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Calendar of courses and conferences  35
ACTIVE AGEING

177/1 The association between activity and well-being in later life: what really matters? by Howard Litwin, Sharon Shiovitz-Ezra.
A study of the complex associations between older people's participation in activity and their well-being in later life used data from a national sample of 1,334 Jewish-Israeli retirees. Confirmatory factor analysis substantiated a division of the activities into solitary, formal and informal categories, as postulated by activity theory. The outcome measure, the latent construct well-being, was compiled from scores on the 12-item General Health Questionnaire (GHQ-12), a global measure of life satisfaction, and a measure of satisfaction with the use of time. The analysis also examined the influence of socio-economic status, health status and the quality of inter-personal relationships. "Social relationship quality", also a latent construct, was a composite of measures of satisfaction with children, friends and neighbours and a self-rated loneliness scale. Path analysis using structural equation modelling was employed. The results showed that when the quality of social relationships was taken into account, the amount of activity had no independent effect on the respondents' well-being. Moreover, it was social relationship quality, a facet of informal activity, that has generally been neglected in activity research, that emerged as the most influential variable in the association between activity and well-being. Thus, the findings provide empirical backing for the assertion that the quality of social ties matter more than activity participation per se as predictors of a good old age. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

AGE DISCRIMINATION

177/2 The influence of patient's age on clinical decision-making about coronary heart disease in the USA and the UK; by Ann Adams, Christopher D Buckingham, Sara Arber (et al).
The likelihood of ill health, including coronary heart disease (CHD), increases with age. This paper uses an analytic approach based on conceptualising decision-making as a classification process, to explore the ways in which UK and US primary care doctors' cognitive processes contribute to ageism in health care at three key decision points during consultations. In each country, 56 randomly selected doctors were shown videotaped vignettes of doctors portraying patients with CHD. The patients' ages (55 or 75 years), gender, ethnicity and social class were varied systematically. During the interviews, doctors gave free recall accounts of their decision-making. The results do not establish that there was substantial ageism in the doctors' decisions, but rather suggest that diagnostic processes pay insufficient attention to the significance of older patients' age and its association with the likelihood of co-morbidity and atypical disease presentations. The doctors also demonstrated more limited use of "knowledge structures" when diagnosing older than midlife patients. With respect to interventions, differences in the national health care systems rather than patients' age accounted for the differences in doctors' decisions. US doctors were significantly more concerned about the potential for adverse outcomes if important diagnoses were untreated, while UK general practitioners (GPs) cited greater difficulty in accessing diagnostic tests. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

177/3 Removing ageism - make it your business: a simple-to-follow 3 step Age Positive business checklist to identify and eliminate age discrimination in the workplace ... suitable for employers of any size or sector; by Age Positive, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, [2005?], A4 folded booklet (with insert).
A leaflet to promote good practice in advance of the Age Regulations due to come into force on 1 October 2006. The three steps are: ageism, check your current awareness; a checklist, where does you business stand; and taking action, a plan of what to do. Further sources of help and information are suggested. The insert is a leaflet, "20 facts your business needs to know". (KJ/RH)
Price: FOC
From: Download copies: http://www.agepositive.gov.uk
Email: agepositive@dwp.gsi.gov.uk
AGEING (GENERAL)

177/4 The oldest old in Great Britain: change over the last 20 years; by Cecilia Tomassini. Population Trends, no 123, Spring 2006, pp 32-40. This article follows the author's recent analysis of the oldest old (those aged 85+) in the UK (in Population Trends, no 120; 2005). In line with that study, the current study goes beyond the usual practice of treating the oldest old as part of a homogenous older group. Rather, the aim is to disentangle the effects of the individual characteristics of interest and how they vary in this age group when compared to the older population as a whole over the last 20 years. Using data from the General Household Survey (GHS), this study offers detailed descriptive and multivariate analyses of the use of selected health services and the living arrangements of oldest old over the last 20 years. The results indicate increases in the proportions of those living alone and in hospital out-patient visits in contrast to the stability in the proportion visiting their general practitioner (GP). (RH)
 ISSN: 03074463
From : http://www.statistics.gov.uk

ASSESSMENT
(See 177/47)

ASSISTIVE TECHNOLOGY
(See 177/50)

ATTITUDES TO AGEING

177/5 An exploration of the relationship between place of residence, balance of occupation and self-concept in older adults as reflected in life narratives; by Deb Hearle, Jane Prince, Valerie Rees. Quality in Ageing, vol 6, no 4, December 2005, pp 24-33. In 2002, there were 19.8 million people in the UK aged 50+, and the Office for National Statistics (ONS) estimate that by 2030 there will be close to 27 million. Predictions about older population changes in the next 20 years indicate that although overall growth will be low, the numbers of "young old" (65-74) and "middle old" (75-84) remaining stable until 2011, the "old old" (85+) will show a substantial increase. The increase in the ageing population is evident in the corresponding rise in the growth of nursing and residential homes, sheltered accommodation and home care support. This article outlines and discusses the findings of a study using narratives with 14 older people (mean age 90, and either living in their own homes or in residential homes), to explore such effects of life changes, including transition, on their self-concept and how they occupied themselves. (RH)
 ISSN: 14717794
From : http://www.pavpub.com

177/6 The meaning of stigma: identity construction in two old-age institutions; by Tova Gamlil, Haim Hazan. Ageing and Society, vol 26, part 3, May 2006, pp 355-371. People in advanced old age with frailties and those who are resident in old-age institutions manage their identities within the constraints of stigmatised settings. This paper compares the processes of identity construction in an old-age home and in a sheltered housing project for older people in Israel. Applying a symbolic-interactionist perspective that sees old-age institutions as social arenas for the reconstruction of identity, the paper first distinguishes the residents' constructions of stigma and deviance. While the old-age home residents collectively turned their stigma into a source of positive labelling, the sheltered housing residents drew advantages from their previous roles and statuses. Gossip is shown to play a critical role in reproducing stigma, particularly in the old-age home. These findings are used to demonstrate the variability and potential for adaptation among the residents - who are often stereotyped as homogeneous and
passive. The paper concludes with a discussion of the literal and metaphorical languages used by older people, and of stigma as a positive instrument that can introduce content into the definition of the self. (KJ/RH)

ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

177/7

A multidimensional scale for the measurement of agreement with age stereotypes and salience of age in social interaction; by Andreas Kruse, Eric Schmitt.
This paper presents a new scale of the assessment of the salience of age in social interaction and of levels of agreement with four age stereotypical assertions. These assertions relate to characteristics of people in the 'third age' and the 'fourth age', about older people's social roles and social participation, and about the problems for society produced by population ageing. The scale was constructed by testing the agreement of a national sample of 804 German respondents aged 41-84 with more than 60 item statements in two pilot studies. The final scale has 24 items, and was tested using a stratified sample of 1275 subjects aged 40-75. Five postulated subscales were confirmed using principal components analysis: 'age salience' in social interaction; old age as a time of 'developmental losses and risks of development'; 'the social downgrading of older people'; and believing that 'older people are a burden on society'. For age stereotypes and age salience, no significant sex differences were found, but those aged 58-64 held more optimistic views about old age and population ageing than both the younger and older age groups (with no differences between the latter). Moreover, age stereotypes and age salience varied by several social-economic variables, particularly occupational status, the rates of unemployment in the region of residence, and being resident in the eastern or western part of Germany. No significant interactions between age group and sex were found for any of the five subscales. (KJ/RH)

ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

CARERS AND CARING

(See 177/24)

CONSUMER PERSPECTIVES

177/8

Class, cohort and consumption: the British experience of the third age; by Chris Gillearbd, Paul Higgs, Martin Hyde (et al).
The relative effect of historical and social class location on engagement in consumerism is examined within two different cohorts of retired people in the UK. The first is a stratified sample of 284 men and women in their 60s and 70s drawn from the Boyd-Orr 1930s survey of childhood diet and health. The representativeness of findings from that study was checked using data from the 2002 English Longitudinal Study of Ageing (ELSA). The consumer index used in the Boyd-Orr survey demonstrated sufficient internal reliability to provide an operational measurement of "consumerism" within the retired population. Analyses of variance confirmed that class at exit and cohort but not class of origin contributed significantly to variation in levels of consumerism. These effects were not mediated by cohort differences in health. Occupational standing immediately before retirement was associated with "consumerism" after retirement. The results also show that birth cohorts exercised a stronger historical influence on content consumption in later life than did class background (i.e. parental social class). This supports the authors' thesis that the limited but increasing immersion in mass consumer society of successive cohorts who were born and grew up earlier in the 20th century continues to be reflected in levels of "consumerism" in retirement. (RH)

ISSN: 10795014
From: http://www.geron.org
Three steps to heaven? Tensions in the management of welfare: retirement pensions and active consumers; by Kirk Mann. 

Whether New Labour's proposals for welfare reform succeed - particularly retirement pensions - hinges on its ability to promote the idea of the consumer citizen and to undermine traditional ideas of citizenship rights. However, managing this transition - including the presentation of class and the management of consumers - has not been straightforward. While the Government presents retirement as a matter of lifestyle choice, welfare "consumers" are demanding more from their providers and are regularly disgruntled with the response. Simultaneously, pension providers are expressing reservations about their ability to manage aggrieved consumers. Furthermore, they believe pension fund management has been politicised, and their scope for discussion reduced by regulation, while technical and scientific developments in terms of portfolio management and risk assessment have changed the working practices of those in the pension industry. These tensions between consumers, providers and legislators may generate further dissatisfaction, with the balance of rights and responsibilities being hotly contested. (RH) 

ISSN: 00472794
From : http://www.journals.cambridge.org

DEATH AND DYING

(See Also 177/27)

Listening to older people: opening the door for older people to explore end-of-life issues; by Jane Seymour, Caroline Sanders, Amanda Clarke (et al), Peer Education Project Group, Help the Aged. London: Help the Aged, 2006, 36 pp.
This report describes the findings from a collaborative venture between Help the Aged and a team of researchers from the Universities of Sheffield and Nottingham to run four listening events around the UK. These aimed to offer older people the opportunity to express their views about the end of life, while also supporting them with advice and information to help meet their concerns. 74 people from diverse communities attended these events. Their views are presented under six themes: perspectives on talking about the end of life; raising concerns about the end of life with family members; the importance of spirituality; after death; care at the end of life; and concerns about death and dying. (RH) 
ISBN: 1845980042
Price: £8.00
From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: info@helptheaged.org.uk Website: www.helptheaged.org.uk

DEMENTIA

Alzheimer's Care for people with and affected by dementia; by Matthew V Morrissey. 
About 17.5 million people living in the UK are living with a long-term condition. Part of the government strategy to improve outcomes for these people was to introduce community matrons (CMs). This article builds on previous research by examining the community matron role across nine primary care trusts (PCTs) where the Evercare model of care has been introduced. (RH) 
ISSN: 09547762
From : http://www.nursingtimes.net

There is a paucity of studies of behavioural and psychological symptoms of dementia (BPSD) in developing countries, ethnic minority groups in a given country and cross-national studies. Such studies of BPSD are emerging and provide evidence of cultural differences in the prevalence and correlates of BPSD. Using comparable and uniform methodology and comparable instruments in cross-cultural studies could allow identification of the genetic and environmental aetiology of BPSD and the influence of gene-environment interaction. This article reviews the literature and
the measurement instruments for BPSD. (RH)
ISSN: 08856230
From: http://www.interscience.wiley.com

177/13
This guide is for people in Scotland with early stage dementia, and for people helping or caring for someone with dementia. It contains up-to-date information on the provisions of the Adults with Incapacity (Scotland) Act 2000, including guardianship, intervention orders, medical decision-making and research, and on the Mental Health (Care and Treatment) (Scotland) Act 2003.
The guide also explains ways of helping with: financial and welfare matters; welfare benefits; community care; and long-term care. However, differences in legal provision between Scotland and the rest of the UK should be borne in mind. (RH)
ISBN: 0948897414
Price: £5.00 (Single copies free to carers and people with dementia in Scotland)
From: Alzheimer Scotland - Action on Dementia, 22 Drumsheugh Gardens, Edinburgh EH3 7RN. Dementia Helpline (for free copies): 0808 808 3000. Full text also available at www.alzscot.org/pages/info/mandleg.htm

177/14
Effectiveness of educational interventions in improving detection and management of dementia in primary care: cluster randomised controlled study; by Murna Downs, Stephen Turner, Michelle Bryans (et al).
General practitioners (GPs) face difficulties in diagnosing and managing dementia, and they need education and training. The authors report a study of 36 general practices in central Scotland and London conducted between 1999 and 2002. Three educational interventions were randomly assigned: 8 practices were assigned to an electronic tutorial on CD-Rom; 8 to decision support software; 10 to practice based workshops; and 10 were a control group. Electronic and manual searches yielded 150 valid and usable medical records. The decision support software and the practice based workshops both significantly improved rates of detection compared with the control group. There were no significant differences by intervention in the measures of concordance with guidelines. These results indicate that decision support systems and workshops are effective in improving detection of dementia in primary care. (RH)
ISSN: 09598138
From: http://www.bmj.com

177/15
Service innovations: a dedicated drug treatment service for dementia; by Bart Sheehan, Karim Saad.
A specialised community-based service in Coventry dedicated to the management of patients on anti-dementia drugs is described. All new referrals in a 6-month period were included; and data on clinical and demographic background, service performance and cognitive, functional and behavioural outcomes were recorded. Of 96 patients initiated on anti-dementia drugs, most had dementia of mild to moderate severity and had heterogeneous diagnoses. Significant improvements in cognition, behaviour and function were found. This dedicated domiciliary drug treatment service for dementia achieved high levels of clinical activity and outcomes at least as good as clinical trials, and may be an attractive choice of service model. (RH)
ISSN: 09556036
From: http://pb.rcpsych.org

177/16
Use of the life story in the institutional care of people with dementia: a review of intervention studies; by Inger Moos, Agnes Björn.
This paper reports a systematic review of 28 evaluations of interventions that aimed to describe the benefits of the use of the life story for nursing home residents with dementia, particularly with reference to their sense of identity. The 28 studies were published during 1990-2003. The review focuses on the methodology of the evaluations and how the studies contribute to our
understanding of the value of using a resident's life story in care interactions. The studies were divided into three groups by the purpose of the intervention: to raise self-esteem and self-integration; to improve life quality; and to change behaviour. The features of the interventions that were associated with enhanced sense of identity were a thorough and encompassing treatment of the individual's life story, the translation of the life story into care interactions, and active encouragement of the residents' initiatives. Only one intervention had all of these features. The diverse aims and forms of the interventions were mirrored by the diverse methodologies of the evaluation studies. Recently the trend has been towards more rigorous designs that measure a few precisely-defined quantitative outcomes, but at the cost of a narrower appreciation of the impacts. Given that there is still a great deal to learn about how best to deliver sensitive, individualised and effective support and care to people with dementia, it is argued that qualitative assessments have been too hastily discontinued. (KJ/RH)

ISSN: 0144686X

From: http://www.journals.cambridge.org/jid_ASO

Journal of Dementia Care, vol 14, no 1, Jan/Feb 2006, pp 28-34.
How do care staff describe their experience of caring? And what part do emotions play in working with people with dementia? In the second of two articles, the authors discuss what they have learned from talking to care staff. They find that communication with people with dementia is routinely avoided in care settings, creating a social barrier between staff and residents. (RH)

ISSN: 13518372

DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

(See Also 177/4, 177/82)

Life expectancy: women now on top everywhere; by Anna Barford, Danny Dorling, George Davey Smith (et al).
During 2006, even in the poorest countries, women can expect to outlive men. This short article notes some landmark years in recording mortality trends in European countries. An important factor in this trend has been greater emancipation for women to demand better health care, which must however be tempered by the desire to smoke. (RH)

ISSN: 09598138

From: http://www.bmj.com

A methodology for estimating the population by ethnic group for areas within England; by Pete Large, Kanak Ghosh.
Estimates of the population by ethnic group for local authority districts within England were published by the Office for National Statistics (ONS) as experimental statistics in January 2006. This article explains the methodology used, and describes the advantages of the method adopted over existing survey-based sources. The approach used is a cohort component methodology with population counts, and each component of population change, constrained to the ONS Mid-Year Population Estimates. Consideration is given to the modelling of the ethnic dimension of mortality; fertility (and the allocation of ethnic group to infants); switching between ethnic group categories; and the various aspects of migration, with particular attention given to the application of commissioned census data. A description and analysis of the estimates themselves will be the subject of a separate article in Population Trends. (RH)

ISSN: 03074463

From: http://www.statistics.gov.uk
Mortality in southern England during the 2003 heat wave by place of death; by R Sari Kovats, Helen Johnson, Clare Griffiths.

