

New Literature on Old Age

EDITOR

Gillian CrosbyVOLUME
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ABUSE

- 192/1 Good practice in safeguarding adults: working effectively in adult protection; by Jacki Pritchard (ed). London: Jessica Kingsley, 2008, 270 pp (Good practice in health, social care and criminal justice).
As in 'Good practice with vulnerable adults' (Jessica Kingsley, 2001), the editor hopes that this book "will illustrate that effective work can be undertaken to prevent abuse but also that there can be positive outcomes for victims if work is undertaken with them in the long term". The "No secrets" guidance from the Department of Health (DH, 2000), together with 'Safeguarding adults' (ADSS, 2005) emphasise the importance of inter-agency working and working partnership. This book aims to broaden thinking about adult abuse, and assesses alternative models of practice such as criminal justice and welfare. Contributors write about vulnerable adults who have not been given enough attention in the adult protection literature: people with brain injuries; older prisoners; and adults from black and minority ethnic communities. As in the previous book, issues of domestic violence are covered, with the addition of honour-based crime. Other contributions consider service provider perspectives: adult protection co-ordinators; the role of the Commission for Social Care Inspection (CSCI); and inquiries into abuse in institutions. Other topics covered include the Mental Capacity Act 2005, risk assessment, group work, and financial abuse. The book will be essential reading for anyone working with vulnerable people: social and health care workers and managers, police, probation officers, prison staff, advocates, volunteers, training officers and students. (RH)
Price: £19.99
From : Jessica Kingsley Publishers, 116 Pentonville Road, London N1 9JB. Website: www.jkp.com
- 192/2 The Protection of Vulnerable Adults list: an investigation of referral patterns and approaches to decision-making: final report; by Martin Stevens, Shereen Hussein, Stephen Martineau (et al), Social Care Workforce Research Unit, King's College London. London: Social Care Workforce Research Unit, King's College London, July 2008, 191 pp.
As part of the implementation of the Care Standards Act 2000, the Department of Health (DH) introduced the Protection of Vulnerable Adults (POVA) list on 26 July 2004, as a complement to the requirement for the development of local multi-agency adult protection policies and procedures. This study follows on from the Social Care Workforce Research Unit's smaller study in 2005 that looked at commonalities and the extent of differences between the first 100 referrals to the POVA list. The report includes an analysis of referral records, and considers the suitability or otherwise of referrals based on interviews with 18 POVA team members and two discussion groups with 5 managers, 3 frontline practitioners and 14 older people. Implications for recruitment, training, support, registration and management of social care workers are considered. (RH)
From : Download from website:
<http://kcl.ac.uk/schools/sspp/interdisciplinary/scwru/res/pova.html>
- 192/3 Safeguarding adults: a consultation on the review of the 'No secrets' guidance; by Department of Health - DH; Home Office; Ministry of Justice. London: Department of Health, 16 October 2008, 66 pp (Ref: 290862).
In 2002, the Department of Health (DH) and the Home Office issued joint guidance on keeping adults safe from abuse, called 'No secrets', the focus of which was adult protection. This consultation asks how that guidance needs to be changed and developed, and/or whether new legislation is needed: what would make a difference to making safeguarding more effective? The document describes the main messages about 'No secrets'. It looks at the policy context of personalisation, community empowerment and access to criminal justice for all; and examines issues of leadership, prevention and outcomes. It asks what aspects of safeguarding can be built into personalisation, health services, community empowerment, housing responsibilities, and access to the justice system. Views are sought on whether the 'No secrets' definition of a "vulnerable adult" should be revised; also whether the word "abuse" is always useful, or should "harm" or "crime" be used instead. The consultation seeks responses by 31 January 2009 (email:

nosecretsreview@dh.gsi.gov.uk or by post to Lucy Bonnerjea, Department of Health, Wellington House, 133-155 Waterloo Road, London SE1 8UG. (RH)

From : Download link at: http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_089098
DH Publications Orderline, PO Box, 777, London SE1 6XH. E-mail: dh@prolog.uk.com Tel 0300 123 1002.

ACTIVE AGEING

(See Also 192/90)

192/4 Issues of active ageing: perceptions of older people with lifelong intellectual disability; by Laurie Buys, Gillian Boulton-Lewis, Jan Tedman-Jones (et al).: Blackwell Publishing, June 2008, pp 67-71.

Australasian Journal on Ageing, vol 27, no 2, June 2008, pp 67-71.

The study aimed to investigate the lived experiences of older people with lifelong intellectual disability and to explore the meaning of active ageing for this group. Data were collected using semi-structured interviews with 16 service users (aged 50+), 16 service providers, and 16 key informal network members from regional/rural and urban areas in Queensland and Victoria, Australia. Themes were identified as follows: being empowered. being actively involved; having a sense of security; maintaining skills and learning; having congenial living arrangements; having optimal health and fitness; being safe and feeling safe; and having satisfying relationships and support. Service users wanted to 'keep on keeping-on' in areas of life that gave them pleasure rather than discontinuing them because of age. They wanted more control over issues affecting their lives and to be given meaningful roles. Mental stimulation, companionship, reliable support and safety were valued by this group. (KJ/RH)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

192/5 Labour market policy for 'Active Ageing' in Europe: expanding the options for retirement transitions; by Miriam Hartlapp, Günther Schmid.

Journal of Social Policy, vol 37, part 3, July 2008, pp 409-432.

Based on the theory of Transitional Labour Markets (TLM), this article derives normative criteria for 'active ageing'. It is argued why and under what conditions more employment for older people can help to improve their quality of life and can thus be considered an important part of future social policy. To this end, the article presents a brief review of the employment situation of older workers (aged 55-64) in the different European countries so as to identify what precisely might be required at the level of labour market policy. It systematically discusses the promoting and inhibiting factors behind the significant variation in the employment of older workers across Europe, and tests their explanatory value in a simple statistical model. Finally, the authors put the quantitative evidence into the perspective of policy examples, summing up some general strategies for 'active ageing'. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

AGE DISCRIMINATION

192/6 Age discrimination in mental health services; by Jennifer Beecham, Martin Knapp, José-Luis Fernández (et al), Personal Social Services Research Unit - PSSRU, London School of Economics and Political Science - LSE; Centre for Social Carework Research, University of Wales, Swansea; Centre for the Economics of Mental Health, Institute of Psychiatry, King's College London. Canterbury: PSSRU, University of Kent, May 2008, 67 pp (PSSRU Discussion paper 2336).

The UK is considering the introduction of legislation to outlaw age discrimination in the provision of public services. This is one of four reviews commissioned by the Department of Health (DH) on eliminating age discrimination in social services and mental health services (<http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuida>

nce/DH_085763). This report by PSSRU staff explores the extent of age discrimination in mental health services. Three broad issues are considered: inequalities between adult and older people's mental health services; inequalities between adults and older people with mental health problems in their use of health and social care services; and knowledge about the likely single equalities legislation in current services and the possible cost implications. The report does not examine differences in outcomes. Information is based on findings from interviews with mental health organisations, reviews of previous cost studies and models, and new statistical analyses. (RH)
From : Download (16/9/08): <http://www.pssru.ac.uk/pdf/dp2536.pdf>
PSSRU, Cornwallis Building, University of Kent, Canterbury, Kent CT2 7NF. E-mail: pssru_library@kent.ac.uk

192/7 The dangers and limitations of equality agendas as means for tackling old-age prejudice; by Colin Duncan.

Ageing and Society, vol 28, part 8, November 2008, pp 1133-1158.

This paper presents a critique of both the concept of age equality and of the limited scope it offers as a means for challenging old-age prejudice. The equality constructs that feature in anti-ageism initiatives and in current discourses on intergenerational equity have proved susceptible to political and ideological manipulation, which has led to the illegitimate dissociation of ageism from older age and promoted damaging notions of age equivalence. The consequence has been that old-age prejudice has been de-prioritised, and older people have been de-legitimised socially and as welfare constituency. The corrective is best sought outside the confines of age equality frameworks, although legal remedies may play a useful role if human dignity is incorporated as an equality criterion. This paper also assesses other approaches to tackling old-age prejudice that avoid the constraints of equality constructs and engage more firmly with its roots. The notion of the 'third age' with new social roles merits reconsideration as an affordable alternative to current policies of work obligation and pension retrenchment. Radical interventions in the labour market in favour of older people may also be needed. Age activism and advocacy will increasingly influence policy on prejudice and well-being in older age, but changed emphases are needed, as from defensive strategies and the ideologies of generational interdependence and solidarity, towards the promotion of organisational, financial and social autonomy in older age. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

192/8 Ethnic aged discrimination and disparities in health and social care: a question of social justice; by Megan-Jane Johnstone, Olga Kanitsaki.: Blackwell Publishing, September 2008, pp 110-115. Australasian Journal on Ageing, vol 27, no 3, September 2008, pp 110-115.

Older overseas-born Australians of diverse cultural and language backgrounds experience significant disparities in their health and social care needs and support systems. Despite being identified as a 'special needs' group, the ethnic aged in Australia are generally underserved by local health and social care services, experience unequal burdens of disease, and encounter cultural and language barriers to accessing appropriate health and social care compared to the average Australian-born population. While a range of causes have been suggested to explain these disparities, rarely has the possibility of cultural racism been considered. In this article, it is suggested that cultural racism be named as a possible cause of ethnic aged disparities and disadvantage in health and social care. It is further suggested that unless cultural racism is named as a structural mechanism by which ethnic aged disparities in health and social care have been created and maintained, redressing them will remain difficult. (KJ)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

AGEING (GENERAL)

(See 192/65)

ARTS AND MUSIC

- 192/9 Museums, the arts, responsive care and supportive design; by John Killick.: Hawker Publications, July/August 2008, pp 24-26.
Journal of Dementia Care, vol 16, no 4, July/August 2008, pp 24-26.
The US-based care provider Hearthstone Alzheimer Care is fast becoming a beacon of good practice in the care sector. This article introduces examples of its work with museums and on cultural events through ARTZ, Artists for Alzheimer's. (RH)
ISSN: 13518372
- 192/10 The second coming: [ageing crooners]; by Jude Rogers.
New Statesman, 27 October 2008, pp 44-45.
Inspired by Johnny Cash, the now deceased country and western singer, a "slew of ageing crooners" are pursuing their desires and reinventing themselves as serious musicians. This short article reviews the careers of, amongst others, Tom Jones, Glen Campbell, Leonard Cohen, who have successfully re-entered the popular music scene, often in collaboration with younger musicians, after an absence that could have been construed as "retirement". (KJ/RH)
ISSN: 13647431
From : www.newstatesman.com

ASSISTIVE TECHNOLOGY

- 192/11 Individualised telecare and electronic assistive technologies to support vulnerable people; by Peter King, Gareth Williams.
Journal of Assistive Technologies, vol 2, no 3, September 2008, pp 48-52.
Although telecare services are now available across the UK, few people have the technical expertise necessary to prescribe and provide the bespoke solutions that may be required to support more complex cases. This paper describe a range of innovative approaches to extending the application of existing telecare systems to cater for the needs of people facing different physical or cognitive challenges. These include new, easy-to-operate alarm switches, interfaces for bed/chair occupancy and property exit alarms, and a range of hybrid arrangements that can result in automatic alarms for the management of various environmental emergencies (e.g. hypothermia, hyperthermia, poor air quality and noise alarms). (RH)
ISSN: 17549450
From : <http://www.pavpub.com>
- 192/12 Safety vs privacy: elderly persons' experiences of a mobile safety alarm; by Anita Melander-Wikman, Yiva Fältholm, Gunvor Gard.
Health and Social Care in the Community, vol 16, no 4, July 2008, pp 337-346.
New Information and communication technology (ICT) and services can be used to further health care. To enable older people to remain at home for as long as possible, various kinds of technology such as safety alarms, are being used in the home. This Swedish study describes the experiences of older people through testing a prototype mobile safety alarm in development and their reasoning about safety, privacy and mobility. Five older people with functional limitations and four healthy older people from a pensioners organisation tested the alarm. The mobile alarm with a drop sensor and a positioning device was tested for 6 weeks. The intervention was evaluated with qualitative interviews and analysed with latent content analysis. Results showed four main categories: feeling safe; being positioned and supervised; being mobile; and reflecting on new technology. From these categories the overarching category "safety and mobility are more important than privacy" emerged. The mobile safety alarm was perceived to offer an increased opportunity for mobility in terms of being more active and as an aid for self-determination. The fact that informants were located by means of the positioning device was not experienced as violating privacy as long as they could decide how to use the alarm. It was concluded that this alarm was experienced as a tool to be active and mobile. As a way to keep self-determination and empowerment, the individual has to make a "cost-benefit" analysis where privacy is sacrificed to the benefit of mobility and safety. The participants were actively

contributing to the development process. (RH)
ISSN: 09660410
From : <http://www.blackwellpublishing.com/hsc>

- 192/13 Support for carers: a guide to telecare; by Carers UK. London: Carers UK, 2008, 15 pp (code: UK9015).
Telecare is technology that can support carers, providing help to restore independence for both the carer and the person they are caring for. This guide is aimed at carers to introduce them to telecare and the solutions that it can offer for help with physical and sensory impairments. Case studies are given to show the uses of telecare and the terminology is explained. (KJ/RH)
From : Carers UK, 20 Great Dover Street, London SE1 4LX.
<http://www.carersuk.org>

- 192/14 Telecare service report for Herefordshire; by David Rainbow.
Journal of Assistive Technologies, vol 2, no 3, September 2008, pp 53-56.
Telecare services in Herefordshire have taken off at a considerable pace since the provision of the Preventative Technology Grant. More than 600 people have received the service, most of them having a Lifeline and a number of sensors linked to a remote alarm monitoring centre. The service has proved popular with service users and their carers who report significant reductions in anxiety and levels of concern across a number of areas. The service has also reduced the need for homecare, or residential and nursing home placements. Annual savings of almost £0.5 million have been achieved, with the greatest contribution for the use of technology to improve medication self-management without needing check calls. The telecare service in Herefordshire is now part of mainstream provision, is being expanded, and will be providing training to health and social care professionals. (RH)
ISSN: 17549450
From : <http://www.pavpub.com>

BLACK AND MINORITY ETHNIC GROUPS

(See Also 192/44)

- 192/15 Financial inclusion and ethnicity: an agenda for research and policy action; by Omar Khan, Runnymede Trust. London: The Runnymede Trust, 2008, 76 pp (A Runnymede report).
Education, employment and housing are identified as the key areas relevant to black and minority ethnic (BME) communities' experiences of disadvantage that may affect their financial inclusion. Discussion of five aspects of financial provision - banking, credit, insurance, savings and advice - serves to help in distinguishing between poverty-related exclusion and ethnicity-related exclusion. This review also considers whether some financial products and services are compatible with social justice. The author lists 24 points for further research and policy action involving the aforementioned points, together with issues around pensions, risk and assets. International case studies are presented as appendices. (RH)
Price: £11.95
From : The Runnymede Trust, 7 Plough Yard, Shoreditch, London EC2A 3LP. E-Mail: info@runnymedetrust.org Electronic version available at: www.runnymedetrust.org

- 192/16 The health and social care experiences of black and minority ethnic older people; by Jo Moriarty, Race Equality Foundation - REF. London: Race Equality Foundation - REF, July 2008, 8 pp (Better Health Briefing 9).
In their own ways, the National Service Framework for Older People (NSF) and the Race Relations (Amendment) Act 2000 have required public bodies to improve services to black and ethnic minority (BME) communities. This briefing paper reviews literature and research conducted in the last ten years which comment on the barriers to using services and attitudes of professionals experienced by ethnic groups. It also points to a growing body of evidence about what BME groups want from services: good quality services and more engagement with users. Although good services exist, it has been difficult to bring them into the mainstream. The

briefing suggests other online resources on research, policy and practice relevant to BME older people's needs. (RH)

Price: FOC

From: <http://www.raceequalityfoundation.org.uk/health/files/health-brief9.pdf>

Race Equality Foundation, Unit 35, Kings Exchange, Tileyard Road, London N7 9AH.

192/17

Strategic approaches for older people from black and minority ethnic groups; by Jill Manthorpe, Jess Harris, Sheila Lakey, Social Care Workforce Research Unit, King's College London; Better Government for Older People - BGOP. London: Better Government for Older People - BGOP, July 2008, 78 pp.

In 2004, Better Government for Older People (BGOP) reported on a survey of UK local authority strategies for black and minority ethnic (BME) older people. The survey found that only a third of local authorities had approaches underway to meet BME older citizens' needs and interests; an additional third were considering the first steps and would welcome assistance, whilst the remainder had no plans. This guide is part of BGOP's commitment to developing work in this area, and has been produced with the support and involvement of Help the Aged and the Care Service Improvement Partnership (CSIP). It is adapted from the framework offered by the Audit Commission and BGOP in 'Older people - independence and well-being: the challenge for public services' (2004) for developing comprehensive strategic approaches to all older people. It consists of seven inter-related dimensions: a strategic approach; commitment and leadership; partnership and whole systems working; a picture of the local population of older people; involving older people; communication and information; and evaluation and impact. In common with other BGOP publications, the guide is based on the values of citizenship. (RH)

ISBN: 0954648161

From : Better Government for Older People, 25-31 Ironmonger Row, London EC1V 3QP.

