

Citizens Assembly: How we best respond to the challenges and opportunities of an ageing population

Submission by the Citizens Information Board - May 2017

Introduction

The Citizens Information Board (CIB) welcomes the opportunity to make a submission to the Citizens Assembly on the theme of '*How we best respond to the challenges and opportunities of an ageing population*'. The submission draws on feedback from the national network of Citizens Information Services (CISs)¹ and the Citizens Information Phone Service (CIPS) and sets out some of the challenges faced by older people in getting the supports they need. Approximately 14% of CIS clients during 2016 were aged 66 years or over.

The types of enquiries received by these services by or on behalf of older people highlight difficulties older people encounter whether living independently or in residential care. Queries also highlight the issues older people and their carers face when they are transitioning back home from hospital or from hospital to nursing home care.

The CIB also operates the Assist Ireland website and Helpline which provides information on assistive technology (aids and appliances) for older people and people with disabilities. Many of the queries to the Helpline refer to the difficulty older people have in getting the equipment or adaptations they require to continue to live safely and comfortably at home. Some of these queries also reference the difficulty caused by delays for assessments and adaptations, which often left some having to remain in unsuitable accommodation or unable to return home from hospital.

Commonly reported issues

CISs and CIPS identify a number of issues on an ongoing basis that impact on the quality of life of older persons:

- Delays in getting adaptations and specialised equipment for people moving out of hospital can mean that they may have to stay in hospital longer or move to a nursing home;
- The Housing Adaptation Grant can be a crucially important support in enabling people with an acquired disability or mobility problems to remain living in their own homes – however, as it currently operates, it falls short of what is required due to

¹ There is a national network of 42 Citizens Information Services supported by the Board operating from over 200 locations nationwide. These services dealt with 607,000 callers in 2016 and over a million queries from the public on all aspects of rights and entitlements and public service provision.

both the slow administration of the grant and limited funding;

- People sometimes cannot return home from hospital or continue to live at home because the care and supports available fall significantly short of what is required – this situation can arise even in situations where family carers are involved;
- Supported housing is rarely offered or recommended as a referral option in the continuum of support and care offered by the HSE and GPs – this may be due to the low number of supported housing places available;
- As the hospital system moves to ‘centres of excellence’, outpatients may need to travel substantial distances from their home for appointments and there may not be public transport links to and from their home to the hospital;
- The ongoing erosion of certain social and community supports (e.g., Garda stations, post offices and local shops) that helped people feel secure and provided social interaction opportunities has led to the further isolation of older people;
- The current policy of digitalisation of public services ((e.g. the move to online applications for public services and the payment of benefits directly to bank accounts) and the move to on-line banking by financial services can be difficult for some older people who may not be computer literate and also means that another route of social interaction is no longer available to them;
- The Nursing Home Support Scheme (‘Fair Deal’) does not cover certain supports which are available to people living in the community and for which people may be eligible, e.g., physiotherapy, occupational therapy, chiropody – there appears to be a de-prioritisation of nursing home residents in terms of the HSE providing these services;
- Nursing homes have no obligation to provide specialised equipment, e.g., special chairs, under the ‘Fair Deal’.

A two-pronged approach

In responding to the challenges and opportunities of an ageing population, there is a need to have a two-pronged approach. On the one hand, there is a need to identify factors that would contribute to a more positive view of ageing generally, a better understanding of the ageing process and the actual and potential contribution of older people to society. Secondly, there is a need to target groups of older people who need additional supports. These include, in particular, dependent older people living at home, people in long-term residential care settings and people with Alzheimer’s/dementia, the latter whether living in the community or in nursing homes.

Positive ageing

While there is no evidence of major intergenerational conflict in Ireland, it may well be that there is a tacit uncritical acceptance by all age groups (including older persons) of certain processes which result in disengagement, lessened role status and an under-utilisation of the valuable skills and experiences of older people. In Ireland, as in many western countries,

there is an absence of an ethos and value system that celebrates and marks the passage of years, the achievements that go with this and the consequent contribution that older people make to social integration.

