



An Roinn Sláinte  
Department of Health

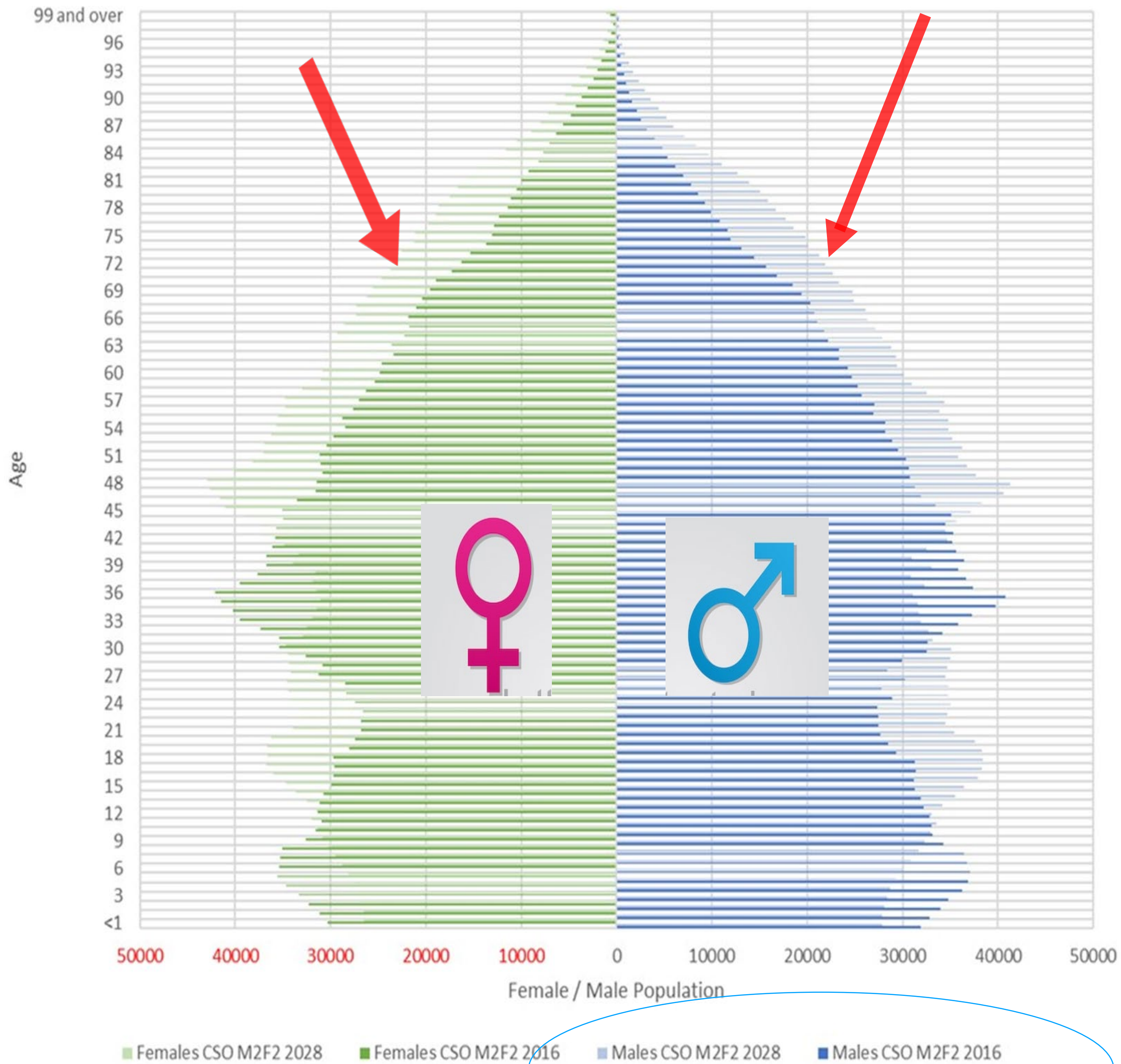
# ESRI Health Policy Conference

24<sup>th</sup> September 2019

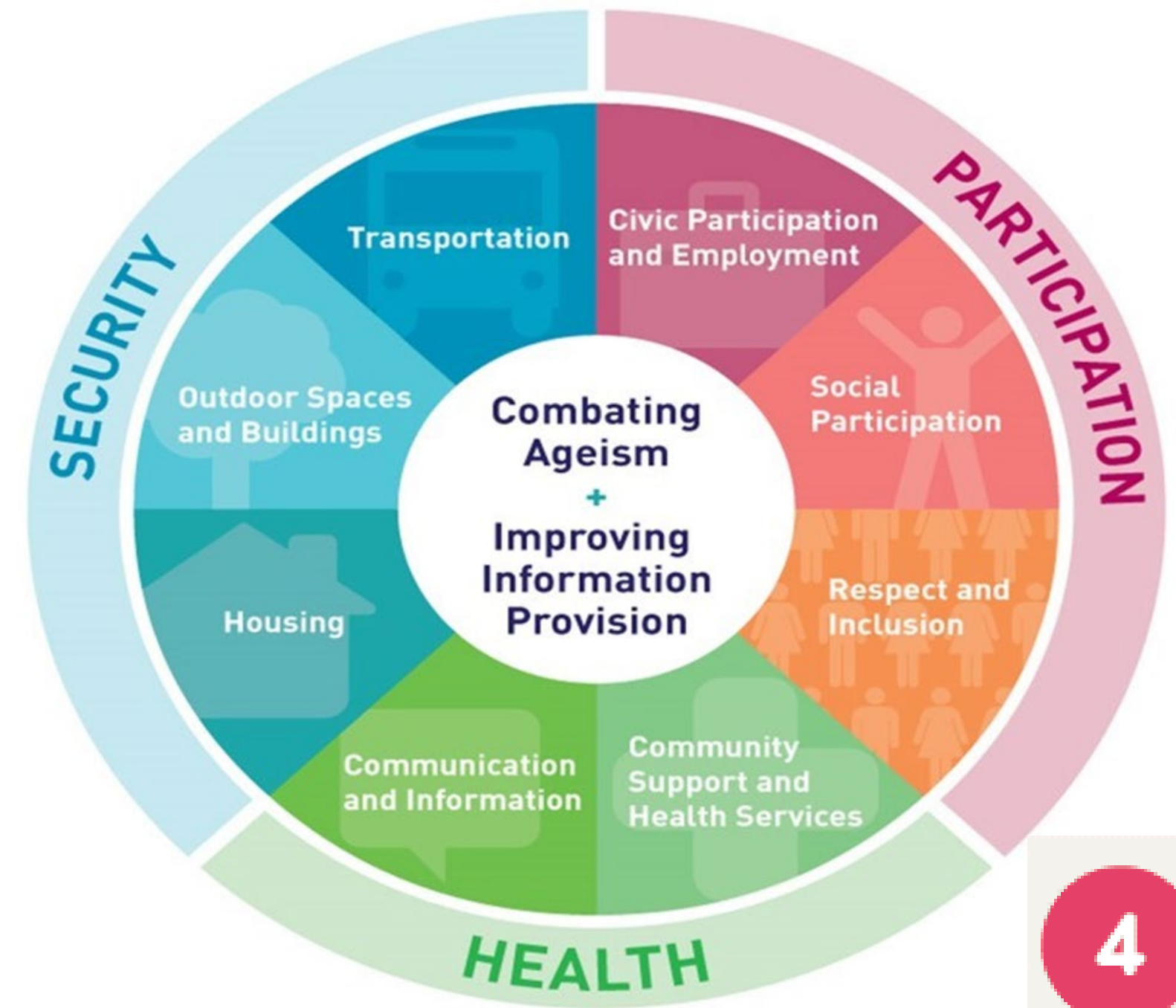
Dr Kathleen Mac Lellan



Population in 2016 vs Population in 2028



National Positive Ageing Strategy goals aligned with WHO Age Friendly themes