More than 2000 deaths were attributed to the August 2003 heatwave in England and Wales. This analysis of excess mortality during the heatwave is restricted to south east, south west and eastern England, and London. Excess mortality was 33% in those aged 75+, and 13.5% in under 75s during the 10-day heatwave. Among those aged 75+, deaths at home increased by 33% and deaths in nursing homes increased by 42%. Around a quarter of the heatwave attributable deaths occurred in care homes, but this is likely to be an underestimate, as some residents may have been admitted to hospital before death. There is a need for further research to assess the risk of heat-related mortality by hospital in-patients and the residents of care homes in order to improve prevention strategies. (RH)

ISSN: 14651645
From: http://www.statistics.gov.uk

DEPRESSION

(See 177/67)

DIRECT PAYMENTS

(See Also 177/60)

177/21 Direct payments; by Peter Scourfield.
Direct payments were first introduced in 1996 in order to allow local authorities to make cash payments in lieu of services to those people eligible for community care provision. In this article, the author reports the findings of research carried out amongst care managers and older people about their attitudes towards direct payments, and comments on what could be done to better connect older people with this new way of paying for services. The research was carried out by the Institute of Health and Social Care at Anglia Polytechnic University (APU) in partnership with Age Concern Cambridgeshire. (RH)
ISSN: 13663666

177/22 It's all at the co-op: [direct payments]; by Jon Glasby.
Community Care, no 1608, 2 February 2006, pp 34-35.
The system of direct payments is a key component of the government's vision for the future of social care. However, progress has tended to focus on the payments as an individual way of working. In contrast, this article argues that there is scope for much more imaginative use of direct payments through group approaches and mutual or co-operative models. This draws on work already undertaken by Co-operative UK, and challenges social work practitioners to think about direct payments in new ways. (RH)
ISSN: 03075508

ECONOMIC ISSUES

(See Also 177/13, 177/53)

177/23 "Living poor to die rich"? or "Spending the kids' inheritance"?: attitudes to assets and inheritance in later life; by Karen Rowlingson.
A significant and probably increasing proportion of older people are "asset rich, income poor". This raises a number of social policy issues around poverty and living standards in later life. For example, perhaps older people are "living poor to die rich", because they wish to pass on their assets to future generations or because they feel they have an "inalienable right" to their property. Or perhaps they would like to use up their assets but find that difficult, for example, because of concerns around equity release products. This article focuses on attitudes to assets and inheritance, drawing on findings from in-depth interviews and focus groups. The data suggest that people
generally take a balanced and pragmatic attitude to their resources. They do not wish to "live poor to die rich", but nor are they keen to spend their resources recklessly as they wish to leave something to their families, while also maintaining a reasonable standard of living in later life. It concludes by suggesting that the current "asset-based welfare" debate should broaden its focus on asset accumulation to consider issues around asset use. (RH)

ISSN: 00472794
From: http://www.journals.cambridge.org

Scotland is the only part of the UK to introduce free personal care for older people both in care homes and domiciliary settings. The authors and their team at the University of Stirling have carried out research into the funding and operation of long-term care policy in Scotland and its wider lessons for the UK as a whole. Their report begins by outlining current care policy for older people in the UK, and the development and context of free personal care in Scotland. The practical problems encountered in implementing free personal care is viewed from the perspectives of suppliers, older people and their carers. The financial effects of free personal care on the Scottish Executive, care clients, care homes, local authorities and informal carers are considered. To estimate the affordability of free personal care, the authors present four simulations forecasting care costs from 2003 to 2063. They identify key threats to the sustainability of the policy, and conclude by reviewing the wider lessons for the UK as a whole in designing policies to care for older people.

(RH)
ISBN: 1859354394
Price: £17.95 (+£2.00 p&p)
From: York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. Other formats available from: Communications Department, Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. http://www.jrf.org.uk

EDUCATION
(See 177/75)

EMPLOYMENT
(See Also 177/3, 177/77)

177/25 Older workers and options for flexible work; by Wendy Loretto, Sarah Vickerstaff, Phil White, School of Management, University of Edinburgh; School of Sociology, Social Policy and Social Research, University of Kent; Equal Opportunities Commission - EOC. Manchester: Equal Opportunities Commission, 2005, 92 pp (EOC Working paper series, no 31).
The Equal Opportunities Commission (EOC) commissioned this report as part of its General Formal Investigation into part-time and flexible work. The report is based on a comprehensive review of existing literature from government and non-government sources; secondary analysis of data sets, particularly the Labour Force Survey (LFS); and theme building to identify the key issues associated with older workers, gender and flexible employment. The report analyses working patterns and the extent of flexible working among people aged 50+ in Great Britain, and considers their personal factors which affect decisions on whether to continue working, retire or engage in flexible working. The external influences (e.g. employers, benefits and pensions) that create either barriers to or opportunities for flexible working are examined. The report reviews some examples of good practice in employment opportunities in the UK and abroad. The implications of the findings for policy-makers, employers, trade unions and individuals are considered. (RH)
ISBN: 1842061488
From: Research and Resources, EOC, Arndale House, Arndale Centre, Manchester M4 3EQ. Email: info@eoc.org.uk Website: www.eoc.org.uk/research Helpline: 0845 601 5901
Survey of employers' policies, practices and preferences relating to age: a report of research carried out by the National Institute of Economic and Social Research (NIESR) in conjunction with the British Market Research Bureau (BRMB) on behalf of the Department for Work and Pensions and the Department of Trade and Industry; by Hilary Metcalf, Pamela Meadows, National Institute of Economic and Social Research - NIESR; Department for Work and Pensions - DWP; Department of Trade and Industry - DTI. Leeds: Corporate Document Services, 2006, 226 pp (Department for Work and Pensions Research report, no 325; DTI Employment relations research series, no 49).

This survey establishes, prior to implementation of the Employment Equality (Age) Regulations 2006, the extent to which current employment policies and practices have an age dimension. It was based on a representative sample of 2,087 employment establishments in Britain with at least 5 employees, and was conducted between November 2004 and May 2005. To ensure that all policies and practices that might be covered, all types of age-related policies and practices were included in the questionnaire. The report covers: equal opportunities and practices; pay, pensions, sick pay and other benefits; retirement; recruitment; performance appraisal; training; promotion; redundancy; flexible working; and employer attitudes. Employers' knowledge and awareness of the impending legislation is also covered. Overall, age was found to play a direct role in many policies and practices, with young and older people most likely to suffer discrimination in employment. This survey provides a baseline for judging the effects of the forthcoming legislation, allowing changes in employers' policies and attitudes to be tracked over time by future surveys. (RH)

ISBN: 1841239747

From: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. Orderline tel: 0113 399 4040. E-mail: orderline@cds.co.uk Summary available from website: http://www.dwp.gov.uk/asd/

END-OF-LIFE CARE

(See Also 177/10)

The Good Sunset Project: making contact with those close to death; by John Killick, Kate Allan. Journal of Dementia Care, vol 14, no 1, Jan/Feb 2006, pp 22-24.

The Good Sunset Project is being undertaken in partnership with the Hammond Care Group in Australia. In the second of three articles about the project, the authors describe the Getting Through Initiative, which aims to reach individuals with advanced dementia and those close to death. They describe sessions undertaken with four participants, with whom they explored establishing speech communication. They consider the ethical issues, and discuss how staff and relatives might have positive experiences in communicating with people with advanced dementia. (RH)

ISSN: 13518372


Peer education - the sharing of information with people of similar age and background - has been found to be a successful way of raising older people's awareness about health issues. This guide is the result of an 18-month project funded by the Health Foundation. It has been designed to raise awareness about advance care planning - that is, possible future health care options, particularly at the end of life, and expressing preferences. It is intended as a preliminary guide, and its three sections cover: legal and ethical issues; caring and coping; and loss and bereavement. The guide includes case studies, and is designed to be read and discussed in small groups along the lines of workshops, held in Sheffield which is how this project began. (RH)

ISBN: 1845980026

Price: £2.00

From: Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: info@helptheaged.org.uk Website: www.helptheaged.org.uk
EXTRA-CARE HOUSING

177/29
"It's fantastic!": [Extra care housing for disabled people]; by Jim Ledwidge.
Community Care, no 1608, 2 February 2006, pp 36-37.
Extra care housing has been used to give older people independence, but it can also dramatically improve the lives of disabled people. This article supports this assertion, by describing an innovative large supported housing scheme in Bradford, which demonstrates the use of extra care housing for severely disabled people under pension age as an alternative to residential care. The author illustrates how the right environment and support reduces levels of dependency and reduces the need for intensive packages of care. (RH)
ISSN: 03075508

177/30
Opening doors to independence: a longitudinal study exploring the contribution of extra care housing to the care and support of older people with dementia; by Sarah Valelly, Simon Evans, Tina Fear (et al), Housing 21; Housing Corporation; Dementia Voice; Faculty of Health and Social Care, University of the West of England (UWE). London: Housing 21, 2006, 137 pp.
More than 750,000 people in the UK have dementia, and by 2050 this is will rise to 1.8 million. This is a report of 3-year tracking study carried out by Dementia Voice and the University of West of England (UWE), funded by Housing 21 and the Housing Corporation. The aim was to evaluate the contribution that extra care housing can make to the long term care and support of people with dementia; to make recommendations for good practice and assess the limitations of extra care housing; and to capture the views of older people with dementia. The study tracked people with dementia in Housing 21's extra care housing courts. Data was collected on 103 people; and 36 people with dementia were interviewed up to five times from July 2003 to October 2005. This report presents findings on the extra care environment; the health and social care of residents with dementia; and the perspectives of residents and their relatives. Overall, extra care housing is providing a good quality of life for the majority of residents who have dementia, many of whom also have complex health needs. Many older people recognise that, of the housing options available to them, extra care is more suitable in helping them to maintain their independence. A 14-page summary is also available on Housing 21's website. (RH)
Price: £25.00
From: Housing 21, Clifton House, 93-101 Euston Road, London, NW1 2RA.

177/31
Increasingly, government policy on health and social care stresses the value of preventative care. This concept can be ambiguous, ranging from "that little bit of help" enabling a person to continue to live independently, to the support needed to prevent hospital admission or re-admission. Sheltered housing must therefore clearly state that its prime task is to provide preventative care. This report comprises commentaries of contributors' papers, variously representing the perspectives of the Supporting People programme, the EROSH Outcomes Tool, and of residents themselves. A paper by the Convenor, Peter Lloyd, "Preventative care and the role of sheltered/retirement housing" is also available on the Reports section of the Housing LIN website, (http://www.changeagentteam.org.uk/housing). (RH)
Price: £3.00
From: Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

FALLS

177/32
Taking a stand against falls; by Emma Vere-Jones.
Janet Robson, a district nurse team leader for Tameside and Glossop PCT, has won this year's NT Award for devising measures to reduce falls among nursing home residents. This article outlines the problems causing falls that she identified, whether in particular areas in the home, or with
issues such as eyesight, footwear, or the effects of medication. Her guidelines - which have become known as the Robson Model - are being used not only in care homes, but also by district nurses to help people in their own homes. (RH)

From: http://www.nursingtimes.net

FAMILY AND INFORMAL CARE

177/33
Careworn country: [dependence on informal carers]; by Keith Brown, Emma Matthews. Community Care, no 1617, 6 April 2006, pp 34-35.
Informal carers used to plug the gap in the system of state social provision. This article considers the provision of informal care and how it is likely to be affected by changes in population and family structure. It argues that, even with a promotion of actively involved citizens, there is likely to be a significant growth in demand for social care services as the structure of society shifts. This has major implications for the role of social workers and for social policy. (RH)

From: http://www.communitycare.co.uk

177/34
The strength of the bonds of obligation and expectations between generations, the extent of different types of support exchanged between generations, and the impact of filial norms on the exchange of intergenerational support between adult children and older parents are examined. This article reports findings from the 5-country (Norway, England, Germany, Spain and Israel) OASIS study - Old Age and Autonomy: the Role of Service Systems and Inter-generational Family Solidarity - which collected data from representative, age stratified, urban-community samples of about 1,200 respondents in each country. The findings indicate that solidarity is general and considerable, although the strengths of its dimensions vary by country. Most respondents acknowledged some degree of filial obligation, although the proportions were higher in Spain and Israel than in the northern countries, and there was greater variation in the tangible forms than in the expressed norms. Adult children were net providers of support, but older parents provided emotional support and financial help. Most support was provided to unmarried older people with physical function limitations. The effect of filial norms on help provision by adult children was moderate but significant and variable across the five countries, appearing more prescriptive in the south than in the north, where intergenerational exchanges were more open to negotiation. The findings demonstrate that cross-national analyses provide insights into both country-specific factors and the sometimes unexpected similarities between them. (RH)