The focus of debate, therefore, needs to shift to older people as a human resource who can contribute to the twin processes of citizenship and social cohesion. The following factors are relevant in responding to the opportunities presented by an ageing population:

- The older population is a major societal resource – they perform key integrative functions by, for example, providing care for dependent others (e.g., spouses), voluntary work in the community (including in CISs), and child-minding;
- Older people are significant consumers of services and products and have considerable purchasing power; this points to the potential for the providers of goods and services, e.g., telecommunication, utilities products, to design goods and services appropriate to the needs of this sector of the population;
- Effective engagement of older persons across the whole spectrum of society can only happen when there are clear structures for participation at local, regional and national levels;
- There should be more planning for making opportunities available throughout society for ongoing education and social engagement by older people to support the concept of active ageing.

If positive ageing is to be truly meaningful, concepts such as ‘active ageing’ and ‘healthy ageing’ need to be applied more extensively than is currently the case and extended to involve greater numbers and a wider range of people, and especially those with functional impairment and in those long- term care accommodation.

The term ‘active ageing’ as used by both the World Health Organisation² and the European Commission refers to involvement by older people in society to the maximum extent possible (intellectually, politically and economically) according to each individual’s capacity. This implies that people are provided with opportunities to match their capacities and interests, which may not always be the case at present in Ireland.

One of the most damaging threats to older people is likely to be a loss of life purpose and boredom. The focus on ageing as a process of learning and adjustment in which older people themselves are actively involved in developing their social inclusion and coping strategies lays the foundation for an empowering rather than dependency-based model of engagement. The lifelong learning concept is particularly apt for people in the third and fourth ages. Programmes targeted at older people therefore, should operate on the basis that people of all ages want to maximise their learning and creative abilities.

One of the major barriers to increased involvement of older persons in the labour market is

² The World Health Organisation defines the term ‘active ageing’ as “the capacity of people as they grow older to lead productive and healthy lives in their families, societies and economies”.

the inflexible nature of working arrangements. A key challenge is to find ways to tap into this enormous pool of skill, energy and experience of older persons (a significant natural resource).

Older people with support needs

In addition to allowing for and facilitating the positive contribution that older people can and do make to society, we also need to fully acknowledge the inevitable fact that some older persons have additional needs because they are frail, ill or vulnerable or because of social or environmental factors.

Addressing the care and support needs of older persons should be based on the following considerations:

- There should be a continuum of support and care provision – housing, community services, hospital services and long-term care provision;
- Care and support for dependent older persons should be provided at the lowest level of complexity, e.g., where people cannot continue to live in their own homes, the potential of supported housing in the community should be the first alternative option explored;
- Income maintenance, transport, and infrastructural policies should be age-proofed to ensure optimum outcomes for older people from equality and social inclusion perspectives;
- There is need for more clarity around the interface between the family and the State in caring for dependent older people in order to ensure that families are not being over-burdened by caring responsibilities;
- Protecting vulnerable older people from abuse (financial, physical or psychological) perpetrated by individuals or institutions must remain at the top of the policy agenda.

Meeting older persons' support needs at the lowest level of complexity

There is universal acknowledgement that supporting people to age at home and in their own communities makes sense socially. Older persons in need of care and support who have different needs clearly require a range of accommodation, care, nursing and medical responses and a continuum of delivery and intensity. Appropriate well-designed housing and related preventative services are centrally important in promoting the health and well-being of older people.³

While enabling people to stay in their homes is frequently a desirable and possible option and one that can be facilitated through the timely availability of housing adaptation grants and other home-based supports, the reality is that not everyone can continue to live

³ Clúid has recommended flexible schemes with varied house types, and the careful design of homes which would allow for multiple uses as the person's needs change over time -- Cluid (2015), *A Home for Life*, <https://www.cluid.ie/wp-content/uploads/2015/10/A-HOME-FOR-LIFE-FINAL-28-10-15.pdf>

indefinitely in mainstream housing and it may not be possible to meet people's housing and support needs in their current dwelling. In such instances, people need some form of supported housing. Indeed, sheltered housing has long been promoted as having the potential to bridge the gap between living independently at home and nursing home care.⁴

The National Dementia Strategy 2014 includes a reference to exploring the potential of new residential models, including housing with care, for people with dementia. An important consideration in this regard is the fact that there is no overall national strategic framework for meeting a range of different needs, e.g., the higher costs associated with high support sheltered housing, because of separate functional responsibilities and budgetary processes on the part of the HSE, the Department of Housing, Planning, Community and Local Government (DHPCLG) and local authorities. It is clear that stronger cross departmental links between the housing sector and health at national and local levels are necessary to implement Government policy as outlined in the Positive Ageing Strategy, viz., enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.⁵

The Report on the Review of the Nursing Home Support Scheme (NHSS) recommended that the Departments of Health and DHPCLG and the HSE, explore the potential for developing sheltered or supported living arrangements. This is an area where proactive planning and target setting is urgently required. The existing network of supported housing schemes provided by housing associations, e.g., Respond and Cluid, has the potential to be a useful starting point in this regard.

