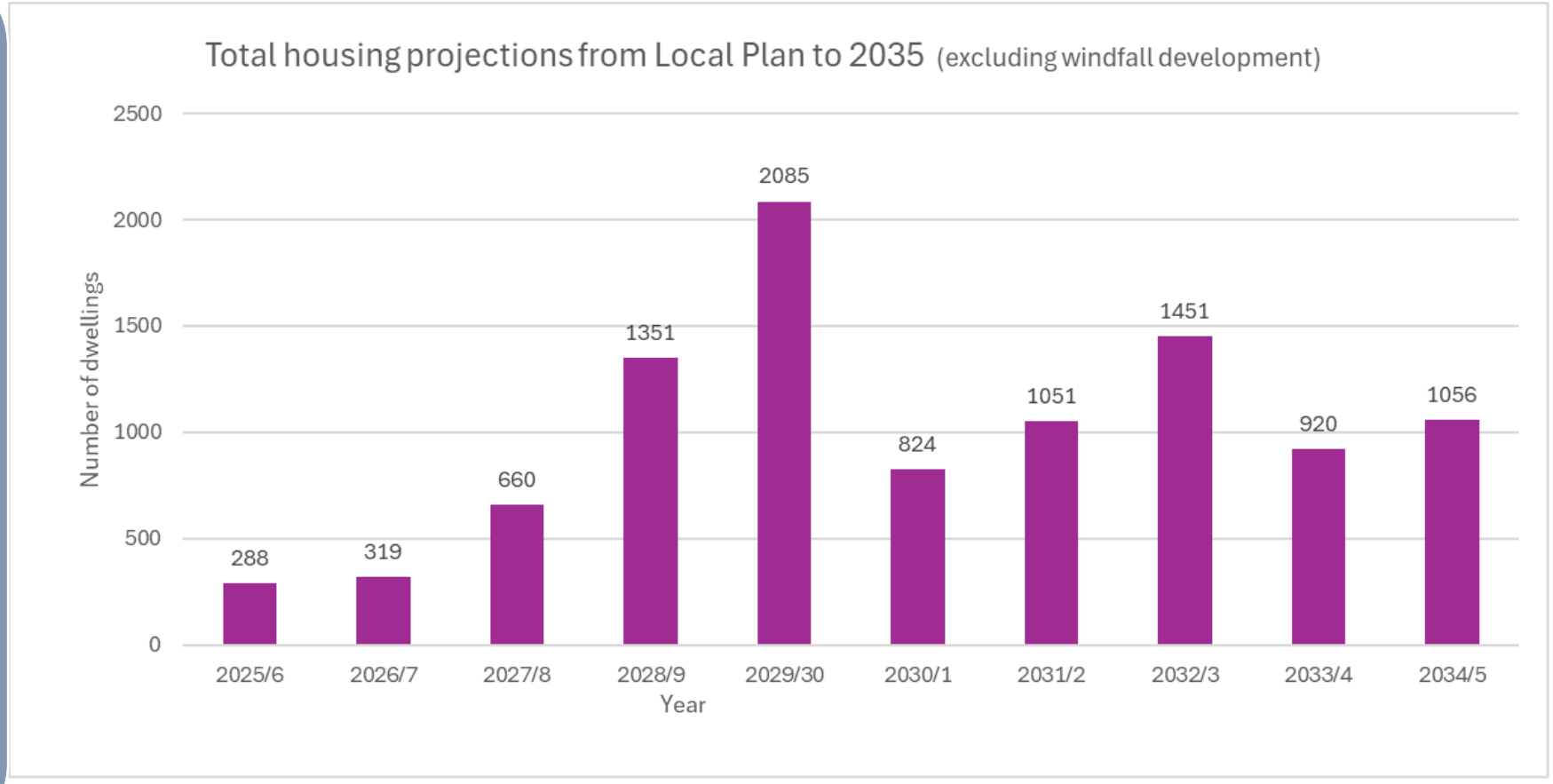
The projected natural fall in population due to more deaths than births in York is expected to be offset by net migration into the City leading to a projected population increase.



New homes in York up to 2035 – per year

This graph gives a year-on-year breakdown of the number of additional dwellings expected to be built in the City until 2034/35, as per the CYC Local Plan.

Numbers include 'ST' larger developments and 'H' smaller developments but not 'windfall' developments, which are estimated at around 196 dwellings per year.



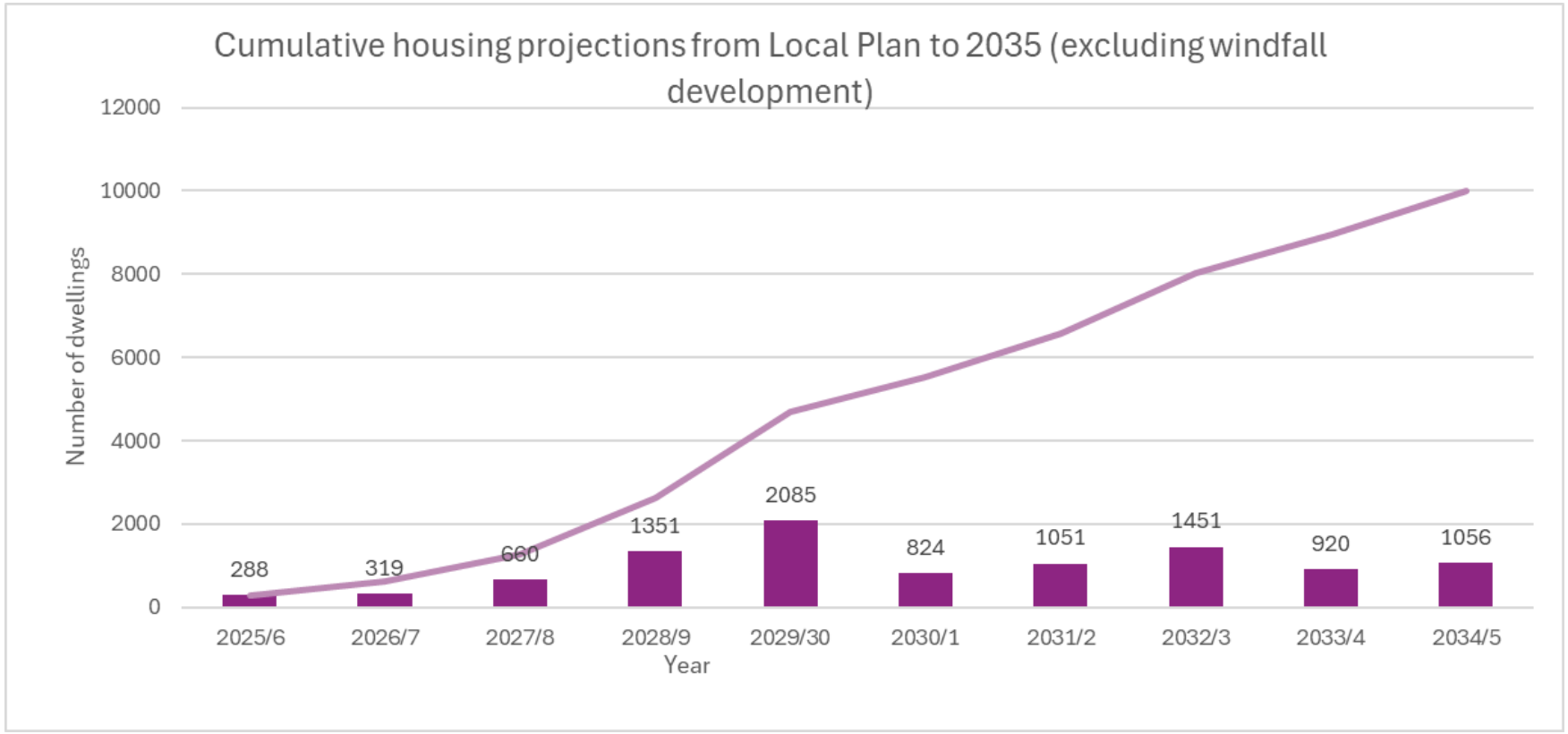
Number of dwellings (ST and H sites) per annum

New homes in York up to 2035 – cumulative

This graph gives year-on-year and cumulative numbers of additional dwellings expected to be built in the City until 2034/35.

Numbers include 'ST' larger developments and 'H' smaller developments but not 'windfall' developments.