From: http://www.journals.cambridge.org/jid_ASO

GERONTOLOGY (GENERAL)

177/35
Contributors from Europe and North America look at key issues in the development of critical gerontology. There is a shared belief that mainstream social gerontology has paid insufficient attention to ways in which age and ageing are being transformed by processes of globalisation. This book is in three sections. Section 1 - on the dimensions of critical gerontology - looks variously at the impacts of globalisation, political economy and feminist perspectives, also aspects of modernism. Section 2 is on critical dimensions of medicalisation: ageing and health as cultural products. Chapters consider in turn factors contributing to the "social construction" of later life: "functional ageing" and "functional health"; anti-ageing and empowering older people; and psychiatry and its treatment of dementia of the Alzheimer's type. Contributors to Section 3 - on local, national and global dynamics of age and inequality - explore aspects of cumulative advantage or disadvantage at local, national nd global levels, using qualitative or quantitative methods to do so. A concluding chapter on world population issues gives a broad overview of
demographic change. (RH)
ISBN: 0895033585
Price: $60.00
From: Baywood Publishing Company, Inc., 26 Austin Avenue, PO Box 337, Amityville, NY 11701, USA. E-mail: baywood@baywood.com  Web site: http://baywood.com

HEALTH CARE

(See 177/74)

HEALTH SERVICES

(See Also 177/84, 177/85, 177/95, 177/98, 177/99, 177/100, 177/101)

177/36 Destination unknown: [White Paper series : part four]; by Melanie Henwood. Community Care, no 1612, 2 March 2006, pp 36-37. The White Paper, "Our health, our care, our say " (Cm 6737; TSO, 2006) failed to provide the anticipated elaboration of the nature and dimensions of the seven outcomes in adult services. It is essential that work on outcome definition follows as a matter of urgency. Without clarity there is a risk that those responsible for implementation will be side-tracked by process demands and become mired in a confusion of ends and means to adult care. This article is the fourth in a series examining the White Paper's proposals. (RH) ISSN: 03075508 From: http://www.communitycare.co.uk

177/37 Health must be on board: [White Paper series : part three]; by Andrew Cozens. Community Care, no 1611, 23 February 2006, pp 36-37. Directors of adult social services and directors of public health will be required to assess the need of their community, and to design services that prevent health deterioration and promote independence. This article is the third in a series examining proposals in the White Paper, "Our health, our care, our say " (Cm 6737; TSO, 2006). It looks at how social care services should be shaped to respond to the new agenda and what shifts in approach will be required from practitioners and managers. (RH) ISSN: 03075508 From: http://www.communitycare.co.uk

177/38 Help seeking and barriers to utilisation of medical and health social work services among ageing immigrants to Israel from the former Soviet Union; by Varda Soskolne, Gail K Auslander, Ilana Ben-Shahar. Health & Social Care in the Community, vol 14, no 1, January 2006, pp 74-84. There is a need to reduce difficulties in usage of medical services and to enhance awareness about health social work services among immigrants. This study aimed to examine use made of medical and health social work services among ageing recent and long-term immigrants, also factors related to use of these services. 402 participants recruited from a random community sample of immigrants from the former Soviet Union in Israel aged 55+, living in urban areas were interviewed by telephone. An expanded framework of Anderson's behavioural model was used. Independent variables included predisposing, enabling and need variables; and barriers to, or difficulties encountered during use of services were additional variables. A linear regression model was employed for use made of medical services, and a logistic regression model for use made of social work services. Recent immigrants had similar use rates for medical services, but used more social work services than long-term immigrants. While there were few barriers but numerous difficulties encountered in using medical services, there were barriers but negligible difficulties in using social work services. The findings suggest that different factors are associated with the use of non-discretionary versus discretionary (social work) services. (RH) ISSN: 09660410 From: www.blackwellpublishing.com/hsc

About 17.5 million people living in the UK are living with a long-term condition. Part of the government strategy to improve outcomes for these people was to introduce community matrons (CMs). This article builds on previous research by examining the community matron role across nine primary care trusts (PCTs) where the Evercare model of care has been introduced. (RH)

ISSN: 09547762

From: http://www.nursingtimes.net


The Social Exclusion Unit report "A Sure Start to later life: ending inequalities for older people" (Office of the Deputy Prime Minister, 2006) indicates the government's wish to extend the principles of Sure Start to older people. That report includes the Mayfair Community Centre in Church Stretton, Shropshire as a case study of an existing model of what the SEU has in mind. This article outlines the range of services and activities offered by volunteers at the Centre. The Centre is operated by the Strettons Mayfair Trust, which was formed in 1996. Its aim is to reach out to people living in a rural area who may be isolated; and although open to people of all ages, most are older than 60. (RH)

ISSN: 03075508

From: http://www.communitycare.co.uk


In the final article in a series examining proposals in the White Paper, "Our health, our care, our say" (Cm 6737; TSO, 2006), the author explains the consequences of the proposed closer strategic relationship between primary and social care. Partnerships between social care and primary care have tended to focus on improving joint working between front-line staff. Such partnerships are at least as important today. However, the White Paper's aim of realigning the whole system also demands strong commissioning alliances between local authorities and primary care trusts (PCTs) to shift investment towards interdependence, good health and well-being. (RH)

ISSN: 03075508

From: http://www.communitycare.co.uk

A new ambition for old age: next steps in implementing the National Service Framework for Older People; a report from Professor Ian Philp, Director for Older People, Department of Health; by Ian Philp, Department of Health - DH. London: Department of Health, 20 April 2006, 24 pp (Ref 274287).

The Director for Older People, Department of Health reports on progress to date with the government's ten-year National Service Framework (NSF) for Older People, and sets out the priorities for the second phase. Ten programmes are introduced under three themes: Dignity in care; Joined-up care; and Healthy ageing. The programmes are: dignity in care; dignity at the end of life; stroke services; falls and bone health; mental health in old age; complex needs; urgent care; care records; healthy ageing; and independence, well-being and choice. The report also identifies five key levers for implementing these programmes: leadership; regulation and inspection; public service agreement (PSA) targets; commissioning; and the Care Services Implementation Partnership (CSIP) and other service improvement agencies. More detailed information about the programmes is included in the Next Steps Resource document. (RH)

Price: FOC

From: DH Publications Orderline, PO Box 777, London SE1 6XH. Tel: 0870 155 54 55 E-mail: dh@prolog.uk.com Download document: http://www.dh.gov.uk/assetRoot/04/13/39/47/04133947.pdf


The health and social care White Paper (Our health, our care, our say; Cm 6737) maps out strong commissioning arrangements with the creation of a new lead role: the director of adults' services. It also points to the commissioning by service users themselves. The White Paper is welcome in
confirming the vision of the Green Paper (Independence, well-being and choice; Cm 6499), but has a long way to go in setting out arrangements for implementation. A bridge needs to be formed between government and commissioning authorities to create the capacity for this. Commissioning to deliver the White Paper needs to take place at the strategic level, led by the director of adult social services with new statutory responsibilities and delivered through local area agreements. (RH)
ISSN: 03075508

177/44 Smarter Working in Social and Health care (SWISH): enhancing the quality of life of older people using an "expert system"; by Steve Iliffe, Kalpa Kharicha, Claire Goodman (et al). Quality in Ageing, vol 6, no 4, December 2005, pp 4-11. Successive policy documents concerning older people’s health and well-being have aimed to improve their care, by raising standards and promoting independence. These policies also emphasise the need for research to prevent disability, and reduce admission to hospitals and long-term care settings. This paper reports an evaluation in progress of a health technology approach designed to achieve these objectives. An "expert system" is described that is intended to improve older people's access to health and social care information, to enable service providers to review the health and social care of older people, and to allow planners to assess the needs of whole populations. (RH)
ISSN: 14717794
From: http://www.pavpub.com

HOME CARE
(See Also 177/51, 177/59)

177/45 "What matters is what works"?: how discourses of modernization have both silenced and limited debate on domiciliary care for older people; by Peter Scourfield. Critical Social Policy, vol 26, no 1, issue 86, February 2006, pp 5-30. Policy statements about the care of vulnerable older people repeatedly emphasise the desirability of keeping people at home. An enduring problem in implementing this strategy is the ongoing crisis within the quasi-market in domiciliary care. In 2004, the government announced that it wanted a new vision for adult social care. In such circumstances, it could be argued that, in order to achieve home care services that are stable, flexible and better placed to integrate more effectively with health agencies, local authorities should significantly expand in-house provision. Despite exhortations from ministers to think the unthinkable, such a proposal is "unsayable". This article discusses how discourses of modernisation exclude ideas that imply an expansion of directly provided social care. Such discourses have so much invested in the shedding of what it regards as outmoded "welfarist" baggage, they are blind to proposals that could improve the lives of older, vulnerable citizens. (RH)
ISSN: 02610183
From: http://csp.sagepub.com

177/46 Accidental hypothermia; by Elliott Epstein, Kiran Anna. British Medical Journal, vol 332, no 7543, 25 March 2006, pp 706-709. Hypothermia can be defined as an unintentional fall in core body temperature below 35º Celsius, and older people and people with debilitating disease or malnutrition are at risk. This article should help doctors to understand the condition better. It briefly explains: why temperature homeostasis is important; how hypothermia develops; the predisposing conditions; diagnosis and investigation; management; rewarming strategies; and preventing hypothermia. Healthcare professionals are in a position to advise older people on how to keep warm in winter. (RH)
ISSN: 09598138
From: http://www.bmj.com

177/47 Older persons’ experience of being assessed for and receiving public home help: do they have any influence over it?; by Ann-Christin Janlòv, Ingalill Rahm Hallberg, Kerstin Petersson. Health & Social Care in the Community, vol 14, no 1, January 2006, pp 26-36. This Swedish qualitative study explored 28 older people's experience of participation in and
influence on decisions about public home help or care when undergoing needs assessment and receiving public home help. Data were collected by means of in-depth interviews. A content analysis revealed one overarching category: ‘having to be satisfied, adjust and walk a fine line when balancing between needs and available help’. There were three further principal categories: balancing comfort and guilt - receiving help from the family at the limits of their capacity; ‘a necessary evil’ - balancing feelings and resources against having no choice but to accept; and incorporating the home help into daily life to gain a sense of continuity. The findings indicate that older people have difficulties coping and adapting to their new life situation and have no actual influence over the decisions about their home help. This suggests that attention should be paid to a frail person's mental state, and that the needs assessment and home help officer should to a larger extent focus on individual needs as a whole, and involve and encourage the older person to strengthen his or her sense of being in control. (RH)

ISSN: 09660410
From: www.blackwellpublishing.com/hsc

HOSPITAL SERVICES
(See Also 177/84)

177/48 Improving the hospital experience for older people; by Joanne Odell, Joy Holbrook, Ruth Sander. Nursing Times, vol 102, no 2, 10 January 2006, pp 23-24. The National Service Framework for Older People (NSF) states that older people's care in hospital should be delivered by staff who have the right set of skills to meet their needs. This article outlines an innovative project to enhance the knowledge and skills of acute care ward staff in Portsmouth Hospitals NHS Trust. The project aims to: develop champions in clinical areas; use action learning and critical companionship to develop care; engage senior management and other stakeholders; involve older people; and develop systems to maintain and disseminate good care. (RH)
ISSN: 09547762
From: http://www.nursingtimes.net

HOUSING
(See Also 177/96)

177/49 Housing with care for later life: a literature review; by Karen Croucher, Leslie Hicks, Karen Jackson, Joseph Rowntree Foundation - JRF; University of York. York: Joseph Rowntree Foundation - JRF, 2006, 142 pp. Housing with care includes a variety of concepts within its remit: very sheltered housing, supported housing, integrated care, extra care, assisted living, as well as various forms of retirement communities. Reflecting the current emphasis on developing evidence-based policy and practice, this review focuses on the empirical literature that reports primary research and service evaluations. Researchers at the University of York identify different models of housing with care both in the UK and elsewhere. They consider themes that emerged from the more theoretical (and mainly American) studies. They draw together the evidence from 11 British studies, and structure their review around these themes: promoting independence; health, well-being and quality of life; social integration; home for life; housing with care as an alternative to residential care; cost-effectiveness; and affordability. A concluding chapter presents the main messages for provider organisations. Appendices include search strategies, and the databases and websites searched. (RH)
ISBN: 1859354378
Price: £9.95
From: York Publishing Services, 64 Hallfield Road, Laythorpe, York YO31 7ZQ. (ISBN-13: 9781859354377) PDF download available - http://www.jrf.org.uk Alternative formats such as large print, Braille, audio tape or disk available from Communications Department, Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.
177/50 Model village: [a virtual care village for Cumbria]; by Graham Hopkins. Community Care, no 1622, 11 May 2006, pp 38-39. Peter Woodhouse, strategic development officer for Cumbria, explains to the author the ideas behind a new virtual care village that has received planning permission. All the residents of this village - with a planned population of 500 by 2008 - will already have received care services. While installing and running "telecare" services and alarm systems might seem expensive, the costs are favourable when compared to care home fees, added to which people would prefer to live in their own homes. (RH) ISSN: 03075508 From: http://www.communitycare.co.uk

177/51 Small things matter: the key role of handyperson services; by Care & Repair England. Nottingham: Care & Repair England, 2006, 37 pp. The current provision of small repair and minor adaptation services being provided by the voluntary and community sector in England is examined. This report includes the main findings from research undertaken to establish the range and characteristics of such provision - mainly through home improvement agencies, local Age Concern groups, and Help the Aged. This research was funded by the Lloyds TSB Foundation, hact (Housing Associations Charitable Trust) and the Housing Learning & Improvement Network (Housing LIN), part of the Care Services Improvement Partnership (CSIP) at the Department of Health (DH). In addition to this overview report, a web-based bank of more detailed practical information is being developed on the Care & Repair website (click on 'Handyperson'). (RH) From: Care & Repair England, The Renewal Trust Business Centre, 3 Hawksworth Street, Nottingham NG3 2EG. Email: info@careandrepair-england.org.uk Website: www.careandrepair-england.org.uk

INCOME MAINTENANCE

(See Also 177/23)

177/52 The material resources and well-being of older people; by Vanessa Burholt, Gill Windle, Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, 2006, 54 pp. The risk of poverty among older people in the UK is about three to four times higher than the typical risk of poverty in Europe. Moreover, people aged 75+ rely more on benefits as a source of income and get a smaller proportion of their income from occupational pensions and investments than younger pensioners. This study uses data for 987 people aged 65+ from the British sample of Ageing Well: a European Study of Adult Well-Being (ESAW), to construct measures of material resources and financial satisfaction. The new measures are used to: compare the material resources and financial satisfaction of different groups of older people; and identify the key determinants of poverty in old age. The findings indicate that women, people living alone, people who are widowed, divorced or separated, in poor health, with lower education, and living in deprived neighbourhoods tend to have low levels of material resources or income in old age. These matters should be of concern to policy makers. (RH) ISBN: 185935422X Price: £13.95 (+£2.00 p&p) From: York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. (ISBN-13: 9781859354223) PDF download available - http://www.jrf.org.uk Alternative formats such as large print, Braille, audio tape or disk available from Communications Department, Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.