Website: www.bgop.org.uk

CARERS AND CARING

(See Also 192/13)

192/18

"Confidentiality smokescreens" and carers for people with mental health problems: the perspectives of professionals; by Ben Gray, Catherine Robinson, Diane Seddon (et al).

Health and Social Care in the Community, vol 16, no 4, July 2008, pp 378-387.

Some findings from a collaborative study funded by the Big Lottery and led by Crossroads Caring for Carers about carers for people with mental health problems are presented. While government initiatives have attempted to augment the role and rights of carers, policy guidelines involving information sharing between professionals and carers have failed to deal with the practical dilemmas of patient confidentiality. Professional codes and training neither explore nor develop the moral and ethical ground that stands between the service user's need for privacy and the carer's need for information. Policy and training guidance on confidentiality is scattered, ambiguous, confusing for professionals, and inconsistent. There is uncertainty in practice about the information that professionals may share, and many professionals do not take into account carers' rights, not least to basic information to help them care for service users. "Confidentiality smokescreens" may sometimes lead to information being withheld from carers. Professionals sometimes find it easier and safer to say nothing. To explore these issues from the perspectives of professionals, a sample of directors and senior staff from the health, social and voluntary sectors (65 in all) were interviewed. Respondents were asked to comment at length on their understanding of confidentiality and information sharing with carers. Findings highlight "confidentiality smokescreens" that erect barriers that limit effective information sharing; issues involving confidentiality; risk management and carers in crisis; examples of good practice; and the need for training of professionals on confidentiality issues and rights of carers. This paper explores the challenge of confidentiality smokescreens from the perspective of professionals, and draws out implications for professional practice and training. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

- 192/19 Living and caring for all; by James Lloyd, International Longevity Centre UK - ILC UK. London: International Longevity Centre - ILC-UK, September 2008, 26 pp.
 There is wide recognition that, as the population ages, demand for social care will increase. The majority of care provision is likely to remain unpaid care; and it is older people themselves who are expected to meet a large share of this rising demand. This discussion paper is based on and responds to research published by the ILC UK in collaboration with the National Centre for Social Research (NatCen), 'Living and caring? An investigation of the experiences of older carers'. Its purpose is to provide accompanying policy analysis and discussion to 'Living and caring?' for both general and specialist readerships. It aims to provoke discussion, by helping the reader to make sense of care provision, exploring the evidence providing in 'Living and caring?', and looking at improving older carers' quality of life and the future of carers policy. (RH)
From : International Longevity Centre UK, 22-26 Albert Embankment, London SE1 7TJ.
 Website: www.ilcuk.org.uk
- 192/20 Living and caring? An investigation of the experiences of older carers: a report of research carried out by the National Centre for Social Research on behalf of the ILC-UK; by Andy Ross, James Lloyd, Michael Weinhardt (et al), National Centre for Social Research - NatCen; International Longevity Centre UK - ILC UK. London: International Longevity Centre - ILC-UK, September 2008, 60 pp.
 There is comparatively little research comparing the lives of carers and non-carers in the UK, due mainly to the dearth of suitable data sources. This report uses data from Waves 2 and 3 (2004 and 2005) of the English Longitudinal Study of Ageing (ELSA) to compare the lives of carers and non-carers across five key domains: income and work; mobility and access to services; participation in leisure and community activities; health; and housing. Quality of life was measured for these policy domains using the four dimensions of CASP 19 (Control, Authority, Self-realisation and Pleasure). A separate analysis was conducted concerning the spouse being cared for, to explore the relationship between carers' quality of life and the characteristics of their spouse or partner. (RH)
From : International Longevity Centre UK, 22-26 Albert Embankment, London SE1 7TJ.
 Website: www.ilcuk.org.uk
- 192/21 Longitudinal perspectives on caregiving, employment history and marital status in midlife in England and Wales; by Harriet Young, Emily Grundy.
 Health and Social Care in the Community, vol 16, no 4, July 2008, pp 388-399.
 Data from the Office for National Statistics (ONS) Longitudinal Study (LS) were initially based on a sample from the 1971 Census, and in 2001 included data on 110464 people aged 40-59, of whom 5% provided 20 or more hours per week of unpaid care. The authors used this data to analyse associations between caregiving of this intensity and current employment, employment history and characteristics, marital status, and employment after childbearing. Among men, caregiving was associated with a history of lower levels of employment. The small group of men with a history of least employment were 70% more likely to provide care than those with a history of most employment. Among women, caregiving was associated with a history of non-employment, but there were no differences between those with fully engaged and partially engaged labour market histories. Analyses of a sub-set of data on women who had a child between 1981 and 1991 showed that those who returned to full-time paid work by 1991 were over 50% less likely to become caregivers. Some associations between employment characteristics and propensity to provide 20 or more hours per week of care were also identified. Those in public sector jobs and those previously in employment with a caregiving dimension were 20%-30% more likely than other working women to provide unpaid care. These results suggest a continuing gender dimension to care provision which interacts with marital status and employment in gender-specific ways. It also suggests that implementation of strategies to enable those in midlife to combine caregiving and work responsibilities should they wish to do so, should be an urgent priority. (RH)
 ISSN: 09660410
From : <http://www.blackwellpublishing.com/hsc>

CONSUMER PERSPECTIVES

- 192/22 Ageing in a consumer society: from passive to active consumption in Britain; by Ian Rees Jones, Martin Hyde, Christina R Victor (et al). Bristol: The Policy Press, 2008, 148 pp (Ageing and the lifecourse series).
People retiring now participated in the creation of the post-war consumer culture; and while these "grey consumers" have grown older, they have not stopped consuming. This book is based on findings from a Cultures of Consumption project funded by the Economic and Social Research Council (ESRC) and the Arts and Humanities Research Council (AHRC) (RES-154-25-007). It uses secondary analysis of the Family Expenditure Survey (FES) to follow older people's engagement with Britain's consumer society since the 1960s, a period of much social change. The book considers the evolution of the "third age" and terms such as "baby boomers"; the changing nature of the household, along with income, expenditure and inequalities in later life; and the consumption of health and health products. It charts changes in the experience of later life in the UK, the rise of the "individualised consumer citizen", and what this means for health and social policy. (RH)
Price: £19.99
From : Marston Book Services, PO Box 269, Abingdon, Oxon OX14 4YN.
Email: direct.orders@marston.co.uk
Website: <http://www.policypress.org.uk>

- 192/23 Silver service?: are supermarkets meeting the needs of older shoppers?; by Steve Costello. Working with Older People, vol 12, issue 2, June 2008, pp 20-22.
Assuming that the older consumer has successfully manoeuvred his or her way around the transport system and eventually found a post office to pick up the pension or pay the bills, it is now time to do the weekly shop. The Consumer Council and Age Concern Northern Ireland have conducted qualitative and quantitative research with older consumers (aged 50+) across Northern Ireland regarding difficulties faced when buying food. This article reports on the physical, financial and informational barriers in accessing food. (RH)
ISSN: 13663666
From : <http://www.pavpub.com>

CONTINENCE

(See 192/104)

DEMENTIA

(See Also 192/9, 192/85)

- 192/24 Assessing the validity and reliability of the Pool Activity Level (PAL) Checklist for use with older people with dementia; by Jennifer Wenborn, David Challis, Jackie Pool (et al).: Taylor & Francis, March 2008, pp 202-211.
Aging & Mental Health, vol 12, no 2, March 2008, pp 202-211.
The Pool Activity Level (PAL) instrument was developed by Jackie Pool and published as part of the Bradford Dementia Group Good Practice Guide series. The PAL Checklist guides the selection of appropriate personally meaningful activities which are key to maintaining physical and mental health and well-being. The checklist's validity and reliability when used with older people with dementia was assessed. A questionnaire sent to activity providers assessed content validity, and validity and reliability were measured with a sample of 60 older people with dementia. The questionnaire response rate was 83% (102/122). Most respondents felt no important items were missing; and 7 of the 9 activities were ranked as "very important" or "essential" by at least 77% of the sample. Correlation with measures of cognition, severity of dementia and activity performance demonstrated strong concurrent validity. Inter-item correlation indicated strong construct validity. Given that all items achieved acceptable

test-retest reliability and most demonstrated acceptable inter-rater reliability, the authors conclude that the PAL Checklist demonstrates adequate validity and reliability when used with older people with dementia and appears to be useful in a variety of care settings. (RH)

ISSN: 13607863

From : <http://www.informaworld.com/CAMH>

- 192/25 A biographical approach: [dementia and life story books]; by Mary Rose Day, Teresa Wills. *Nursing Older People*, vol 20, no 6, July 2008, pp 22-24. Life story work is an intervention that has been used with a number of older people on medical wards and those with dementia. The authors explore the development of life story books in practice, hitherto an underdeveloped area of research. (RH)
ISSN: 14720795
From : <http://www.nursingolderpeople.co.uk>
- 192/26 *Dementia: out of the shadows*; by Toby Williamson, Mental Health Foundation - MHF; Alzheimer's Society. London: Alzheimer's Society, October 2008, 71 pp. This report describes a research project exploring the experiences of people with dementia and their carers of finding out that they had dementia, the assessment and diagnostic process, and how they have adjusted and coped since being diagnosed. 61 people participated in the research, 32 of whom had dementia. Four main themes emerge: the importance of early diagnosis in understanding what is wrong; having a "good" diagnostic process; having practical and psychological coping mechanisms; and the pervasiveness of the stigma of dementia. Five recommendations are made: improve public understanding of dementia; improve GPs' understanding of dementia; develop better specialist diagnostic assessment services for dementia; provide information which is timely and accessible; and develop stronger peer support networks to help people cope. Appendices include a summary of the literature review by Alisoun Milne and Julie Peet, University of Kent (full review and references at www.alzheimers.org.uk/outoftheshadows). The Alzheimer's Society commissioned this project, for which work was done by the Research and Service Improvement and Workforce Development teams at the Mental Health Foundation, supported by staff at the Alzheimer's Society. The foreword by author Terry Pratchett encapsulates his experience of a particular form of Alzheimer's disease, posterior cortical atrophy (PCA). (RH)
Price: £25.00
From : Alzheimer's Society, Devon House, 58 St Katharine's Way, London E1W 1JX.
Website: www.alzheimers.org.uk
- 192/27 *Dying from dementia - a patient's journey*; by Tim Dartington. *British Medical Journal*, vol 337, no 7675, 18 October 2008, pp 931-933. Anna Darlington (wife of the author of this article) trained and worked as a nurse, social worker and psychotherapist in the National Health Service (NHS). This article relates how she developed Alzheimer's disease (AD) at the age of 54 and died at home seven years later. It incorporates comments on her care from the perspectives of the palliative care physician, the psychiatrist, the Admiral nurse, the occupational therapist, as well as those of Anna herself. (RH)
ISSN: 09598138
From : www.bmj.com
- 192/28 *Dying with dementia: the views of family caregivers about quality of life*; by Cherry Russell, Heather Middleton, Chris Shanley. Blackwell Publishing, June 2008, pp 89-92. *Australasian Journal on Ageing*, vol 27, no 2, June 2008, pp 89-92. The objective of this study was to document the views of family caregivers of persons with dementia about quality of life for their relative during the late and terminal stages of the disease, as part of an exploratory study of best quality care and support. 15 former caregivers (5 wives, 5 husbands, 2 sons, 3 daughters) participated in in-depth semi-structured interviews. Participants identified three main sets of indicators of quality of life: the physical body, the physical and social environment, and treatment with respect and dignity. The constructs 'quality of life' and

'quality of care' tended to be conflated in the experience of caregivers. An important role for caregivers was to interpret and represent the subjective experience of the person with dementia. Quality of life needs to be understood from multiple perspectives. Caregivers' views are a central part of this understanding and should be used to inform future research and service development. (KJ/RH)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

192/29

Screening for dementia in primary care: how is it measuring up?; by Alison Culverwell, Alisoun Milne, Reinhard Guss (et al).

Quality in Ageing, vol 2, issue 3, September 2008, pp 39-44.

Despite evidence that early identification of dementia is of growing policy and practice significance in the UK, limited work has been done on evaluating screen measures for use in primary care. The aim of this paper is to offer a clinically informed synthesis of research and practice-based evidence on the utility, efficacy and quality of dementia screening measures. The study has three elements: a review of research literature; a small-scale survey of measures employed in three primary care trusts (PCTs); and a systematic clinical evaluation of the most commonly used screening instruments. The authors integrated data from research and clinical sources. The General Practitioner Assessment of Cognition (GPCOG), Memory Impairment Screen (MIS), and Mini-Cognitive Assessment Instrument (Mini-Cog) were found to be: brief, easy to administer; clinically acceptable; effective; minimally affected by education, gender and ethnicity; and to have psychometric properties similar to the Mini Mental State Examination (MMSE). Although the MMSE is widely used in the UK, this project identifies the GPCOG, MIS and Mini-Cog as more appropriate for routine use in primary care. A coherent review of evidence coupled with an in-depth evaluation of screening instruments have the potential to enhance ability and commitment to early intervention in primary care and, as part of a wider educational strategy, improve the quality and consistency of dementia screening. (RH)

ISSN: 14717794

From : <http://www.pavpub.com>

192/30

Seeing patients with dementia through to the end of life; by David Jolley, Julian Hughes, Ian Greaves (et al).

Geriatric Medicine, vol 38, no 9, September 2008, pp 461-468.

Death with dementia accounts for 1 in 3 deaths in an average general practice. End of life, and death with dementia may be complicated by distress, which is difficult to interpret and resolve. A positive, proactive approach using palliative care principles helps the patient, their family and professional carers. General practitioners attending nursing homes is the best method for coordinating this work. Support should be available from local services for old-age psychiatry and palliative care. (KJ/RH)

ISSN: 0268201X

DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

(See Also 192/49)

192/31

The effects of socioeconomic status and health on transitions in living arrangements and mortality: a longitudinal analysis of elderly Finnish men and women from 1997 to 2002; by Pekka Martikainen, Elina Nihtilä, Heta Moustgaard.

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 63B, no 2, March 2008, pp S99-S109.

The authors used a 40% sample (n=250787) of Finnish men and women aged 65+ living alone or with a partner on 31 December 1997 drawn from population registers, and followed up for transitions in living arrangements and death at the end of 2001. Health conditions associated with functional difficulties were major determinants of institutionalisation and death, and were associated with transition between private households. Low income among men and in particular not owning a home were independently associated with institutionalisation and death among

those living alone or with a partner at baseline. Among those living with a partner, the transition to living alone was associated with all socioeconomic factors but most strongly with a low income and not owning a home. Transitions to living with others were associated in particular with low occupational social class and education. Variations in the associations of different socioeconomic indicators with living arrangement transitions imply different social pathways. However, material socioeconomic indicators determined other measures of socioeconomic status in determining such transitions, and their effects were only partly mediated by chronic conditions. (RH)

ISSN: 10795014

From : <http://www.geron.org>

192/32

Widening gap in life expectancy; by David Gordon, Diane Gibbs.

Health Service Journal, vol 118, no 6128, 16 October 2008, p 17.

Area-based inequalities in mortality is the most commonly used indicator of progress in reducing inequalities. This short article illustrates the continuing inequalities in life expectancy between England, Wales, Northern Ireland, the Republic of Ireland and Scotland, and points to a widening gap in life expectancy at birth between England and Scotland, based on data for 1991-93 and 2004-06. (RH)

ISSN: 09522271

From : <http://www.hsj.co.uk>

DEPRESSION

(See Also 192/64)

192/33

More than just a communication medium: what older adults say about television and depression; by Giang T Nguyen, Marsha N Wittink, Genevra F Murray (et al).

The Gerontologist, vol 48, no 3, June 2008, pp 300-310.

