The changing role of care homes

British Society of Gerontology
40th Annual Conference

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Centre for Policy on Ageing
July 2011

The changing role of care homes: a report commissioned by Bupa and carried out by the Centre for Policy on Ageing using data provided by Bupa.

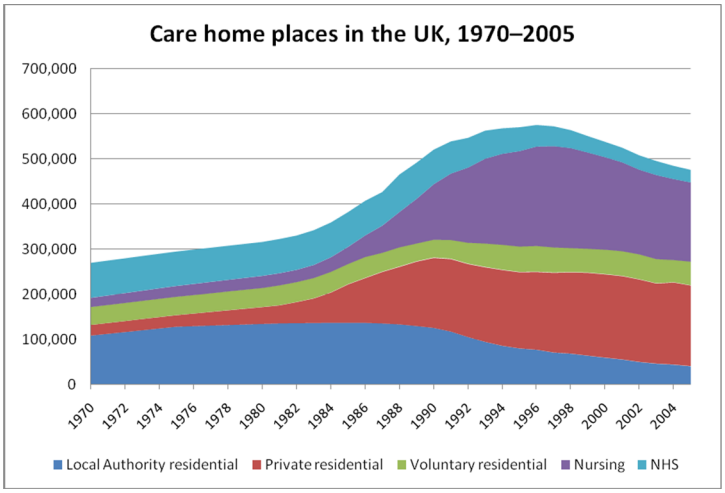
- A historical perspective: the precursors of residential care
- Recent trends in the development of residential care
- Care homes today: a profile of residents in Bupa care homes

Historical perspective

- ... the aged and infirm, very often, the same people, were accorded some form of residential care in the workhouse dormitories or infirmaries. That average of 60,000 in-house paupers of 1892 constituted 4% of their age-echelon. Curiously, today's figure of those in state supported residential care is also about 4% of the age group.
- ... in both eras, another enduring aspect was the existence of a commercial, usually rather coyly described as 'private', sector covering temporary and permanent residency, embracing care homes and nursing homes. The charitable sector, too, has been active in both old and new times, although today parts of both the commercial and charitable components may well be funded, in part or whole, by the public purse.
- The Victorian distinction of 'able-bodied' and 'infirm' has been largely replaced by the modern jargon of 'independence' and 'dependency'. Institutional care placements have mainly been dictated by medical rather than social forces. ... Nowadays the level of dependency in residential care accommodation is high...

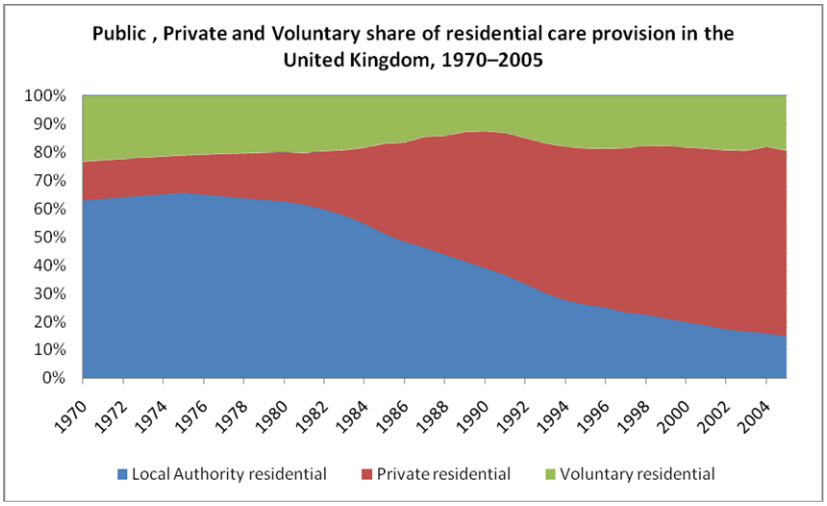
- ‘There was a point, possibly in the 1970s and early 1980s, when there was just a gleam of evidence that residential care could be a social life-style option rather than a clinical necessity. In other words, there were some older people, in not unreasonable health, who chose to live in a residential care setting for its communal benefits and to avoid social isolation.’
- ’This proved, in the main, to be much too luxurious or progressive an alternative for a state-funded scheme. Residential care is increasingly medical and nursing care, with the distinction between this activity and the work of a conventional nursing home much narrower than in the recent past. Indeed, it is closer in character to the poor law model.
- A parallel might be sought in the post-war interlude when there was a glimmer of aspiration that the council estate might have been cross-class in nature, giving it a chance of remaining socially balanced and stable. The harsh dictates of economic viability soon overwhelmed that vision and ‘social housing’ soon became the last welfare hope of the impoverished, with the current plan to limit tenure a final blow to that original dream.’
(Midwinter, 2011)

Recent trends...