177/53 Retirement resources: the role of housing assets and bequests; by Karen Rowlingson, Stephen McKay. Quality in Ageing, vol 6, no 4, December 2005, pp 12-23. There is currently a major debate about the future of pension provision in Britain. Much of that debate concerns levels and sources of income. But there is also growing interest in the role that assets and bequests might play in raising people's living standards in later life. Based on a major new survey of attitudes to inheritance and assets, this article argues that assets will not fill the pension gap for those on lowest incomes as these groups are at least likely to have assets; and
among those that do, there is more support for the concept of preserving assets by inheritance than among other more affluent groups. Bequests will also fail to help those most in need of a windfall, as receipt of inheritances currently benefits the most affluent groups. However, among those with assets, there does seem to be more interest in liquidating assets - including housing assets - than previous research has suggested. Some people, therefore, are prepared to liquidate their assets in later life to supplement their income. (RH)

ISSN: 14717794
From: http://www.pavpub.com

INFORMATION AND COMMUNICATION TECHNOLOGY

177/54
Mobile phones; by Claudine McCreadie.
The author dispels the myth that getting older means an increasing inability to adopt new technologies. Based on findings from her recent research about older people and mobile phones, she explains about the factors that play a part in why some people have them (24% of people aged 75+ in 2003) and many do not. (RH)
ISSN: 13663666

INSPECTION AND REGULATION

(See Also 177/92)

177/55
When will the inspector call?: [CSCI change of policy with regard to frequency of inspections]; by David Behan, Gary FitzGerald.
Community Care, no 1618, 13 April 2006, pp 32-33.
In March 2006, the Commission for Social Care Inspection (CSCI) announced that the best providers of adult care services will be fully inspected once every three years. Currently, all providers are scrutinised once or twice a year. David Behan, chief inspector of CSCI, explains the reasons for this change. Gary Fitzgerald, Chief Executive, Action on Elder Abuse (AEA), examines the pitfalls, commenting that this policy has its origins in "Inspecting for improvement: developing a customer focused approach" (Prime Minister's Office for Public Service, 2003). He suggests that the proposed regime of inspection will not inspire public confidence. (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

INTERGENERATIONAL ISSUES

177/56
Intergenerational practice, as described here, aims to bring people together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations, and contributes to building more cohesive communities. 27 case studies of projects in England and Wales covering the whole spectrum of intergenerational practice are presented. Each entry includes contact details. (RH)
ISBN: 0907875327
From: Download from: www.centreforip.org.uk Centre for Intergenerational Practice, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Hartshill, Stoke-on-Trent ST4 7JL.
E-mail: generations@bjf.org.uk

INTERMEDIATE CARE

177/57
Buying Time 1: a prospective, controlled trial of a joint health/social care residential rehabilitation unit for older people on discharge from hospital; by Tessa Trappes-Lomax, Annie Ellis, Mary Fox (et al).
Health & Social Care in the Community, vol 14, no 1, January 2006, pp 49-62.
The effectiveness of a joint NHS/social services rehabilitation unit (a form of intermediate care)
for older people on discharge from 10 community hospitals in Devon, is compared with "usual" community services. Criteria for inclusion in the "Buying Time" study were those aged 55+ and 'likely to benefit from a short-term rehabilitation programme' ('potential to improve', 'realistic and achievable goals', and 'motivation to participate'). 94 people were recruited to the intervention, 6 weeks in a rehabilitation unit where they worked to regain their independence with care/rehabilitation assistants and occupational therapists. 112 controls went home with the health and social care services they would usually receive. Mean age was 81.8 years. The main outcome measure was prevention of institutionalisation assessed by the number of days from baseline interview to admission to residential/nursing home care or death ('survival at home time'). Secondary outcome measures were time to hospital re-admission over 12 months, quality of life and coping ability. There were no significant differences between the groups on any outcome measure. However, attending the unit was associated with earlier hospital discharge. The median (and interquartile range) number of days in hospital for the intervention group was 27 (20, 40), and for the control group 35 (22, 47). Overall, these findings suggest a stay in the rehabilitation unit is no more effective than "usual" care at diverting people from hospital or long-term care. (RH)

ISSN: 09660410
From: www.blackwellpublishing.com/hsc

Intermediate care is a set of services which cross existing boundaries, providing care for people who no longer require accommodation and support in hospital, yet are still in need of temporary care to get back to normal living. The author describes facilities provided by Hanover Housing Association's Up & About intermediate care service at two locations. Poppyfields at St Neots in Cambridgeshire, an extracare scheme, works in partnership with Huntingdonshire Primary Care Trust (PCT). Cotswold and the Vale Primary Care Trust has developed 16 sheltered housing units providing intermediate care at St Peter's Court in Cirencester, Gloucestershire, Hanover's first Up & About facility. (RH)
ISSN: 13663666

INTERNATIONAL AND COMPARATIVE
(See Also 177/1, 177/2, 177/12, 177/18, 177/34, 177/38, 177/68, 177/102)

Over the last few decades in Sweden, the proportion of older people living in the community who receive public home-help services has decreased, even amongst the oldest old. At the same time, older people's abilities in activities of daily living (ADLs) have on average improved. This paper reports a study of the changes between 1988/89 and 2002/03 in the allocation and utilisation of public home help services and in the support and care needs of older people (aged 65+). The aims were to analyse whether the reduction in the percentage of home-help recipients could be explained by a reduction in needs among the older population, whether public home-help services had been targeted at people with greater needs, and whether informal care had increased. It was confirmed that over the 15 years, even after taking needs factors in account, the likelihood of an older person being a recipient of public home care had declined. Home help had clearly been targeted at more needy individuals. Among older women (aged 80+) with limitations in the activities of daily living and who lived alone, the proportion receiving home help declined and the proportion receiving informal care increased, which suggests that informal care had substituted for formal care. The findings indicate that the Swedish welfare system had reduced its commitment to the support of older people who require less intensive care and that, in effect, the concept of need for public social care support had been redefined. (KJ/RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO
Care revolutions in the making?: a comparison of cash-for-care programmes in four European countries; by Virpi Timonen, Janet Convery, Suzanne Cahill.
Cash-for-care programmes offer cash payments or vouchers instead of services-in-kind for older people. This article describes and evaluates four such programmes, namely, Home-Care Grants in Ireland, Direct Payments in the UK (England), Service Vouchers in Finland, and Personal Budgets in The Netherlands. The purpose is to raise understanding of the background and reasons for the introduction of cash-for-care programmes and their impact on the countries' care regimes. It is argued that while the motives for introducing cash-for-care programmes in the four countries are similar - namely to promote choice and autonomy, to plug gaps in existing provision, to create jobs, and to promote efficiency cost savings and domiciliary care - the relative importance of these goals varies. Current programmes have comparatively modest coverage as compared with direct service provision; and they provide no more than an optional, supplementary source of care in three of the studied countries. Such schemes have not radically transformed the care regimes in Finland, the Netherlands or the UK. In Ireland, however, the restricted availability of cash-for-care might shift care provision significantly towards private provision and financing.

A comparative case study of care systems for frail elderly people: Germany, Spain, France, Italy, United Kingdom and Sweden; by Blanche Le Bihan, Claude Martin.
Comparative studies of European social policies toward frail older people typically focus on the systems and their implications. The study presented in this article was conducted in 2001 in six European countries (Germany, Spain, France, Italy, United Kingdom and Sweden), and aimed to compare the rights of individuals within the different care systems. The methodology used is a case study approach, which draws on a series of situations of dependent older people. The analysis thus focuses on public authorities' responses - the care packages, which determine the type of care required and the user's financial contribution - in each of the six countries in relation to the situations of frail older people. As local variations are important, specific local authorities were chosen in each of the countries. This approach gives interesting concrete elements on the services and financial help which can be given to frail older people, but it also enables a precise understanding of the national care systems organised in the different countries and the main difficulties encountered by public authorities in facing particular problems of caring for frail older people.

The differential impact of social-pension income on household poverty alleviation in three South African ethnic groups; by Monica Ferreira.
Social pension programmes play a key role in old-age support systems through their ability to reach vulnerable older people. Under apartheid, South Africa's citizens were categorised according to race; and those classified as Asian, black and coloured (mixed race) had less access to the opportunities and resources available to whites. Parity in the amount of social pension benefits paid to beneficiaries in the different ethnic categories was achieved only in 1993. The Non-Contributory Pensions and Poverty Study (NCPPS), conducted in Brazil and South Africa, has assessed the impact of social pension income on household poverty alleviation. This paper draws on the findings of the South African survey to analyse the differential effects of pension income on household poverty alleviation in three ethnic-geographic groups. Its data show a pervasive social and economic gradient of disadvantage among the groups, with rural-black households being most disadvantaged, urban-coloured households least disadvantaged, and urban-black households in between. The impact of pension income on household poverty alleviation has a similar pattern. The paper concludes with a discussion of the implications of the findings for the achievement of equity through informed policy interventions.
This article examines whether the different welfare states of the European Union (EU) member states engender different policy preferences and attitudes among the population. More specifically, it investigates variations in attitudes towards population ageing and pension reforms, and variations in people's retirement age preferences and expectations. It is shown that despite the different cultures and welfare traditions in the old and new member states, there are commonalities in people's value orientations and views about population ageing, not least that the vast majority are pessimistic about the consequences. In both Eastern and Western Europe, the most popular options for pensions reform are to raise taxes and to extend working life; few favour reducing pension benefits. Despite these similarities, there are also marked attitudinal differences. Eastern Europeans rely more on their children for old-age care and are much more in favour of a pension structure in which benefits depend on the number of children. On personal expectations and preferences for retirement, it is shown that both Eastern and Western Europeans expect to retire from the labour market at an older age than the current actual retirement age. (KJ/RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

Older age policy initiatives that have had a bearing on countries in Southeast Asia and the work of UN-ESCAP are summarised: the World Health Assemblies in Vienna (1982) and Madrid (2002); the Macao Declaration and Plan of Action on Ageing for Asia and the Pacific (1998); and the International Year of Older Persons (1999). Some of the general, social and economic implications of rapid population ageing in countries represented by ASEAN (the Association of Southeast Asian Nations) are discussed. Finally, there is a brief introduction to the World Health Organization's 2005 WHO Guidance on Health Programme. (RH)
ISSN: 10165177
From: http://www.inia.org.mt

Non-state care homes for older people as third sector organisations in China's transitional welfare economy; by Linda Wong, Tang Jun.
The rise of the third sector has been a global welfare phenomenon. In China, the growth of social organisations has been a remarkable feature of the transitional society after the adoption of market reforms and political liberalisation. As the state retreats from direct provision of welfare services, the third sector has been hailed as a new growth point for social care in China. This article begins with a brief review of the theory of the third sector, non-governmental organisations (NGOs) and private markets in the production of welfare, which are then discussed in the specific context of China. The authors appraise the factors that contribute to the surge of non-state residential provision for older people. The final part of this article presents empirical findings on the development, key features and authority relations of 137 non-state care homes in three cities. It is argued that their uniqueness marks them out as a special form of third sector organisation in China's welfare economy. (RH)
ISSN: 00472794
From: http://www.journals.cambridge.org

Positive ageing: the views of middle-aged and older adults in Hong Kong; by Alice Ming-Lin Chong, Sik-Hung Ng, Jean Woo (et al).
Ageing and Society, vol 26, part 2, March 2006, pp 243-266.
Life expectancy has been increasing rapidly in many parts of the world, including Hong Kong. A longer life can be welcome as an opportunity to fulfil unmet aspirations or to take up new challenges and projects, but it may also be a burden, especially for individuals who are unprepared. A pressing question for longer-life societies is: how many older people live their longer lives to the full positively? This article report a qualitative study of Hong Kong Chinese
people's views about "positive ageing", as expressed and discussed in 15 focus groups of middle-aged and older people. Two themes emerged. First, the participants considered that positive ageing should comprise good health, having a positive life attitude, active engagement with an activity or with society, feeling supported by their families and friends, being financially secure, and living in a place with emotional ties. Second, several key factors that enable positive ageing were identified, namely: adopting a healthy lifestyle; thinking positively; promoting family and inter-personal relationships; and building up financial resources. The views of the participants about "positive ageing" are compared with those reported from western studies and the policy implications are considered. (RH)

ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

LONELINESS

177/67
The extent and nature of loneliness in later life does not show a consistent relationship with gender. As part of the Economic and Social Research Council (ESRC) Growing Older (GO) Programme, this study investigated whether there are differences in the nature and extent of loneliness among older men and women in contemporary Britain. Loneliness was measured using a self-report 4-point scale and a special module commissioned from the Office for National Statistics (ONS) Omnibus Survey comprising a nationally representative sample of 999 people aged 65+ living in the community (response rate 77%). About half of the sample (53%) were women. Compared with men, the women were significantly more likely to be widowed, live alone, and have direct contact with friends and relatives. Preliminary analysis identified statistically significant differences between men's and women's self-reported loneliness (and changes over the previous decade). Ordered logistic regression indicated that gender was no longer independently associated with loneliness once confounding influences of marital status, age and living arrangements were excluded. The overall self-reported prevalence of severe loneliness shows little difference between men and women, challenging the stereotype that loneliness is a specifically female experience. (RH)
ISSN: 14747464
From: http://www.journals.cambridge.org

LONG TERM CARE

177/68
Future long-term care expenditure in Germany, Spain, Italy and the United Kingdom; by Adelina Comas-Herrera, Raphael Wittenberg, Joan Costa-Font (et al).
Findings are reported from the European Study of Long-Term Care Expenditure, a European Union (EU) funded study. This has investigated factors that are likely to affect future expenditure on long-term care services in Germany, Spain, Italy and the United Kingdom (UK). Macro-simulation (or cell-based) models were used to make comparable projections based on a set of common assumptions. The paper investigates the sensitivity of these projections to variant assumptions about future trends in life expectancy, trends in functional dependency, trends in the future availability of informal care, and trends in unit costs of services. The project also investigated the sensitivity of the projections to other factors, such as the trends in the structure of formal long-term care services and patterns of provision. The projected future demand for long-term care services for older people is sensitive to assumptions about the future number of older people, the prevalence of dependency, and the availability of informal care. For the purposes of planning, it is important to recognise the considerable uncertainty about future levels of long-term care expenditure. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO
Lessons from the funding of long-term care in Scotland; by Joseph Rowntree Foundation - JRF.:
The University of Stirling has carried out research into the funding and operation of long-term care policy in Scotland with wider lessons for the UK as a whole, focusing particularly on the policy of free personal and nursing care. This project sought views from clients and those involved in implementing the policy, using both interviews and focus discussion groups, which are outlined in these findings. The extent to which the policy is replicable and sustainable is also discussed. The full report, "Financial care models in Scotland and the UK" by David Bell and Alison Bowes, is published by the Joseph Rowntree Foundation (JRF). (RH)
ISSN: 09583084
Price: FOC
Full report (ISBN 1859354394) £17.95 (+£2.00 p&p) from York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ.