Older people watch more television than do younger people. Television's role in mental health has been described in the general population, but less is known about how older people think of television in the context of depression. The authors conducted a qualitative study of 102 patients aged 65+, using a semi-structured interview created to help clinicians understand how older people conceptualise depression diagnosis and treatment. During analysis, the authors found that many respondents offered spontaneous thoughts about the relationship between television and depression. All television-related content was extracted from the interview transcripts, and themes were identified using grounded theory. Participants cited television as a way to identify depression in themselves or others (either through over-use or lack of interest) or as a way to cope with depressive symptoms. Some felt that television could be harmful, particularly when content was high in negativity. A substantial number discussed more than one of these themes; a few mentioned all three. Married people were more likely to discuss television's role in identifying depression. Those with low education more often mentioned that television could be helpful, whereas those with a history of depression treatment were more likely to discuss television's potential harm. Researchers should conduct further studies to better understand the relationship between depression, television viewing, and opinions regarding television's role in geriatric depression. Exploring these issues may yield new approaches to tackling depression in later life. (RH)

ISSN: 00169013

From : <http://www.geron.org>

DISABILITY

(See Also 192/4, 192/46, 192/56, 192/59, 192/97)

- 192/34 Disability and the implications of the wellbeing agenda: some reflections from the United Kingdom; by Claire Edwards, Rob Imrie.
Journal of Social Policy, vol 37, part 3, July 2008, pp 337-356.
A wellbeing agenda has emerged in government that seeks to promote a 'politics of happiness', in which citizens are, as the New Economics Foundation put it, 'happy, healthy, capable and engaged'. This article explores the wellbeing agenda in the UK, and its implications for disabled people. It is argued that it is unlikely, in its present form, to contribute to the development of social theoretical, or more politically progressive, analysis and understanding of disablement in society. This is because of the emphasis on biologism, personality and character traits, and a policy prognosis that revolves around self-help and therapy, or individual actions and (self) responsibilities. (KJ/RH)
ISSN: 00472794
From : <http://www.journals.cambridge.org>
- 192/35 An exploration of access to health and social care services by older deaf people in Scotland: report; research carried out in partnership with Deaf Connections, Glasgow; by Caroline Donaldson, Ailsa Cook, Royal Bank of Scotland Centre for the Older Person's Agenda, Queen Margaret University Edinburgh. Musselburgh: The Royal Bank of Scotland Centre for the Older Person's Agenda, September 2007, 43 pp.
There were some 758000 people in Scotland in 2007 who were either deaf or hard of hearing. This report outlines the methods used in a research project conducted focus groups with 18 older deaf people who were users of Deaf Connections services in the west of Scotland. Findings are presented on the three key issues identified in analysis of the focus group data: communication support, deaf awareness, and specialist services. Among the report's recommendations for policy and practice to improve services for deaf people are: joint partnership working between health and social care service providers and organisations providing specialist services to older deaf people; deaf awareness training; and increased involvement and participation of deaf people in developing service provision and delivery that meets their needs. The report also makes recommendations on future research to involve service users. (RH)
From : The Royal Bank of Scotland Centre for the Older Person's Agenda, Queen Margaret University Edinburgh, Musselburgh EH21 6UU.
E-mail: copa@qmu.ac.uk Website: <http://www.qmu.ac.uk/copa>

EMPLOYMENT

- 192/36 Determinants of older and younger workers' job satisfaction and organisational commitment in the contrasting labour markets of Belgium and Sweden; by Rita Claes, Bart Van De Ven.
Ageing and Society, vol 28, part 8, November 2008, pp 1093-1112.
Throughout the industrialised world, promoting the retention of older workers is high on the agenda of governments, employers, unions and the media, but not at any price. If persuading older workers to stay at work longer is to benefit companies and wider society, then the employees should be committed and satisfied with their decision. This study explores the factors that keep older workers satisfied and committed at work by contrasting samples of older (aged 50+) and younger workers (up to 25 years) in favourable (Sweden) and unfavourable labour markets (Belgium). The core research question is whether the influential factors are different for the two age groups, after controlling for country, gender, educational level, employment sector, supervisory position and the employee's financial contribution to the household. The predictors included workers' self-reports of skill discretion (i.e the range of skills used on the job), organisational fairness, and perceived job insecurity. Hierarchical linear regressions revealed that, across age groups, skill discretion and organisational fairness predicted both job satisfaction and organisational commitment. For older workers there was a negative impact of perceived job insecurity on job satisfaction and organisational commitment. The national context only affected

younger workers. In the unfavourable Belgian labour market, they were more satisfied and committed to their organisation. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

192/37 Older men and work in the twenty-first century: what can the history of retirement tell us?; by John MacNicol.

Journal of Social Policy, vol 37, part 4, October 2008, pp 579-595.

The New Labour government has set a target of getting 1,000,000 more people aged 50 and over back into work as part of its aim of achieving an overall employment rate of 80 per cent among people of working age. To this end, a variety of policies have been introduced to encourage citizens to work later in life, notably the 2006 Age Regulations. However, much of the government's analysis is based on supply-side reasoning that has retained its credibility only because of the rise in older people's employment rates that has taken place since 1994. This article focuses on the employment problems of older men, since their employment rates have fallen sharply since the 1970s. Examination of both the history of retirement and less favourable underlying economic trends suggests that extending the working lives of older men may not be easy. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

192/38 Silver entrepreneurship: new days, new ways; by Tom Cannon.

Working with Older People, vol 12, issue 2, June 2008, pp 30-33.

Television and the media in general have raised the profile of entrepreneurs, whom we imagine to be young, energetic and creative people. Research indicates that the older you are when setting up a business, the greater its chances of success. The author of this article puts things in a global perspective, and draws attention to the challenge that budding "silver entrepreneurs" face, and what is being done in the north of England to remove those barriers. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

END-OF-LIFE CARE

(See Also 192/27, 192/28, 192/30, 192/43)

192/39 Multiple conditions: multiple challenges: exploring palliative and end of life care for older people with multiple conditions; by Lucy Sutton, Philip Hurst, National Council for Palliative Care - NCP; Age Concern England - ACE; Help the Aged. London: National Council for Palliative Care, October 2008, 23 pp.

Frail older people with multiple conditions make the greatest use of the health and social care system. In order to better meet this group's palliative care needs, staff must be encouraged to consider the whole person throughout the care process. This guidance publication is designed to support implementation of the End of Life Care Strategy. It uses innovative practice examples and case studies of inappropriate care to illustrate how best to achieve individual centred care and commissioning of services. It makes recommendations on workforce training and development. Content of this publication was informed by a roundtable discussion on the topic in November 2007 and a national event, 'Dying with Dignity' in March 2008. (RH)

Price: £15.00

From : National Council for Palliative Care, The Fitzpatrick Building, 188-194 York Way, London N7 9AS. E-mail: enquiries@ncpc.org.uk Website: www.ncpc.org.uk

192/40 A new beginning for the end: [End of Life strategy]; by Louise Hunt.

Community Care, issue 1742, 9 October 2008, pp 30-31.

There needs to be a radical change in the way professionals approach the subject of death, if more people are to have a say on how they spend their final days. This article refers to the End of Life Care strategy and to research from the University of Lancaster End of Life Care

Observatory. Care home staff confidence in consulting with and recording residents' end-of-life wishes is seen as a major barrier. (RH)
ISSN: 03075508
From : <http://www.communitycare.co.uk>

192/41

The quality and adequacy of care received at home in the last 3 months of life by people who died following a stroke: a retrospective survey of surviving family and friends using the Views of Informal Carers Evaluation of Services questionnaire; by Amanda J Young, Angie Rogers, Julia M Addington-Hall.

Health and Social Care in the Community, vol 16, no 4, July 2008, pp 419-428.

Stroke is the third leading cause of death in the UK. Despite this, little is known about the care needs of people who die from or following a stroke. In early 2003, 183 questionnaires were returned from a survey of 493 people who had registered a stroke-related death in four Primary Care Trusts (PCTs), a response rate of 37%. This paper reports on 53 deceased from the survey who had lived at home during their last 3 months and who had been ill for more than 1 month. Data were analysed to explore the role of informal carers and the provision of community-based care in the last 3 months of life. Family and friends helped with 82% of deceased with household tasks, 68% with personal care, 66% with taking medication, and 54% with night-time care. By contrast, health and social services helped 30% with household tasks, 54% with personal care, 20% with taking medication, and 6% with night-time care. Two-fifths (43%) of informants had to give up work or make major life changes to care for the deceased, and 26% of informants found looking after them "rewarding". Half (51%) reported that help and support from health services were excellent or good compared to 38% for social services. Results from the Regional Study of Care for the Dying indicated that people who died from a stroke in 1990 and their carers would have benefited from increased levels of community-based care and enhanced communication with care professionals. The data suggest that informal carers continue to provide the majority of care for those who die from stroke, despite government initiatives to improve care for stroke patients and frail older people. Further research is required to explore best practice and service provision in caring for this group. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

EXERCISE

192/42

Movement in mind: the relationship of exercise with cognitive status for older adults in the Swedish National Study on Aging and Care (SNAC); by Magnus Lindwall, Mikael Rennemark, Tomas Berggren.: Taylor & Francis, March 2008, pp 212-220.

Aging & Mental Health, vol 12, no 2, March 2008, pp 212-220.

813 participants from the Swedish National Study on Ageing and Care (SNAC) in age cohorts from 60 to 96 years completed a wide range of cognitive function tests, the Mini-Mental State Exam (MMSE) and survey questions concerning exercise behaviour and exercise change with light or strenuous intensity. ANCOVA, controlling for age, education, depression, functional status and co-morbidity, demonstrated a main effect for light exercise, but not for strenuous exercise, on five of the six cognitive tests and the MMSE for men but not for women. A negative change in exercise status was associated with lower MMSE scores for men but not for women. Individual exercising with light intensity several times a week had the highest cognitive test and MMSE scores and the inactive group had the lowest scores. The results of the study may contribute to increased knowledge in the exercise-mental health relationship in older people and spawn new research specifically on gender differences in this relationship. (RH)

ISSN: 13607863

From : <http://www.informaworld.com/CAMH>

EXTRA-CARE HOUSING

- 192/43 "Is it that time already?": extra care housing at the end of life: a policy-into-practice evaluation; by Lorna Easterbrook, Sarah Vallely, Housing 21; End of Life Care Programme, NHS, Department of Health - DH.: Housing 21, 14 October 2008, 56 pp.
During 2008, Housing 21 and the NHS End of Life Care team conducted a 6-month service improvement pilot project designed to enhance dignity and choice in end-of-life care (EoLC) in three extra care housing settings in north-east England and East Anglia. This report is an evaluation of the project, exploring what changed over the 6 months and assessing the extent to which the approaches used in this particular project might be translated to other extra care settings nationally. Four key issues are identified: promoting dignity and choice for older people and family carers; support and training for staff; extra care and its links to wider health and specialist resources; and commissioning and funding. (RH)
From: <http://www.housing21.co.uk/downloads/EvaluationreportFINAL.pdf>
- 192/44 Meeting the sheltered and extra care housing needs of black and minority ethnic older people: a Race Equality Foundation briefing paper; by Adrian Jones, Race Equality Foundation. Housing, Care and Support, vol 11, no 2, August 2008, pp 41-48.
The author notes the main reports on housing for black and minority ethnic older people that have been published since 1984. A recurrent theme has been the lack of awareness of BME older people's housing needs, and that the requirement for specialist sheltered housing fulfills only part of such need. One possible solution is the provision of extra care housing, and this article cites a few examples of good practice in meeting minority ethnic housing needs. Further information sources are suggested. (RH)
ISSN: 14608790
From : Website: <http://www.pavpub.com>

FAMILY AND INFORMAL CARE

- 192/45 Kinship care: messages for policy and practice; by Anna Gupta. Community Care, issue 1743, 16 October 2008, pp 24-25.
There is growing pressure for kinship care to be used more for child placements. This article describes a study of children placed with relatives after care proceedings. The study, 'Keeping them in the family: outcomes for children placed in kinship care through care proceedings', by Joan Hunt, Suzette Waterhouse and Eleanor Jutman, is published by BAAF (www.baaf.org.uk). Research drew on a 4-year sample of all children from two local authorities who were placed with family or friends at the end of care proceedings between 1995 and 1999. The study found that while kinship care can be a positive option, placements need to be assessed very carefully. (RH)
ISSN: 03075508
From : <http://www.communitycare.co.uk>
- 192/46 Well-being of mid- and later-life mothers of children with developmental disabilities; by Lori E Weeks, Olive Bryanton, Albert Kozma (et al). Journal of Women & Aging, vol 20, nos 1/2, 2008, pp 115-130.
33 mothers of developmentally disabled (DD) children and 33 mothers in a comparison group responded to a series of quantitative measures of well-being and open-ended questions. In general, quantitative results indicated lower levels of well-being for mothers of DD children. However, these results were examined in the context of educational and financial realities and access to adequate social support. Analysis of the qualitative data resulted in the themes of enhancements to well-being, challenges to well-being and normative experiences of being a parent. Results point to the need to further understand reciprocity in the mother-child relationship and the influence of severity of the developmental disability on a mother's well-being. (RH)
ISSN: 08952841
From : Haworth Delivery Service Centre, The Haworth Press Inc., 10 Alice Street, Binghamton,

GOVERNMENT AND POLICY

192/47

Policy digest: policy into practice into changing lives; by Better Government for Older People - BGOP; Older People's Advisory Group - OPAG. London: Better Government for Older People, October 2008, 43 pp.

A compilation published for the Better Government for Older People (BGOP) "10th birthday" conference held in Blackpool in October 2008. It includes contributions from: Blackpool Council; the Older People's Commissioner for Wales, Ruth Marks; the Department of Health (DH) initiatives Putting People First and Partnerships for Older People Projects (POPPs); Early Years Equality (EYE); the Scottish Government's All Our Futures; LinkAge Plus; the All Parliamentary Local Government Group; the Centre for Policy on Ageing (CPA); and the Welsh Assembly Government. Also included are the main points of the Public Service Agreement (PSA) 17 - Tackle poverty and promote greater independence and well-being in later life - being led by the Department for Work and Pensions (DWP), with contributions from the DH and the Department for Communities and Local Government (DCLG). Mervyn Eastman (Director, BGOP) introduces and concludes this policy digest, by considering whether attitudes to ageing have changed and progress with the age agenda. (RH)

From : Better Government for Older People, 25-31 Ironmonger Row, London EC1V 3QP.
Website: www.bgop.org.uk

HEALTH CARE

(See 192/48, 192/51, 192/105)

HEALTH SERVICES

(See Also 192/16, 192/35, 192/61, 192/75, 192/91, 192/110)

192/48

Efficiency and equity considerations in the employment of health care assistants and support workers; by Carole Thornley.

Social Policy & Society, vol 7, pt 2, April 2008, pp 147-158.

A major policy plank in health and social care involves rebalancing 'skillmix' or occupational grademix to effect cost efficiency savings. In line with this, there has been a large expansion in recent years in the employment of care assistants / support workers. This article focuses on the largest employment area for these occupations - healthcare. It draws upon commissioned research projects to detail the context for the introduction of these new grades, to highlight issues in practice and usage to date, and to analyse tensions between policy objectives around efficiency and equity in the employment of these workers. (KJ/RH)

ISSN: 14747464 From : <http://www.journals.cambridge.org/sps>

192/49

The fortune teller: a life expectancy intervention tool is now available for all local planning; by Andy Cowper.

Health Service Journal, vol 118, HSJ and LGC Supplement [insert in issue 6117], 31 July 2008, pp 12-13.

A new online life expectancy intervention tool has been developed by the Association of Public Health Observatories with and for the Department of Health (DH). The tool builds on the Health Inequalities Information Tool, and is designed to support primary care trusts (PCTs) with their local delivery planning and commissioning. Specifically, the tool will help local authorities to estimate the effect on life expectancies if certain interventions - such as smoking cessation, or anti-hypertensive or statin prescribing for those previously with undiagnosed or uncontrolled hypertension - are increased. This article looks at the tool's potential for tackling health inequalities, and draws attention to the link on the London Health Observatory's website (www.lho.org.uk/health_inequalities/health_inequalities_tool.aspx). (RH)

ISSN: 09522271 From : <http://www.hsj.co.uk>

- 192/50 Give old people a seat at the modernisation table; by Nicky Hayes, Jonathan Webster. Health Service Journal, vol 118, no 6109, 5 June 2008, pp 18-19. Services for older people are falling down government priority lists. Two consultant nurses for older people argue for specialist care, both in hospital and the community, to be made explicit in the government's reform and modernisation plans. They comment that Lord Darzi's next stage review of the National Health Service (NHS) appears to omit older people's care. This is in contrast to their own work in specialist services which is needs-led and brings with it an understanding of the impact of the ageing process on health and well-being, and uses person-centred assessment, treatment and rehabilitation. (RH)
ISSN: 09522271
From : <http://www.hsj.co.uk>
- 192/51 Health and care services for older people: overview report on research to support the National Service Framework for Older People; by Janet Askham, Research and Development Directorate, Department of Health - DH.: Department of Health - DH, 2008, 82 pp (Gateway ref: 9662). This report draws on 16 projects within the Older People and their Use of Services (OPUS) research programme, funded by the Research and Development Directorate, Department of Health (DH), to support the National Service Framework for Older People (NSFOP) since its introduction in 2001. These research projects (summarised in an appendix) aimed to examine particular aspects of the NSFOP policies and recommendations which were seen as requiring investigation. The report notes the tensions between service provision in meeting older people's needs and expectations, and resource constraints. It summarises the three types of OPUS projects, which examined specific national policy directives, local initiatives, and older people's needs and circumstances. It organises findings around the six main principles of the NSFOP: being supported to remain active and healthy into late old age; no discrimination in health and social care services; receiving services from professionals who specialise or are trained in the treatment of older people; person-centred or personalised services; those with health problems should be helped to manage their own conditions, to retain or regain independence and remain living in the community; and those with complex needs should receive integrated and long-term care services. The cross-cutting themes of the OPUS projects suggest further service developments and other lines of enquiry. The report concludes by commenting on the future of research on older people. (RH)
From : DH Publications Orderline, PO Box 777, London SE1 6XH.
email: dh@prolog.uk.com tel: 08701 555 455
Download: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/DH_088848
- 192/52 Primary concerns: older people's access to primary care; by Policy Unit, Age Concern England - ACE.: Age Concern England, September 2008, 19 pp. Older people visit their general practitioner (GP) more often than younger people, and most consider their GP to be the most important person in their healthcare. This report is based on findings of quantitative research commissioned by Age Concern England (ACE) carried out by BMRB. Data were collected in face-to-face interviews with a representative sample of 1097 older people (age 65+) in England during April 1008. While almost all participants felt that they had sufficient time to discuss everything they wanted to with their GP or practice nurse, more than one in seven experienced some difficulty in making an appointment when they wanted it. The report comments on and makes recommendations about access to primary care (including home visits), dental care and foot care. The report also draws on other recent reports on access to and experiences of GP and dental services, as well noting Ara Darzi's NHS Next Stage Review on primary and community care for the Department of Health (DH). (RH)
From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Website: www.ageconcern.org.uk