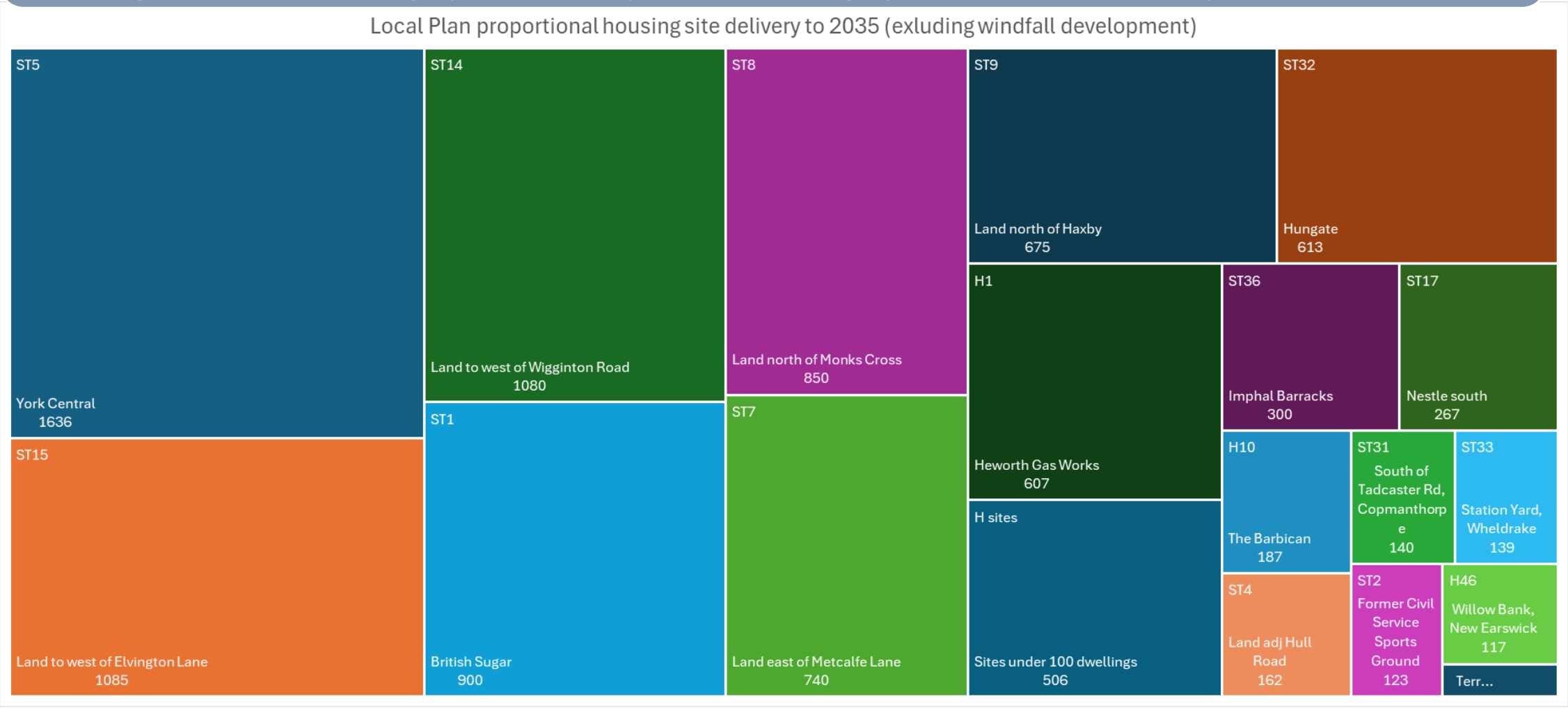
CYC expects all 'H' sites to be completed by 2033.

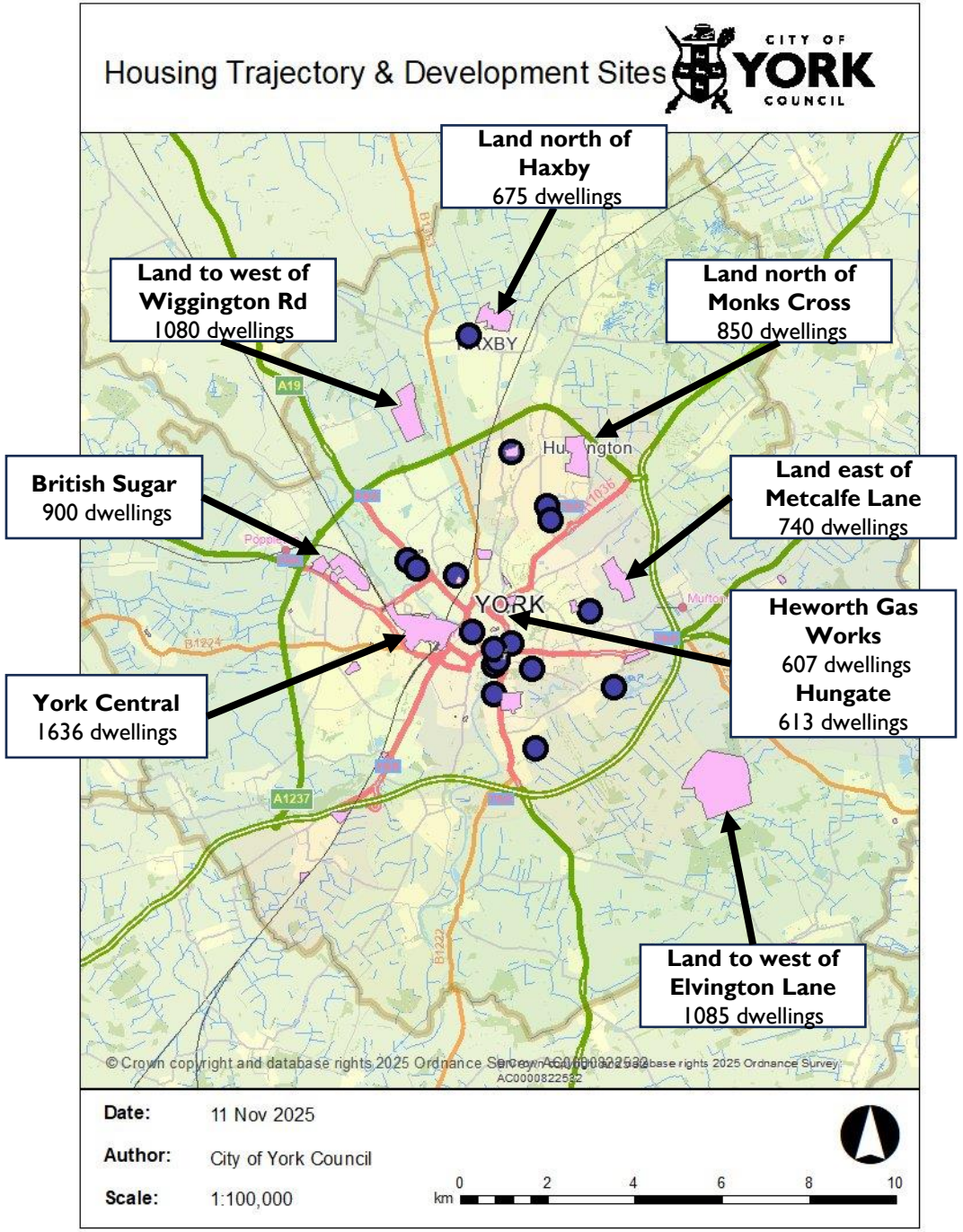


Number of dwellings (ST and H sites) per annum and cumulative

New homes in York up to 2035 – total by site

The chart below gives a visual representation of the size of each of the 'ST' strategic sites and some of the larger 'H' non-strategic sites across the City of York.
Sizes vary from 1636 dwellings (York Central) to 139 dwellings (Station Yard, Wheldrake).





New homes in York up to 2035 – location of largest sites

Following on from the diagram on the previous page, this map visualises the strategic, larger, housing sites (in pink) and non-strategic, smaller, housing sites (blue dots) across the city of York.

Following on from the previous diagram, this map points out the 9 largest housing developments are due to be built in York (> 600 dwellings).

This map suggests that population increase due to new housing is expected to have impact on all areas of York but less so in West.

Possible Impact of New Homes on York population: 2025 to 2035 – Method 1

The ONS projections are: "trend-based projections, which means assumptions for future levels of births, deaths and migration are based on observed levels mainly over the previous 5 years. They show what the population will be if recent trends continue." The impact of future new house building (e.g. York Central) is unlikely therefore to be factored into the ONS projections.

Up to **12,286** new homes are expected to be built in York in the 10-year period between 2025/26 and 2034/35 (CYC Detailed Housing Delivery Trajectory Update (Base Date 1 April 2025)

There is no established formula for calculating how many additional people will be resident in a local area as a result of new homes.

One approach (Method 1) would be to use the current average number of people per household in York (**2.24** from the 2021 Census) and multiply this by the number of expected new houses which provides an estimate of **27,545** residents living in these new homes by 2035.

It is not known how many of the new homes would be purchased by people already living in York (e.g. by a young person who is currently living with family in York). Therefore it is difficult to estimate by how much York's population would increase as a result of the new housing.

Possible Impact of New Homes on York population: 2025 to 2035 – Method 2

Another approach (Method 2) is to calculate the previous impact of net additional dwellings on the population of York.

In the 12 financial years from 2012/13 to 2023/24 a total net of **5,322** new homes were built.

In the 12 calendar years from 2013 to 2024 the population of York increased by **8,133**.

