

The meeting was held in the Council Chamber, EEF Broadway House Conference Centre, Broadway House, Tothill Street, London, SW1H 9NQ - Meeting commenced at 10:45am

Justin Russell (DWP)

Welcomed everyone to the meeting and introduced new members. Pensions Minister Steve Webb is attending the meeting and will be on first. Due to other Parliamentary business Care Minister Norman Lamb is unable to attend (again).

Steve Webb

Announced he had to leave at 11.15, had to be in Parliament for prayers at 11.30 to reserve his seat for the Budget Speech, said we would be happy with the Budget, something in it for savers.

He wanted to focus on “Extending Working Life”, it should focus on people who drop out in their 50’s:

- Carers - usually female who drop out of paid work, a report is coming out in June to show how carers can stay linked to the labour market. Not going to throw money at it but will see what can be done.
- Health problems - people get incapacity and health benefits, but are unable to contribute to pensions. Can be referred to Occupational Health (Health and Work Service) with reference to work via their GP. The aim to prevent short-term absence becoming long-term.

Comments from members:

- If you have to look after people, assistance is needed if to continue working; Steve Webb replied that on Pension Credit DWP paid to those they identified as entitled but not claiming, the system flopped as people still did not claim. There is a need to find a way to get money to people who do not claim;
- DWP, DoBusiness, National Careers Service, DoEmployment concentrating on 50+ when this is too early to revert to p/t work;
- The Generations Divide is also a problem;
- My contribution – some politicians and the media encourage young people to blame their problems on older people. Public service employees need to be valued. Older people need to be kept at work for their experience, with jobs created for young people to work alongside them. Need to unite not divide the generations.

Lis Robinson (DWP) - Extending Working Lives (Attachment 1)

This was a follow up to Steve Webb’s session.

“Framework for Action on Extending Working Lives” published later this year sets out the imperative for action by employers, individuals, medical/care professions and Government. Makes the economic (productivity, consumption, State Expenditure), social (improved wellbeing in later life) and moral (social inclusion) case for extending working lives.

By 2020 over 50’s will comprise 1/3 of the working age population. There will be a gap in the workforce if we are not careful. Disadvantaged groups as well as older people will be needed. Carers will have the same rights as the disabled. There is a business case for an

extended working life. This will impact on health and wellbeing.

Comment from members;

- Where did the figures come from? A: From across Europe not just a UK survey on future jobs. The gap has been developing since the 1960's. The workforce should be developed regardless of age.

Table discussion – How can UKAFA help in this work?

Responses – UKAFA, Regional Forums and Government need to work together; there has to be proper jobs with full training and high skills; this needs to be reflected in pay levels; older people retained in the workforce to work with young people.

Lord Filkin - Centre for Ageing Better (*Attachment 2*)

The Centre is in its planning phase and should be operational by early 2015. We are all living much longer and need to optimise this gain so that individuals and society gain from it. Promoted by £50M from the Big Lottery Fund for 10 years, to be up and running by January 2015.

The Centre to act as a core of evidence and knowledge, to stimulate others to work to bring about change. Need to change Labour Market discussion to “how to cater for an older workforce”.

Comments from members;

- South West Regional Forum suggested the Dorset “POP” Project which got older people back into p/t, ultimately f/t work. A: Lord Filkin would love to talk about this;
- Which ‘older generation’ are being talked about, it is different for different age groups. A: need to reflect ageing not a specific age;
- Employers should look at quality not quantity. A: Employers should value older workers;
- Scotland OP's assembly, it is hard to get views across to employers who are often hostile. A: The remit is England, but will look at how previous surveys/initiatives have not worked in the past.
- They need to look at all evidence from anywhere even Scotland. A: Will not visit Scotland unless invited.

They will build an engagement process, only two at the moment. Lord Filkin will visit South West Regional Forum. Dot Gibson, NPC General Secretary, invited Lord Filkin to attend the NPC's Pensioners Parliament in June.

Audrey Roy (DEFRA) - Impact of an Ageing Society on Service Design and Delivery in Rural Areas (*Attachment 3*)

There is a higher percentage of older people in rural populations than in urban populations. Transport is a major problem. Need for a changing landscape for service delivery. Methodology – need to see what's already out there. Talked to service users; started with 50+ group, then older age groups – got different answers.

Headlines: (i) People tend to call on services at crisis points – injury at home, on return from hospital;
(ii) Inability to express need, lack of transport access, lack of appropriate housing.

There are barriers to planning for need. Why does Rural Ageing matter to services? Two key challenges – lower population density; the “penalty of distance”. Questions – transport is always the first thing to go in cuts. If transport is cut Local Authorities need to take services to people instead, this can cost more.

- People reverting to their own cars is not a good idea. A: community transport cannot provide concessionary travel.
- The rollout of Broadband is a problem. A: this is slow but getting there.

Phillip Hays (DfCAaLG) - Housing for an Ageing Population; Planning Ahead (Attachment 4)

Population of older people in England growing faster than any other group. Celebrate getting healthier as well as older. The house an older person actually lives in can be very different from the house they would ideally like to live in.

John Galvin - First Stop (Attachment 5)

Why do older people not consider housing change? A: Fear of not being able to manage. Network – combined local and national advice service on housing and related support, care and finance for older people. Rather than planning for older people, involve older people in the planning. Government policy is to keep people out of long-term institutional care, there should be a range of different housing. Commissioning research – Regional Forums invited to contribute to the research.

Gareth Arthur and William Davis (DoH) - No One Left Alone (Attachment 6)

To improve care for vulnerable people. There are 4.2M over 75's in England, projected to grow to 6.3 M by 2026. GP's a key role to play working with a wider multi-disciplinary team. In July 2013, DoH launched an engagement to inform a vulnerable people's plan. Feedback moved the focus to more than age alone. The no one left alone plan will set out an ambition for improved out of Hospital Care, including: Protective Care, Personalised Care, and Joined-up Care. High Quality Care – a core package of care for 800,000 most at risk people. The GP will identify patients with the highest risk; a personalised and holistic care plan based on the individual's situation will be developed. The document will draw on wider changes to the GP contract; improved standards and transparency; greater integration between services.

Now considering how the vision for pro-active care could be tendered to other groups. Work is underway to explore how to support new models of care. In USA older people are dealt with differently when they arrive at A&E. There is better integration to hospital care and fewer returns on discharge.

Points from table discussion:

- This appears to be all task based care;
- Older people are blamed for occupying hospital beds when there is no other way;
- Varies according to hospital and area, Services worse in rural areas;
- Depends on who owns the agenda for pro-active care;
- Need for access to 24 hour care – usually only available in A&E;
- Training – requires qualified staff on proper contracts, paid better than the minimum wage.
- Balance between Medical and Care? Don't know where one starts and the other finishes, e.g. surgical stocking – prevention – to stop a care issue becoming a health issue – who applies it?

Summary

Another interesting meeting with all agenda items being relevant, although there was a link between the first three items – keeping older people at work longer.

Credit to Pensions Minister Steve Webb for turning up on Budget Day. The absence again of Care Minister Norman Lamb is becoming of increasing concern to me; it must be a year now since he last attended a UKAFA meeting. I have raised his repeated absence as an issue within the Review of UKAFA Working Group, on which I serve.