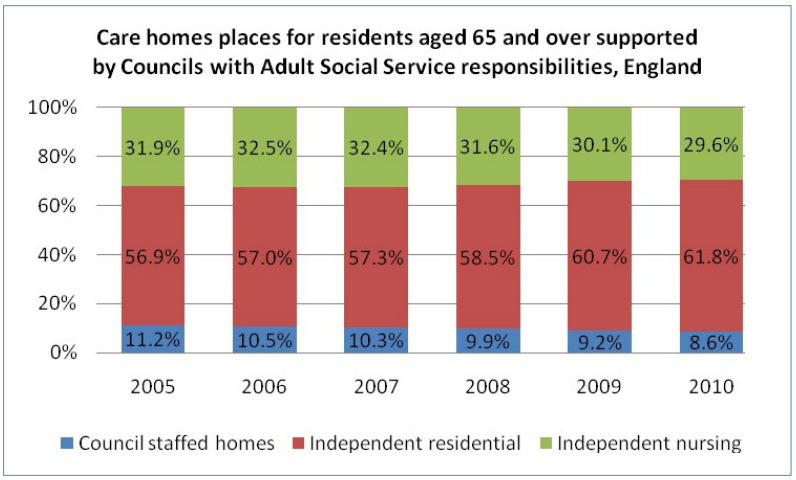
Source: Laing & Buisson Care of elderly people market survey 2005

- The number of residential care places in the United Kingdom peaked at around 321,000 places in 1990 and has been declining steadily ever since.
- From the late 1980s the number of NHS places declined significantly and from the mid 1980s to 1998 there was a very rapid rise in, mainly private, nursing care provision in care homes

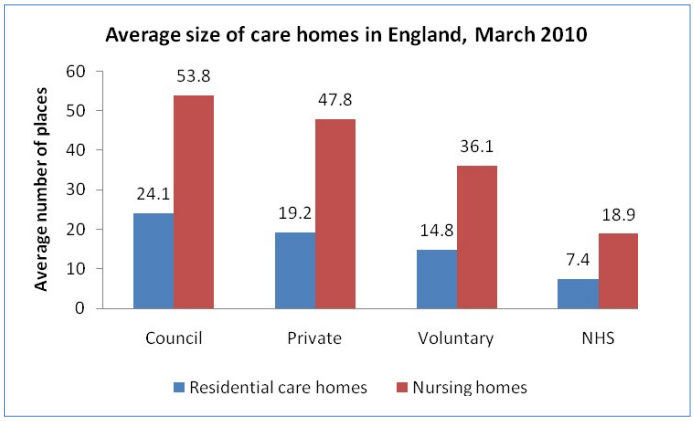


Source: Laing & Buisson Care of elderly people market survey 2005

In 1980 local authorities provided 63% or residential care home places and the private sector 17% but by 2002 the positions had been reversed and that trend continues to the present day.



Source: NHS Information Centre



Source: CQC

- Care homes are getting larger - the average care home size in England rose from 23.13 places in 2004 to 25.17 places in 2010.
- Local authority homes, in England, are, on average, larger than private, voluntary sector or NHS homes. Nursing homes are, in 2010, on average, over twice as large as residential care homes.

- There has been a move towards a smaller number of larger, corporate run homes
  - by 2005, organisations owning or running 11 or more care homes, owned or ran 20% of care homes in the UK and 30% of care home places (Office of Fair Trading, *Care homes for older people in the UK*, 2005).
  - over 50% of homes and 40% of places were still controlled by organisations with a single care home.