Specific areas where action is required

Income support and poverty issues

The SILC 2015^[1] data shows that Ireland's older population has the lowest risk of poverty compared to other age groups. However, those over 65 and living alone have higher 'at risk of poverty', 'deprivation' and 'consistent poverty' rates than the general over-65 population.^[2] The significant role played by the social welfare system, both the State Pension and other state benefits, in minimising the risk of poverty among the older population continues to be an important consideration.

There is recurring evidence of older people having difficulty meeting the cost of fuel and heat. Although housing insulation and heating systems have improved, many older people still have inefficient or expensive heating systems and have additional heating needs. The existing Fuel Allowance Scheme is insufficient to meet their heating needs.

There is a particular problem in some instances where a person's spouse is in a nursing home under the 'Fair Deal'. S/he is effectively worse off because of having many of the same costs, e.g., house insurance, health insurance, Local Property Tax, on a significantly

⁴ See *The Years Ahead Report* 1988

⁵ See Initiatives under the Rebuilding Ireland programme to 'stimulate and encourage the design and construction industries to be innovative in designing and delivering housing solutions for older people'

<http://rebuildingireland.ie/news/smart-ageing-universal-design-challenge/>

^[1] <http://www.cso.ie/en/releasesandpublications/er/silc/surveyonincomeandlivingconditions2015/>

^[2] The 'at risk of poverty' figures are 10.7% for the 65+ group as a whole and 14.7% for those over 65 living alone

reduced household income. Extra nursing home charges may also be incurred. Also, some people in this situation may no longer be entitled to the Household Benefits Package because they are a Qualified Adult on their spouse's pension.

Legislative provision for Home Care Packages

The impact of the absence of legislative provision for Home Care Packages is widely acknowledged and there is broad agreement that legislation is required to put home care on an equal legislative footing with nursing home care.

Implementing the Assisted Decision-making (Capacity) Act 2015

The Assisted Decision-making (Capacity) Act 2015 requires that people (irrespective of cognitive ability) have the support they need to make decisions and to assert their will and preferences in all matters affecting them, including health care and place of residence. The Act also makes provision for advance healthcare directives, the purpose of which is to enable a person to be treated according to his/her will and preferences and to provide healthcare professionals with important information about the person in relation to their treatment choices. The implementation of the Act should be progressed apace.

Existing strategies relating to older people

The National Positive Ageing Strategy, the National Carer's Strategy and the Housing Strategy for People with Disabilities have the potential to have a significant bearing on the lives of older people and should all be implemented through a concerted, targeted and interconnected Government approach.

Age Friendly Strategies

The county Age Friendly Strategies currently in place provide a valuable platform for responding to the challenges and opportunities of an ageing population. These strategies, however, require stronger practical application and need to be located more firmly within a social inclusion framework involving all age groups. The strategic goals also need to be reflected in joint planning for supported housing in the community involving both Local Authorities and the HSE.

Financing of long-term support and care

Given the predicted future demographic pressures arising from greater longevity, a national planning strategy for funding care and support is required to ensure consistency and equity. There is, therefore, a need to proactively plan for the financing of long-term care of an older population who are living longer and to make decisions about how this is to be funded.⁶

An ageing population: social problem or human resource

The societal response to the challenge and opportunities of ageing needs to be twofold – firstly, facilitating and enabling the many older people who can, and wish, to continue to make a positive contribution to society (through work, creative civic engagement and learning) and, secondly, ensuring that people who require support and care get the services they require in a timely manner and in accordance with their will and preferences. This requires some attitudinal change, innovative thinking and a shift in perspective that puts older persons at the centre.

⁶ A public opinion survey carried out by Amárach for the Forum on Long-term Care (2016) found that the greatest overall preference for funding long-term care is through general taxation.

Policies would then be developed in a context of enabling and facilitating older individuals and groups and the communities in which they live to optimise their contribution and to identify and address the totality of their needs – thus, lessening social isolation and providing for more meaningful participation by older persons at all levels of the social supports and caring infrastructure.