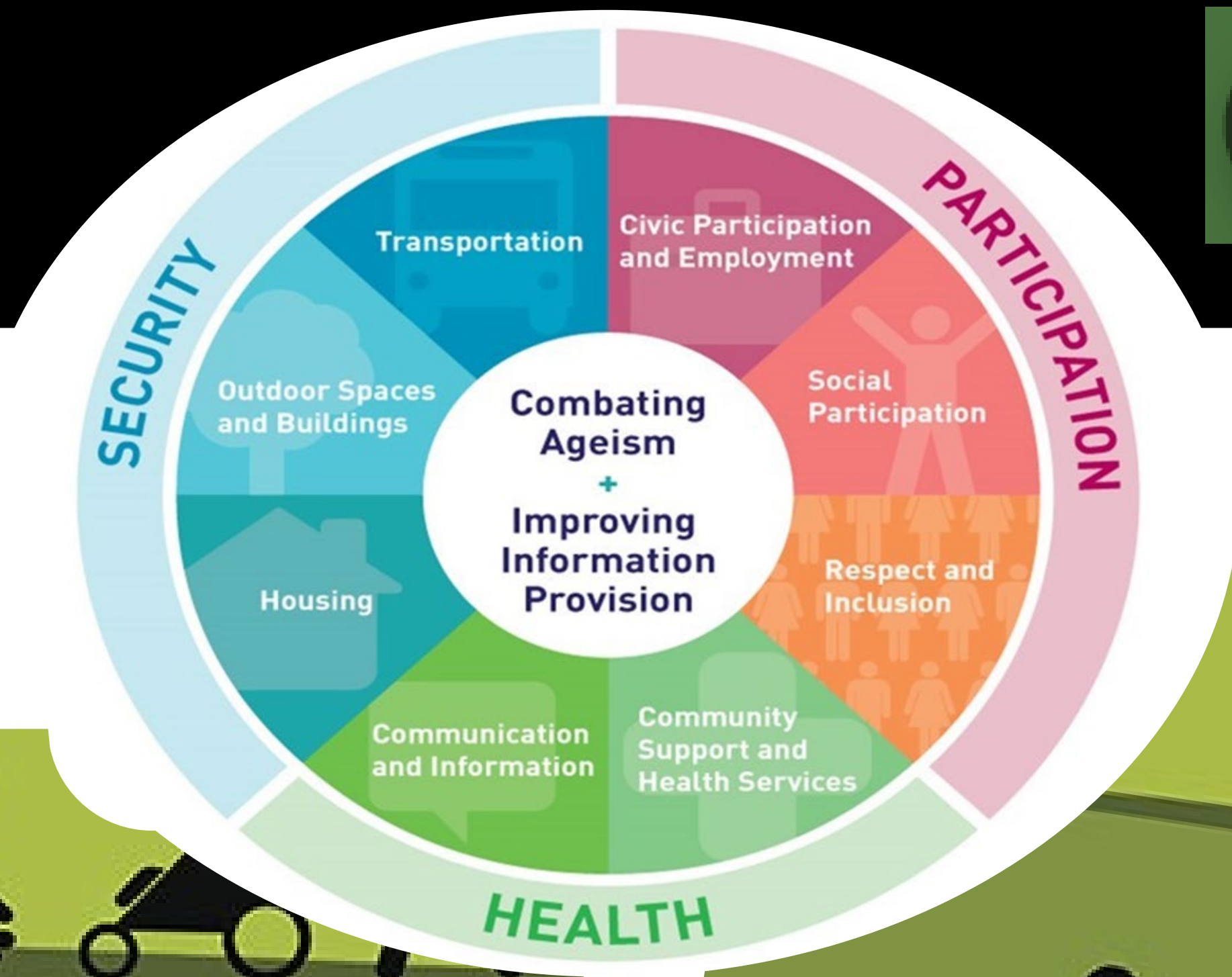


**4 GOALS**

- 1 Remove barriers to participation and provide more opportunities for the continued involvement of people as they age in all aspects of cultural, economic and social life in their communities according to their needs, preferences and capacities
- 2 Support people as they age to maintain, improve or manage their physical and mental health and wellbeing
- 3 Enable people to age with confidence, security and dignity in their own homes and communities for as long as possible
- 4 Support and use research about people as they age to better inform policy responses to population ageing in Ireland