HOME CARE

(See Also 192/41, 192/116)

- 192/53 The effectiveness of home care reablement: developing the evidence base; by Caroline Glendinning, Elizabeth Newbronner.
Journal of Integrated Care, vol 16, issue 4, 2008, pp 32-39.
Adult social care services are increasingly reablement services as part of their range of home care provision, sometimes alone, sometimes jointly with National Health Service (NHS) partners. Typically, home care reablement is a short-term intervention, often free of charge, that aims to maximise independent living skills. This paper describes two small studies examining the impact of home care reablement on subsequent service use. So far, the evidence strongly suggests that a period of home care reablement can reduce the subsequent use of home care services and that, for some people, these benefits may last for a year or more. However, a number of organisational and cultural factors can limit the immediate and longer-term benefits of home care reablement. (RH)
ISSN: 14769018
From : <http://www.pavpub.com>
- 192/54 From rhetoric to reality: a manifesto for sustainable homecare; by United Kingdom Home Care Association - UKHCA. Sutton, Surrey: United Kingdom Home Care Association - UKHCA, 2008, 4 pp.
Homecare is the essential component of social care in the 21st century. This manifesto sets out UKHCA's programme of action to support and develop the homecare sector. It sets out actions for central and local government, and independent and voluntary sector providers to tackle the demographic and workforce challenges to the homecare sector, and thereby to ensure that service users receive genuine choice about their personal care. (RH)
Price: download
From : Download from website: <http://www.ukhca.co.uk/pdfs/Manifesto.pdf>
- 192/55 Island of the free: [Isle of Wight home care]; by Natalie Valios.
Community Care, issue 1741, 2 October 2008, pp 30-31.
The Isle of Wight has improved the lives of older people by making home care free for many over 80s so they are not forced to go into residential homes. This article examines what has worked and how the change was implemented with action taken in five key areas to get the scheme up and running: political sign-up, leadership, cost allocation, publicity and discrimination. Further innovation has been introduced for older people with mental health problems, who will now be able to access the same services as under 65s. The council is also developing an integrated dementia service across the island. (KJ/RH)
ISSN: 03075508
From : <http://www.communitycare.co.uk>
- 192/56 Quality of private personal care for elderly people with a disability living at home: correlates and potential outcomes; by Claudio Bilotta, Carlo Vergani.
Health and Social Care in the Community, vol 16, no 4, July 2008, pp 354-362.
100 older outpatients of a geriatric medicine unit in Milan, Italy living at home were recruited to this cross-sectional study between May 2005 and February 2007, along with their private aides and 80 informal carers. Cases were stratified according to the quality of private care as described by participants and informal caregivers. In cases of individuals suffering from overt cognitive impairment, only informal caregivers' opinions were taken into account. Comparisons were made between the "poor or fair care" group (n=15) the "intermediate care" group (n=39) and the "optimal care" group (n=45). Considering the characteristics of private aides, there was a significant trend across the three groups in terms of language skills and level of distress with life conditions. A statistical analysis performed on participants without an overt cognitive impairment (n=59) and informal carers showed an increase in the European Quality of Life Visual Analogue Scale score and a decrease in the Caregiver Burden Inventory score across the

three groups. No significant differences were found across the three groups in terms of social variables, functional and cognitive status, prevalence of depressive disorders and morbidity. Good language skills or non-distressing living conditions of private aides appear to be correlates of an optimal quality of care for community-dwelling older people with a disability. Better quality of life for these outpatients, and less distress for their informal caregivers appear to be potential outcomes of the quality of personal care. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

HOUSING

(See Also 192/82, 192/83)

192/57

The future home improvement agency: supporting choice and maintaining independence: a report overview; by Foundations - National Co-ordinating Body for Home Improvement Agencies; Department for Communities and Local Government - DCLG. London: Department for Communities and Local Government, September 2008, 38 pp.

Home improvement agency (HIA) services - such as 'Care and Repair' or 'Staying Put' - originated more than 20 years ago, to provide responsive solutions to older owner occupiers' home repair, maintenance and adaptation problems. The Department for Communities and Local Government (DCLG) commissioned Foundations, the National Co-ordinating Body for Home Improvement Agencies to carry out the Future HIA project. The project aims to set out a broad agenda for the sector's evolution; identifies what is being done well by some HIAs to suggest models for wider use; and examines national policy issues, for example those that were introduced in the report, 'Lifetime homes, lifetime neighbourhoods: a national strategy for housing in an ageing society' (DCLG, 2008). This report presents the initial findings on five areas of HIA services, for which Foundations will also be producing sub-reports: support for choice - information, advice and advocacy; funding repairs, improvements and adaptations; handyman services; major adaptations; and connecting with health. The full report will be published in Autumn 2008. (RH)

From : Communities and Local Government Publications, PO Box 236, Wetherby, West Yorkshire LS23 7NB. For alternative formats, e-mail: alternativeformats@communities.gsi.gov.uk Download link at: <http://www.communities.gov.uk/publications/housing/futurehia>

192/58

A place to live; by Gillian Crosby, Angela Clark, Centre for Policy on Ageing - CPA. Working with Older People, vol 12, issue 3, September 2008, pp 12-14.

The home improvement agency sector must move up a gear or two as the pace quickens to respond to society's wish to 'stay put', even when frailty or ill health set in. These authors examine the policies that are driving the housing agenda forward and the housing options that are currently available to older people, stressing the need for consultation all the way. The study which informed this article - 'Older people's vision of long term care', undertaken by the Centre for Policy on Ageing (CPA) with the Older People's Programme (OPP) - is described. It explored the choice and control of older people with high support needs. (KJ/RH)

ISSN: 13663666

From : <http://www.pavpub.com>

192/59

Rainy days and silver linings: using equity to support the delivery of housing or services for older and disabled people; by Housing Learning and Improvement Network - Housing LIN, Care Services Improvement Partnership - CSIP, Department of Health - DH.: Care Services Improvement Partnership - CSIP, October 2008, 72 pp.

Published at a time of turbulence in the housing market, this report sets out the landscape of equity release possibilities for older home owners, and describes a range of models that use equity in a variety of ways to provide additional housing or support for other vulnerable people. These include commercial equity release products; non-commercial loans provided by not-for-profit organisations such as community development financial institutions (CDFI); third

party equity; and housing market renewal products. The aim is to help older and disabled people, professionals, registered social landlords (RSLs), and voluntary and commercial organisations in seeking information on, or an understanding of, equity. (RH)

From : <http://networks.csip.org.uk/IndependentLivingChoices/Housing/Topics/type/resource/?cid=4211>

192/60

Where will we live when we get older?; by Tricia McLaughlin, Anthony Mills.

Quality in Ageing, vol 9, issue 3, September 2008, pp 15-21.

Although they exhibit marked differences across countries and cultures, ageing populations are a global culture. Old age dependency ratios in most developed countries are projected to double by 2050. In Australia, there will be a strain on economic growth as a large part of the population moves from pre-retirement to post-retirement age over the next 25 years. A disproportionate amount of this strain will be concentrated in aged-care housing or retirement accommodation. Current evidence suggests that existing housing stock for older people is inadequate. As the Australian population ages, the maintenance and long-term performance of retirement housing is a key concern of government and housing providers. This study examined the performance of the current housing stock managed by four aged-care or retirement providers across Australia. Although housing design decisions in retirement stock are critically important in the changing needs of occupants and the adequate supply of suitable housing, interviews revealed these to be often ill-considered. The findings critically question the idea of simply building "more of the same" to relieve demand. This study has major implications for the future of Australian retirement housing, especially as the population ages dramatically. (RH)

ISSN: 14717794

From : <http://www.pavpub.com>

HUMAN RIGHTS

(See Also 192/114)

192/61

On the right track?: a progress review of the human rights of older people in health and social care; by Policy Unit, Age Concern England - ACE. London: Age Concern England, August 2008, 47 pp.

In 2007, the Parliamentary Joint Committee on Human Rights (JCHR) published the report of its inquiry, 'The human rights of older people in healthcare'. Although there were instances of good practice, the JCHR found that the regulation of services with respect to human rights has often fallen short; and the Human Rights Act 1998 (HRA) has not realised its potential since coming into force in 2000. In 'On the right track?' Age Concern England (ACE) sets out 24 recommendations for action, if the culture change recommended by the JCHR is to be achieved, or the Department of Health (DH) commitments on older people's human rights are to be realised. It calls for: the Ministry of Justice to demonstrate support for human rights; protection through legislation regarding independent care, hospital discharges, and age discrimination; regulation by the Care Quality Commission to be underpinned by human rights; leadership from the Equality and Human Rights Commission (EHRC); a human rights framework for the work of the National Institute for Health and Clinical Excellence (NICE); empowering older people through the complaints system, advocacy and information; support for the role of service providers through guidance and training; and service providers and commissioners to adopt a human rights based approach to their work. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.
http://www.ageconcern.org.uk/AgeConcern/Documents/On_the_right_track_FINAL.pdf

INFORMATION AND COMMUNICATION TECHNOLOGY

192/62

Ageing, social capital and the internet: findings from an exploratory study of Australian 'silver surfers'; by Cherry Russell, Andrew Campbell, Ian Hughes.: Blackwell Publishing, June 2008, pp 78-82.

Australasian Journal on Ageing, vol 27, no 2, June 2008, pp 78-82.

This study's objective was to document the sociodemographic characteristics and online use patterns of older Australian internet users as part of an exploratory study of the relationship between internet communication and access to social capital in later life. A purposive sample of 154 internet users aged 55 years+ and not employed full-time completed an electronic survey about their social characteristics and patterns of internet use. A sub-sample of 30 participated in follow-up in-depth interviews. The majority of participants comprised married, home-owning, English-speaking women and men in good health. They made extensive use of the communication and information functions of the internet to supplement and enhance their connections with friends and family and their engagement with wider social networks. In conclusion, policy development should be informed by better understanding of the potential and limitations of the internet as a tool for generating and sustaining social capital in old age. (KJ/RH)

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From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

INTERMEDIATE CARE

192/63

Intermediate care: what are service users' experiences of rehabilitation?; by Jane Benten, Nicola J Spalding.

Quality in Ageing, vol 9, issue 3, September 2008, pp 4-14.

The Department of Health's introduction of intermediate care recognised the need for rehabilitation following acute hospital care. The importance of rehabilitation was also stressed by a review carried out across England and Wales by District Audit. This article reports a phenomenological study carried out to explore service users' experiences of a 22-bedded intermediate care service. Face-to-face semi-structured interviews were conducted with 8 service users who were older people, with a further follow-up interview two weeks later. Data were analysed using an open coding and theming approach. One of the six emergent themes is discussed in this article: service users' rehabilitation experiences. Data were themed into a rehabilitation framework of users' understanding, assessment and goal setting, interventions and transfer home. Intermediate care was found to provide support for service users between discharge from acute hospital and return to their own homes, but service users lacked understanding and awareness of the intermediate care service. They did not feel involved in their assessment and goal setting, and so were unable to make individual contributions regarding their own rehabilitation needs. Interventions were subsequently not linked to their needs; and transfer home experiences were variable. Users' experiences did not reflect the DH's four principles that underpin the delivery of intermediate care: person-centred care; whole system working; timely access to specific care; and promoting health and an active life. Recommendations are made to address these and to incorporate the recommendations from District Audit. (RH)

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From : <http://www.pavpub.com>

INTERNATIONAL AND COMPARATIVE

(See Also 192/5, 192/8, 192/36, 192/42, 192/67, 192/79, 192/85, 192/102, 192/123)

192/64

Social networks and depressive symptoms among elderly women and men in Havana, Cuba; by Maryline Sicotte, Beatriz Eugenia Alvarado, Esther-Maria León (et al).: Taylor & Francis, March 2008, pp 193-201.

Ageing & Mental Health, vol 12, no 2, March 2008, pp 193-201.

Information gathered from a representative sample of 1905 older people in Havana, Cuba as part

of the SABE study (Salud, Bienestar y Envejecimiento - a study of health, well-being and ageing) was used to examine the main and stress-buffering effects of social networks on depressive symptoms. Depressive symptoms were measured using the 15-item Geriatric Depression Scale (GDS). The structure and functions of social networks were studied. Gender-specific multivariate logistic regressions were fitted to test the main (independent of stressors) and the stress-buffering effects (in the presence of financial strain or disabilities) on depressive symptoms. Social ties were associated with a lower prevalence of depressive symptoms in women and men independently of the presence of stressors. Women who were or had been married, lived in an extended family, and enjoyed balanced exchanges with relatives and children reported low prevalence of depressive symptoms. Men were less likely to report depressive symptoms if they were currently married, and did not live alone. Social networks buffered the effect of financial strain on depression, but not in the event of disability. In Cuba, networks centred on children and extended family were associated with low frequency of depressive symptoms, ruling contrary to common findings in developed societies. (RH)

ISSN: 13607863

From : <http://www.informaworld.com/CAMH>

192/65

Successful ageing among low-income older people in South Korea; by Soondool Chung, Soo-Jung Park.

Ageing and Society, vol 28, part 8, November 2008, pp 1061-1074.

The aim of this study was to investigate 'successful ageing' among low income elderly people in the Republic of Korea (South Korea). A sample of men and women aged 65+ who received welfare benefits and social welfare services from senior welfare centres and who had good cognition were identified and recruited by the staff of eight such centres in Seoul, the capital city of the country. Face-to-face interviews were conducted with a structured questionnaire using measures and instruments that were selected following a literature review and previous studies of low-income older people. The survey instrument was pre-tested with seven subjects to ensure the comprehensibility of the items, and 220 main interviews were conducted in the respondents' homes and at senior welfare centres during October and November 2006. Factor analysis identified three factors in successful ageing: 'a positive attitude towards life', 'success of adult children', and 'relationships with others'. Men reported higher scores on successful ageing than women. It was concluded that the concept of 'successful ageing' does apply to low-income older people in Korea, although its components have little to do with material or social success as conceived by previous studies of the general older population in either western or Asian countries. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

LEARNING DIFFICULTIES

192/66

Working with older people with learning disabilities: lessons from an Age Concern pilot programme; by Age Concern England - ACE. London: Research and Development Unit, Fieldwork Division, Age Concern England, 2008, 13 pp (Research briefing).

Two charitable trusts - the Calouste Gulbenkian Foundation, and the Mercers' Company - provided financial support to five local Age Concern projects to undertake work focusing on empowering older people with learning disabilities and their families. The projects focused on one or more of these areas of work: supporting inclusion; developing partnerships; research and development; and independence, voice and choice. The five pilot project locations selected - Coventry, Leicester, Norfolk, Norwich and Nottingham - variously undertook activities on collecting information, consulting people, raising awareness, improving communication, and delivering services. Les Bright, independent consultant, undertook the programme evaluation and wrote the evaluation report on which this briefing is based (e-mail: BrightLes@aol.com). (RH)

From : Sally Steele, Research and Development Unit, Age Concern England: Sallyanne.steele@ace.org.uk

LEGAL ISSUES

(See Also 192/81)

- 192/67 Facts on law and ageing quiz: older people's knowledge of their legal rights; by Israel Doron, Perla Werner.
Ageing and Society, vol 28, part 8, November 2008, pp 1159-1174.
Until now, no attempt has been made to develop a research tool to provide a broad descriptive picture of the actual knowledge that older people have of their legal rights. This article describes a first attempt, conducted in Israel, to create such a tool, known as the 'Facts on Law and Ageing Quiz (FoLAQ)'. This quiz was developed to provide a short and standardised tool for assessing older people's knowledge of their legal rights in Israel. It is also intended to serve as a research platform for similar studies in other countries worldwide. The research was designed using a quantitative approach. The research population consisted of a randomly chosen sample of 227 adult Jews, aged 50+, living in the community in Israel. The participants were asked 20 multiple-choice questions on central legal issues, and 13 closed questions on their socio-demographic background, by means of a computer-assisted telephone interview (CATI). The findings revealed that, in general, the majority of older people in Israel know little about their legal rights. Specifically, the most vulnerable groups in this context were the less educated, the poor, the older-old and women. Finally, the findings also showed that knowledge gaps were particularly obvious with regard to national legal schemes covering social security in old age, and the rights of older people regarding Israel's national health insurance scheme. (KJ/RH)
ISSN: 0144686X
From : <http://www.journals.cambridge.org/ASO>

LIFE-LONG LEARNING

- 192/68 'Keeping the grey matter ticking over': learning after the age of 50; by Policy Unit, Age Concern England - ACE.: Age Concern England, September 2008, 23 pp.
Age Concern England (ACE) commissioned Helena Poldervaart of Dialogue by Design to design and run four deliberative workshops with 46 older learners (83% female, 71% aged 70+, and 74% white). The workshops were conducted in south-east England, the West of England, and the Midlands. This report presents the research findings and recommendations to policy makers and service providers, in the light of the government consultation on informal adult learning ('Informal adult learning - shaping the way ahead'; Department for Innovation, Universities and Skills, DIUS, 2008). The report defines lifelong learning, by referring to examples of pilot schemes funded by the Department for Work and Pensions (DWP) until October 2008. It presents participants' views on the benefits of and barriers to lifelong learning. ACE recommends that government must address three priority areas: funding; co-ordinating and joining up of initiatives; and ensuring equity and inclusion, so that all older people have access to lifelong learning. (RH)
From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Website: www.ageconcern.org.uk