In "Facing the costs of long-term care" (JRF, 2005) Donald Hirsch tested four key ideas with people of differing ages across the UK, including carers, people with disabilities, and people from minority ethnic groups. This summary draws together recently tested consumer views on policy proposals to pay for long-term care being explored by the Joseph Rowntree Foundation (JRF). The four key ideas are: standardised assessment and means testing of domiciliary services; repackaging Attendance Allowance into a standardised care payment; increasing support of informal carers through resources and/or formal help; and the potential of equity release schemes to pay for domiciliary care costs. The main points from discussions are: the state is still expected to play a major role in funding long-term care in the future; people are receptive to change; the notion that thrift is penalised is eroding confidence in the social welfare system; any changes must be perceived to be equitable; an apparent willingness to accept tax increases; and a need to promote wider acceptance that individuals must contribute more. (RH)
Price: FOC
From: Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.

MEDICAL ISSUES
(See 177/46)
MENTAL HEALTH SERVICES
(See Also 177/73)
Survey of the provision of psychological therapies for older people; by Ceri Evans, Paul Reynolds.
The current state of provision of psychological therapies for older people in Wales is assessed. A postal questionnaire was sent to all consultant old age psychiatrists in Wales, requesting information regarding the consultant's community mental health team (CMHT) and access to psychological therapies. A response rate of 85% was achieved: 45% of CMHTs had team members providing psychological therapy, 31% of CMHTs had access to psychological therapy via the team and also generic services. The estimated average wait for generic services was 29 weeks. There was no access to psychological therapies for 17% of CMHTs. Thus, in some parts of Wales there is limited or no access to psychological therapies via mental health services for older people. This may represent an important unmet need. Long-term strategies, taking into account recruitment and retention, training and new ways of of working, need to be implemented. (RH)
ISSN: 09556036
From: http://pb.rcpsych.org
NURSING

177/72

What is putting nurses off working with older people? The author asks whether a change of image is needed to attract more nurses to this specialist area. The article's context is the five years since the National Service Framework for Older People (NSF) was published, noting the initiatives that have been since introduced which may be attract nurses to this area of care. (RH)
ISSN: 09547762
From: http://www.nursingtimes.net

OLDER OFFENDERS

177/73

The number of older prisoners is increasing, and evidence suggests that there is significant unidentified psychiatric morbidity in this group. Currently, older prisoners who have psychiatric needs are managed either by the generic forensic psychiatric services or generic old age psychiatry services. The authors discuss the extent of the problem and how these patients can be better identified. (RH)
ISSN: 0268201X
From: http://www.gerimed.co.uk

PALLIATIVE CARE

177/74

From a review of the literature published between 1985 and 1999, it is evident that the importance and maintenance of oral health for patients with cancer is recognised as an integral part of basic nursing care. Yet from practical observation in the hospital environment together with reviewing the published literature, it is clear there appears to be limited evidence of regular assessment of the mouth or implementation of oral protocols on the ward. Articles selected highlight the lack of published research; and their results raise concern about the lack of training and education for nurses in the assessment of mouth care, as well as the need to rationalise the assessment tools used in the ward or hospice. While it was recognised in palliative care that a multiprofessional approach was beneficial, in practice this did not appear to apply to mouth care with a few notable exceptions. This review highlights inconsistencies in both the knowledge of mouth care and its implementation by nursing staff. The importance of establishing protocols and setting standards of care was also indicated in this review. It is clear that without effective assessment of the mouth, the appropriate implementation of care will not be delivered. (RH)
ISSN: 14664240
From: http://rsh.sagepub.com

177/75

The nature and extent of existing palliative care education activities is considered. Following a literature review, the authors gathered data by questionnaires, face-to-face and telephone interviews, visiting palliative care teams across the Mount Vernon Cancer Network in Middlesex, and attendance at conferences, meetings and exhibitions. A comprehensive needs assessment for palliative care education within nursing homes was completed. The findings revealed inequalities across the network with regard to educational provision and uptake of palliative care services. Recruitment of overseas staff and a transient workforce were both cited as major difficulties in implementing educational programmes. Funding of these programmes and responsibility for providing the education remain unclear. A real and urgent need for palliative care training was found across the network area, with scope for a variety of approaches to be adopted in delivering training. (RH)
ISSN: 09547762
From: http://www.nursingtimes.net
PENSIONS AND BENEFITS

(See Also 177/9, 177/62, 177/63)

The National Pensioners Convention (NPC) has been actively involved in highlighting problems associated with the Government's decision to pay the state pension and other benefits directly into bank, building society or post office accounts. By way of clarifying issues and offering further advice for those affected by the new system of payment, this briefing paper outlines discussions and correspondence between the NPC and the Department for Work and Pensions (DWP). (RH)
From: National Pensioners Convention, 19-23 Ironmonger Row, London EC1V 3QN.
http://www.npcuk.org.uk

This report presents findings from a survey of employers carried out in 2005 to gather information on the extent and nature of pension provision among private sector organisations in Great Britain, and to collect details of recent or forthcoming changes in pension provision. This research, carried out by BMRB and Stephen McKay from the University of Bristol, is the sixth in a series of surveys commissioned by the Department for Work and Pensions (DWP) to examine employers' pension provision. It involved telephone interviews with about 2,400 private sector organisations.
The questionnaire used in 2005 is based on those used in previous surveys, making it possible to track trends over time. The report covers occupational, stakeholder and group personal pensions (GPPs), and issues such as the effects of contribution levels on membership of workplace-based pension schemes.
The report is also available from the DWP website (http://www.dwp.gov.uk/asd). (KJ/RH)
ISBN: 1841239801
From: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. Email: orderline@cds.co.uk
Website: http://www.cds.co.uk

The Pensions Commission was appointed in December 2002 with the remit of keeping under review the adequacy of private pension saving in the UK, and advising of appropriate policy changes. This report is intended as the Commission's final contribution to the public debate on the recommendations made in its Second report, including results obtained from the National Pensions Day on 18 March 2006. The report reiterates the key features of the integrated package proposed, and comments further on the employer contribution and the design of the National Pension Saving Scheme (NPSS). The report is arranged in seven sections: pension trends; state system reform; automatic enrolment into NPSS; compulsory employer contributions; ensuring low cost savings - the NPSS; an integrated package (objectives and trade-offs); and securing and maintaining consensus. (RH)
From: Pensions Commission, 4th floor, Adelphi, 1-11 John Adam Street, London WC2N 6HT.
Available at: http://www.pensionscommission.org.uk

The Department for Work and Pensions (DWP) commissioned this research, to understand customers' experience of, attitudes towards and satisfaction with the service they received from
the Pension Service. This was a follow-up to the baseline survey carried out in 2003 and identifies key trends. It is important to note that there have been significant changes to the Pension Service since the last survey, in particular, no customers’ cases are now held by Social Security Offices, and there has been a significant expansion of the local service. This report presents findings, based on interviews conducted with a representative sample of current pensioners, future pensioners, and their representatives who had recent contact with the Pension Service. The report examines: the customer profile; the Service’s overall performance; customers' awareness and knowledge of the Service; methods of communication, and how the Service responded to customers with specific service needs; the customer’s most recent enquiry and how this was handled; signposting and transferring enquiries to other organisations; and appeals and complaints. Appendices include a technical report on the methodology used in compiling this report. (RH)

ISBN: 1841239828
From: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. Email: orderline@cds.co.uk Website: www.cds.co.uk

177/80 Pension trends: No 1, 2005 edition; by Pauline Penneck, Di Lewis (eds), Office for National Statistics - ONS. 2005 ed Basingstoke: Palgrave Macmillan, 2005, 96 pp. "Pension trends" brings together key statistics from a number of government departments and other organisations to illustrate the economic and social issues that shape trends in pension provision in the UK. This first edition highlights the core issues and provides pointers to sources that provide more detail. It is arranged in 13 chapters, beginning with an overview of pensions legislation. Other chapters comprise commentaries, charts and statistics on: population change; the labour market and retirement; pensioner income and expenditure; attitudes to retirement and pension planning; state pension entitlements and second tier pension provision; private pension scheme membership; pension contributions; individual pension wealth; non-pension wealth; employer pension provision; pension fund investment; and pensions and the National Accounts. Aimed at a wide audience including current and future pensioners, the publication is also available at www.statistics.gov.uk/pensiontrends as an interactive PDF containing links to Excel spreadsheets giving data for all tables and figures. (RH)
ISBN: 1403997365
Price: £40.00
From: Palgrave Macmillan, Brunel Road, Houndmills, Basingstoke, Hampshire RG21 6XS. tel: 01256 302794
http://www.palgrave.com/ons ONS enquiries e-mail: pensionsanalysis@ons.gsi.gov.uk

177/81 The priorities of pension reform: creating a consensus for modern social insurance; by National Pensioners Convention - NPC. London: National Pensioners Convention - NPC, 2006, 21 pp. The reluctance of government and the Pensions Commission to make any immediate changes to the state pension system is commented on in this publication which pre-dates the White Paper. The National Pensioners Convention (NPC) states that an immediate aim of pension reform should be preventing poverty among all older people, by ending the need for widespread means-testing, and re-affirming the role of the state in providing decent pension income in retirement. Also covered are: the principles of reform; the changes needed to improve the state first- and second-tier pension provision; retirement and the state pension age (SPA); and national insurance (NI). A final section comprises recommendations, with associated time scales, costs and implications. (RH)
ISBN: 1902245199
From: National Pensioners Convention, 19-23 Ironmonger Row, London EC1V 3QN.
http://www.npceuk.org.uk

The word "decumulation" is gaining widespread acceptance throughout the pensions industry, and in pensions terms, is the opposite of accumulation. It refers to the conversion of pension assets accumulated during working life into a pension income to be spent during retired life. This paper
highlights the need to extend the range of decumulation options available to ordinary consumers, for example how we manage savings and finances in the transitions between work and different phases of retirement for our own well-being. It calls for new thinking from the different experts involved in the provision of financial services. This submission has been produced by the Actuarial Profession as a response to the Pensions Commission 2nd report, as a contribution to the National Pensions Debate, and as input to government policy in advance of the forthcoming Pensions White Paper. (RH)

From: Dr Martin Hewitt, Programme Manager, Social Policy, The Actuarial Profession, Staple Inn Hall, High Holborn, London WC1V 7QJ. E-mail: martin.hewitt@actuaries.org.uk
http://www.actuaries.org.uk

This White Paper sets the direction for the long-term future of pensions and retirement savings. Its publication follows a National Pensions Debate (February 2005-March 2006) and reports by the Pensions Commission (chaired by Adair Turner). The reforms aim to meet five key tests that strike a balance between the responsibilities of the state, the individual and the employer: personal responsibility, fairness, simplicity, affordability and sustainability. An executive summary outlines progress to date and the reasons why reform is needed. Chapters 1-4 discuss the main themes: encouraging and enabling private pension saving; strengthening existing provision; providing a foundation for private saving; and extending working life in an ageing society. Annexes provide evidence on: measuring undersaving for retirement; improving fairness in the state pension system; the extent and impact of demographic and societal change; and outcomes under the reformed system. They also include a glossary and list of DWP commissioned research. Comments are sought by 11 September 2006, and Chapter 5 outlines the consultation arrangements. (RH)
ISBN: 0101684126
Price: £27.00
From: TSO, PO Box 29, Norwich, NR3 1GN. www.tso.co.uk/bookshop

PERSON CENTRED CARE

Recent policy developments across the UK highlight the importance of a more "person-centred" approach within community care services. Within this framework, however, little attention has been given to the role played by frontline workers in limiting, facilitating or delivering on these policy imperatives. Understanding the roles and experiences of frontline workers is crucial in understanding how frontline care can be made more "person-centred". The authors look at the barriers to and opportunities for promoting person-centred care for older people, disabled people, and people from minority ethnic groups. Their report examines perceptions of frontline work: what the most important qualities of frontline workers are, and the value attached to care work. Organisational and systemic issues that influence the experiences of frontline workers and service users are explored. Recommendations are made on further research to fill gaps in knowledge, while policy recommendations include a scoping study, a national mapping exercise, consideration of training needs for this group of staff, and more consultation with care workers and users alike on practice issues. (RH)
ISBN: 1859354513
Price: £9.95
From: York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. (ISBN-13: 9781859354513) PDF download available - http://www.jrf.org.uk Alternative formats such as large print, Braille, audio tape or disk available from Communications Department, Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.
POVERTY

(See 177/52)

QUALITY OF LIFE

177/85
This is the first collaborative in-depth review of the National Service Framework for Older People (NSF). It has been carried out by the Healthcare Commission, the Audit Commission and the Commission for Social Care Inspection (CSCI), who have worked in partnership to assess NHS and local authorities progress in meeting the standards set out in the NSF. Evidence comes from a number of sources, including 10 local authorities and 40 NHS trusts covering Buckinghamshire, Brent, Liverpool, Redcar & Cleveland, Greenwich, Leicester, Dorset, Portsmouth, Wiltshire, and Medway. The report identifies these themes by which to review progress on the eight NSF standards: tackling ageism and promoting equality; involving older people; designing and delivering services around older people; stroke; falls; mental health; and living well in later life. Key areas for further action are: tackling discrimination; ensuring that all standards of the NSF are met; and strengthening working in partnership. Appendix B lists policy changes and influences since the NSF was originally published. (RH) A summary report (28 pp) (http://www.healthcarecommission.org.uk/assetRoot/04/02/46/43/04024643.pdf) is also available. (RH)
ISBN: 184562881X
From: Download: http://www.healthcarecommission.org.uk/assetRoot/04/02/46/42/04024642.pdf
Healthcare Commission, Finsbury Tower, 103-105 Bunhill Row, London EC1Y 8TG. Available in other formats and languages on request: 0845 601 3012.