Top six care home providers in the UK, April 2006

Organisation	Homes	Beds	Market share	Type
Southern Cross Healthcare	527	27,744	8.1%	Private
Bupa Care Homes	294	21,036	6.2%	Private
Four Seasons (JDM)	316	16,416	4.8%	Private
Barchester Healthcare	156	10,021	2.9%	Private
Anchor Trust	97	4,286	1.3%	Voluntary
Order of St John Care Trust	74	3,216	0.9%	Voluntary

Source: Philpot, *Residential Care: A positive future*, 2008

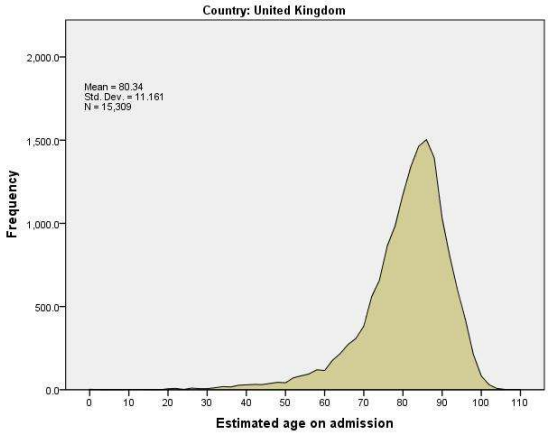
Care homes today:

a profile of residents in Bupa care homes...
(Bupa care home census 2009)

Overview

- The Bupa census was carried out 2009, covering all residents in Bupa care homes in the UK, New Zealand, Australia and Spain. Similar censuses were carried out in 2003 and 2006
- Nearly three quarters (73%) of Bupa care home residents are receiving 'nursing care' – but there is considerable overlap in the profiles of residents who receive 'nursing' and 'residential' care.
- Residents are predominantly female (72% in the UK) and aged over 65 (93% in the UK)

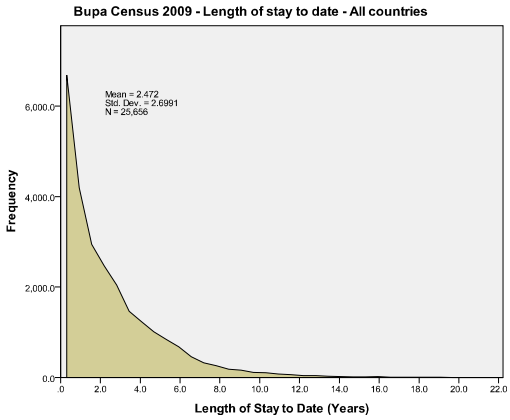
Age



Bupa Census 2009 - Average age of care home residents and average estimated age on admission.

		UK	Australia	New Zealand	Spain
Age of resident	Median	85	85	85	85
	Mean	82.77	83.62	82.43	83.45
Estimated age on admission	Median	82	83	82	82
	Mean	80.34	81.17	79.91	81.03

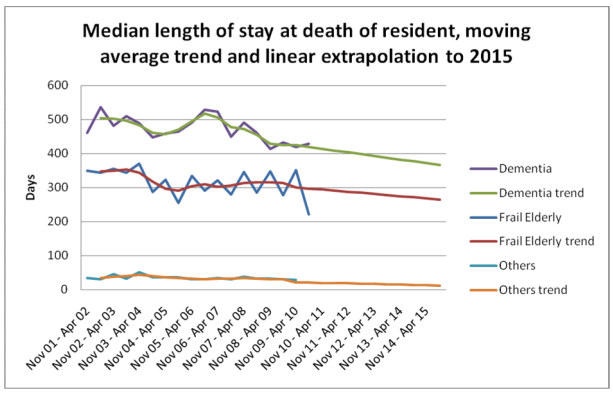
Length of stay to date



Bupa Census 2009 –Resident length of stay to date (years)

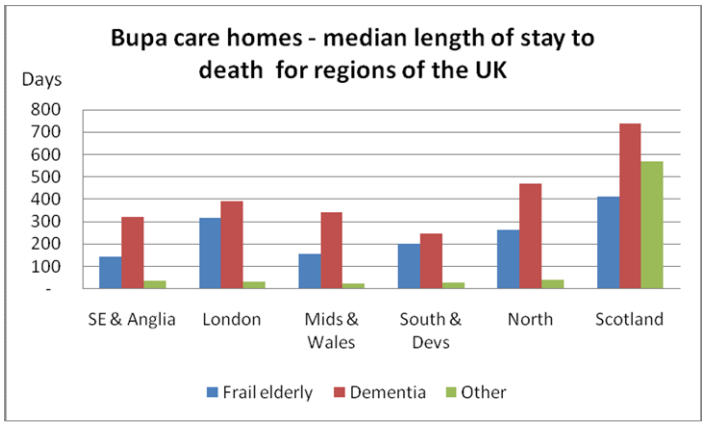
Country	Mean	Median	Maximum
United Kingdom	2.473	1.603	39.4
Australia	2.494	1.734	26.8
New Zealand	2.496	1.622	40.1
Spain	2.428	1.885	17.1