LONELINESS

- 192/69 The experience of social and emotional loneliness among older people in Ireland; by Jonathan Drennan, Margaret Treacy, Michelle Butler (et al).
Ageing and Society, vol 28, part 8, November 2008, pp 1113-1132.
This paper reports a study of the risk factors for social and emotional loneliness among older people in Ireland. Using the Social and Emotional Scale for Adults, the social and emotional dimensions of loneliness were measured. Emotional loneliness was conceptualised as having elements of both family loneliness and romantic loneliness. The data were collected through a national telephone survey of loneliness in older people conducted in 2004 that completed interviews with 683 people aged 65+. It was found that levels of social and family loneliness were low, but that romantic loneliness was relatively high. Predictors for social loneliness were

identified as greater age, poorer health, living in a rural area, and lack of contact with friends. Living in a rural setting, gender (male), having a lower income, being widowed, no access to transport, infrequent contact with children and relatives and caring for a spouse or relative at home were significant predictors of family loneliness. Romantic loneliness was predicted by marital status, in particular being widowed. Never having married or being divorced or separated were also significant predictors for romantic loneliness. The findings indicate that loneliness for older people is variable, multi-dimensional and experienced differently according to life events, with, for example, the death of a partner being followed by the experience of emotional loneliness, or the loss of friends or declining health leading to social loneliness. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

LONG TERM CARE

- 192/70 Do we have the means?: [funding and provision of adult services]; by Andrew Mickel. Community Care, issue 1743, 16 October 2008, pp 28-29. In 1999, the Royal Commission on Long-Term Care for the Elderly recommended that the state should pay for all long-term personal care. This article comments that much of the discussion on the reform of adult services is about funding, but that we need to work out what provision should be paid for. Free personal care in Scotland is proving problematical: when local authorities run out of money, it becomes a rationed system. Help the Aged suggests an entitlement to a basic care home bed; and in research for the Department of Health (DH), Caroline Glendenning (University of York is looking at social care reforms overseas. (RH)
ISSN: 03075508
From : <http://www.communitycare.co.uk>

- 192/71 Does a functional activity programme improve function, quality of life, and falls for residents in long term care?: cluster randomised controlled trial; by Ngaire Kerse, Kathy Peri, Elizabeth Robinson (et al).
British Medical Journal, vol 337, no 7675, 18 October 2008, pp 912-915.
A programme of functional rehabilitation had minimal impact for older people in residential care with normal cognition, but was not beneficial for those with poor cognition. Residents in low-level dependency residential care in two cities in New Zealand were eligible for this study; participants were 682 residents aged 65+. 330 were offered a goal-setting and individualised activities of daily living (ADLs) programme (the promoting independence in residential care, PIRC intervention) by a gerontology nurse, reinforced by usual healthcare assistants. 352 received social visits. 472 (70%) completed the trial. The programme had no impact overall. However, in contrast to residents with impaired cognition (no differences between intervention and control group), those with normal cognition in the intervention group may have maintained overall function and lower limb function. In residents with cognitive impairment, the likelihood of depression increased in the intervention group. No other outcomes differed between groups. (RH)
ISSN: 09598138
From : www.bmj.com

MEDICAL ISSUES

- 192/72 Malignant mesothelioma in older people; by Stefan Marciniak.
CME Journal, Geriatric Medicine, vol 10, no 1, 2008, pp 47-50.
Thousands of British people will die from malignant mesothelioma during the early part of this century because of previous industrial exposure to asbestos. Most of these deaths will be among the elderly population because of the long latency in mesothelioma development. Regrettably, median survival from this disease remains depressingly short. To address these problems, novel diagnostic tools are becoming available and two major randomised controlled therapeutic trials are currently underway in the United Kingdom. (KJ/RH)
ISSN: 14751453

192/73

Rehabilitation in Parkinson's disease; by Dorothy Robertson.

CME Journal, Geriatric Medicine, vol 10, no 1, 2008, pp 51-57.

The onset of Parkinson's Disease (PD) has profound implications for the individual and their family, impacting on employment if of working age, retirement plans and personal finances. The gradual erosion of independence shrinks horizons and limits patient and carer options for social interaction. The variability which characterises PD is particularly frustrating to live with and complicates the planning and provision of care. The National Service Framework for Long term Neurological Conditions highlights the importance of "improving access to rehabilitation services so that people disabled as a result of a neurological conditions can achieve and maintain the greatest possible level of independence and social inclusion". Many issues addressed by rehabilitation are common across the spectrum of neurology. PD specific approaches employ externally cued movement strategies to compensate for dysfunction within the brain's autopilot - the basal ganglia. Medication review is integral and management must take account of non-motor as well as mobility related issues. (KJ/RH)

ISSN: 14751453

192/74

Traditional hip and knee replacement are less likely to need revision; by Zosia Kmietowicz.

British Medical Journal, vol 337, no 7669, 6 September 2008, p 534.

Brief news article that reports on a study which tracked more than 150,000 people who underwent a hip or knee replacement by the National Health Service (NHS) in England between April 2003 and September 2006, in order to study the performance of joint replacements according to the type of prosthesis used. It found that, overall, only one in 75 patients (1.4%) needed revision of their hip or knee operation in the three years after initial surgery, but the percentage needing revision varied with the procedure used. The study was published in the journal, PLoS Medicine, (vol 5, no 8) under the title "Revision rates after primary hip and knee replacement in England between 2003 and 2006" by Sibanda, Copley, Lewsey, et al (2008). The website of PLoS Medicine should allow free access to the journal article :

(<http://medicine.plosjournals.org/perlserv/?request=index-html&issn=1549-1676>). (KJ/RH)

ISSN: 09598138

From : <http://www.bmj.com>

MEDICATION

192/75

Patients' experiences of a community pharmacy-led medicines management service; by Paul Bissell, Alison Blenkinsopp, Duncan Short (et al).

Health and Social Care in the Community, vol 16, no 4, July 2008, pp 363-369.

Medicines management services provided by community pharmacists have been proposed as one means of ensuring that patients receive all the medicines they may benefit from in the English National Health Service (NHS). These services may also offer ways of tackling the historic under-use of community pharmacists' clinical skills and expertise. Medicines management services differ significantly from the dispensing and medicine sales roles traditionally associated with community pharmacy, particularly in relation to the provisions for pharmacists to make recommendations to both patients and doctors about pharmacological treatment and lifestyle management. This paper describes patients' experiences of a medicines management service by community pharmacists for people with coronary heart disease (CHD), delivered in England. It draws on findings from semi-structured, face-to-face interviews with 49 patients recruited from pilot sites delivering the service. Findings suggest that although patients cautiously welcome the opportunity to consult with a pharmacist about their medicines, they have reservations about them making recommendations about treatment, and many still regard the doctor as the health professional "in charge" of their medicines. These findings are discussed in light of developing sociological literature on pharmacy and medicines usage. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

- 192/76 Pills and perils: repeat prescribing for older patients; by David Andrewes, Diane Andrewes, Jackie Charles (et al), Eastleigh Southern Parishes Older People's Forum (ESPOPF). Old Bursledon, Southampton: Eastleigh Southern Parishes Older People's Forum (ESPOPF), 2008, 33 pp.
Eastleigh Southern Parishes Older People's Forum (ESPOPF) in Hampshire has surveyed repeat prescribing for the over 60s in six villages in semi-rural Hampshire. This is ESPOPF's fourth piece of research by older people into problems experienced by older people. The study's aim is to examine the problems arising out of repeat prescribing, and to make recommendations to enhance the well-being of older people who are dependent on prescribed drugs for their continuing quality of life. This report includes the questionnaire used, and notes the study's limitations. It presents findings on: the profile of respondents; statistics of repeat prescribing; GPs' explanations of medications; ordering, collection and delivery, identification and packaging of medication; patients' forgetfulness; adverse side-effects; monitoring of medication; and non-compliance. Whereas health professionals research why patients won't and don't take their tablets, this research sets out to discover why older patients don't and can't. (RH)
From : Diane Andrewes, Orchard Hill, Salterns Lane, Old Bursledon, Southampton SO31 8DH. email: diane.andrewes@virgin.net Website: www.espopf.org.uk

MENTAL HEALTH

(See Also 192/18, 192/42, 192/68, 192/105)

- 192/77 Mental wellbeing and older people; by National Institute for Health and Clinical Excellence - NICE. London: NICE - National Institute for Health and Clinical Excellence, October 2008, 5 pp (Quick reference guide : NICE public health guidance, 16).
This quick reference guide presents the recommendations made in 'Occupational therapy interventions and physical activity interventions to promote the mental well-being of older people in primary care and residential care'. The guidance focuses on occupational therapy interventions, physical activity and walking schemes for older people and their carers being made available by health and social care professionals. It recommends that occupational therapists are involved in designing and developing training schemes for those working with older people. Tools for putting this guidance into practice and other documentation is available in the NICE website (at www.nice.org.uk/PH016). (RH)
ISBN: 1846298180
From : National Institute for Health and Clinical Excellence, MidCity Place, 71 High Holborn, London WC1V 6NA. Website: <http://www.nice.org.uk/PH016>
- 192/78 New perspectives on subjective memory complaints: editorial and special section; by Steven H Zarit (ed.): Taylor & Francis, March 2008, pp 165-192.
Aging & Mental Health, vol 12, no 2, March 2008, pp 165-192.
Three papers in this issue of Aging & Mental Health (and Oyeboode et al's in the November 2007 issue) provide further perspectives on memory complaints, representing the Netherlands, Portugal, the UK and the US. Two provide clarification of the role of depression for memory complaints, while another considers the psychosocial determinants of forgetfulness. (RH)
ISSN: 13607863
From : <http://www.informaworld.com/CAMH>
- 192/79 Older people's sense of coherence: relationships with education, former occupation and living arrangements; by Silvia Ciairano, Emanuela Rabaglietti, Roberta De Martini (et al).
Ageing and Society, vol 28, part 8, November 2008, pp 1075-1092.
Few studies have explored the combination of individual and contextual conditions that influence psychological health among older people. This study aimed to analyse the sense of coherence (SOC) in a sample of Italian senior citizens in relation to gender, educational level, living arrangements and former employment, when controlling for age. The short version of the SOC scale (Antonovsky, 1987), which has items for the 'comprehensibility', 'manageability' and 'meaningfulness' components, was administered to a sample of 198 senior citizens of both

genders and with an average age of 68.5 years. The findings showed that senior citizens with a higher level of education and who had retired from jobs with a high level of responsibility perceived reality as more controllable, manageable and meaningful; and that with greater age, the perception that life's challenges are worth facing decreased. The study also found there was an interaction between living arrangements and education level, viz those with higher education, and those with lower education living with a spouse or partner, perceived reality as more meaningful and their life challenges as worth facing. It is important to investigate further the activities that help maintain a high sense of coherence throughout the life span, and to design social policies that support senior citizens who live alone, because they appear psychologically weaker than others. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

MENTAL HEALTH SERVICES

(See Also 192/6, 192/29)

192/80 Copying letters to older people in mental health services: policy with unfulfilled potential; by Michael Clark, Susan Mary Benbow, Vanessa Scott (et al).

Quality in Ageing, vol 9, issue 3, September 2008, pp 31-38.

The important initiative from the Department of Health (Working Group on Copying Letters to Patients, 2002) to require that letters between clinicians should be copied to the patient has not been implemented as widely as was intended. There have been concerns about logistics, and fears that patients might be confused or frightened by communications that they are not equipped to understand. Yet modifications of the system to allow patients the choice to receive or not receive such letters, and suitable training for clinicians offer safeguards. There is no doubt that copying letters provides an inexpensive mechanism for involving patients in their own care and treatment, offering transparency and confirming respect for quality in the relationship between patient and clinician. This paper reports experience with copying letters to patients and families with dementia. The process was warmly received by patients and carers, including families, in a black and minority ethnic (BME) community in Wolverhampton, and few adverse comments were met. The routine application of this initiative will have benefits for the quality of service experience for older people, including those with dementia. (RH)

ISSN: 14717794

From : <http://www.pavpub.com>

192/81 Putting it into practice: will the new Mental Health Act slow down or accelerate integrated working?; by Joan Rapaport, Jill Manthorpe.

Journal of Integrated Care, vol 16, issue 4, 2008, pp 22-29.

The review of the Mental Health Act 1983 is part of the Government's modernisation agenda for England and Wales. Mental health legislation has been affected by the Human Rights Act 1998, judgments in the European Court of Human Rights and in the House of Lords (notably the 'Bournewood judgment'), and the Mental Capacity Act 2005. This article provides a short overview of changes introduced in the Mental Health Act 2007. It argues that the workforce changes are important features of the Act that confirm policy goals of integrated working and practice. (RH)

ISSN: 14769018

From : <http://www.pavpub.com>

NEIGHBOURHOODS AND COMMUNITIES

192/82 Building our futures: meeting the housing needs of an ageing population; by Margaret Edwards, Ed Harding, International Longevity Centre UK - ILC UK; Cousing Corporation. Rev ed London: International Longevity Centre - ILC-UK, 2008, 30 pp.

This version of 'Building our futures' has been funded by an Innovation and Good Practice Grant from the Housing Corporation. The report's aim is to encourage people involved in planning for

housing and housing-related services to assess their role in planning for the well-being of communities alongside health, social care and other services. It also provides a guide to the issues that an ageing population present to housing, for example ensuring a good range of housing options, the preventative value of appropriate, adapted or specialist housing, and importance of the wider neighbourhood in promoting independence. It refers to strategies such as Supporting People, and includes a table illustrating the relationships between tenure and various circumstances based on Age Concern England's Lifeforce survey. (RH)

From : International Longevity Centre UK, 22-26 Albert Embankment, London SE1 7TJ.
Website: www.ilcuk.org.uk

192/83

Explaining about ... building to last: [lifetime neighbourhoods]; by Paul Cann.

Working with Older People, vol 12, issue 2, June 2008, pp 9-11.

The Director of Policy and External Communications at Help the Aged discusses how policy-makers and local government need to listen to older people when designing the communities we live in. He highlights how simple, joined-up thinking can make a big difference to older people's lives. Help the Aged has formed the Communities Council, a multidisciplinary working group of individuals from organisations and interests (including the Centre for Policy on Ageing - CPA). The aim is to use the expertise of those involved to further the vision of lifetime neighbourhoods. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

192/84

Post office closures; by Gretel Harris.

Working with Older People, vol 12, issue 2, June 2008, pp 16-19.

The post office network is said to be losing £4 million a week - a seemingly strong enough argument for change. The author explains Age Concern England's campaign against the planned closures, and argues that post offices play a much more vital role in people's lives than the public consultations have given credit. This is particularly important in rural areas where services are sparse, or where there would otherwise be poor access to financial services. As it is, provision of the post office card account (POCA) is likely to have ceased by 2010. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

NURSING

192/85

Strain in nursing care of people with dementia: nurses' experience in Australia, Sweden and United Kingdom; by Anna-Karin Edberg, Mike Bird, David A Richards (et al): Taylor & Francis, March 2008, pp 236-243.

Ageing & Mental Health, vol 12, no 2, March 2008, pp 236-243.