RELIGION AND SPIRITUALITY

177/86
This monograph has been co-published simultaneously as the Journal of Gerontological Social Work, vol 44, nos 1/2 and 3, 2005, and comprises papers by American scholars. It is arranged in three sections, the first entitled "Research", and including: religion and coping; religiosity as a mediator of caregiver well-being; religious congregations as social services providers; and attitudes about religion and spirituality in gerontological social work practice. The second section, on "Practice" variously looks at spirituality from the points of view of caregivers, care management, and social work in long-term care. The third section comprises six articles on the theme, "Search for meaning", covering: autobiography as a spiritual practice; dreams in midlife and old age; pastoral counselling; dementia care as spiritual formation; caregiving; and wisdom and spirituality. (RH)
ISBN: 0789024993
Price: pbk $39.95; hbk 69 95
From : The Haworth Press Inc., 10 Alice Street, Binghamton, NY 13904-1580, USA.
http://www.HaworthPress.com

177/87
The latest research on ageing, spirituality and religion is outlined. The main study reported is based on the experiences and anecdotes gathered in interviews of frail older nursing home residents and the staff who care for them. A developmental approach to spirituality in ageing is considered, along with the assessment of spiritual needs. Two of the spiritual tasks of ageing - the search for ultimate meaning and how we respond to life's meaning - are described. Other chapters cover: spiritual reminiscence; mental health and dementia in later life; worship and the use of ritual among older people, including the context of multi-faith and multicultural societies; vulnerability and transcendence; living with chronic physical health problems; relationship and
intimacy needs; grief, death and dying; and ethical issues which are also considered throughout.
The final chapter brings together the components of the model of spiritual growth and care in the
fourth age of life. (RH)
ISBN: 1843102315
Price: £17.99
From : Jessica Kingsley Publishers, 116 Pentonville Road, London N1 9JB. Email:
post@jkp.com Website: www.jkp.com

REMINISCENCE

177/88
City memories: reminiscence as creative therapy; by Chris Joyce.
This paper describes and evaluates a recent innovative project in Liverpool that brought together
the skills and creative vision of a major national museums group in partnership with the housing
action trust (HAT). "City Memories" created opportunities for older people to take part in
reminiscence activities at the museums and in a large extra care housing setting in the community.
Training was provided for community leaders, care home managers and care workers, in order to
help them to apply some of the ideas in their own work. The project looked at outcomes for older
people who participated in terms of increased stimulus and sense of well-being. There was a
special focus on those with conditions such as stroke and dementia. It is hoped that such work will
inspire others to put therapeutic reminiscence into practice in their own settings and
circumstances, and that it may be possible at some stage to conduct a more systematic study to
test the benefits of this approach in relation to measurable health gains. (RH)
ISSN: 14717794
From : http://www.pavpub.com

177/89
Reminiscence and recall: a practical guide to reminiscence work; by Faith Gibson, Age Concern
handbook series).
Health and social care professionals have come to realise the value of reminiscence for
educational, recreational, social and therapeutic purposes. This book was first published in 1994
as "Reminiscence and recall: a guide to good practice". It is written from a developmental life
course perspective, and provides practical advice and guidance on how to plan and run a
reminiscence group and on reminiscence with individuals. It includes special approaches required
for work with people with dementia or depression, physical and learning disabilities, and people
from minority ethnic groups. Also included are new materials on: intergenerational work;
reminiscence with terminally ill and bereaved children and adults; building partnerships with
libraries, museums and community arts organisations; promoting social inclusion through
reminiscence; and staff training. (RH)
ISBN: 0862424119
Price: £14.99
From : Age Concern England, 1268 London Road, London SW16 4ER.

RESEARCH

177/90
Older people as researchers: evaluating a participative project; by Roger Clough, Bert Green,
Barbara Hawkes (et al), Joseph Rowntree Foundation - JRF, Eskrigge Social Research. York:
Social research is a worthwhile field of activity and increasingly older people's experiences are
sought: they are experts. This report reviews a research project into older people's views on
services which involved older people themselves as researchers. It follows their experiences as
they step beyond the traditional role of consultee to that of interviewer and researcher. The report
is an account of learning by doing - of discovering what research is and how to do it - and both
the practicalities and the pitfalls of undertaking research are set out. The experiences of older
researchers are placed in the wider context of policy development. A companion report, "How
older people become researchers", by Mary Leamy and Roger Clough, looks at the development
of a course in research methods for older people. (RH)
ISBN: 1859354335
RESIDENTIAL AND NURSING HOME CARE

(See Also 177/20, 177/84)

177/91 Achieving a fair price for care [for independent care homes]: the scope for using costing models: report from an English Community Care Association seminar; by English Community Care Association - ECCA. London: English Community Care Association, [2005], 9 pp.
The ECCA seminar on using independent models to cost a fair price for care was held on 6 April 2005, and was chaired and facilitated by independent health and social care consultant Melanie Henwood. The seminar had the following objectives: to share experiences of using "cost of care" exercises; to consider the strengths and weaknesses of such methodologies; and to discuss ways in which further development of cos of care approaches might be supported. This report includes two case studies - Leeds and Lancashire - where "Fair Price for Care" models have been used; and discussions of the key advantages and disadvantages or challenges of using costing models. (RH)
ISBN: 0955108802
Price: £20.00
From: English Community Care Association, 145 Cannon Street, London EC4N 5BQ. E-mail: info@ecca.org.uk Website: www.ecca.org.uk

177/92 Care standards legislation handbook; by David Pearl, Care Standards Tribunal. 4th ed Bristol: Jordans, 2006, 592 pp.
This 4th edition brings together the texts (without annotation) of the Care Standards Act 2000 (as amended by subsequent legislation), and related statutes and statutory instruments (SIs) with regard to the regulatory system (and appeal processes) for England and Wales set up under the Act. Any sections or sub-sections which have been repealed have been omitted, while included are prospective amendments or repeals. The forthcoming registration by the General Social Care Council (GSCC) of social care workers has prompted inclusion of the General Social Care Council (Conduct) Rules 2003 and the General Social Care Council (Registration) Rules 2005. The introduction notes that decisions of the Care Standards Tribunal are placed on its website (www.carestandardstribunal.gov.uk), where there is also a digest of cases. Decisions are also reported on the British and Irish Legal Information website (www.bailii.org/ew/cases/EWCST). (RH)
ISBN: 184661016X
Price: £35.00 (p+p £4)
From: Jordan Publishing Ltd, 21 St Thomas Street, Bristol BS1 6JS.

The 2001 Census identified some 5.2 million people as carers in the UK, of whom just over 1 million care for their spouse at home. There is, however, a group of people who do not fit the standard definition of carers - the partners of people in care homes. While practical involvement in physical care may have ended (not always the case), the physical, emotional and financial effects can still be as strong. This study looks at the views and experiences of more than 100 people who have partners in care homes, based initially on analysis of calls received at the Relatives & Residents Association, and subsequently questionnaires covering general matters and finance. The report covers issues around the fairness or otherwise of paying for a place in a care home, and who qualifies for financial help. The authors make recommendations to the government, the Commission for Social Care Inspection (CSCI), local authorities, care homes, and relatives and residents. The report was produced with financial support from the Department of Health (DH) (RH)
ISBN: 190021606X
A workshop to maintain residents' mobility and activity; by Maayken van den Berg, Karen Lett, Cath Sackley.
Nursing Times, vol 102, no 14, 4 April 2006, pp 32-34.
Care homes have poor access to physiotherapy and occupational therapy, and consequently staff can be unaware of basic rehabilitation techniques. This article describes the design, content and delivery of a workshop that was devised to enable staff to learn simple strategies to improve and maintain residents' mobility and activity. Aspects covered are: risks of inactivity; walking aids, wheelchairs and other equipment; positioning, sitting and standing; and preventing falls. (RH)
ISSN: 09547762
From: http://www.nursingtimes.net

The factors influencing access to health and social care in the farming communities of County Down, Northern Ireland; by Deirdre Heenan.
Against a background of limited previous research, this paper examines access to health and social care among older people in the farming communities of County Down, Northern Ireland. In-depth interviews were conducted with 45 people aged 60+ living on family farms, to collect information about health care needs and service use and adequacy. In addition, interviews with service providers provided information on their perceptions of farming communities' needs. The findings indicate that there are specific rural dimensions of access to services, and that there was substantial unmet need among the respondents. For many farming families, using services is determined by much more than being able to reach them physically. The lack of reliable information, the culture of stoicism, and the absence of appropriate services impeded obtaining effective support. Recent health care policies and strategies have stressed the importance of developing local services that are responsive to need in consultation with service users, but there is worryingly little evidence that this has occurred. If effective outcomes are to be achieved, policies must recognise the specific characteristics of rural populations and be sensitive to farming families' needs, attitudes and expectations. The current lack of understanding about the distinct needs of these communities exacerbates the isolation and marginalisation of already vulnerable older people. (KJ/RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

In 2000, the Joseph Rowntree Foundation (JRF) launched a major study on rural Britain, "Exclusive countryside", prepared by Mark Shucksmith. As a follow-up to that work, the JRF set up the Rural Housing Policy Forum in 2005 to consider the issues around the problem of shortages of affordable housing in rural areas and to suggest remedies. This summary outlines the solutions, for example, better use of the existing housing stock, and the need to allocate sites for affordable housing in larger rural settlements. It also recommends removal of an unintended loophole in the Commonhold and Leasehold Reform Act 2003. (RH)
Price: FOC
Rural disadvantage: quality of life and disadvantage amongst older people: a pilot study; by Thomas Scharf, Bernadette Bartram, Centre for Social Gerontology, Keele University; Commission for Rural Communities. London: Commission for Rural Communities, 2006, 69 pp. Evidence on different forms of disadvantage experienced by older people living in diverse rural settings was gathered over a 3-month period. Following screening interviews with 91 people aged 60+ living in different types of rural communities in the Midlands and North West of England, in-depth interviews were conducted with a sub-sample of 21 people who were identified as being disadvantaged in at least one aspect of their lives. This report sets the rural context, noting the existing evidence on low income, social isolation and access to services. It summarises the key features of the methodological design (appendices include the screening questionnaire and interview schedule). Research findings focus on four different forms of disadvantage: material resources, area change, social relationships, and access. Appendix A comprises eight case studies illustrating four types of disadvantage identified in the interview transcripts: lack of access to material resources; inadequate or poor quality social relations; lack of access to services and amenities; and disadvantage linked to rural community change. Policy implications lessons for future studies on disadvantaged rural older people are considered. (RH)

From: Commission for Rural Communities, 20th Floor, Portland House, Stag Place, London SW1E 5RS. Website: www.ruralcommunities.gov.uk

SEXUALITY

Overcoming barriers for older gay men in the use of health services: a qualitative study of growing older, sexuality and health; by David Clover.
While noting that a cultural change is needed in service provision to older people and their carers, the National Service Framework for Older People (NSF) does not acknowledge needs in terms of sexuality or sexual difference. This qualitative study explores older gay men's experiences in relation to health, gaps in health and social care services, and how primary care services could better meet older gay men's needs or concerns. A variety of recruitment methods were used to identify 10 gay men aged between 60 and 70 living in Greater London. These men were interviewed in their own homes using a semi-structured interview schedule. Each participant was given a pseudonym. Analysis of the interviews revealed that older gay men may view health services with caution, having experiences of, expectations of, discrimination of poorer quality care or treatment. Older gay men may not disclose their sexuality to health providers, and may find some needs unmet, particularly around areas of partner and other social relationships. Policy makers and practitioners must deal with the current silence around ageing and sexuality in health services policy. Services need to consider whether they are best responding to the needs of older gay men in their communities, ensure cultural competence, and make efforts to demonstrate that they are seen to be open to or accepting of gay men, and to recognise the particular needs that older gay men may experience. (RH)
ISSN: 00178969
From: http://www.rsmpress.co.uk/pub/hej.htm

SOCIAL CARE

How much will it cost to provide social care for older people in 20 years time; and what funding should be in place to ensure that money is available to support the high quality outcomes sought? The King's Fund commissioned this Review of social care for older people in England, which was led by Sir Derek Wantless. The Review team examined social and health care policy, services and spending as well as demographic, social and technological trends, to develop a model for

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estimating the level of need over the next 20 years. This main report is in three parts. Part 1, Evidence and trends, assesses the state of care today in terms of the policy context, the needs of an ageing population, the shortcomings of the social care system, who pays what, the workforce, informal care, and new services and technology. Part 2, Resource requirements, presents projections of future demands and costs to produce new models of care based on various scenarios. Part 3, Funding options, sets out some general principles, suggests a variety of funding systems, and assesses the most promising options. A final chapter brings together the main recommendations. (RH)

ISBN: 1857175441
Price: £25.00
From: King's Fund Publications, 11-13 Cavendish Square, London W1N 6AN. E-mail: publications@kingsfund.org.uk
Also available at: http://www.kingsfund.org.uk/publications

177/100
Will Wanless inject hope?: [Wanless Social Care Review report]; by Janet Snell.
Community Care, no 1618, 13 April 2006, pp 34-35.
The report of the Wanless Social Care Review, "Securing good care for older people: taking a long-term view" (King's Fund, 2006) has been greatly welcomed by the social care sector in England. Bearing in mind that the government has not acted on recommendations of the Royal Commission on Long-Term Care, the author of this article wonders how much of what this new report recommends will be adopted. Sir Derek Wanless points to the insufficient funding of social care: not only can more funding be afforded, we also have no choice but to pay. (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

177/101
The £30bn question: [Wanless Social Care Review report]; by Jon Glasby.
Community Care, no 1618, 13 April 2006, pp 36-37.
The author examines the funding and policy implications of the Wanless Social Care Review, "Securing good care for older people: taking a long-term view" (King's Fund, 2006). He believes that the Review's partnership model is social care's best hope for future funding, and that policymakers must take its recommendations on board and make them work. (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

SOCIAL EXCLUSION

177/102
An economic and social evaluation of the Senior Help Line in Ireland; by Eamon O'Shea.
The Senior Help Line in Ireland provides a confidential telephone listening service for socially excluded older people and is operated by older volunteers. The service has grown rapidly in recent years and is highly regarded. This paper provides a systematic examination and assessment of the service from the perspectives of costs, outcomes and best practice. The study uses personal interviews, focus groups and postal questionnaires to elicit information about the service and its impact on volunteers and callers. The Senior Help Line has made a significant contribution to the health and well-being of older people in Ireland at relatively low cost. The service demonstrates the positive effects of volunteering for older people, and the value and effectiveness of peer-to-peer communication for vulnerable callers. The help-line is a model project in terms of accountability and best practice, but requires additional resources, particularly for publicity and training. It needs to become a branded national service for vulnerable older people to meet the level and need for a service of this kind. The help-line also needs to be linked more formally to existing health and social care provision for older people, to become part of a holistic model of healthy ageing. For the service to reach its manifest potential, the efforts of volunteers need to be supported by higher and sustained levels of public spending, through more widespread and substantial public-voluntary partnership arrangements. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO
SOCIAL POLICY AND THEORY

(See Also 177/42)

The Age Agenda is Age Concern England's annual report on public policy on ageing and older people. It outlines significant policy developments and trends over the last year and looks ahead to likely developments in the next. The focus is on UK government policy on: income; equality and human rights; health and health care; social care; housing; work and learning; local communities and local services; and transport. Many of these themes are covered in a set of 25 key indicators, first used in 2005, to demonstrate the impact of public policy on older people. Progress against each indicator is assessed. (KJ/RH)
ISBN: 190362939X
Price: £10.00
From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER. www.ageconcern.org.uk

177/104 Policies for the aged in the 21st century: more 'structured dependency' or the realisation of human rights?; by Peter Townsend.
Peter Townsend's paper, "The structured dependency of the elderly: creation of social policy in the twentieth century" was published in Ageing & Society, vol 1, 1981. In recognition of the author's contribution to social gerontology, he presented this paper at the annual meeting of the British Society of Gerontology (BSG) at the University of Keele in July 2005, an event also marking the 25th anniversary of this journal. During the final decades of the 20th century, older people were perceived and treated - according to much research evidence - as more dependent than they really were or needed to be, hence the idea of a "structured dependency". This paper argues that the release and implementation during after the Second World War of collective liberal egalitarian values, expressed in many countries in international statements on human rights, had a big impact on the design of public services, including those for older people. If the claims for older people in the welfare state of 50 years ago were exaggerated, as we can now safely conclude, the claims for older people today are even more exaggerated - at a time of heightened emphasis on individual rights and individual market powers. The various problems of "structured dependency" persist, and seem set to grow in many parts of the world. Human rights offer a framework of rigorous analysis and anti-discriminatory work. Success depends on good operational measurement, and the incorporation of international and national institutions and policies that reflect those rights. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

STATISTICS

(See 177/20)
There are now hundreds of courses, conferences, training events, workshops etc which are held throughout the year about older age issues.
A fuller listing is available on AgeInfo CD-ROM/Web.

