

For later life: better health and care in tough times

Conference attended 25th April 2013 : Report by MASHUD HAQUE

The morning plenary session started by Martin Lewis CBE in a jovial mood when he retold what “W” Bush addressed a bigger than expected audience - dense crowd.

There were 270 names in the attendee list.

Tom Write CBE, set the scene by saying this was the 4th conference and wanted to report

- How AGEUK performing
- What are top policies
- How culture and practice is changing

Population of 60+ in UK is 14.1 million

Life expectancy is on the rise hence more attention to 85+ than 60+

Dignity in old age

Francis Report on Staffordshire saga

Third of elderly not claiming benefits entitled, fuel poverty on the rise

State funded support is shrinking, isolation/loneliness rising

Care need to be person centred rather than Silo model

AGEUK priorities:

1. Valuing contribution and recognising needs of older people
2. Preventative health care
3. Cornwall Pathfinder Project as model to combat loneliness/isolation

Neil Churchill, National Director Patient Experience talked about Driving change in the N|HS for older pupil through patient feed back and acting on complaints. He admitted to have been in post for the past here weeks only so watch the space (*not my lips*).

Short input from Stephen Dorrell, Chair of Health select Committee, Dr Linda Paterson, Clinical Vice President, Royal College of Physicians and Ben Richardson, Principal McKinsey & Company was followed by moderated questions from the floor.

I commented on the passionate presentation of a positive changes in the NHS by SD and wanted to highlight the opinion research of Dr. Oliver Corrado but suddenly found myself tongue tied and blank brain. After excruciating moments of silence I managed to ask if Geriatrics was a dead word as Dr Paterson introduced herself as a specialist of Care of Older People.

Then followed opportunity to visit the exhibition and network, over a cup of tea/coffee. Councillor Cathy Osselton Cabinet member Basingstoke & Deane Borough Council introduced herself as an ex Bradfordian and local old people champion in her council.

Before lunch were three Parallel plenary sessions. I was allocated High impact health interventions. Order of the formal presentation was altered as the last speaker was brought forward to be first as she had to go to face TV reporters about measles vaccine.

Dr. Yvonne Doyle, director of Public Health, NHS South of England told the group that Blackpool through intervention has reduced inequality in health by reducing infant mortality but did not elaborate. She stressed that her role as Public Health would be to improve health and reduce inequality through evidence based data and will be outcome focused.

Professor Tom Kirkwood enumerated 7 factors affecting health in later life:

1. Genes
2. Nutrition
3. Lifestyle
4. Environment
5. Socioeconomic status
6. Attitude
7. Chance

Spoke about Newcastle 85+ study culminating in a party for 89 year olds!

David Regan, Director of Public Health, Manchester City Council spoke about how Manchester has successfully integrated care for the elderly through intergeneration intervention viz. South way Housing Project and Future City United, a social club for he elderly for clubbing.

Lunch was an “eat on your feet” affair. I managed to rest my plate on a window sill and attracted a co attendee to talk about our roles/activities in our areas. I was speaking with Dave Laws , Chairman, East Kent Association of Senior Citizens Forum who refused to pay the conference fee and was allowed free attendance as he said the organisers wanted him to attend! He told me about a Ghurkha pensioner group fighting for treatment at par with the British Army and a Turkish pensioner group who are active.

After lunch was billed as Debates and ideas labs but the format took the morning session model with speakers followed by Q&A chaired by Dianne Jeffrey, CBE.

I was allocated Food (malnutrition and obesity).

Dr Lisa Wilson PhD, freelance consultant to International Longevity Centre, spoke at length about consequence of malnutrition which means poor or bad nutrition and obesity. If ones BMI is over 30 then the person is obese in UK and if under 18 then undernourished. She revealed that although 37% of 65+ eat “5 –a day” regularly, 35% are still obese! Hoever according to US survey, overweight oldr persons are likely to live longer!

Rachel Masters, Senior Specialist Dietician, County Durham and Darlington NHS Foundation drew our attention to the website: www.focusonundernutrition.co.uk

Jackie Hayhoe, Manager - fit as a fiddle spoke enthusiastically about the success of the project in recruiting participants.

I enquired if there was a magic potion to reduce BMI and was told there was none!
Another enquirer asked why his mother was fed diced carrot for every meal in hospital.
He was told to write to the Catering Manger of the Hospital.

Rt. Hon. Jeremy Hunt MP, Secretary of State for Health delivered the keynote speech. He spoke about the changes in the NHS and the computerisation of patient records to be in place soon involving all users including GPs in the design of the system.

Culture change in care was the last formal session addressed by Dianne Jeffrey, CBE DL, Chairman Age UK, Dame Julie Mellor DBE, Health Service Ombudsman and David Behan, CBE, Chief Executive CQC followed by Q&A. The main message was the role of complaints in improving care of older people. Complaints are mainly of the following six catagories:

1. inadequate personal care
2. dehydration
3. malnutrition
4. poor communication
5. lack of integrated care
6. discharge from hospital

David Lewis closed the conference with his closing remarks and a one minute film covering covering care from birth to death.