Length of stay to death (not from census data)



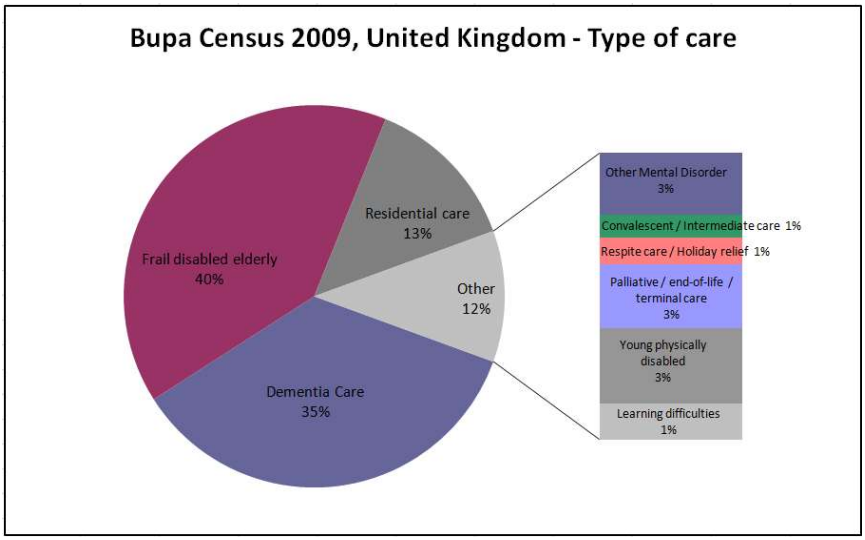
If present trends continue, by 2015 the median length of stay for dementia care residents will be around one year (367 days) and for older frail residents will be just under nine months (265 days).

Length of stay to death (not from census data)



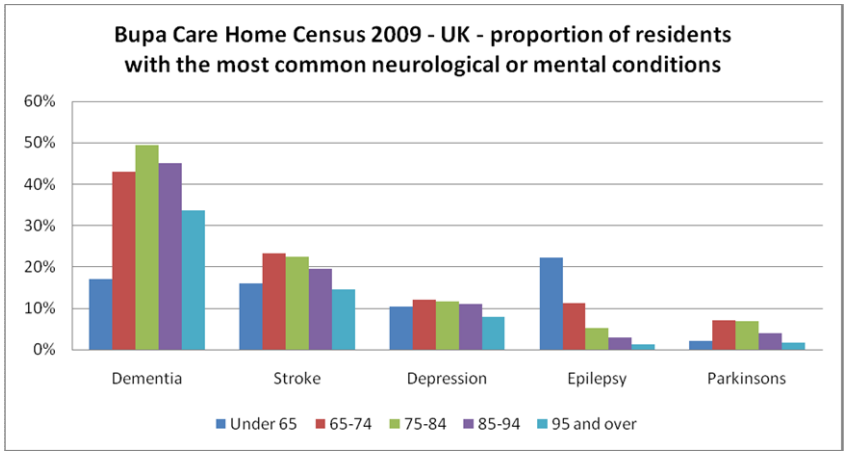
Length of stay to death is greatest in Scotland

Type of care



Three quarters of Bupa care home care in the UK is either 'frail disabled elderly' or dementia care

Neurological and mental disorders



In 2009, three quarters (75%) of Bupa care home residents in the UK were experiencing some form of neurological or mental disorder.

Dementia

Bupa census– UK proportion of residents with dementia and confusion

UK	2003	2006	2009
Confused or forgetful	62%	63%	63%
Dementia	36%	38%	44%

The proportion of UK Bupa care home residents with a diagnosis of dementia has risen from 36% in the 2003 census to 38% in 2006 and just under 44% in 2009.