Summer 2006

23rd Annual McMaster Summer Institute on Gerontology
This summer institute on gerontology provides an intensive theoretical and practical learning opportunity in the field of ageing. The programme consists of lectures, workshops, panel presentations, small group discussions and case presentations.
Organised by: McMaster Centre for Gerontological Studies
Venue: McMaster University
Location: Hamilton, Ontario, Canada
Details: 1280 Main Street West, KTH-226, Hamilton, Ontario, L8S 4M4
Tel: (905) 525-9140 ext.24449, Fax: (905) 525 4198

1 June 2006

Commissioning - Getting it right for everyone
To identify the challenges facing commissioners and to determine how these might best be addressed using examples of current good practice.
Speakers: Chair: Martin Green (Chief Executive, ECCA).
Organised by: Pavilion and English Community Car Association (ECCA)
Venue: The Manchester Conference Centre, University of Manchester
Location: Manchester, England
Details: Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL
Tel: 0870 890 1080, Fax: 0870 890 1081

6 June 2006

Older Volunteers : Opportunity of a Lifetime Conference
Organised by: Help the Aged
Venue: Central Hall Westminster
Location: London, England
Details: Tina Chignoli, Help the Aged, 207-221 Pentonville Road, London, N1 9UZ
Tel: +44 (0)20 7843 1560

8 June 2006

Housing for an Ageing Population - the Agenda for the Future
The ageing of the population affects every aspect of society - this is particularly true of housing. 30% of all UK households are currently headed by someone aged 60 or over and this is set to increase. This conference will look ahead to how to meet the housing challenges and opportunities presented by our ageing society, as well as making improvements to the housing and support available today.
Speakers: Chair: Helena Herklots. Malcolm Dean (The Guardian); Sue Adams (Director, Care & Repair England); Jane Minter (Housing 21); David Gardiner (BGOP); John Galvin (Director, EAC) and others.
Organised by: HOPDEV organised by FOUNDATIONS
Venue: Royal College of Surgeons, London
Location: London, England
Details: S Collins, FOUNDATIONS, Bleaklow House, Howard Town Mill, Glossop, Derbyshire, SK13 8HT
Tel: +44 (0)1457 891909, The Housing and Older People Development Group (HOPDEV) is the group charged with advising Government on housing and older people. Its members include housing providers, older people, voluntary organisations, local authorities, and other experts on housing and related issues.<br>, Baroness Andrews OBE, Parliamentary Secretary at the Office of the Deputy Prime Minister, will open this conference with the keynote address on Government policy on housing and older people. The Government has announced that it will be developing a new housing strategy for older people, and delegates will have the opportunity to hear about the latest thinking on this.<br>, HOPDEV will launch two new reports at the conference. The conference will conclude with an expert panel debating the major challenges in
hiring, and delegates will be invited to ask questions.

8 June 2006

**Medicine for an Ageing Population**

*Organised by:* Royal College of Physicians (RCP) London and British Geriatrics Society (BGS)

*Venue:* Royal College of Physicians, Regent's Park

*Location:* London, England

*Details:* The Conference Department, RCP, 11 St Andrews Place, Regent's Park, London, NW1 4LE

_Tel:_ +44 (0)20 7935 1174 ext 300/252/436, _Fax:_ +44 (0)20 7224 0719

9 June 2006

**Getting PPI (Patient & Public Involvement) working - practical approaches for improved care and "mirror meetings"**

The Healthcare Commission process requires healthcare organisations to report on how they have been achieving (or not) the core standards from Standards for Better Health. This workshop looks at the requirements of the patient focus domain and examines various approaches of PPI. Three approaches, with examples of better practice, will be highlighted and discussed.

*Speakers:* Caroline Powell - Picker Institute Europe; Maria Mul - Academic Medical Centre Amsterdam, the Netherlands; Gary Brough - Bloomsbury Patient Representative; Gonny Pol, Facilitator

*Organised by:* Institute of Quality Assurance - IQA

*Venue:* IQA Headquarters, London

*Location:* London, England

*Details:* 12 Grosvenor Crescent, London , SW1X 7EE

_Tel:_ +44 (0)20 7245 6722, _Fax:_ +44 (0)20 7245 6788

14-15 June 2006

**Evidence-based practice in dementia care**

Expert speakers; debate and discussion; in-depth workshops; networking opportunities.

*Organised by:* Dementia Care

*Venue:* Marsham Court Hotel

*Location:* Birmingham, England

*Details:* Hawker Conferences, Hawker Publications, 2nd Floor, Culvert House, Culvert Road, London, SW11 5DH

_Tel:_ +44 (0)20 7720 2108, _Fax:_ +44 (0)20 7493 3023

15 June 2006

**Diet and Depression : A national conference on nutritional interventions for tackling depression**

Depression has increased twenty-fold since 1945 and is predicted to be the second highest cause of the global disease burden by 2020. The costs to the individual sufferer, society and economy are profound.

*Organised by:* Pavilion

*Venue:* ORT House Conference Centre

*Location:* London, England

*Details:* Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL

_Tel:_ 0870 890 1080, _Fax:_ 0870 890 1081, This national conference examines the links between diet, nutrition and mental and emotional health. It will focus on the latest research into effects of diet and environment on mild to moderate depression, and provides practical solutions by leading award-winning clinicians on how to manage symptoms within an integrated, holistic framework.

15 June 2006

**World Elder Abuse Awareness Day**

The day will focus efforts across the globe to raise awareness of elder abuse in a coordinated fashion for the first time.

*Organised by:* International Network for the Prevention of Elder Abuse (INPEA)

16 June 2006

**7th Annual Care Homes and Dementia Conference**

*Speakers:* Chair: Caroline Baker (Care Services Director, Four Seasons Health Care)

*Organised by:* Dementia Care

*Venue:* Marsham Court Hotel

*Location:* Birmingham, England

*Details:* Hawker Conferences, Hawker Publications, 2nd Floor, Culvert House, Culvert Road, London, SW11 5DH

_Tel:_ +44 (0)20 7720 2108, _Fax:_ +44 (0)20 7493 3023

16 June 2006

**8th National Memory Clinic Conference**

*Organised by:* Sponsored by Eisai Ltd/Pfizer Ltd

*Venue:* Edinburgh Corn Exchange

*Location:* Edinburgh, Scotland

_Tel:_ +44 (0)115 937 5073, _Fax:_ +44 (0)115 937 1281
19 June 2006

**Ageing Well - Option or Aspiration?**

*Organised by:* British Society of Gerontology (BSG) Scotland  
*Venue:* Govan Mbeki Building, Glasgow  
*Caledonian University*  
*Location:* Glasgow, Scotland  
*Details:* Susan Tester (Coordinator)

19-20 June 2006

**International Prisoner Health: Achieving international standards in prison health care**

*Organised by:* Taylor & Francis Events  
*Venue:* Radisson SAS  
*Location:* Tallinn, Estonia  
*Details:* Gemma Capindale, The Bookings Department, Informa UK Ltd, PO Box 406, West Byfleet, KT14 6WL  
*Tel:* +44 (0)20 7017 5520, *Fax:* +44 (0)20 7017 4745

19 June 2006

**Safeguarding Adults: A conference for Adult Protection Co-ordinators**

*Speakers:* Chair: Professor Hilary Brown (Canterbury Christ Church University)  
*Organised by:* Pavilion  
*Venue:* ORT House Conference Team  
*Location:* London, England  
*Details:* Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL  
*Tel:* 0870 890 1080, *Fax:* 0870 890 1081

19-21 June 2006

**The Gathering 2006: Scotland's Voluntary Sector Fair**

*Organised by:* SCVO supported by The Royal Bank of Scotland and The Herald  
*Venue:* Scottish Exhibition and Conference Centre, Glasgow

19-21 June 2006

**Young and Old in a Changing Europe: 14th European Social Services Conference**

*Organised by:* European Social Services Conferences  
*Location:* Vienna, Austria  
*Details:* European Social Network, 19 Park Lodge, Dyke Road, Brighton, BN3 6NF  
*Tel:* +44 (0)1273 549 817, *Fax:* +44 (0)1273 549 317

22 June 2006

**Three Sector Summit: Solution for User-Led Services**

This Network was founded by ACEVO, CBI and the National Consumer Council in early 2006 to enable public services to be more driven by citizens and consumers. This first summit will explore the role for providers - particularly those in the third sector - in delivering user-led public services.  
*Keynote address:* Rt. Hon Tony Blair MP, Prime Minister.  
*Organised by:* Future Services Network  
*Venue:* London (tba)  
*Location:* London, England  
*Details:* Neil Stewart Associates, PO Box 39976, 2nd Floor, 1 Benjamin Street, London EC1M 5YT  
*Tel:* +44 (0)20 7324 4330, *Fax:* +44 (0)20 7490 8830, The Network's website holds further details about this conference and other developments: (www.futureservicesnetwork.org)

26-29 June 2006

**Connecting Intergenerational Communities through Creative Exchange**

This conference will extend the aims of ICIP through workshops and activities that provide a practical approach to intergenerational exchange within creative community environments.  
*Organised by:* International Consortium for Intergenerational Programmes - ICIP  
*Venue:* Conference Centre, Victoria University  
*Location:* Melbourne, Australia  
*Details:* Susan Feldman, Director, Alma Unit for Research on Ageing, Victoria University, Melbourne, Victoria, Australia  
*Tel:* +61 3 9919 7249, *Fax:* +61 3 9919 7199

26-27 June 2006

**Improving Care for Older People 2006**

Fourth annual conference examining the latest developments in improving services and care delivery for older people - with a practical focus on four key issues: Delivering person centred care; Working in partnership; Improving patient safety for older people; Developing nurse led care in older people. Keynote presentations from: Gordon Lishman, Professor John Young and Professor Peter Crome.  
*Speakers:* Gillian Crosby (CPA Director) and others.  
*Organised by:* Healthcare Events  
*Venue:* Savoy Place, London  
*Location:* central London, England  
*Details:* 2 Acre Road, Kingston, Surrey, KT2 6EF
26 June 2006

**Medicine and Me : Dementia - the early stages**
A half-day conference. Four sessions: Overview; Treatment and Management; Access to Care and Support; Panel Discussion.
*Organised by:* Royal Society of Medicine (RSM) and Alzheimer's Society
*Venue:* North Hall, RSM
*Location:* London, England
*Details:* Tori Bennett, Academic Department, Royal Society of Medicine, 1 Wimpole Street, London, W1G 0AE
*Tel:* +44 (0)171 290 2987, *Fax:* +44 (0)171 290 2989

29 June 2006

**European Conference on Social Exclusion**
This meeting is the first day of the European Conference on Social Exclusion and Poverty Among Older People which is part of a AGE’s transnational project. The participants will be from 7 partner countries (Greece, Germany, Lithuania, Czech Republic, UK, France and Ireland) as well as from 25 members states. The representatives will present the findings of work in their countries. We have also invited speakers from DWP and Social Exclusion Unit.
*Speakers:* general
*Organised by:* AGE
*Location:* central London, England
*Details:* Kinga Bujalska, Team Co-ordinator, European and International Unit, Age Concern England
*Tel:* +44 (0)20 8765 7717, *Fax:* +44 (0)20 8679 6727

30 June 2006

**Celebrating Changes in the Care of Older People**
This seminar is the first in a series to be organised through an innovative partnership between the Institute, Broadening Choices for Older People and the Adults and Communities Directorate, Birmingham City Council. Chaired by Councillor Sue Anderson and Peter Hay, Adults and Communities directorate. There will be 3 workshops on: Local area agreements; The role of assistive technology in providing support; Developing standards in long term care.
*Speakers:* include Jon Glasby (University of Birmingham).
*Organised by:* Institute of Ageing and Health (IAH) - West Midlands
*Venue:* Birmingham Medical Institute
*Location:* Birmingham, England
*Details:* Jeanette Lane, Institute of Ageing and Health - West Midlands, Moseley Hall Hospital, Alcester Road, Moseley, Birmingham, B13 8JL
*Tel:* +44 (0)121 449 8360, *Fax:* +44 (0)121 442 3663

3 July 2006

**Care of Older People : three co-located conferences**
Three co-located conferences: Long Term Care of Older People; Nursing for the Care of Older People; Managing the Uncertainty for Care of Older People
*Speakers:* Seamus Breen (DH); Simon Conroy (University of Nottingham); Dr Keith Harkins (Whthenshawe Hospital) and others.
*Organised by:* SBK Healthcare
*Venue:* Piccadilly Jarvis Hotel
*Location:* Manchester, England
*Tel:* +44 (0)1622 870 129, *Fax:* +44 (0)1622 331 083

4 July 2006

**Direct Payments**
*Organised by:* Carers UK Training
*Venue:* London
*Location:* Central London, England
*Details:* Carers Training Unit, Carers UK, 20-25 Glasshouse Yard, London, EC1A 4JT
*Tel:* +44 (0)20 7566 7632, *Fax:* +44 (0)20 7490 8824

4 July 2006

**Real Lives : Real Choices. Ethics & Decision-making in Palliative Care**
*Organised by:* National Council for Palliative Care
*Venue:* London tba
*Location:* London, England
*Details:* Philipa Casbon, 25 Mereland Road, Didcot, Oxon, OX11 8AT
*Tel:* +44 (0)1235 512384, *Fax:* +44 (0)1235 512384

5-7 July 2006

**PSIGE Annual Conference : Equality and Diversity in the Third Age**
Choice of workshops on one day and two days of four parallel academic streams.
*Speakers:* Keynote speakers: Prof. Simon Biggs, Prof. Sara Arber.
*Organised by:* PSIGE - Psychologists' Special Interest Group Working with Older People
*Venue:* University of Sussex
*Location:* Brighton, England
Fifth Leveson Lecture - "Thinking the Unthinkable: ten years on"
Lecture will be given by Frank Field, MP Birkenhead. What was the phrase 'thinking the unthinkable' meant to convey? Was it merely more of New Labour's spin? Or was it meant to be the beginnings of a radical welfare reform programme? In this lecture Frank Field looks at how well the Government has done in welfare reform at a time of a booming economy and a strong fiscal balance. The lecture is free but spaces are limited. It will be followed by a drinks reception.