This suggests that each new home is associated with an additional **1.53** residents in York.

If this figure is applied to the **12,286** expected new homes this provides an estimate of **18,773** additional residents living in these new homes by 2035.

Financial Year	Net Additional dwellings*	MYE population year	MYE population year	Additional Residents per dwelling
2012/13	32	2013	201,168	
2013/14	13	2014	202,206	
2014/15	228	2015	203,212	
2015/16	635	2016	202,892	
2016/17	322	2017	203,546	
2017/18	1,240	2018	203,906	
2018/19	393	2019	203,877	
2019/20	504	2020	202,169	
2020/21	566	2021	201,851	
2021/22	402	2022	204,115	
2022/23	459	2023	206,780	
2023/24	528	2024	209,301	
Total	**5,322**	**2013 to 2024 increase**	**8,133**	**1.528**
*Ministry of Housing Communities and Local Government				

Possible Impact of New Homes on York population: 2025 to 2035 - Summary

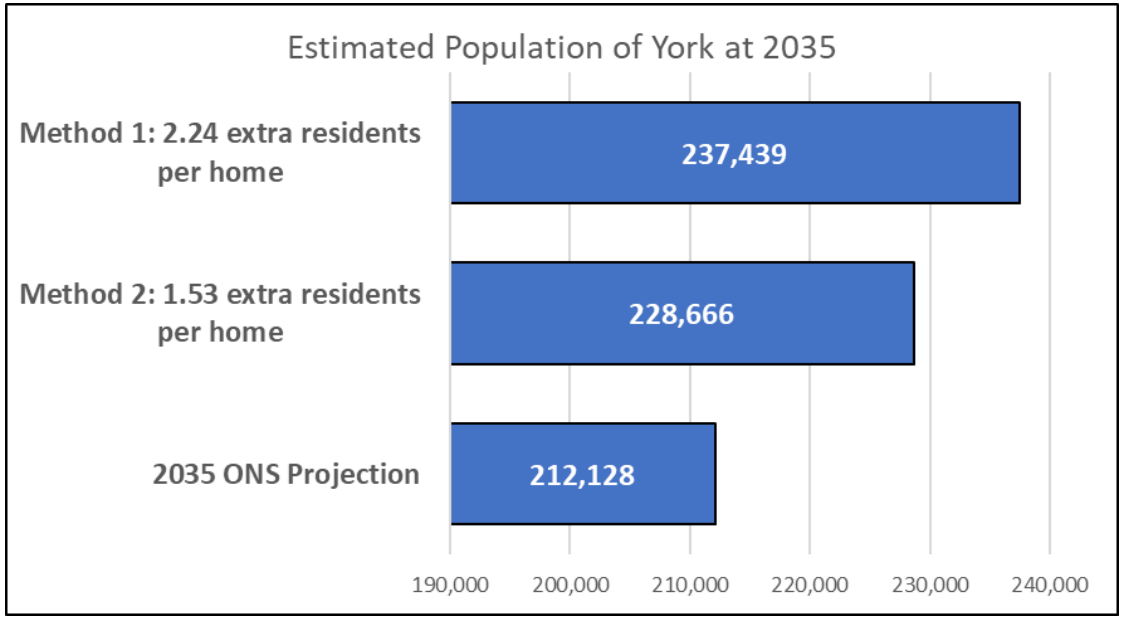
The ONS projection for 2035 could be considered as a **lower** estimate as it may not factor in the impact of new housing.

Method 1 could be considered as an **upper** estimate as it assumes all new homes would be purchased by people not currently living in York at the rate of 2.24 people per home

Method 2 could be considered as the **middle** estimate as it based on the impact of new homes in York over the previous 12 years.

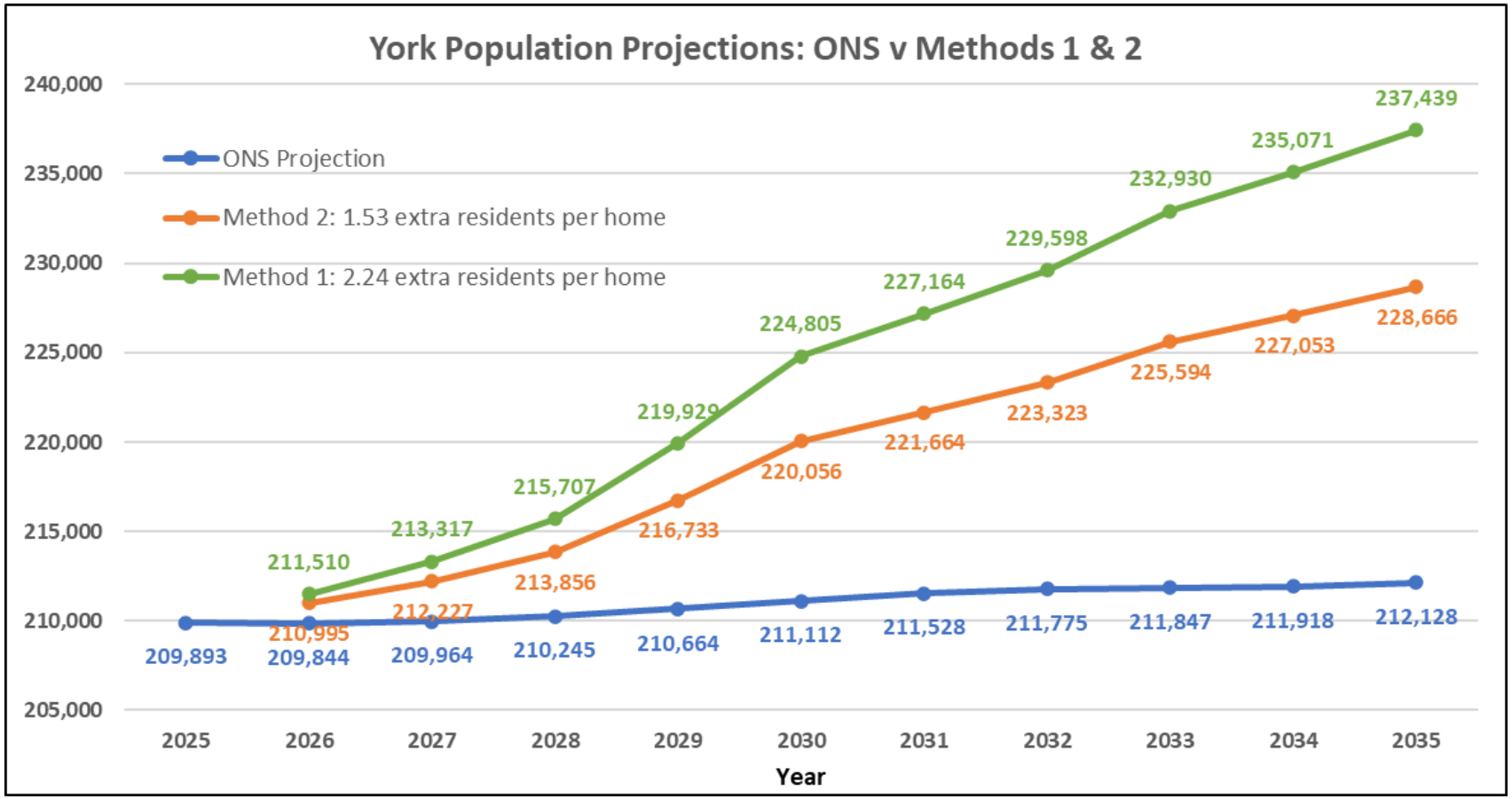
We recommend **a range of 212,128** (ONS, no housing growth) **to 237,439** (ONS, housing growth at 2.24 residents per dwelling) is used for service planning.

Estimated Population of York at 2035	No.
Current 2024 Mid Year Estimate	209,301
2035 **ONS** Projection	212,128
Method 2 - Projection based on 12K+ new homes at 1.53 additional residents per home (using previous impact of new homes in York since 2012/13)	228,666
Method 1 - Projection based on 12K+ new houses at 2.24 additional residents per home (using current household average size in York and assuming all new home bought by someone not currently living in York)	237,439



Possible Impact of New Homes on York population: 2025 to 2035 - Chart

The largest rise in population is expected in 2030 as over 2,000 homes in York are expected to be built in 2029/30.



Projections for Health and Social Care

Adult Social Care (ASC)

The number of people who will receive funded ASC support in the future is dependant on a number of factors. Whilst population changes may affect demand, Care Act duties around reducing, avoiding and delaying the need for statutory care have meant that over the last decade, population growth has not been matched by a corresponding increase in ASC service users.