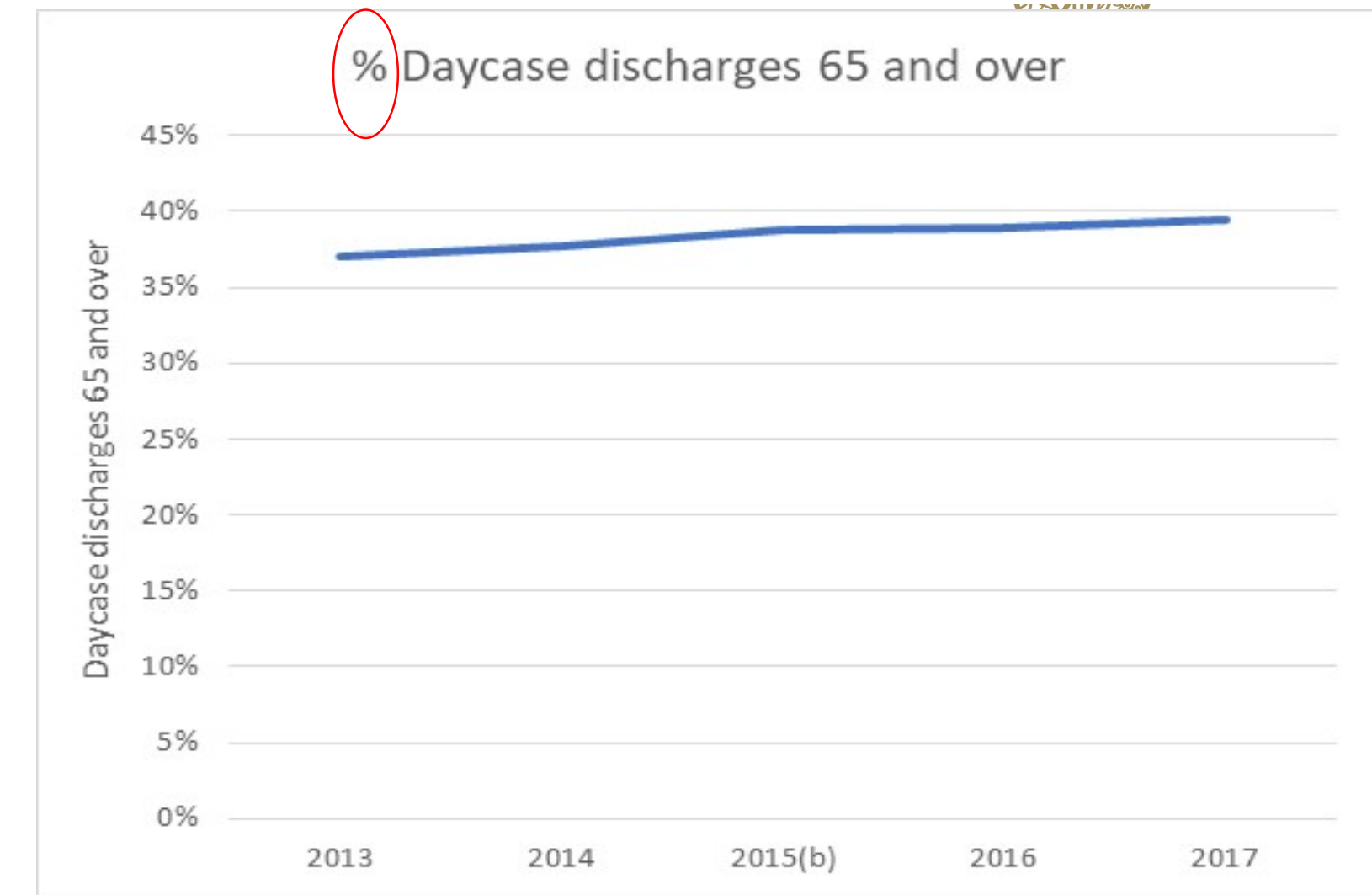
