Active Healthy Ageing in England

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UK's ageing population

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2030

Source: ONS
The whole person

Transforming services for older people requires a fundamental shift towards care that is co-ordinated around the full range of an individual’s needs (rather than care based around single diseases) and care that truly prioritises prevention and support for maintaining independence. Achieving this will require much more integrated working to ensure that the right mix of services is available in the right place at the right time.
The NHS has designed hospital medical specialties around single organ diseases. Primary care consultations and payment systems do not lend themselves to treating patients with multiple and complex conditions. Common conditions of older age receive less investment, fewer system incentives, and lower-quality care than general medical conditions prevalent in mid-life.

Beales and Tulloch 2013; Roland 2013
Steel et al 2008; Melzer et al 2012
10 Integrated services to provide person-centred care

1. Stay well and age well with dignity and choice at end of life
2. Live well with one or more long-term conditions
3. Support for complex comorbidities in frailty
4. Accessible, effective support in crisis
5. High-quality, person-centred acute care
6. Good discharge, planning and post-discharge support
7. Effective rehabilitation and re-ablement
8. Person-centred, dignified long-term care
9. Support, control and choice at end of life

Shift to prevention and pro-active care
When we consider what is required to improve quality of care for older people, we need to look beyond the narrow definition given by Lord Darzi in the NHS Next Stage Review – which centred on **effectiveness, safety and experience** – to encompass the broader domains of **access, efficiency and equity**, including freedom from (age-based) discrimination. For older people using multiple services, continuity and co-ordination are also key components of quality.

*Department of Health 2008*

*Institute of Medicine 2001*
What we know can work

Providing continuity and care co-ordination

In England, the new GP contract (which comes into force in October 2014) will ensure that all people over 75 with complex, multiple long-term conditions will be cared for by a named GP
Identification and case management

To help identify people at risk, NHS England incentivises population risk stratification with annual health checks for all people aged 50–74

Case management has been defined as ‘a targeted, community-based and proactive approach to care that involves case-finding, assessment and care planning’
A key aspect of good management of long-term conditions is ensuring that the services and support provided reflect the person’s own circumstances and preferences.

The ‘house of care’ model offers one approach for achieving this, where people with long-term conditions engage in collaborative care planning through pre-arranged appointments, co-producing a single holistic care plan with their care co-ordinator.
House of care model

The House of Care takes a whole system approach to LTC management. It makes the person central to care. It is about aligning levers, drivers, evidence and assets to enhance the quality of life for people with long term conditions no matter what or how many conditions they have.
Personal care budgets and direct payments

Local authorities, in conjunction with health partners, should ensure that older people and their carers are offered the choice of taking up personal care budgets and direct care payments.
The evidence for telehealth services for people with long-term conditions is mixed, with the best evidence pointing to possible effectiveness of telecare services for older People with specific conditions such as cardiac failure, diabetes or chronic lung disease. Evidence suggests that telehealth can also play an important role in the delivery of care to remote and rural populations.
Improving care and treatment for the common conditions of ageing

These include osteoarthritis, cardiac failure, chronic airways disease, and non-insulin dependent diabetes. Despite clear guidelines from the National Institute for Health and Care Excellence (NICE) for these conditions, clinical audit data and other studies reveal significant care gaps
In conjunction with Newcastle Council, Newcastle West CCG has developed an ageing well strategy that goes beyond mid-life to the ‘mature life cycle’, which comprises ‘preparing for active old age’ (50 onwards), ‘active old age’, ‘vulnerable old age’ and ‘dependent old age’.

The strategy includes:

• health checks aimed at identifying risk factors such as obesity, physical inactivity and poor diet in those aged 40–74
• engaging older people as volunteers and health champions focus on case-finding to identify older people who are vulnerable to deterioration or dependency so that they can receive proactive support a focus on supported self-management.
Salford’s Integrated Care Model

A major new study, led by The University of Manchester, is to examine Salford’s pioneering integrated care programme for older people.

Salford Integrated Care Programme (SICP) is revolutionising the delivery of care with more ‘joined up’ services for older people with long-term conditions and social care needs. It includes better access to community resources and support to help people manage their own health; the development of an integrated contact centre to assist people to get the right support; and multi-disciplinary teams to make sure different services work together to get the best possible results for those people with most needs.

The programme is being driven forward by Salford Royal NHS Foundation Trust, Salford City Council, NHS Salford Clinical Commissioning Group and Greater Manchester West Mental Health NHS Foundation Trust.
Cancer is one of the leading causes of death, in particular in modern societies since age is the key risk factor for most types of tumours. Even though many cancer-related genes have been identified, new diagnostic and molecular targets are of great importance. The post-genome era has made possible large-scale molecular analysis of tumours and cancer cell lines to explore the links between ageing and cancer.
Thank you!