ASC age band	Number of people 2025	Population change 2025-2035	Change in number by 2035	Total people in 2035
18-64	852	-0.6%	-5	847
65-74	253	15.0%	38	291
75-84	430	3.6%	15	445
85+	562	43.5%	245	807
Total	**2,097**		**293**	**2,390**

The above table suggests that applying a simple population growth factor using ONS data based on total ASC customer numbers in June 2025 (2,097), broken into age bands, would result in a total **of 2,390 ASC customers in 2035 – a 14% increase**. Factoring housing growth into these projections provides further complication, as it is unclear the tenure and occupancy (age profile) of these houses, and what proportion of new residents would be eligible for ASC, or changes in the residential care market. Therefore using a crude ratio (rather than age-adjusted) with an anticipated extra 12,286 homes by 2035 would suggest this number could rise to around **2,603 ASC customers** (Method 1) **or 2,703 ASC customers** (Method 2) in 2035.

The POPPI and PANSI resources give projections for health and disability prevalence at LA level over a 10-year period.

For York, the largest predicted % **increases** from 2025 to 2035 are:

- A 26% increase in people 65+ with severe hearing loss
- A 24% increase in people 65+ with dementia
- A 22% increase in people 65+ admitted to hospital due to a fall.
- A 2.4% increase in dependency on drugs for 18-64s.

Poppi / Pansi - Number in York predicted to have:-	Age Group	2025	2030	2035	2025 to 2030 % change	2025 to 2035 % change
severe hearing loss	65+	3,368	3,926	4,235	16.6%	25.7%
dementia	65+	3,076	3,411	3,811	10.9%	23.9%
a hospital admission due to a fall	65+	1,328	1,513	1,618	13.9%	21.8%
unable to manage at least one mobility activity on their own	65+	7,783	8,593	9,464	10.4%	21.6%
day-to-day activities limited a lot due to disability	65+	5,750	6,267	6,893	9.0%	19.9%
a fall	65+	11,015	12,124	13,061	10.1%	18.6%
a bladder problem at least once a week	65+	6,806	7,414	7,971	8.9%	17.1%
autistic spectrum disorders	65+	374	409	432	9.4%	15.5%
cardiovascular disease	65+	13,143	14,251	15,145	8.4%	15.2%
a longstanding health condition caused by bronchitis and emphysema	65+	686	746	790	8.7%	15.2%
a BMI of 30 or more	65+	12,439	13,534	14,321	8.8%	15.1%
a moderate or severe visual impairment	75+	2,654	2,840	3,050	7.0%	14.9%
registrable eye conditions	75+	1,370	1,466	1,574	7.0%	14.9%
diabetes	65+	6,286	6,777	7,220	7.8%	14.9%
a learning disability	65+	849	919	975	8.2%	14.8%
a moderate or severe learning disability	65+	112	121	127	8.0%	13.4%
a dependency on drugs	18-64	5,459	5,590	5,590	2.4%	2.4%
a moderate or severe learning disability and be living with a parent	18-64	316	323	323	2.2%	2.2%
Down's syndrome	18-64	95	95	96	0.0%	1.1%
an autistic spectrum disorder	18-64	1,306	1,311	1,313	0.4%	0.5%
a severe learning disability	18-64	210	212	211	1.0%	0.5%
a moderate or severe learning disability	18-64	763	767	765	0.5%	0.3%
an antisocial personality disorder	18-64	4,435	4,445	4,446	0.2%	0.2%

Poppi / Pansi - Number in York predicted to have:-	Age Group	2025	2030	2035	2025 to 2030 % change	2025 to 2035 % change
early onset dementia (Males)	30-64	30	28	27	-6.7%	-10.0%
severe hearing loss	18-64	707	688	668	-2.7%	-5.5%
some hearing loss	18-64	11,908	11,535	11,309	-3.1%	-5.0%
impaired mobility	18-64	6,569	6,415	6,250	-2.3%	-4.9%
early onset dementia (Females)	30-64	21	21	20	0.0%	-4.8%
diabetes	18-64	5,416	5,275	5,184	-2.6%	-4.3%
a longstanding health condition caused by a stroke	18-64	359	350	348	-2.5%	-3.1%
serious personal care disability	18-64	1,080	1,063	1,050	-1.6%	-2.8%
a serious visual impairment	18-64	88	88	87	0.0%	-1.1%
a higher risk of alcohol-related health problems	18-64	6,671	6,664	6,624	-0.1%	-0.7%
predicted to be survivors of childhood sexual abuse	18-64	15,736	15,709	15,684	-0.2%	-0.3%
a common mental disorder	18-64	25,696	25,670	25,639	-0.1%	-0.2%
a borderline personality disorder	18-64	3,261	3,258	3,254	-0.1%	-0.2%
a psychotic disorder	18-64	944	944	943	0.0%	-0.1%
two or more psychiatric disorders	18-64	9,721	9,719	9,711	0.0%	-0.1%
number of mortalities predicted to be from suicide	18-64	19	19	19	0.0%	0.0%
a learning disability	18-64	3,332	3,338	3,332	0.2%	0.0%
a learning disability, predicted to display challenging behaviour	18-64	61	61	61	0.0%	0.0%

The largest predicted % **decreases** from 2025 to 2035 are:

- A 10% reduction in 30-64 early onset dementia amongst males and 4.8% reduction amongst females *(NB. small numbers)*
- A 6% reduction in 18-64 severe hearing loss
- A 5% reduction in 18-64 impaired mobility
- A 4.3% reduction in 18-64 diabetes

Primary Care

Difference between resident population and registered population

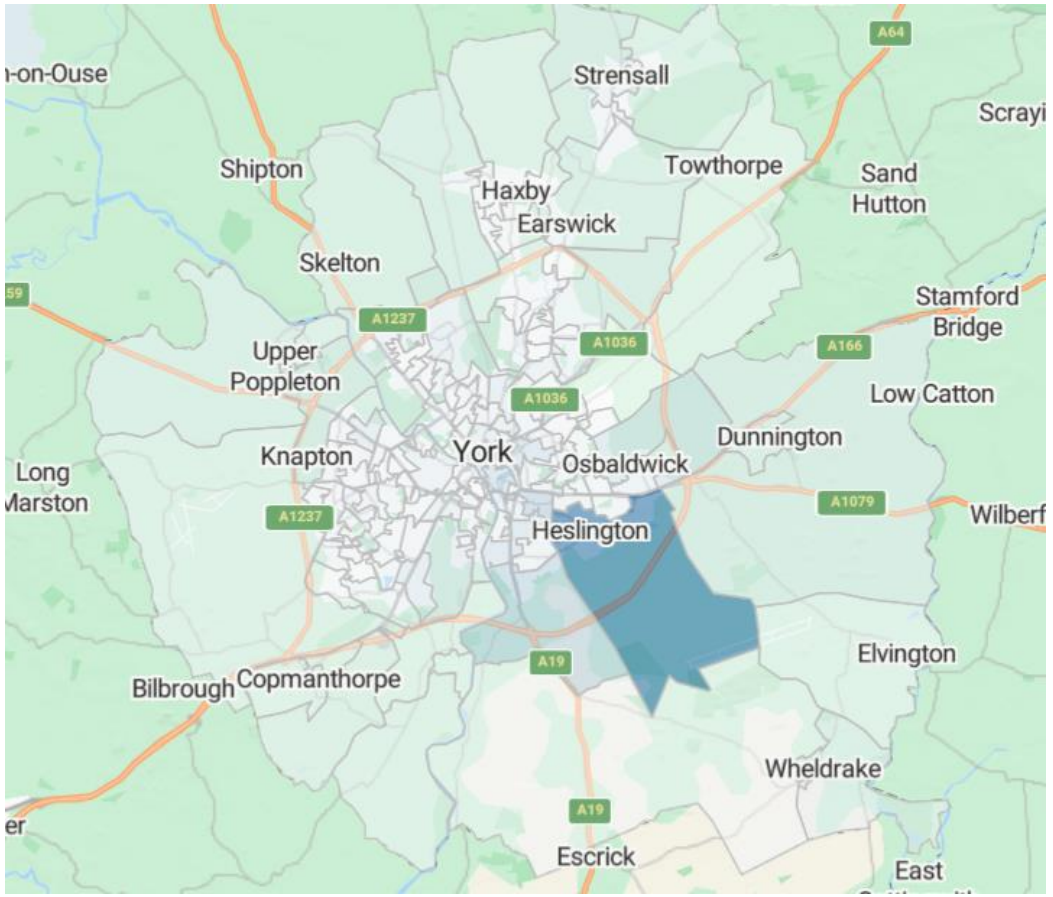
Resident population refers to people physically living within a defined geographic area (such as a local authority or Integrated Care Board footprint), regardless of where they are registered at a GP practice for healthcare. This measure is often based on census or mid-year population estimates and is used for planning services tied to where people live.

In contrast, the **registered** population consists of individuals registered with a specific GP practice or Primary Care Network, regardless of where they reside. This is derived from GP registration data and is crucial for commissioning and funding decisions because NHS resources follow patient registration rather than residence.

In short, resident population is location-based, while registered population is GP-registration-based, and the two can differ significantly due to patient mobility and boundary overlaps.