Focus groups were held with 15 nurses in Sweden, Australia and the UK caring for people with dementia. The discussions were tape-recorded and analysed using qualitative content analysis. The nurses described the complexity of their situation and referred to environmental factors such as "the system", community attitudes, other staff, residents' family members and also their own family. With regard to caring for people with dementia, three main sources of strain could be identified: being unable to reach; trying to protect; and having to balance competing needs. The nurses' experience could be understood as a desire to do the best for the people in their care by trying to alleviate their suffering and hence their quality of life. When they did not have the resources, opportunity or ability to do this, it caused strain. (RH)

ISSN: 13607863

From : <http://www.informaworld.com/CAMH>

OLDER OFFENDERS

- 192/86 Community spirit and honour among thieves: [prison healthcare]; by Julia Tabraham. Health Service Journal, vol 118, no 6124, 18 September 2008, pp 16-17.
A study by the author of prison healthcare has uncovered evidence of inmates giving routine care to other prisoners who are old, vulnerable or ill. Her article notes that although prisoners are not allowed to care for each other in prison in any official sense, she describes ways in which both men and women prisoners care for fellow inmates, including secretly administering medication. In the light of the national strategy for carers, she believes that it is time that the acts of this group of carers were formally recognised. (RH)
ISSN: 09522271
From : <http://www.hsj.co.uk>

OLDER WOMEN

(See Also 192/46)

- 192/87 "When I am an old woman, I shall wear purple": Red Hatters cope with getting old; by M Elise Radina, Annette Lynch, Marybeth C Stalp (et al). Journal of Women & Aging, vol 20, nos 1/2, 2008, pp 99-114.
The Red Hat Society began in 1998, when its founder Sue Ellen Cooper bought a red fedora on impulse while browsing in a charity shop. She found that she herself changed with the purchase of the hat, and wanted other women to have this liberated feeling about their behaviour and appearance. This ethnographic study examined women's friendships in Red Hat Society (RHS) chapters. Qualitative data included in-depth interviews (n=25), a focus group interview (n=7), participant observation, and examination of RHS publications. Results suggest that participation in the RHS aids in developing and enhancing positive attitude about self and ageing that contributes to overall well-being; offers the opportunity to obtain instrumental and emotional support; and provides social connections that prevent feelings of social isolation. Collectively, these findings highlight the potential buffering of RHS participation in women's lives. (RH)
ISSN: 08952841
From : Haworth Delivery Service Centre, The Haworth Press Inc., 10 Alice Street, Binghamton, NY 13904-1580, USA.
<http://www.HaworthPress.com>
- 192/88 Challenging social myths and stereotypes of women and aging: heterosexual women talk about sex; by Sharron Hinchliff, Merryn Gott. Journal of Women & Aging, vol 20, nos 1/2, 2008, pp 65-82.
Whereas menopause is constructed as a time when women either lose or renew their interest in sex, later life is regarded as a time when sexual activity no longer assumes importance, yet remains vital to healthy ageing. This article examines the importance of sexual activity to "older" women, paying particular attention to how they negotiate such representations. In-depth interviews were conducted with 19 women aged 50+ recruited from Sheffield. A material-discursive analysis revealed that whilst participants rejected the asexual discourse of ageing, they accepted it for women older than themselves. They constructed women per se as sexually complex, in comparison to men, making sexual activity "risky business" for women, and positioned their own sexual desire as responsive either to a man's sexual desire or to their own hormones. Sexual activity was constructed as having psychological and physiological benefits for couples within committed relationships. (RH)
ISSN: 08952841
From : Haworth Delivery Service Centre, The Haworth Press Inc., 10 Alice Street, Binghamton, NY 13904-1580, USA.
<http://www.HaworthPress.com>

192/89

Older women and domestic violence; by Julie McGarry.
Nursing Older People, vol 20, no 6, July 2008, pp 10-11.

This article explains that domestic abuse in later life is different to elder abuse, and that older women who suffer domestic violence have limited options open to them. The author reviews recent findings on the impact of domestic violence on life and health status, and on the boundaries with elder abuse. (RH)

ISSN: 14720795

From : <http://www.nursingolderpeople.co.uk>

PALLIATIVE CARE

(See 192/39)

PARTICIPATION

192/90

Communities in control: real people, real power: summary; by Department for Communities and Local Government - DCLG.: Department for Communities and Local Government, July 2008, 13 pp.

Seven key issues are considered in the White Paper (Cm 7427), which this document summarises: individual citizens being active in the community; providing more access to information; having an influence through participatory budgets and voting; challenge; redress when things go wrong; standing for office; and ownership and control. One paragraph (35) notes the importance of older people in being able to shape local services and the review of older people's engagement with government. A link to the main White Paper is also available on the DCLG website (<http://www.communities.gov.uk/publications/communities/communitiesincontrol>). (RH)

Price: FOC

From: <http://www.communities.gov.uk/publications/communities/summarycommunities>
Communities and Local Government Publications, PO Box 236, Wetherby, West Yorkshire LS23 7NB. For alternative formats, e-mail: alternativeformats@communities.gsi.gov.uk

PENSIONS AND BENEFITS

192/91

The future of pensions and healthcare in a rapidly ageing world: Scenarios to 2030; by Bernd Jan Sikken, Nicholas Davis, Chiemi Hayashi (et al), World Economic Forum. Geneva: World Economic Forum, September 2008, 115 pp (World Scenario series).

In 2007, the World Economic Forum launched a project, Financing Demographic Shifts 2030, the aim being to address the questions, "How may the future of pensions and healthcare look like in 2030, by taking the various key drivers and critical uncertainties into account? What may be the role of governments, the private sector and individuals?" This report provides an overview of the main challenges related to providing and financing pensions and healthcare of ageing societies. It presents three challenging scenarios for how the business environment around pensions and healthcare might look in the year 2030, considering factors such as attitudes towards retirement and health, global economic performance and investment returns, patterns of infectious and chronic diseases, innovation and the role of governments. The report provides a brief overview of the types of strategic options that may be available to stakeholders to overcome the challenges and grasp the opportunities presented by shifting demographics. Throughout the report, the examples of China and Italy offer contrasting case studies. (RH)

From : Download from website:

<http://www.weforum.org/en/initiatives/Scenarios/FinancingDemographicShifts/index.htm>

PERSON CENTRED CARE

192/92

Talk but no walk: barriers to person-centred care; by Heather Hill.: Hawker Publications, July/August 2008, pp 21-24.

Journal of Dementia Care, vol 16, no 4, July/August 2008, pp 21-24.

Why is it so hard to "walk the walk" of truly person-centred care, even in what seems a very good care environment? The author reports on the study she conducted in a Jewish care home and through the literature, exploring the aims of achieving person-centred care as espoused by Tom Kitwood in 1992. She concludes that challenges are needed beyond the care facility itself - in the whole organisation and the wider community too. (RH)
ISSN: 13518372

PERSONALISATION

- 192/93 A critical consideration of the cash for care agenda and its implications for social services in Wales; by Ann Nullanee James.
The Journal of Adult Protection, vol 10, no 3, August 2008, pp 23-34.
This paper considers cash for care as reflected in direct payments and the more recent development of individual budgets in England. While the momentum to roll out individual budgets gathers pace in England, Wales has embarked on a more cautious approach in wishing to evaluate the impact of individual budgets on social services. The paper identifies some of the far reaching implications of cash for care in general and individual budgets in particular, for service users, carers - both paid and informal - and for the social work profession. The policy incoherence in relation to risk and safeguarding is highlighted. This paper supports the approach currently adopted by the Welsh Government in relation to the 'rolling out' of individual budgets. The Welsh Assembly's 10-year strategy for social services focuses on the rights of citizens and the needs of communities. This paper argues that fulfilling that vision should not be wholly contingent upon an unproven extension into the field of individual budgets. (KJ/RH)
ISSN: 14668203
From : Website: <http://www.pavpub.com>
- 192/94 Employment aspects and workforce implications of direct payments: research report prepared for Skills for Care by IFF Research; by IFF Research Ltd; Skills for Care. London: Electronic format - Skills for Care, May 2008, 253 pp.
The direct payments system introduced in 1997 positions direct payment recipients in the role of "employers". There is a need to understand how direct payments are affecting the nature of the social care sector workforce. This report presents findings of quantitative research conducted by IFF Research in 2007 on behalf of Skills for Care. The research comprised three survey elements: main employer survey; self-completion-survey of personal assistants; and a telephone survey of personal assistants. The report examines the implications of direct payments for: the quality of care and support received by employers; bringing new "employers" into the sector; the nature of the personal assistant workforce; and working practices and working conditions for personal assistants. Personal assistants' views on their current role and future intentions, as well as on training and staff development, are covered. Appendices include the questionnaires, and key findings by local authority for the employer and personal assistant telephone survey. (RH)
Price: foc
From : Download from website: <http://www.skillsforcare.org.uk/view.asp?id=1006>
Contact details: Lorna Adams and Laura Godwin, IFF Research Ltd, Chart House, 16 Chart Street, London N1 6DD. Email: LornaA@IFFResearch.com (Website: www.IFFResearch.com)
- 192/95 Evaluation of the Individual Budgets pilot programme: summary report; by Caroline Glendinning, David Challis, José-Luis Fernández (et al), Individual Budgets Evaluation Network - IBSEN; Social Policy Research Unit - SPRU, University of York. York: Social Policy Research Unit, University of York - Electronic format, 2008, 60 pp.
Individual Budgets (IBs) were first proposed in the report, 'Improving the life of chances of disabled people' (Cabinet Office Strategy Unit, 2005), and repeated in the Green Paper, 'Independence, well-being and choice' (Cm 6499). IBs were piloted as a new way of providing support for older and disabled adults and people with mental health problems eligible for publicly funded social care. The Department of Health (DH) set up IB pilot projects in 13 English local authorities which ran November 2005 to December 2007. The DH commissioned IBSEN to conduct this evaluation, which is the first robust UK study of the implementation and

impact of personalisation approaches to social care. This summary report outlines the methods and the user sample. It comments on: the outcomes for individual service users; costs and cost-effectiveness; the funding streams used; eligibility, assessment and resource allocation; support planning and brokerage; risk and risk management; the workforce, providers and commissioners; and IBs and the interface with NHS planning and services. Discussion includes how we can understand the outcome findings for differing groups of services users. Although the DH has already announced extending personalisation across adult social care in England, the evaluation highlights policy issues for policy and practice that run counter to the IBs concept, such as Fair Access to Care Services (FACS) and charging policies. (RH)

From : The Publications Office, Social Policy Research Unit, University of York, Heslington, York YO10 5DD. Link to download:

<http://php.york.ac.uk/inst/spru/pubs/adult.php>

192/96

In Control? Making sure we're not out of control!: some issues for people considering a direct payment or individualised budget; by Anonymous family carer.

The Journal of Adult Protection, vol 10, no 3, August 2008, pp 14-22.

Individualised budgets or self-directed support allow people to design their own community care package and choose how they get support. Direct payments offer a cash payment in lieu of a community care service. These initiatives signal a move away from established services. At the same time, they may also involve transferring management responsibility from services to the individual service user or family carers - or in some cases, could involve setting up an unmanaged service. This article is based on experience of supporting a carer's son who has learning disabilities to move from the family home into a supported living scheme. This carer happens to work in learning disability services, and thus gets to see another side of the picture too. The article looks at some potential consequences of current policy, and highlights issues that users and family carers may need to consider when they are developing a support package for themselves or a family member or friend. (KJ/RH)

ISSN: 14668203

From : Website: <http://www.pavpub.com>

192/97

Increasing choice and control for older and disabled people: a critical review of new developments in England; by Caroline Glendinning.

Social Policy & Administration, vol 42, no 5, October 2008, pp 451-469.

This paper critically examines new policies currently being implemented in England aimed at increasing the choice and control that disabled and older people can exercise over the social care support and services they receive. The development of these policies, and their elaboration in three policy documents published during 2005, are summarized. The paper then discusses two issues underpinning these proposals: the role of quasi-markets within publicly funded social care services; and the political and policy discourses of consumerism and choice within the welfare state. Despite powerful critiques of welfare consumerism, the paper argues that there are nevertheless very important reasons for taking choice seriously when considering how best to organize and deliver support and other services for disabled and older people. A policy discourse on consumerism, however, combined with the use of market mechanisms for implementing this, may be highly problematic as the means of creating opportunities for increased choice, and, on its own, risks introducing new forms of disadvantage and social exclusion. (KJ/RH)

ISSN: 01445596

192/98

Moving forward : using the learning from the Individual Budget pilots: response to the IBSEN evaluation from the Department of Health; by Department of Health - DH; Individual Budgets Evaluation Network - IBSEN. London: Department of Health - DH, 2008, 37 pp (Gateway ref: 10701).

The main questions that the Department of Health (DH) wanted the Individual Budgets (IBs) pilots to answer were: can IBs help people to get better outcomes from social care resources and services to improve their lives; and can improvements be achieved without additional costs? This response from the DH to the IBSEN research team covers: removing barriers to access for people with mental health problems; monitoring outcomes for individual service users; costs and

sustainability; funding streams; eligibility and assessment; acceptable use of resources and managing the money; support planning and brokerage; risk and risk management; the workforce, providers and commissioners; and the interface with the NHS. The DH acknowledges that, in some cases, different user groups experienced less positive attitudes towards IBs; and that the report highlights challenges in ensuring benefits to everyone as well as financial sustainability. Overall, for the DH, the research shows that IBs have the potential to improve outcomes for people without increases in costs, and with increased cost-effectiveness; and that the personalisation agenda is moving in the right direction. (RH)

Price: download

From : Department of Health, Wellington House, 133-155 Waterloo Road, London SE1 8UG.

<http://www.dh.gov.uk/en/socialcare/socialcarereform/>

192/99

The national evaluation of the Individual Budgets pilot programme: [briefing]; by Caroline Glendinning, David Challis, José-Luis Fernández (et al), Individual Budgets Evaluation Network - Ibsen; Social Policy Research Unit - SPRU, University of York. York: Social Policy Research Unit, University of York - Electronic format, 2008, 4 pp.

The Individual Budgets (IBs) pilot programme tested new ways of giving people who use social care services a greater say in the assessment of their needs; a better understanding of how resources are allocated to meet these needs; and greater flexibility in using resources to meet individual needs and priorities. The evaluation found that IBs were generally welcomed by users, because they gave them more control over their lives. The variations in outcomes between user groups are outlined. Older people reported lower psychological well-being and found the management processes of IBs burdensome. In contrast, mental health service users reported significantly higher quality of life; physically disabled adults were more satisfied with the help they received; and those with learning difficulties were more likely to feel they had control over their daily lives. This briefing comments on costs and cost-effectiveness, the eligibility criteria, planning support arrangements, and the funding system, as well as implications for policy and practice. (RH)

From : The Publications Office, Social Policy Research Unit, University of York, Heslington, York YO10 5DD. Link to download: <http://php.york.ac.uk/inst/spru/pubs/adult.php>

192/100

Not throwing out the partnership agenda with the personalisation bathwater; by Helen Dickinson, Jon Glasby.

Journal of Integrated Care, vol 16, issue 4, 2008, pp 3-8.

The personalisation agenda currently appears as a key strand of the Government's approach to health and social care services. On the face of it, this offers an exciting new future where service users drive the way services are joined up. Given the paucity of evidence to show that the organisationally-driven partnership working of the past decade has delivered real and tangible outcomes for service users, this may be welcome news. There is some suggestion that in future, any talk about partnerships will be this citizen-state interaction, rather than one between health and social care agencies. This paper argues that there is a real danger in suggesting that personalisation negates the need for health and social care agencies to work together in partnership; instead, this interface is more imperative than ever. The authors provide an overview of the debates around personalisation and partnership. They set out the case why partnership should not be forgotten, and indeed will be key in the success of the personalisation agenda. (RH)

ISSN: 14769018

From : <http://www.pavpub.com>

192/101

The personalisation of adult social care in rural areas; by Jill Manthorpe, Martin Stevens, Adult Social Care Workforce Research Unit, King's College London; Commission for Rural Communities. Cheltenham: Commission for Rural Communities, 2008, 44 pp.

This study was commissioned by the Commission for Rural Communities as part of its programme of work on rural disadvantage and access to services. The aim is to inform debate about the transformation of social care and to produce a set of specific messages about and for

rural communities on evidence from rural areas. The study is based largely on 33 interviews with people living and working in rural areas of England in early 2008. Some knew a great deal about individual budgets (IBs) and were asked to think about the rural implications of the personalisation of social care based on their experiences, while others thought about the implications of the personalisation of social care for rural communities. The focus was on people aged 75+, and participants' experiences and expectations. Lessons of the study for older people themselves, for voluntary and community groups, and for private sector and statutory service providers lead to recommendations on "rural proofing", research and monitoring the personalisation programme, and implementing initiatives in rural localities. (RH)

From : <http://www.ruralcommunities.gov.uk/files/CRC%2078%20Adult%20Social%20Care.pdf>

Commission for Rural Communities, John Dower House, Crescent Place, Cheltenham, GL50 3RA. E-mail: info@ruralcommunities.gov.uk Website: www.ruralcommunities.gov.uk

POVERTY

192/102

Doing a bit more for the poor?: social assistance in Latin America; by Peter Lloyd-Sherlock. *Journal of Social Policy*, vol 37, part 4, October 2008, pp 621-639.

Social assistance programmes involving cash transfers to poor and vulnerable households have become a major focus of development policy in recent years. This article compares the experiences of three such programmes in Latin America: Oportunidades in Mexico, Jefes y Jefas de Hogares in Argentina, and Brazil's social pension. Particular attention is given to each programme's administrative effectiveness, as well as their impacts on poverty, human capital, and household and gender dynamics. More broadly, the article assesses whether these schemes live up to their billing as 'best practice' for developing countries, and how they relate to wider shifts in the political economy of welfare provision. It concludes that experiences have been mixed, that claims about positive outcomes are sometimes exaggerated, and that the potential of these programmes to substantially re-orientate welfare systems and promote equitable public policies remains limited. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

192/103

Measuring poverty in Britain as a multi-dimensional concept, 1991 to 2003; by Mark Tomlinson, Robert Walker, Glenn Williams.

Journal of Social Policy, vol 37, part 4, October 2008, pp 597-620.

While poverty is widely accepted to be an inherently multi-dimensional concept, it has proved very difficult to develop measures that both capture this multi-dimensionality and facilitate comparison of trends over time. Structural equation modelling appears to offer a solution to this conundrum, and is used to exploit the British Household Panel Study (BHPS) to create a multi-dimensional measure of poverty. The analysis reveals that the decline in poverty in Britain between 1991 and 2003 was driven by falls in material deprivation, but more especially by reduced financial stress, particularly during the early 1990s. The limitations and potential of the new approach are critically discussed. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

PSYCHOLOGY

(See 192/79)

PUBLIC SERVICES

192/104

Dignity through change: how continence matters; by Pamela Holmes.

Working with Older People, vol 12, issue 2, June 2008, pp 23-25.