Organised by: Leveson Centre for the Study of Ageing, Spirituality and Social Policy
Venue: St Mary's Church, Temple Balsall
Location: Solihull, England
Details: Temple House, Fen End Road, Temple Balsall, Knowle, Solihull, B93 0AN
Tel: +44 (0)1564 780222, Fax: +44 (0)1564 778432

Policy & Politics second Conference : Reconnecting Policy & Politics
'Re reconnecting Policy and Politics' is the main theme of the conference with
Organised by: Policy & Politics
Venue: Kingsdown Conference Centre
Location: Brighton, England, sub-themes:
'Inclusivity in policy and policy-making', 'Evidence, knowledge and power', 'Social or territorial justice' and 'Neoliberalism and economisation of policy'.
Details: Ms Elaine Allenby-Parker

Fourth Annual Older People's Assembly : Living Longer, Living Better
Distinguished keynote speakers including Ken Livingstone; and a choice of workshops.
Organised by: London Older People's Strategies Group (LOPSG)
Venue: City Hall, South Bank, London
Location: Central London, England
Details: Anna Roberts, Greater London Authority, City Hall, The Queen's Walk, London, SE1 2AA
Tel: +44 (0)20 7785 3870

Care Quality 2006 : post Modernisation
The IQA Health and Social Care Quality Group 2006 annual conference.
Speakers: Chairmen: Frank Steer MBE (IQA) and Dr Andrew Vallence-Owen (BUPA Group), with numerous speakers.
Organised by: Pavilion and IQA Health and Social Care Quality
Venue: Imperial College
Location: London, England
Details: Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL
Tel: 0870 890 1080, Fax: 0870 890 1081

The Single Assessment Process : Ongoing Implementation and the Implications of CAF
Keynote address: "SAP & Common Assessment Framework in the Wider Policy Context" by Craig Muir, (Director, Older People and Disability Care Services Directorate, Department of Health). Chair: Richard Humphries, Chief Executive, Care Services Improvement Partnership. Speakers include: Jan Hoogewerf, (Project Director, National e-SAP, NHS Connecting For Health); Keith Wilson, (Adviser, Institute of Healthy Ageing); and others.
Two streams in the afternoon: a Case Study of e-SAP with Karen Banks, SAP Project Manager, Sunderland Teaching PCT and Pauline Hobson, Modern Matron & Business Change Lead Sunderland Teaching PCT; or, a Common Assessment Framework panel session with three Panellists and Panel Chair, Gillian Crosby, CPA Director.
Speakers: Chair - Richard Humphries, Chief Executive, Care Services Improvement Partnership.
Organised by: Capita Conferences in association with Centre for Policy on Ageing
Venue: central London (tba)
Location: central London, England
Details: 17 Rochester Row, London, SW1P 1LA
Tel: +44 (0)20 7808 5252, Fax: +44 (0)870 165 8989

Living before dying : contemporary issues at the end of life
Location: Manchester, England
Details: John Costello
Email: john.costello@manchester.ac.uk
14-22 July 2006

**Advanced Health Leadership Forum: an international program to rethink health policy and health systems change**

A further conference is planned on the same topic during January 2007 in San Francisco, USA.

**Organised by:** University of California, Berkeley  
**Venue:** Universitat Pompeu Fabra, Barcelona  
**Location:** Barcelona, Spain  
**Details:** Meg A Kellogg, Program Administrator, School of Public Health, 140 Earl Warren Hall, Dean's Office, Berkeley, CA 94720-7360, USA

15-20 July 2006

**10th International Conference on Alzheimer's Disease and Related Disorders, presented by the Alzheimer's Association**

This is the world's leading forum on dementia research. The conference brings together more than 5000 leading experts and researchers. Presentations cover the entire spectrum of dementia research including etiology, pathology, treatment and prevention of the disease.

**Organised by:** Alzheimer's Association  
**Venue:** Centro de Convenciones  
**Location:** Madrid, Spain  
**Details:** Conference Service Team, 225 N. Michigan Ave., Fl. 17, Chicago, IL 60601-7633, USA  
**Tel:** +1 (312) 335 5790

18 July 2006

**One day regional conference on the older workforce**

A free one day regional conference on the older workforce in the South East, to be held at the University of Surrey in Guildford on Tuesday 18th July.

**Organised by:** CROW, University of Surrey  
**Location:** Guildford, Surrey, The event is to mark the completion of CROW’s three year contract with the South East England Development Agency (SEEDA), and the Centre’s move to the National Institute of Adult Continuing Education (NIACE) in August 2006. We aim to use the day to take stock of what we have learned, to invite key colleagues to reflect on the work, and explore what needs to be done next in the South East and more widely. Conference details, and the online application form, can be found on our website. Closing date for applications: 22 June 2006.  
**Details:** Alan Smith

18-20 July 2006


**Organised by:** Social Policy Association (SPA)  
**Venue:** University of Birmingham  
**Location:** Birmingham, England  
**Details:** SPA Conference Office, Institute of Applied Social Studies, University of Birmingham, Edgbaston, Birmingham, B15 2TT

19 July 2006

**Age, Advocacy and Citizenship - Older People's Advocacy Alliance (UK) Conference**

A national conference to present the findings of the OPAAL national development project, with an opportunity to contribute to the final report. Key speaker: Katie Ghose, Director (British Institute of Human Rights).  
**Organised by:** OPAAL (UK)  
**Venue:** Paragon Hotel  
**Location:** Birmingham, England  
**Details:** Jackie Robinson, OPAAL (UK), Parkfield House, 64 Princes Road, Hartshill, Stoke-on-Trent, ST4 7JL  
**Tel:** +44 (0)1736 740991 or mobile, : 07976 069390

July 2006

**Celebrating Age: An international conference, exhibition & cultural festival**

**Organised by:** Organised by Brighton & Hove City Council; Better Government for Older People (BGOP) in collaboration with the Department for Work and Pensions and partner organisations.  
**Venue:** Brighton  
**Location:** Brighton, East Sussex  
**Details:** Paul Martin or Donna Close  
**Tel:** +44 (0)1273 295045/292008

25-26 July 2006

**AEA International Conference: Later life learning - fit for purpose?**

The aim of the conference on later life learning is to bring together academics, practitioners and older people in a meaningful and mutually beneficial way in order to:  
**Organised by:** Association for Education and Ageing - AEA In association with: Institute for Employment Studies, University of Sussex; National Institute of Adult Continuing Education  
'Celebrating Age' - Brighton Festival and Conference
**Venue**: Brighton Conference Centre  
**Location**: Brighton, Sussex, England  
**Details**: Jo Walker, Education Centre, Cathedral, Guildford, GU2 UP  
**Fax**: +44 (0)1483 450 424, Hear about research and other forms of evidence about the benefits of learning in later life, Interact with the material presented and with each other to build on ‘the case’ for later life learning, and how it could be presented, Hear the voice of older people concerning their experience of learning, as a reality check on theory and practice, and to consider the impact of policy and practice on learners.

25-26 July 2006

**Later life learning - fit for purpose**  
The aims of this conference are to explore whose purposes older adult learning currently serves, and to enable everyone involved in it, to communicate better for the benefit of older learners.  
**Organised by**: NIACE  
**Venue**: The Brighton Centre, Kings Road  
**Location**: Brighton, England  
**Details**: Gurjit Kaur, NIACE Conferences and Courses Office, Renaissance House, 20 Princess Road West, Leicester, LE1 6TP  
**Tel**: +44 (0)116 204 2833, **Fax**: +44 (0)116 254 8368

18-19 August 2006

**16th Annual CME Conference: Caring for the Frail Elderly**  
**Organised by**: School of Medicine, Office of Rural Health Programs, Continuing Medical Education (CME), University of Missouri-Columbia  
**Venue**: Holiday Inn Select Executive Center  
**Location**: Columbia, MO, USA  
**Details**: Shirley Walters, Office of Continuing Education and Extension, 2401 Lemone Industrial Blvd, DC345.00, Columbia MO 65212, USA  
**Tel**: 573/882-0366, **Fax**: 573/882-5666

20 August 2006

**Capital Age Festival**  
Afternoon festival 2.00 pm to 6.00 pm.  
**Organised by**: London Older People's Strategies Group (LOPSG) together with the Mayor of London  
**Venue**: South Bank, London  
**Location**: Central London, England  
**Details**: Anna Roberts, Greater London Authority, City Hall, The Queen's Walk, London, SE1 2AA  
**Tel**: +44 (0)20 7785 3870

6-7 September 2006

**INVOLVE 5th National Conference: People in Research**  
A unique forum for people who are interested in public involvement in research and development to debate current practice, future challenges and opportunities.  
**Organised by**: INVOLVE (formerly: Consumers in NHS Research) supported by the Dept of Health  
**Venue**: De Havilland Campus, University of Hertfordshire  
**Location**: Hatfield, Herts, England  
**Details**: Professional Briefings, Registration Dept, 37 Star Street, Ware, Herts, SG12 7AA  
**Tel**: +44 (0)1920 487672, **Fax**: +44 (0)1920 462730

7-9 September 2006

**British Society of Gerontology Conference 2006 - The Ageing Jigsaw: Interdisciplinary approaches to old age**  
**Organised by**: British Society of Gerontology (BSG) hosted by the University of Wales, Bangor  
**Location**: Bangor, Wales  
**Details**: Becky Stanyard, BSG 2006 Conference Administrator, CSPRD, Institute of Medial and Social Care Research, Arduwy, Holyhead Road, University of Wales, Bangor LL57 2PX  
**Tel**: +44 (0)1248 382225, **Fax**: +44 (0)1248 382229

12 September 2006

**Palliative Care : Fifth Annual Conference**  
A practical one day conference for all members of the clinical team. Keynote speakers: Peter Tebbit OBE, Claire Henry, Professor Julia Addington-Hall.  
**Speakers**: Numerous speakers from a variety of healthcare settings.  
**Organised by**: Healthcare Events  
**Venue**: The Royal College of Surgeons  
**Location**: London, England  
**Details**: Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF  
**Tel**: +44 (0)20 8541 1399, **Fax**: +44 (0)8547 2300

14 September 2006

**The 7th International Conference on Falls and Postural Stability**  
**Speakers**: Chair: Dr Finbarr Martin, Consultant Geriatrician (Guys and St Thomas' Hospital, London)  
**Organised by**: Falls and Bone Health Section, British Geriatrics Society
Age Discrimination: are you ready?
This is a series of half day briefings on the new age regulations coming into force in October 2006 in various locations in Manchester, Glasgow, Birmingham and London.
Organised by: DLA Advance
Venue: various
Location: London, England
Details: Tracey Egerton, DLA Advance, 101 Barbirolli Square, Manchester, M2 3DL
Tel: +44 (0)161 235 4545, Fax: +44 (0)161 235 4505

Ageing and Physical Activity: 2nd World Summit on Physical Education
The University School of Physical Education in Poznan and the State School of Higher Vocational Education in Leszno, both in Poland, are organising the 14th Conference on Physical Education and Sport in Scientific Researches. Topic of this year's conference is ageing and physical activity.
Venue: Rydzyna, Poland
Location: Rydzyna, Poland
Details: Dr Janusz Maciaszek, Akademia Wychowania Fizycznego, Zaklad Teorii Wychowania Fizycznego i Antropomotoryki, Ul. Kr
Listen to what I’m saying, commissioned by North West London Strategic Health Authority and the Department of Health, is produced by Bernie Arigho and Keith Strahan. Created by Age Exchange, the DVD and video are distributed, free of charge, by the Centre for Policy on Ageing.

The film shows health and social care professionals working directly with individuals and their carers. There are no actors, and no prepared scripts. It shows what a difference a person centred approach makes to individuals with many/complex needs.

The film links the Single Assessment Process, as the person centred health and social care framework, with other Department of Health policies e.g. Long Term Conditions with its emphasis on Case Management. It outlines key principles of person centred care that are evolving including holistic assessment, personalised care plans, sharing information, continuity and coordination and self care/self management.

A highlight of the film is to hear the views of the individuals and carers themselves in 3 Case Studies with a Social Worker, Community Matron and a Community Mental Health Nurse.

Supplementary documentation to accompany the DVD and video is available at http://www.cpa.org.uk/sap/dvd

The DVD (not the video) also includes 3 other films,

‘Patients as Teachers’ (Lewisham health and social care film with older people explaining how they wish to be assessed - the inspiration for ‘Listen to What I’m Saying’)

‘Are We Being Heard?’ (Hounslow staff training film made by older people about older people with an emphasis on having control over their own lives e.g. using Direct Payments)

‘Cold Tea’ (Workforce Directorate, Cumbria and Lancashire Strategic Health Authority introductory film about the Single Assessment Process)

To obtain copies of the dvd or video write to Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP    Telephone 020 7553 6500    Email dvd@cpa.org.uk or video@cpa.org.uk

We would also like to draw your attention to the SAP resource at http://www.cpa.org.uk/sap. The resource provides direct access to a substantial amount of material, provided by localities, useful to practitioners implementing the Single Assessment Process. In addition it provides links to key web sites and a lively discussion forum and glossary.

The Centre for Policy on Ageing also produces other resources on ageing and older age issues including the Ageinfo databases of publications, organisations and events and the National Database of Ageing Research (NDAR). These can all be found on our website. http://www.cpa.org.uk