A crucial example of where this is important in York is in Heslington, where Students at the University of York account for many the registered population, but may not have been counted on Census 2021 due to the point at which new registrations are recorded in the student academic year, and any expansions in University intakes since the 2021 Census.

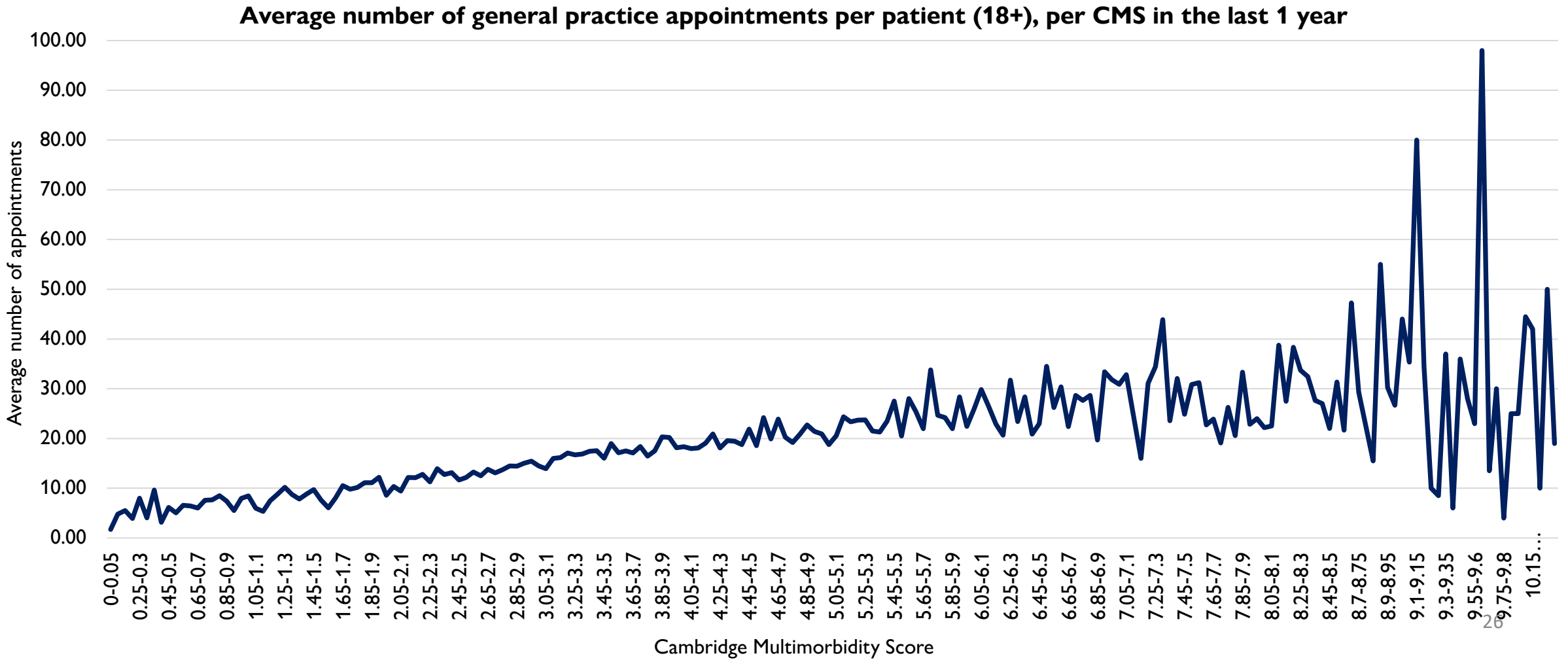
York Resident Population (2021 Census)	York Registered Population (August 2025)
202,821	245,667



York Registered population density by LSOA – August 2025: Source: NHS PDS (patient Demographics Service) Dataset

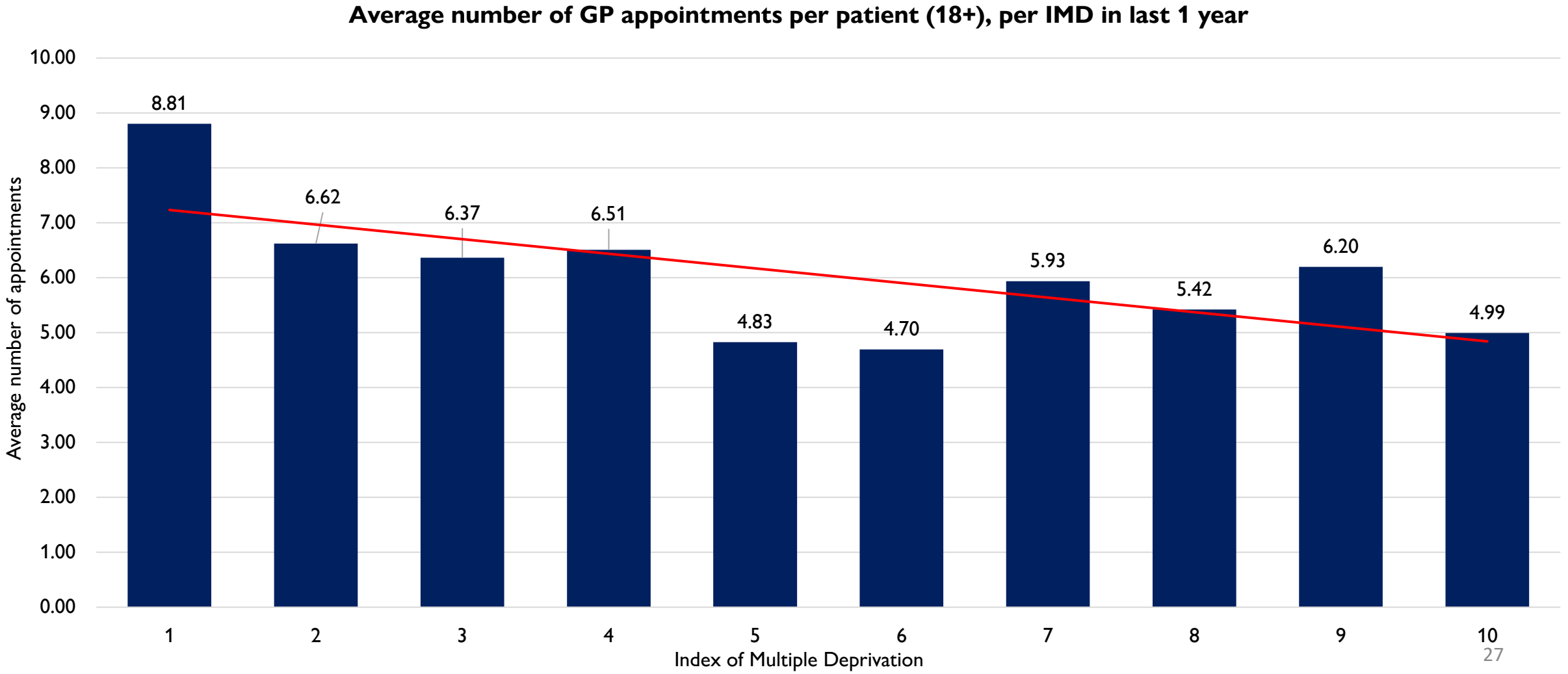
General Practice – Multimorbidity

- The Cambridge Multimorbidity Score (CMS) is a measure that reflects how many long-term conditions a patient has and how severe their overall health burden is. It's used to estimate how complex a patient's health needs are.
- In York, data shows a clear trend that as the CMS increases, the average number of appointments per patient also rises. This reflects that patients with higher levels of multimorbidity have more complex health needs and therefore require more frequent contact with healthcare services.