Although many of the great cities of the ancient world had public toilets, it was not until Victorian times that they appeared in any great number in Britain. The Public Health Act 1848

called for "public necessities" to be provided to improve sanitation. In recent years, though, toilet closures have attracted much attention. This article discusses the effects of incontinence on older people. The author argues that changes in approach can make a real difference to the quality of life for many older people. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

QUALITY OF LIFE

192/105

Get happy: the secret to a healthy old age; by Gordon Lishman.

Health Service Journal, vol 118, no 6122, 4 September 2008, pp 16-17.

There is clear evidence that older people benefit from preventive healthcare. For the fulfilled old age that people want, services must spot depression early, and support good diet and mobility (through foot care services). The Director General of Age Concern England (ACE) writes in the light of findings in the organisation's report, 'Just what the doctor ordered', that one in ten general practices offer a benefits advice service which has led to reduced demands on health services. (RH)

ISSN: 09522271

From : <http://www.hsj.co.uk>

192/106

Valuing Older People update report 2004-2008; by Valuing Older People in Manchester; Manchester Joint Health Unit. Manchester: Manchester City Council, 2008, 30 pp.

This document describes the achievements of the Valuing Older People (VOP) partners, and the VOP Team since the launch in 2004 of the "Quality of Life Strategy for Manchester's older people". This innovative work team is now organising the Full of Life festival, Manchester's annual celebration of ageing amongst other steps in developing services and providing opportunities that can improve the quality of life of the city's older residents. (KJ)

From : Manchester Joint Health Unit, Room 4042, Town Hall Extension, Manchester M60 2LA.
email: vop@manchester.gov.uk

RESEARCH

192/107

The development of a 'postcode best fit' methodology for producing population estimates for different geographies; by Andy Bates.

Population Trends, no 133, Autumn 2008, pp 28-34.

A 'Postcode Best Fit' methodology has been developed by the Office for National Statistics (ONS) to produce population estimates for a range of different geographies which are entirely consistent with each other, regardless of whether or not the estimates for one geography can be aggregated to produce estimates for another geography. This article describes the Postcode Best Fit methodology, its evaluation, limitations with some of the data sources used with the method, the application of the method for producing population estimates, and case studies describing how the method has been used to produce bespoke population estimates to meet specific user requirements. (KJ/RH)

ISSN: 03074463

From : <http://www.statistics.gov.uk>

192/108

Using life histories in social policy research: the case of third sector/public sector boundary crossing; by David Lewis.

Journal of Social Policy, vol 37, part 4, October 2008, pp 559-578.

The life-history method is a valuable tool for social policy research. Taking an anthropological approach to studying policy, the article analyses the usefulness of the method, using data drawn from a set of recently collected life-work histories from the UK. These life-work histories document the experiences of individuals who have crossed over between the public sector and the 'third sector' during their careers. The article first briefly reviews the strengths and weaknesses of the life-history method; and then goes on to analyse selected issues and themes that emerge from the data at both the contextual and the individual levels. The article concludes

that life-history work adds to our knowledge of the relationship between these two sectors, and of the processes through which ideas about 'sector' and policy are constructed and enacted. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

RESIDENTIAL AND NURSING HOME CARE

(See Also 192/116)

- 192/109 Assessment denied?: council responsibilities towards self-funders moving into care; by Gillian Dalley, Michael Mandelstam, Relatives & Residents Association - R&RA. London: The Relatives & Residents Association, 2008, 40 pp (R&RA report).
The Relatives & Residents Association (R&RA) telephone advice frequently receives calls from older people who have decided that they need to go into residential care. This report has been prompted by callers' experiences and the problems they or relatives face when having to meet all the costs of their own social care (also known as self-funding). Specifically, it relates to their dealings with local authorities when having care needs assessed. The report explores the legal position regarding assessment of self-funders; presents some case studies representative of calls to the advice line; and considers the policies of 14 local authorities as stated on their websites. Recommendations are made regarding how local authorities follow government guidance on assessment procedures, and for the better protection of self-funders and their ability to access local advocacy services. (RH)
Price: £8.00 (£6.00 to R&RA members)
From : The Relatives & Residents Association, 24 The Ivories, 6-18 Northampton Street, London N1 2HY.
<http://www.relres.org>
- 192/110 Can we afford the doctor?: GP retainers and care homes; by Maria Patterson, English Community Care Association - ECCA. London: English Community Care Association - ECCA, September 2008, 16 pp.
In its report on elder abuse in 2004, the House of Commons Health Committee recommended that the practice of the payment of retainer fees should be abolished, "as every patient registered with the GP should have a right to a service from the GP without the payment of additional retainer fees". This paper provides evidence on the lack of consistency and clarity about what GP services justify the payment of retainer fees and how much services should cost. It also exposes the fact that many GP practices are charging retainer fees for services that should be free of charge for residents, and makes recommendations accordingly. (RH)
Price: download
From: http://www.ecca.org.uk/CanWeAffordTheDoctor_1_.pdf
- 192/111 Improving care in residential care homes: a literature review; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation, October 2008, 4 pp.
Findings, 2326, October 2008, 4 pp.
A team from the University of Warwick and the University of the West of England (UWE) with support from the University of York found that the literature on improved care in care homes has as the main focus the quality of clinical care. This summary presents selected findings and references from: an annotated bibliography, 'Models for providing improved care in residential care homes: a thematic literature review' (October 2008); and a master bibliography, 'Models for providing improved care in residential care homes: a thematic literature review' (September 2008) (both available from: julia.hyde@warwick.ac.uk). The present review outlines the findings on: residents' and relatives' views on care; medication and nursing care in care homes; medical input into care homes; the interface between care homes and other services; and clinical areas for improvement. The literature identifies a number of approaches to care improvement, mainly from nursing homes, for example, integration or partnership, quality improvement initiatives and evidence-based practice.

The link <https://www.jrf.org.uk/knowledge/findings/socialcare/2326.asp> refers the user to related documents that expand on the key points. (RH)

ISSN: 09583084

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.
<http://www.jrf.org.uk> For the bibliographies contact: julia.hyde@warwick.ac.uk

- 192/112 The power of learning through experience; by Caroline Baker.: Hawker Publications, July/August 2008, pp 27-29.
Journal of Dementia Care, vol 16, no 4, July/August 2008, pp 27-29.
The author describes pilot training carried out with four members of care staff who were given the opportunity to find out how residents may experience life in the care home. (RH)
ISSN: 13518372

- 192/113 Supporting older people in care homes at night; by Diana Kerr, Heather Wilkinson, Colm Cunningham.: Hawker Publications, July/August 2008, pp 35-38 (Research focus).
Journal of Dementia Care, vol 16, no 4, July/August 2008, pp 35-38 (Research focus).
The authors report on their action research study which looked at night time care practices in care homes. The first stage of their study used observation and interviews to identify areas of night-time practice that required improvement. Stage two involved action research (implementation and evaluation) to determine if and how night time care could be improved through a small number of interventions. Recommendations for regulatory bodies, home management and care homes are outlined. (RH)
ISSN: 13518372

- 192/114 What does the Human Rights Act add?; by John Dow.
Journal of Integrated Care, vol 16, issue 4, 2008, pp 19-21.
Private care homes will become directly subject to the the Human Rights Act, under new provisions in the Health and Social Care Bill. The author questions whether this will make any difference in practice, when what is really needed is a "human rights ethos" as part of professional practice in care homes, such as in the Dignity in Care campaign. (RH)
ISSN: 14769018
From : <http://www.pavpub.com>

RETIREMENT : See 192/37 , **RURAL ISSUES** : See 192/101, **SHELTERED HOUSING** :See 192/44

SOCIAL CARE

(See Also 192/16, 192/19, 192/35, 192/61)

- 192/115 "There are wonderful social workers but it's a lottery": older people's views about social workers; by Jill Manthorpe, Jo Moriarty, Joan Rapaport (et al), Older People Researching Social Issues (OPRSI).
British Journal of Social Work, vol 38, no 6, September 2008, pp 1132-1150.
The authors draw on their evaluation of the impact of the English National Service Framework for Older People (NSFOP) on the experiences and expectations of older people, four years into its 10-year programme. The NSFOP focuses on achieving cultural changes so that older people and their carers care treated with respect, dignity and fairness. Funded by the Healthcare Commission, the evaluation took a mixed methods consultation approach in 10 localities, which included involvement of Older People Researching Social Issues (OPRSI). This paper focuses on what was said by older people, their carers and in voluntary sector groups about social workers' roles and activities. The data suggest that they find social workers' roles unclear and variable. They appreciate a person-centred approach, informed about older people's needs in a confusing social care system. Their perceptions tally with those of social workers, that their tasks of care management can be reductionist, but older people also desire specialist knowledge combined with a relationship that is "on their side". Social workers' roles in rationing support

and means testing did not seem to promote such models. At a time of rising expectations about social workers' skills and of changes to social work roles in England and Scotland, this study provides one of the few examples of information directly gathered from older people themselves. (RH)

ISSN: 00453102

From : <http://www.bjsw.oxfordjournals.org>

192/116

'Care contradictions: putting people first?' The harsh reality for older people, their families and carers of increasing charges and tightening criteria : Counsel and Care's national survey of local authority care charging and eligibility criteria 2008; by Counsel and Care.: Electronic format - Counsel & Care, September 2008, 32 pp.

Counsel and Care's national survey of local authority care charging and eligibility criteria 2008 demonstrates that charging for care is ever-increasing, both at home and in a care home. About one third of calls to Counsel and Care's advice service relates to the high cost of, and confusion about, local authority charging policies - some with concerns about eligibility issues. This report on the survey suggests that there is potential for councils to: innovate by upholding the principles of personalisation; look at how they implement Fair Access to Care Services (FACS); promote greater independence and well-being; and consider needs versus means in charging. The report presents results on weekly charging, fixed charges, and care home rates. Counsel and Care recommends that a review on home care charging should be undertaken, and that future reform of care and support must ensure that any new charging procedures are transparent and equitable. (RH)

From : Download from website:

http://www.counselandcare.org.uk/assets/library/documents/Care_Contradictions_2008.pdf

192/117

Beyond modernisation?: social care and the transformation of welfare governance; by Janet Newman, Caroline Glendinning, Michael Hughes.

Journal of Social Policy, vol 37, part 4, October 2008, pp 531-557.

This article reflects on the process and outcomes of modernisation in adult social care in England and Wales, drawing particularly on the recently completed Modernising Adult Social Care (MASC) research programme commissioned by the Department of Health (DH). The authors begin by exploring the contested status of 'modernisation' as a descriptor of reform. They then outline some of the distinctive features of adult social care services, and suggest that these features introduce dynamics likely to shape both the experiences and outcomes of policy ambitions for modernisation. They reflect on the evidence emerging from the MASC studies, and development of a model for illuminating some of the dynamics of welfare governance. Finally, they highlight the emerging focus on individualisation and on user-directed and controlled services. It is argued that the current focus on modernisation involves a reduced emphasis on structural and institutional approaches to change and an increased emphasis on changes in the behaviours and roles of adult social care service users. This focus has implications for both the future dynamics of welfare governance and for conceptions of citizenship. (KJ/RH)

ISSN: 00472794

From : <http://www.journals.cambridge.org>

192/118

Cutting the cake fairly: CSCI review of eligibility criteria for social care; by Commission for Social Care Inspection - CSCI. London: Commission for Social Care Inspection, October 2008, 95 pp (Ref: CSCI-238).

The CSCI report 'The state of social care in England 2006-07' illustrated the poor quality of life for many people who are deemed ineligible for publicly-funded care. The Government asked CSCI to undertake this review in response to that report's findings, particularly in respect of the Fair Access to Care Services (FACS) framework. The present report looks at the reasons for introducing FACS, and what it found about FACS and people's experiences of seeking support and the eligibility decisions. It makes recommendations on: better arrangements that offer universal support; improving the response to people needing assistance; criteria for allocating public funds to individuals; a national resource allocation formula; and measures to support implementation of these arrangements. The weblink includes links to six background papers that

provide further details on the evidence as well as findings on evidence relevant to the Green Paper consultations. (RH)

From : Commission for Social Care Inspection, 33 Greycoat Street, London SW1P 2QF. Email: enquiries@csci.gsi.gov.uk : <http://www.csci.org.uk/default.aspx?page=2596&key=> Free copies from: Admail 3804, Newcastle NE99 1DY. Orderline: 0870 240 7535.

192/119 The development of problem-solving knowledge for social care practice; by Peter Marsh, Mike Fisher.

British Journal of Social Work, vol 38, no 5, July 2008, pp 971-987.

The continuing modernisation of social care in the UK has placed a high premium on evidence. However, there is a lack of investment in social care research in general, and in practice-based research in particular. This paper argues that there is a need to make better connections between research and practice if there are to be substantial improvements in services. The implications of these improved links include more efficient translation of research into action, and more embedding of research within the range of literature that supports service development. The necessary increase in research can be achieved by building on the substantial - albeit piecemeal - achievements of social work research, and by enhancing the practice literacy of the academic workforce as well as the research literacy of the practice workforce. In the context of a new strategy for social work research in UK universities, this paper examines the obstacles to achieving a voice for social work research and how these obstacles are being addressed. (RH)
ISSN: 00453102

From : <http://www.bjsw.oxfordjournals.org>

192/120 Does anyone care about fairness in adult social care?; by Justin Keen, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, September 2008, 12 pp.

Viewpoint, 2292, September 2008, 12 pp.

The author seeks to show that it is quite possible to think clearly about equity principles, and to think through the implications of applying these principles to social care. He notes that whereas academic commentators tend to think in terms of equity and equality, the Government almost always uses the term "fairness". This Viewpoint reviews some of the key proposals in adult social care of the last ten years from an equity perspective. It uses the analysis to argue that we can develop practical policies that are informed by clearly stated principles which serve to ensure that the most disadvantaged groups of people are treated more fairly. (RH)

ISSN: 09583084

Price: download

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. <http://www.jrf.org.uk>

192/121 Model answers: [future funding of adult social care]; by Mark Ivory.

Community Care, issue 1742, 9 October 2008, pp 26-27.

The future funding of adult social care is of great importance given the ageing population, and there are a variety of solutions being put forward in anticipation of the next Green Paper. This article refers to the DH/DWP consultation document, 'The case for change - why England needs a new care and support system' (also known as 'Care, support, independence') and Sir Derek Wanless's report 'Securing good care for older people'. In 1999, the Royal Commission on Long-Term Care for the Elderly recommended free personal care; and for the commentators quoted in this article, this is a major gap in care policy. (RH)

ISSN: 03075508

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

192/122 What future for care?; by Peter Beresford, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, September 2008, 16 pp.

Viewpoint, 2290, September 2008, 16 pp.

Care is a contentious policy concept. Numbers of people needing care are rising. Radical change is planned for care policy to increase choice and control through "personalisation". A new conceptual framework is needed for policy and practice in the 21st century, if people's rights and

needs are to be met. This Viewpoint alerts the reader to the low status of care and care workers, and the reliance on "informal carers". These developments are reinforced by the increasing commodification of care, and researchers have observed and commented on the "carer as resource" in care policy. The context of this Viewpoint is the major reforms of social care and social care funding being pursued by government, on which a Green Paper is expected. (RH)
ISSN: 09583084

Price: download

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.
<http://www.jrf.org.uk>

SOCIAL EXCLUSION

(See Also 192/15, 192/69)

192/123

Vulnerable relations: lifecourse, wellbeing and social exclusion in Buenos Aires, Argentina; by Peter Lloyd-Sherlock, Catherine Locke.

Ageing and Society, vol 28, part 8, November 2008, pp 1177-1202.

Many have presumed that in developing countries contact with children is beneficial to older people's wellbeing, and particularly that women receive more support from children than men because of their lifelong commitment to family responsibilities. This study questions these stylised notions through an analysis of 22 life histories of older women and men living in a district with high rates of social exclusion in Buenos Aires, Argentina. It focuses on the subjective accounts of relationships with children and grandchildren and their influence on current wellbeing. The life histories reveal complex lived experiences and the significance of key events. The informants speak of the anxiety and harm caused by struggling children, about problems of remote relations with successful children, and of the insecurity of the neighbourhood. The analysis contrasts a materialistic interpretation of the influence of children on older people's well-being with the informants' more holistic evaluation of family relationships. By applying a lifecourse framework, it is demonstrated among other things that children may be a key source of vulnerability for older people, that the gendering of parent-child relations and later life well-being is nuanced, and that both local and national conditions influence relationships with specific children, with implications for the intergenerational transmission of wellbeing. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

SOCIAL NETWORKS

(See 192/64)

TRANSPORT

192/124

Understanding the older traveller: stop, look and listen!; by Greg Marsden, Mima Cattan, Ann Jopson (et al).

Working with Older People, vol 12, issue 2, June 2008, pp 12-15.

Despite what we take for granted for getting around - road, rail and pavements - the older traveller is often left feeling frustrated by the current transport infrastructure. In this article, a group of researchers from the Institute of Transport Studies, University of Leeds and the Centre for Health Promotion Research, Leeds Metropolitan University explore why this is the case, based on research undertaken through the Leeds Older People's Forum. They look at barriers that prevent older people getting out and about, and the considerations when planning transport for the older traveller. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

CALENDAR OF COURSES AND CONFERENCES

All contributions to this section of New Literature on Old Age will be welcome.