Dementia prevalence rates in the community and in Bupa care homes in 2009

Dementia % within Age Group	Age Group					All Ages
	Under 65	65–74	75–84	85–94	95 and over	
Community*	0 – 0.16%	1.3% – 2.9%	5.9% – 12.2%	20.3% – 28.6%	32.5%	1.1%
Bupa Care Homes	17.1%	43.0%	49.5%	45.1%	33.6%	43.6%

* Community rates – Consensus estimates from Knapp et al, 2007. Prevalence rate ranges shown are for the first five year period to the last five year period of the age group.

Bupa census data shows the proportion of care home residents aged 95 and over with dementia is lower than for the 65 – 94 age group and comparable to the prevalence of dementia for that age group in the community.

Depression

Proportion of Bupa UK care home residents with Depression

Age	Under 65	65–74	75–84	85–94	95 and over
Percentage with Depression	10.4%	12.1%	11.6%	11.1%	8.0%

- The Bupa census shows the proportion of care home residents with depression declining with age after 65. This is at variance with findings in the community by the Health Survey for England and the Psychiatric Morbity Survey both of which show depression increasing with age
- Depression often goes unrecognised. Less than one half (49.5%) of residents who had been assessed as having depression were described by staff as having a 'depressed or agitated' mental state.
- Residents aged 95 and over had lower levels of depression than all other age groups

Stroke

Percentage of residents with Stroke as a primary or secondary diagnosis

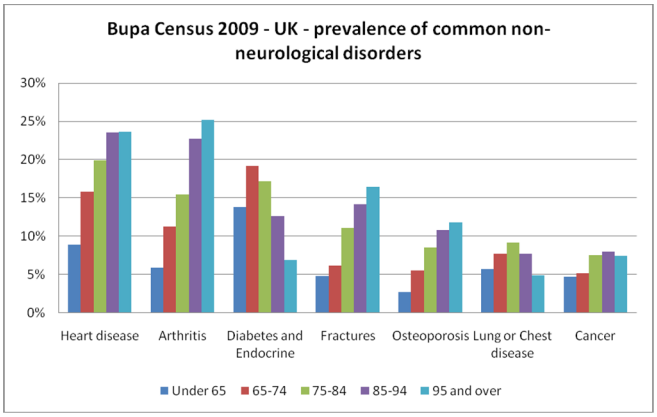
	Resident Age Group					
	Under 65	65–74	75–84	85–94	95 and over	All Ages
Australia	15.6%	20.6%	20.5%	17.7%	15.5%	18.5%
New Zealand	22.0%	28.7%	24.7%	21.2%	18.5%	23.0%
Spain	12.9%	8.2%	9.9%	7.9%	4.9%	8.7%
United Kingdom	16.1%	23.3%	22.4%	19.5%	14.6%	20.2%
All countries	16.5%	21.7%	20.4%	17.7%	14.0%	18.6%

- In the United Kingdom, stroke is the second most common neurological/mental condition among Bupa care home residents, after dementia.
- Stroke levels in New Zealand for residents aged 65 and over are roughly three times those in Spain.
- Stroke levels are lowest in residents aged 95 and over

Non-neurological or mental conditions

Bupa Census 2009 – Proportion of residents with various non-neurological conditions

	UK	Australia	New Zealand	Spain
Heart disease	20.6%	38.3%	47.1%	27.7%
Arthritis	18.3%	24.4%	18.2%	16.0%
Diabetes and Endocrine	14.4%	18.0%	19.7%	20.4%
Fractures	12.0%	14.1%	12.7%	19.4%
Osteoporosis	9.1%	18.7%	15.9%	17.3%
Lung or chest disease	7.8%	12.3%	16.7%	12.2%
Cancer	7.3%	10.8%	10.0%	5.7%



Diabetes

Bupa care home census 2009 - Proportion of UK residents with diabetes / endocrine disorder

	Under 65	65–74	75–84	85–94	95 +	All ages
Diabetes/ endocrine	13.8%	19.2%	17.2%	12.6%	6.9%	14.4%

- Levels of diabetes in Bupa UK care homes have increased from 8% in 2003 and 9% in 2006 to 14% in 2009. At the same time, for residents aged 65 and over in 2009, residents in the younger age groups (65–74 onwards) have higher levels of this, currently incurable, long term condition than older residents. This may herald even higher levels of diabetes in care homes in the future.