General Practice - Deprivation

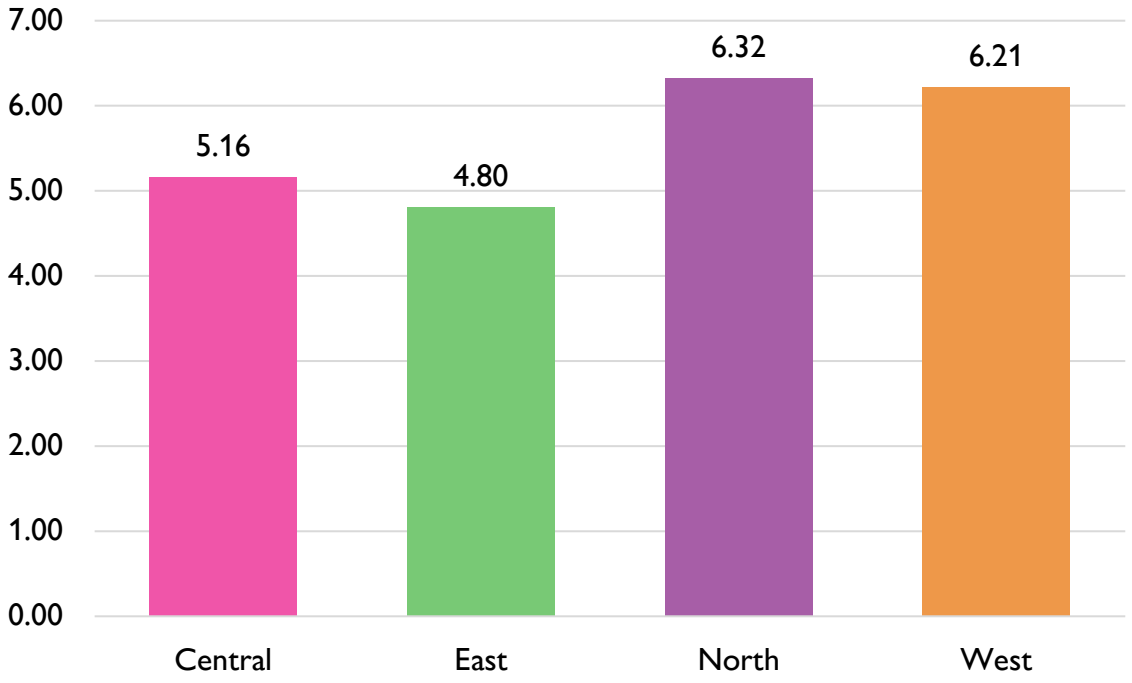
- In York, there is a slight trend showing that patients living in areas with higher levels of deprivation (higher IMD scores) tend to have more appointments on average. However, this relationship is less pronounced than the link observed with multimorbidity. This may be partly explained by the younger age profile of people living in more deprived areas, who generally have fewer long-term conditions and therefore require fewer healthcare appointments overall



General Practice in 2025

- The table to the right includes 221,515 patients registered to 9 of the York GP practices that use SystmOne*. Patients received an average of 5.08 general practice appointments*.
- The chart below shows the average number of appointments per patient by neighbourhood. This data is based on the same 9 practices but is limited to patients aged 18 and over only (185,179). As a result, the average number of appointments is slightly higher at 5.62.

Average number of GP appointments per patient (18+), per Neighbourhood in last 1 year



Age	Number of Patients	As % of caseload	Number of Appointments	As % of Appointments
0-9	17563	7.93%	51877	4.60%
10-19	25682	11.59%	48993	4.35%
20-29	36342	16.41%	104414	9.27%
30-39	30624	13.82%	115392	10.24%
40-49	28169	12.72%	122325	10.86%
50-59	27038	12.21%	150781	13.38%
60-69	24401	11.02%	168202	14.93%
70-79	19311	8.72%	189361	16.81%
80-89	10099	4.56%	136498	12.12%
90-99	2223	1.00%	37568	3.33%
100+	63	0.03%	1186	0.11%
Total	221515	100.00%	1126597	100.00%

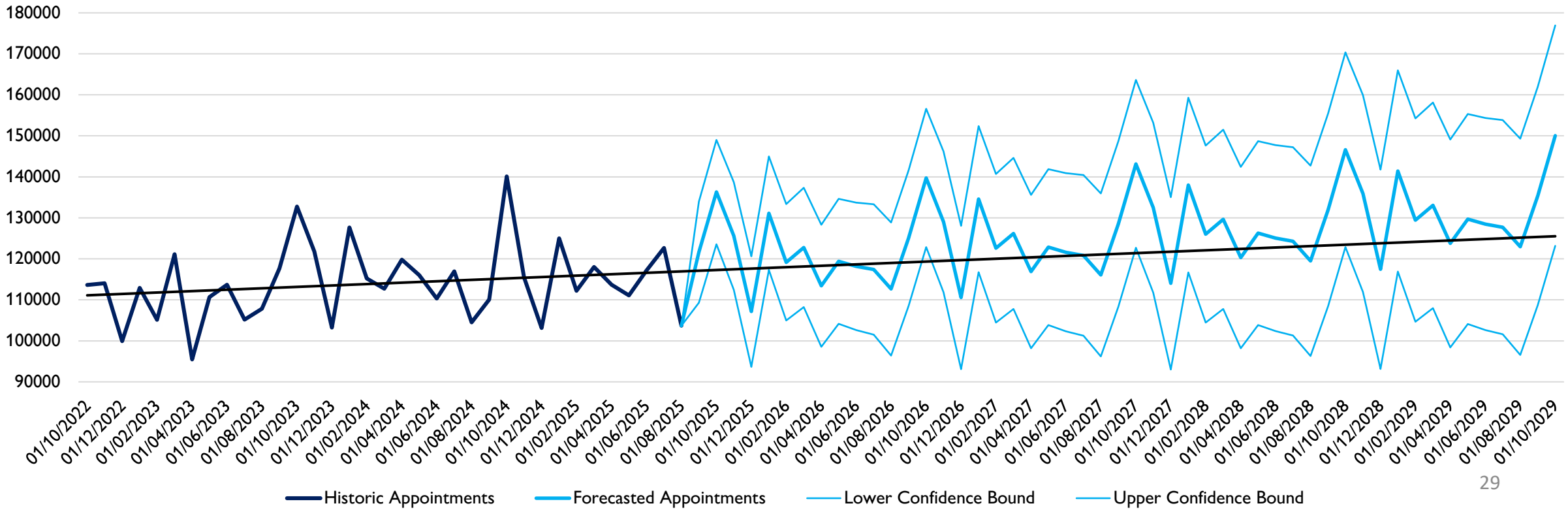
*Dalton Terrace, Front Street, Haxby Group, Jorvik Gillygate, MyHealth, Old School Medical, Priory Medical Group, Unity Health, and York Medical Group.
*Appointments between 12/08/24-12/08/25, including all staff roles.

General Practice – Appointment Forecasting

This forecast draws on data from all 11 general practices in York, as reported through NHS England's General Practice Appointment Data (GPAD), which offers monthly insights into appointment volumes and registered patient counts. It covers patients of all ages, representing the full registered population across York place. To estimate future demand, we used Excel's Exponential Triple Smoothing (ETS AAA) model. This method leverages historical appointment trends to generate projections. While the model accounts for seasonal patterns, it has important limitations. It assumes past patterns will continue and it does not account for changes in patient demography which can significantly increase appointment needs per patient (see previous slide).

Date Range	Number of Appointments	Percentage increase from baseline
Oct 22 - Sep 23	1,317,283	baseline
Oct 23 - Sep 24	1,391,108	5.60%
Oct 24 - Sep 25	1,403,802	6.57%
Oct 25 - Sep 26	**1,448,215**	**9.93%**
Oct 26 - Sep 27	**1,489,447**	**13.07%**
Oct 27 - Sep 28	**1,530,679**	**16.20%**
Oct 28 - Sep 29	**1,571,911**	**19.33%**

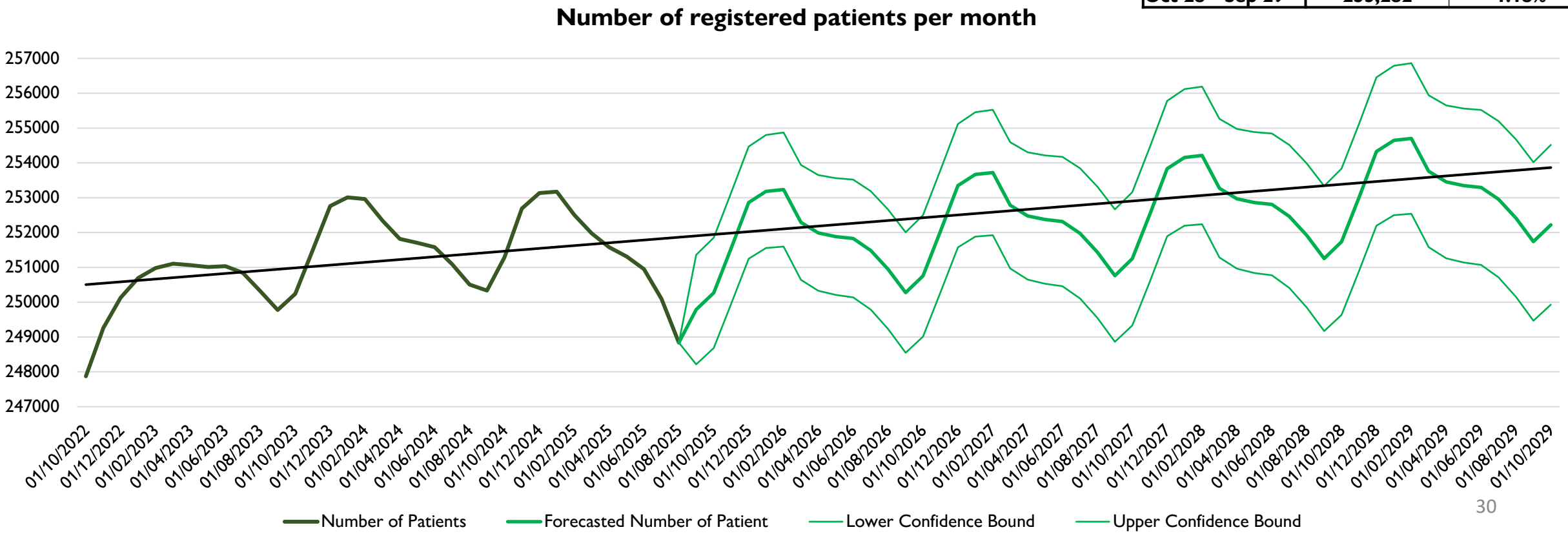
Number of general practice appointments per month



General Practice – Patient Forecasting

In addition to appointment volumes, we applied the same ETS AAA model to forecast the number of registered patients. The below chart illustrates a clear seasonal pattern in patient registrations, with recurring dips during the summer months. This is likely driven by the temporary departure of university students who return home during the summer break, leading to a short-term reduction in the registered population. Correspondingly, there is a noticeable uptick in registrations in October, aligning with the start of the academic year. These cyclical movements are captured in the forecast.