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.

1 December 2008

Joining up race equality, mental health and housing

Speakers: Chair: Ronny Flynn (Director of Health and Housing, REF)

Organised by: Pavilion in partnership with Race Equality Foundation, HACT, Housing Diversity Network, NSIP

Venue: ORT House Conference Centre, London NW1

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

1 December 2008

Risk : What changes with personalisation?

Risk management has always been a contentious issue in services. As Personalisation starts to have an impact, the whole approach to risk management in services is challenged and new approaches will need to be adopted if people are truly to be in control of their lives. This important one day conference examines these issues, highlights emerging best practice, provides a forum for debate and paints a picture of what will need to change.

Speakers: Jeff Jerome (National Director for Personalisation, DH) and others

Organised by: Paradigm organised by Offshoot Events

Venue: Holiday Inn - London, Regent's Park

Location : London, England

Details : n/k

Tel : 0870 066 3627

2 December 2008

Delivering Lifetime Homes and Neighbourhoods for an Ageing Population

2nd Annual Conference of Counsel and Care. This national conference will look at how to improve current housing stock and services and rise to the challenges for new housing. Delegates will explore how to meet the targets to future proof all new homes so that by 2011 all new social housing meets the Lifetime Homes standard, and by 2013 all new homes are age friendly. The event will also examine what age-friendly cities should look like and the role planners and councils have in creating them. As well as demonstrating how we can plan for an ageing population, speakers will present how best services can support older people now through the National Housing Advice and Information Service, the £460m Disabled Facilities Grant and £33m rapid repair and adaptations service.

Speakers: Baroness Sally Greengross OBE; Dr John Belcher CBE; Stephen Burke; Melinda Phillips; Dr David Bonnett; Sue Adams.

Organised by: Counsel & Care conference organised by Neil Stewart Associates supported by Communities and Local Government

Venue: central London - tba

Location : London, England

Details : Laura Brownlee, PO Box 39976, 2nd Floor, 1 Benjamin Street, London, EC1M 5YT

Tel : +44 (0)20 7324 4372, *Fax :* +44 (0)20 7490 8830

2 December 2008

Mental Capacity Act in the Care of Older People

Keynote address: Martin John (Public Guardian and Chief Executive, OPG)

Speakers: Chairman: Ruth Eley (CSIP)

Organised by: Healthcare Events

Venue: 76 Portland Place

Location : London, England

Details : Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF

Tel : +44 (0)20 8541 1399, *Fax :* +44 (0)20 8547 2300

3-4 December 2008

NICE 2008 : 10th Anniversary Conference

Organised by: National Institute for Health and Clinical Excellence - NICE

Venue: Manchester Central Convention Complex

Location : Manchester , England

Details : Health Links Events Ltd., Windsor House , 11A High Street, Kings Heath, Birmingham, B14 7BB

Tel : +44 (0)121 248 3399, *Fax :* +44 (0)121 248 3390

3 December 2008

Sixth National Conference : A Practical Guide to Safeguarding Vulnerable Adults

During this conference you will hear from The commission for Social Care Inspection (CSCI) who will provide an important update on identifying abuse, neglect and bad practice and improving the regulation and monitoring of local safeguarding arrangements. You will also have the opportunity to hear from the Care Services Improving Partnership on the latest developments for personalisation and safeguarding in practice. The conference also includes a legal update examining the impact of the Safeguarding Vulnerable Adults Bill, implications of the Deprivation of Liberty Safeguards and the Mental Capacity Act.

Organised by: Healthcare Events

Venue: Manchester Conference Centre, Manchester

Location : Manchester, England

Details : Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF

Tel : +44 (0)20 8541 1399, *Fax :* +44 (0)20 8547 2300

3 December 2008

Towards Effective Prevention in Adult Social Care

A raft of recent government policies and field research findings are leading to an increasingly strong emphasis on the promotion of health, well being and independent lives for older people. Now Community Care Conferences is partnering the Department of Health and the Social Care Institute for Excellence on a conference showing how to translate these policies and findings into practice. As the current process of engagement with the public on the government's care and support green paper enters its final stages, many service commissioners and providers are already shifting services towards prevention and early intervention. An important focus of this activity are the Partnerships for Older People Projects (POPPs) and Link Age Plus pilots taking place across the country, the results of which will be showcased at this conference.

Speakers: Chair: Alan Bowman (Chair, SCIE). Ruth Eley (POPPS Pilots Evaluation, DH); Brian Keating (LinkAge Plus Pilots, DWP); Mark Ivory (Executive Editor, Community Care); and others.

Organised by: Community Care Conferences in association with LexisNexis, in partnership with SCIE and Department of Health

Venue: central London

Location : London, England

Details : LexisNexis GateHouse, Halsbury House, 35 Chancery Lane, London, WC2A 1EL

Tel : 020 7347 3574, *Fax :* 020 7347 3576

5 December 2008

Carer Rights Day 2008

Ninth annual Carers Rights Day.

Organised by: Carers UK

Location : London , England

Details : Carers UK, 24 Great Dover Street, London , SE1 4LX

Tel : +44 (0)20 7378 4999

8 December 2008

Care for Older People Conference 2008

A one day conference to explore how we can build communities to support an ageing population. *Speakers:* Maggie Ioannou (Director, Croydon NHS PCT), Michael O'Higgins (Chair, Audit Commission), Guy Robertson (POPP Lead, DH); Nigel Waterson MP (Shadow Minister for Work and Pensions and Conservative party spokesman for older people).

Organised by: Society Guardian sponsored by Anchor and Bupa
Venue: Guoman Tower Hotel, St Katherine's Way
Location : London, England

10-11 December 2008

London Health 08 : Innovating for a world city

Speakers: Barbara Young (Chair, CQC); Niall Dickson (King's Fund CE); Paul Corrigan (NHS London) and others

Organised by: Neil Stewart Associates supported by eight separate bodies and endorsed by The King's Fund

Venue: Business Design Centre

Location : London, England

Details : PO Box 39976, 2nd Floor , 1 Benjamin Street, London, EC1M 5YT

Tel : +44 (0)7324 4330, *Fax :* +44 (0)7490 8830

12 December 2008

Secondary Analysis and Reusing Archived Data

Seminar 12 in the Representation of Older People in Ageing Research Series. The seminars are directed at those interested in issues of current methodological innovation. The re-use of archived data leads to the creation of new knowledge, new frameworks of understanding, added themes and a focus on the implications of time as a process in analyzing and contextualizing research. The papers presented at this seminar draw on a wide range of archived data sources, both qualitative and quantitative, drawing out implications for researchers interested in age and ageing. Cost of seminar is £30 which includes a sandwich lunch.

Speakers: Chairpersons: Joanna Bornat and Julia Johnson, (CABS, The Open University). *Speakers:* Libby Bishop (Senior Research Archivist UK Data Archive, University of Essex and Timescapes, University of Leeds); Christina Victor (Professor of Social Gerontology & Health Services Research, University of Reading);

Organised by: Centre for Policy on Ageing - CPA; Centre for Ageing and Biographical Studies (CABS), Open University (OU)

Venue: CPA (lower ground floor office accessible by stairs or lift) at 19-23 Ironmonger Row

Location : London, England

Details : Angela Clark, 25-31 Ironmonger Row, London, EC1V 3QP

Tel : +44 (0)20 7553 6500, *Fax :* +44 (0)20 7553 6501, Pat Thane (Leverhulme Professor of Contemporary British History, Institute of Historical Research, University of London); , Leroi

Henry (Research Fellow) and Parvati Raghuram (Lecturer, The Open University).

17 December 2008

ESRC Seminar Series : Interrogating harm and abuse : protection and citizenship across the lifespan

This seminar series focuses on harm and abuse across the lifespan, and on the responses of individuals, families, communities, professionals and the state. We intend to generate debate amongst stakeholders and academics representing complementary academic disciplines and specialisms in order to create new theoretical perspectives and to advance understanding of issues of protection, agency and citizenship.

Speakers: Convenors: Alison Bowes, Kate Cavanagh; Brigid Daniel; Kathryn Mackay.

Venue: Iris Murdoch Building, University of Stirling

Location : Stirling, Scotland

Details : Jennifer Gordon, Department of Applied Social Science, University of Stirling, Colin Bell Building, STIRLING FK9 4LA

18 December 2008

Improving quality of stroke care through stroke research

The purpose of this meeting is to look at aspects of the local development of stroke research and its impact on services for improving the care of the lives of patients and their carers.

Speakers: Chair: Dr Rod Brooks (Vice Chair of the Institute of Ageing & Health).

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)121 442 3501, *Fax :* +44 (0)121 442 3663, The meeting will also honour the memory of Dr Jed Rowe, who helped set up Liverpool Crossroads, through a talk about stroke related Crossroad activities.

13 January 2009

Healthy Ageing : the Role of Nutrition and Lifestyle

Speakers: Chair: Professor John Mathers (University of Newcastle)

Organised by: British Nutrition Foundation
Venue: Conference Centre, Sainsbury's Head Office
Location : London , England
Details : Mrs Christine Price, MBE, British Nutrition Foundation, High Holborn House, 52-54 High Holborn, London, WC1V 6RQ
Tel : +44 (0)20 7404 6504, *Fax :* +44 (0)20 7242 1866

14 January 2009

Bournemouth Bio-Gerontology Symposium 2009 : Ageing Science for the Clinician

This one-day Symposium aims to present the most relevant and important aspects of ageing science to consultants, SpRs and basic scientists. The programme consists of seven keynote lectures given by national and international experts in their fields.

Organised by: British Geriatrics Society - BGS
Location : Bournemouth, Dorset, England
Details : Grace Wilkinson

15 January 2009

Implementing the National Dementia Strategy

The conference will analyse the strategy and its impact on care homes, community based care, extra-care and methods for creating an adequate environment for people with dementia. Panel of speakers at the end of the conference.

Speakers: Chair: Neil Hunt (Chief Executive Officer, Alzheimer's Society). Professor Sube Banerjee (DH); June Andrews (DSDC, Stirling); Melinda Phillips (Housing 21); Steve Reynolds (MHA Care Group); and others.

Organised by: Laing & Buisson
Venue: America Conference Centre
Location : London, England
Details : Laing & Buisson (Conferences) Ltd, 29 Angel Gate, City Road, London, EC1V 2PT
Tel : +44 (0)20 7923 5348, *Fax :* +44 (0)20 7841 0048

20 January 2009

Implementing the National Stroke Strategy and the NICE Guidance

Organised by: Healthcare Events
Venue: 76 Portland Place
Location : London, England
Details : Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF
Tel : +44 (0)20 8541 1399, *Fax :* +44 (0)20 8547 2300

27 January 2009

Care Bundles : A Practical Guide to Improving Clinical Process, Outcomes and Safety through Developing and Implementing

Care Bundles have been championed by the IHI internationally and the Department of Health in the UK, as a tool for high impact change that healthcare organisations can adopt to make significant, measurable improvements in the way they deliver care.

Organised by: Healthcare Events
Venue: 76 Portland Place
Location : London, England
Details : Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF
Tel : +44 (0)20 8541 1399, *Fax :* +44 (0)20 8547 2300, Chaired by Gren Kershaw Faculty Member The 1000 Lives Campaign Wales, this conference provides a practical guide to improving clinical process, outcomes and safety through Care Bundles, including a step by step guide to introducing them into your service.

29 January 2009

Ageing Population 09

Ministers are warning that England's social care system is heading towards a £6bn funding gap unless there is radical reform. Health experts predict that the ageing population means state funding for the care of the elderly and disabled will face a huge shortfall within 20 years. The warnings come as ministers are about to begin a major consultation on how social care is funded. Ageing Population 09 has been intensely researched to bring you all the hot topics related to providing services, care, training and employment opportunities for the rapidly growing number of older people in the UK.

Speakers: Gillian Crosby, (Director, Centre for Policy on Ageing); Baroness Young of Old Scone, (Chair, Care Quality Commission); Richard Steel, President, Socitm; Lord Sutherland;

Organised by: GovNet Communications
Venue: QEII Conference Centre, London

Location : London, England
Details : Vicky Bowness
Tel : +44 (0)800 542 9585, The conference will also examine the government's multi-million pound strategy to support, help and improve the lives of Britain's army of carers. Also to be discussed is the Department of Health consultation on the first ever national dementia strategy. The full strategy to be launched in the autumn will have three main aims; to increase awareness of

dementia and remove the stigma associated with it; ensure early diagnosis and intervention; and improve the quality of care that people with dementia receive. This year's high profile and prestigious conference will have more than 300 key decision-makers from across the UK, joining 20 speakers and 20 exhibitors to discuss and debate the issues at stake. (Inaugural conference)., Cllr the Honorable Joan Taylor (LGA Champion for Older People and Chair, East Midlands Older People Advisory Group); Liz Mandeville (Better Government for Older People); Baroness Young of Old Scone, (Chair, Care Quality Commission); Baroness Andrews, (Parliamentary Under Secretary of State, Communities and Local Government).

11 February 2009

2009 Annual Extra-care Housing Conference

Keynote presentation invited: Phil Hope MP, Parliamentary Under Secretary of State for Care Services (invited) followed by an Open Forum with the Minister.

Speakers: Chair: Stephen Ladyman MP, past Parliamentary Under Secretary of State for Community Care

Organised by: Laing & Buisson sponsored by Castleoak

Venue: Radisson SAS Portman Hotel

Location : London, England

Details : Laing & Buisson (Conferences) Ltd, 29 Angel Gate, City Road, London, EC1V 2PT

Tel : +44 (0)20 7923 5348, *Fax :* +44 (0)20 7841 0048

3-4 March 2009

Managing New Realities 2009 - Personalisation: Everyone's business

Opening keynote: Phil Hope, Minister of State for Care Services (invited)

Speakers: Chair: David Brindle (The Guardian, Public Sector editor). Julie Jones OBE (SCIE); Baroness Jane Campbell OBE; Paul Cann (Help the Aged); David Behan OBE and others.

Organised by: The Guardian and OLM-Pavilion in partnership with Skills for Care; SCIE; Department of Health; Unison; Impower

Venue: Inmarsat Conference Centre, City Road

Location : London, England

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

Tel : 0844 880 5061, *Fax :* 0844 880 5062

12-15 March 2009

Ageing in the Mediterranean World : Scientific Conference

From a historical perspective, the Mediterranean has been the centre of a process of civilization that has had effects and consequences on a truly global scale. Europe as an economic and cultural entity cannot be possibly fully understood without realizing the enormous impact of developments which took place in this region and will also shape the European position in the future. The ageing of Mediterranean societies will confront them with new challenges and socio-political tasks. Today, ageing affects societies in the Mediterranean already quite differently and will continue to transform them considerably in the future. In this conference we will present and critically discuss research results on work life developments, demographic trends, family strategies and care arrangements in the Mediterranean.

Organised by: Organized by European Social Research (ESR), the European social science section of the International Association of Gerontology and Geriatrics (IAGG), in direct cooperation with The Institute of Gerontology in Malta.

Location : Malta, The basic idea of the conference is to offer a comprehensive outlook on the social fabric of the Mediterranean world in several detailed aspects to be presented and discussed with the participants; to allow the identification of certain areas of ongoing research for all participants and to allow participants the presentation of results of their own research and the critical debate of these results. The programme is divided into keynote lectures; group and panel discussions; it will also give the opportunity of presenting and discussing your own research results.

16-19 March 2009

2009 Joint Conference of NCOA and the American Society on Ageing

Organised by: American Society on Aging & National Council on Aging

Location : Las Vegas, NV, USA

23-24 March 2009

AEA National Conference 2009

Further details and a booking form can be obtained from the AEA website.

Organised by: AEA - Action Against Elder Abuse
Venue: University of Nottingham
Location : Nottingham, England, Senior Events
Co-ordinator,
Details : Natalie Fernandez., Astral House, 1268
London Road, London, SW16 4ER
Tel : 0044 (0)208 765 7000, *Fax :* 0044 (0)208 679
4074, AEA hosts this major annual event to look at
the key issues within Adult Protection, with a
primary focus on Elder Abuse. The conference will
host several high-profile speakers; for the last three
years this has included the Minister for Social Care,
along with a plethora of topical workshops makes
the event a key opportunity to learn and share.

29 June - 1 July 2009

UK Social Policy Association 2009 Conference
Organised by: Social Policy Association (SPA)
organised by the University of Edinburgh's School
of Social and Political Studies
Venue: University of Edinburgh
Location : Edinburgh, Scotland

5-9 July 2009

**Longevity, Health and Wealth : 19th IAGGG
World Congress of Gerontology and Geriatrics**
Organised by: IAGG - International Association of
Gerontology and Geriatrics
Venue: Palais des Congrès de Paris
Location: Paris, France
Details:ICEO - International Congress and Event
Organizers, c/o Colloquium, 12, rue de la Croix-Faubin,
75557 Paris Cedex 1, France
Tel:+33(0)1 44 64 15 15
Fax:+33(0)1 44 64 15 16
Email:info@gerontologyparis2009.com
<http://www.gerontologyparis2009.com/site/view8.php>

AgeInfo

a key information resource
for gerontologists - on both
cd-rom and the internet.

Details and evaluation:

<http://www.cpa.org.uk/ageinfo>