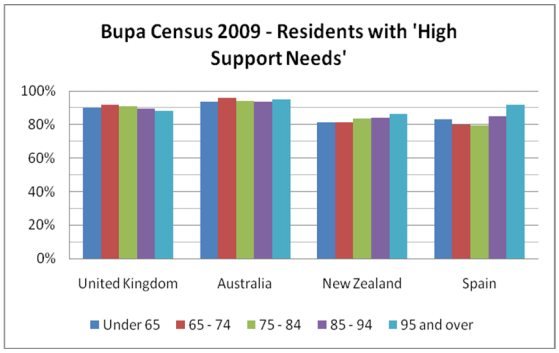
Continence

Bupa Resident Census – UK – 2009 – Continence by Age group

Continence % within Age Group	Resident Age Group					All Ages
	Under 65	65–74	75–84	85–94	95 and over	
Continent	29.7%	29.1%	29.6%	31.8%	33.9%	30.8%
Urinary incontinence	12.6%	13.8%	13.9%	16.2%	17.3%	15.0%
Faecal incontinence	1.1%	.6%	.4%	.7%	.8%	.6%
Dual incontinence	56.6%	56.5%	56.2%	51.4%	48.0%	53.5%
Total (n=15,875)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

- Just under 70% of all Bupa care home residents in the UK experience some form of incontinence
- Levels of urinary incontinence alone increase consistently with the age of the resident but the overall proportion who are continent changes little with age.
- Counter-intuitively, residents over the age of 95 are those most likely to be rated as ‘continent’ and least likely to experience ‘dual incontinence’

High support needs



- 90% of Bupa care home residents in the UK have high support needs - If we define ‘High Support Needs’ as having one or more of dementia, confusion, challenging behaviour, dual incontinence, severe hearing or visual impairment or total dependence in mobility.

- Over 70% of Bupa UK care home residents either have dementia or are ‘confused’ and 17.4% exhibit challenging behaviour. Except for those aged 95 and over, confusion tends to increase with the age of the resident but challenging behaviour declines with age.

Unexpected findings

- The oldest old residents (ages 95 and over) have better continence and lower levels of dementia, stroke, depression, diabetes and lung or chest disease than residents aged 65 to 94.
- Only 9% of residents in Spain suffer from stroke compared with 20% in the UK and 23% in New Zealand
- 47% of residents in New Zealand have heart disease compared with 38% in Australia, 28% in Spain and 21% in the UK
- Although only 10% of residents with multiple sclerosis exhibit challenging behaviour, a proportion well below the overall average of 17.4%, if a resident has both MS and dementia the proportion exhibiting challenging behaviour rises to 38.5% which is well above the 26.6% for residents with dementia but without MS

Bupa census UK, 2009 – Proportion of residents exhibiting challenging behaviour

		Dementia		All
		No	Yes	
Multiple Sclerosis	No	10.3%	26.6%	17.5%
	Yes	8.8%	38.5%	10.4%
All		10.3%	26.6%	17.4%

Reason for admittance

Bupa Resident Census 2009 – UK – Reason for Admittance by Age Group

Count and % within age group		Resident Age Group					
		Under 65	65–74	75–84	85–94	95 and over	All Ages
Reason for Admittance	Clinical	546	939	2636	3006	602	7729
		57.5%	54.0%	50.8%	45.8%	42.0%	48.7%
	Family/Social Reasons	33	45	79	96	19	272
		3.5%	2.6%	1.5%	1.5%	1.3%	1.7%
	Frailty (Unspecified)	143	331	1354	2145	593	4566
		15.1%	19.0%	26.1%	32.7%	41.3%	28.8%
	Housing	163	308	830	1002	159	2462
		17.2%	17.7%	16.0%	15.3%	11.1%	15.5%
	Unknown	64	115	290	315	62	846
		6.7%	6.6%	5.6%	4.8%	4.3%	5.3%
Total		949	1738	5189	6564	1435	15875
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

- The proportion of residents admitted for non-clinical reasons increases with age and the proportion admitted for clinical reasons declines. For residents age 95 and over, the majority (53.7%) of admittances are for frailty, housing or family reasons rather than specific health conditions.

Thank you

http://www.cpa.org.uk

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New attitudes to old age