Date Range	Number of Patients (12 month average)	Percentage increase from baseline
Oct 22 - Sep 23	250,340	baseline
Oct 23 - Sep 24	251,652	0.52%
Oct 24 - Sep 25	251,444	0.44%
Oct 25 - Sep 26	**251,816**	**0.59%**
Oct 26 - Sep 27	**252,304**	**0.78%**
Oct 27 - Sep 28	**252,793**	**0.98%**
Oct 28 - Sep 29	**253,282**	**1.18%**

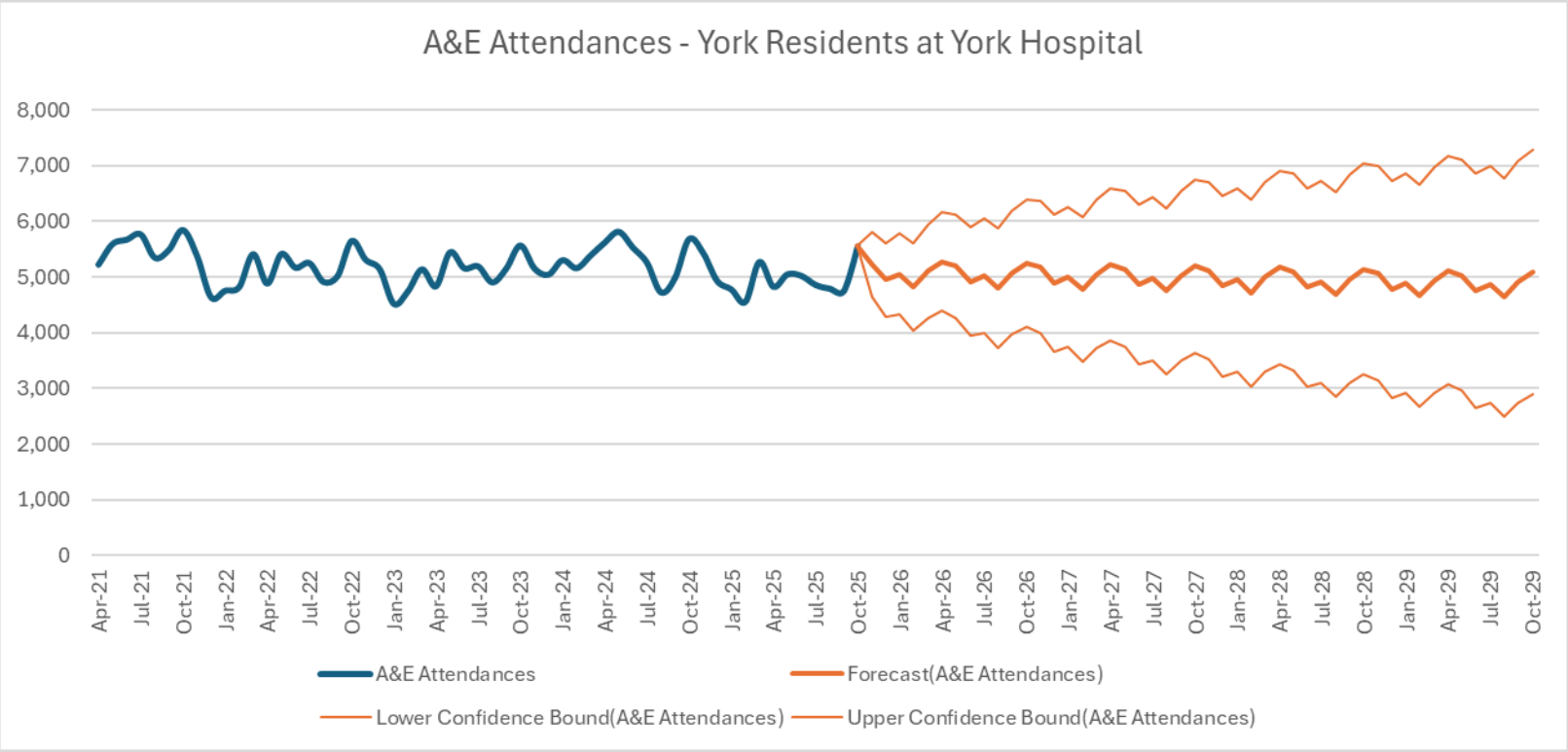


Secondary Care

Impact on Services – Hospital – A&E Attendances

Analysis of monthly A&E attendances for York residents at York hospital reveals moderate variability, with attendances typically ranging from approximately 4,500 to 5,800 per month covering all ages. The average (mean) attendance is around 5,200, and the data shows a seasonal pattern, with higher attendances in winter months and lower in summer, which is consistent with NHS demand trends.

Forecasts for future months provide both expected attendance figures and 95% confidence intervals, indicating the range within which actual attendances are likely to fall. For example, the forecast for November 2025 is approximately 5,225 attendances, with a lower confidence bound of 4,638 and an upper bound of 5,812. These intervals reflect the uncertainty inherent in predicting healthcare demand and are calculated using established statistical methods such as time series analysis and confidence interval estimation.



Date Range	Number of A&E Attendances 12 month Total	Percentage increase from baseline
Apr 21 - Mar 22	63,990	baseline
Apr 22 - Mar 23	61,176	-4.40%
Apr 23 - Mar 24	62,343	1.91%
Apr 24 - Mar 25	62,619	0.44%
Apr 25 - Mar 26	60,006	-4.17%
Apr 26 - Mar 27	60,444	0.73%
Apr 27 - Mar 28	59,796	-1.07%
Apr 28 - Mar 29	59,147	-1.08%

Impact on Services – A&E and Hospital Bed Base

On average, between April 2023 and March 2025 (24 months), there 171 A&E attendances per day, for York residents attending York Hospital with the highest number in a single day recorded of 238, and the lowest of 113.

These average numbers are, however, subject to seasonal variation where higher numbers of daily attendances are seen in the winter months.

By age band on average there are 33 daily attendances for 0-17s, 89 for 18-64s, and 49 for people aged 65+.

The bed base at York Hospital is around 533 G&A Beds available (for general admission), with 34-40 beds available for 'escalation' during times of high pressure for hospital admissions. This figure is an average and does not include times when beds and wards are closed to admission due to infection control measures (e.g. outbreaks of viruses). Around 57% of emergency admissions to York Hospital are for patients who have City of York Council post codes, so it is reasonable to assume that around 302 to 325 beds in the hospital would be occupied by York residents at any one time.

Applying estimated population growth by age band to A&E attendances might mean a potential average daily increase in attendances of around **5 per day** by 2035.

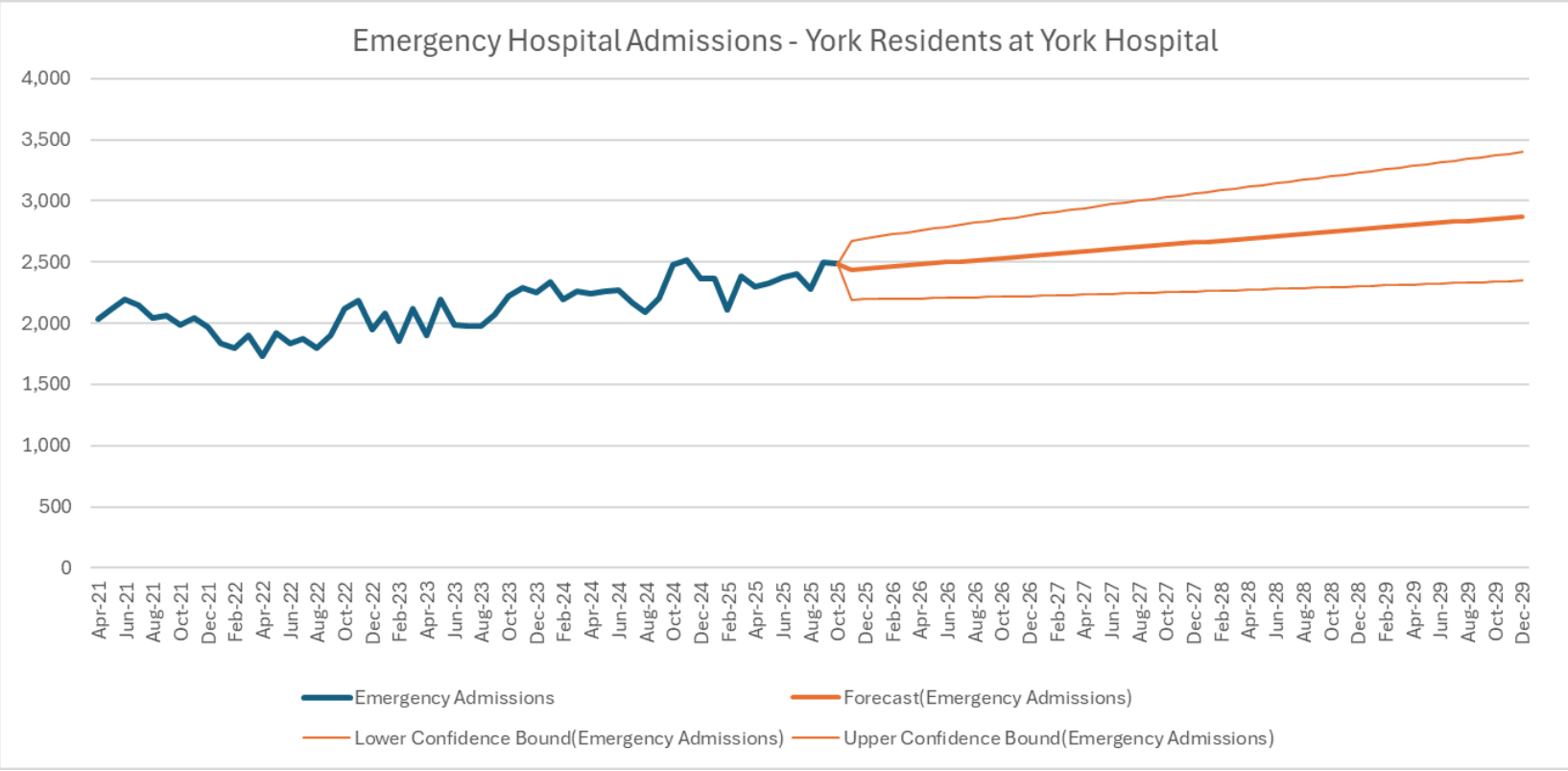
A&E Age Group	Daily Av. No of Attendances - Apr 23 to Mar 25	Population Change in 2025 - 2035	Extra Attendances in 2035	Total Daily Average attendances in 2035
0-17	33	-9.5%	-3	30
18-64	89	0.0%	0	89
65+	49	16.9%	8	57
Total	**171**		**5**	**176**

Impact on Services – Hospital – Emergency Admissions

Monthly Emergency Admissions (for all ages) show moderate variability, with counts typically ranging from around 1,800 to 2,500 per month.

The average (mean) number of admissions is approximately 2,200, and the data demonstrates a seasonal pattern, with higher admissions in winter months and lower in summer, reflecting established NHS demand trends.

Forecasts for upcoming months provide expected admission figures along with 95% confidence intervals, indicating the range within which actual admissions are likely to fall. For example, the forecast for November 2025 is about 2,435 admissions, with a lower confidence bound of 2,193 and an upper bound of 2,677. These intervals are calculated using standard statistical methods such as time series analysis and confidence interval estimation, and they reflect the uncertainty inherent in predicting healthcare demand.



Date Range	Number of Emergency Admissions 12 month Total	Percentage increase from baseline
Apr 21 - Mar 22	24,126	baseline
Apr 22 - Mar 23	23,348	-3.22%
Apr 23 - Mar 24	25,650	9.86%
Apr 24 - Mar 25	27,461	7.06%
Apr 25 - Mar 26	28,930	5.35%
Apr 26 - Mar 27	30,346	4.89%
Apr 27 - Mar 28	31,634	4.25%
Apr 28 - Mar 29	32,922	4.07%

Conclusions

Conclusions - 1

- **Resident population**: This report offers three estimates for population growth in York between 2025 and 2035. We recommend **a range of 212,128** (ONS, no housing growth) **to 237,439** (ONS, housing growth at 2.24 residents per dwelling) is used for service planning. The population is forecast to grow somewhere between 1% and 13%, from a baseline of nearly 210,000 residents.
- **Housing growth:** based on size of new developments and geographical location alone, the increase in new homes are expected to impact on most areas of the City but less so in West.
- **Adult Social Care demand**: at mid-year 2025, CYC funded 2,097 people to receive care packages. If this number rises in line with forecasted population changes, the number of care packages is estimated to increase to 2,390 by 2035 (14% increase from 2025).
- **Health conditions/disability**: the largest estimated changes between 2025 and 2035 are a 10% reduction in early onset dementia amongst males 30-64 year-old, which needs to be interpreted with caution as it is based on small numbers. More striking is the anticipated 26% increase in 65+ severe hearing loss and 24% increase in 65+ dementia prevalence. For 18-64 year-olds, the biggest increase (2.4%) is expected to be drugs dependency.
- **GP registered population**: the projection is that the GP registered population will increase by 0.8% from 251,444 (currently) to 253,282 within the next 3 years, in 2029.

Conclusions - 2

- **General Practice demand**: between 2025 and 2029, around 1,373,153 GP practice appointments are forecast to increase by 1.23% to 1,376,232. An ageing population and more (complex) multi-morbidity are expected to account for the increase in this demand.
- **A&E attendance:** between 2025 and 2029, the number of A&E attendances are expected to decrease slightly, from 60,006 to 59,147 (-1.4%). However when changes to age breakdowns are applied to daily average A&E attendance, this suggests an increase of 5 attendances per day between now and 2035, from 171 to 176 (3.5%). The latter figure could be considered a more accurate estimate than the former, as the former forecast is based on historical A&E attendance trends only.
- **Emergency admissions**: between 2025 and 2029, the number of non-elective admissions are expected to increase year-on year, from 28,930 to 32,922 (+14%). For those that present to A&E, more people over 65 year-old get admitted. In combination with an ageing population, it is therefore no surprise that non-elective admissions are expected to increase quite significantly.

Data Limitations and References

Image credit © The Open University

Data limitations - 1

- Population increase due to housing growth estimates the additional number of York residents, however it is not possible to account for household composition such as age bands that will increase as a result.
- Compared to the 2019 Population Projections, this report does not include data on community nursing and mental health, due to service pressures at the Acute Trust and TEWV, and the required timeframe to complete this piece of work.
- Very limited data was available for children & young people's future health and social care needs. For example, there are no long-term projections for the assumed increase in pupils with SEND, the only available projections are for the next financial year therefore not appropriate to include in this report. Given the rapid rise in CYP SEND over the last 5 years, it is not judged useful to apply crude population and housing projections to the current numbers as such estimates are likely to be unreliable.
- Data sources used to establish health and social care baseline data have their own limitations such completeness, accuracy, and representativeness, which will have a direct impact on our projections.
- Health and social care projections are largely based on historic changes in demand in York, assuming these trends continue at an equal rate, year-on-year. Where relevant, changes in age bands have been taken into account, e.g. A&E attendance, but housing growth has not been factored in as we do not know what the household composition will be.

Data limitations - 2

- Excel's Exponential Triple Smoothing (ETS AAA) model was used for General Practice, A&E attendance, non-elective admissions forecasting was not able to produce estimates beyond 2029. These projections are calculated using standard statistical methods such as time series analysis and confidence interval estimation, and they reflect the uncertainty inherent in predicting healthcare demand.
- General Practice forecasting accounts for seasonal patterns and changes in patient numbers. However, it does not distinguish between age groups, it assumes past patterns will continue, and it does not include multimorbidity rates, which can significantly increase appointment needs per patient.
- A breakdown of Adult Social Care (ASC) categories into residential and non-residential care projections have not been included. With future population projections and housing growth, it should be noted that a lower number than expected of 'new' York residents may need ASC (as people who *think* they might need ASC support tend not to move home).
- Health/disability projections are subject to under-diagnosis, where diagnosis of the issue lags behind the actual estimated prevalence in the York population. A pertinent example is Autism/ADHD.

References

Mid-Year Population Estimates, England and Wales, June 2024 published 30 July 2025.

Population projections for local authorities by five-year age groups and sex, England 2022-based published 24 June 2025

Palliative and End of Life Care Profiles in the Office for Health Improvement and Disparities (OHID) Fingertips data suite.

Information on Births in England and Wales: birth registrations

https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/livebirths/datasets/birthsinenglandandwalesbirthregistrations

Ministry of Housing Communities and Local Government: Net Completions 2012/13 to 2023/24

Projecting Older People Population Information

Projecting Adult Needs and Service Information

City of York Adopted Local Plan 2025