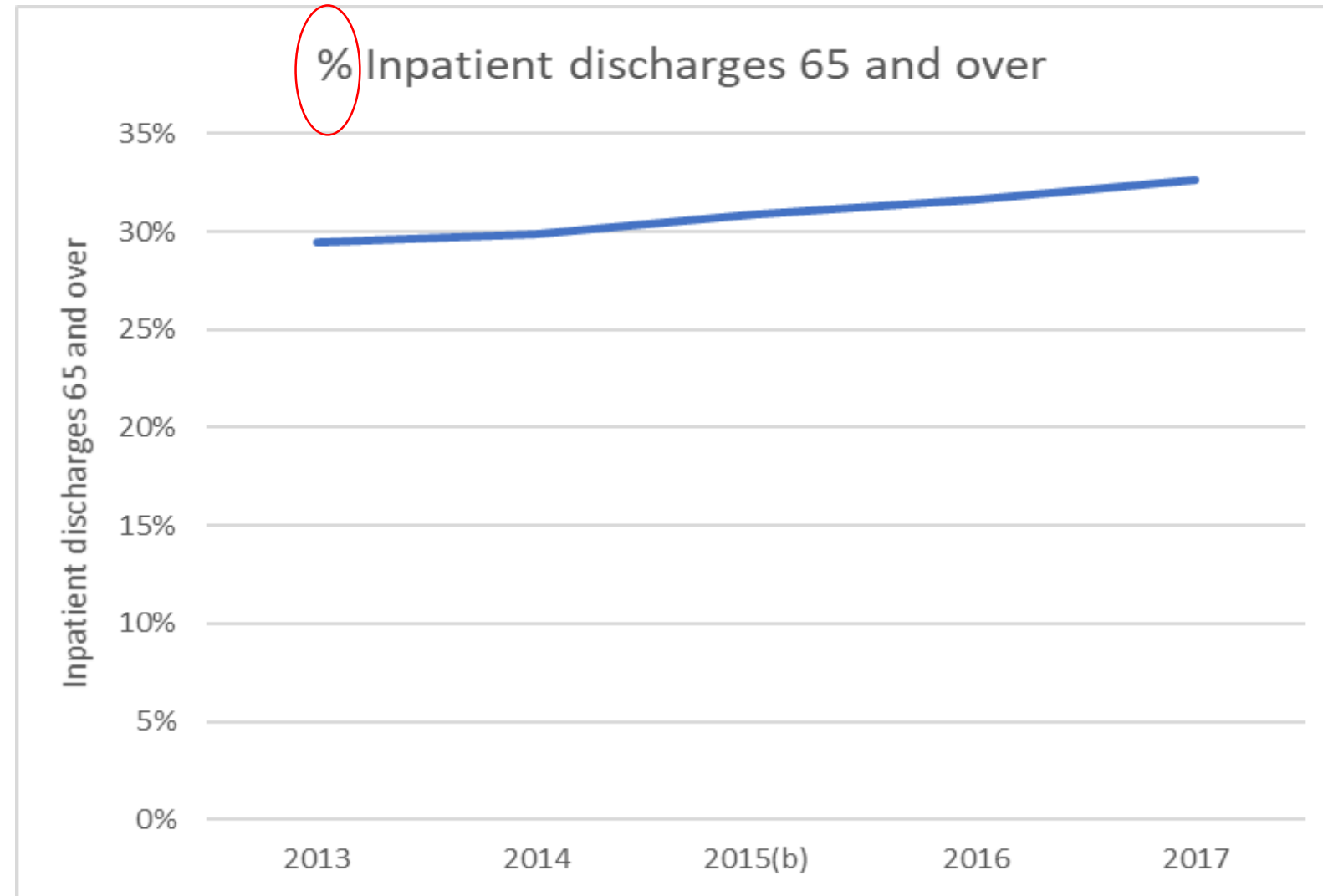
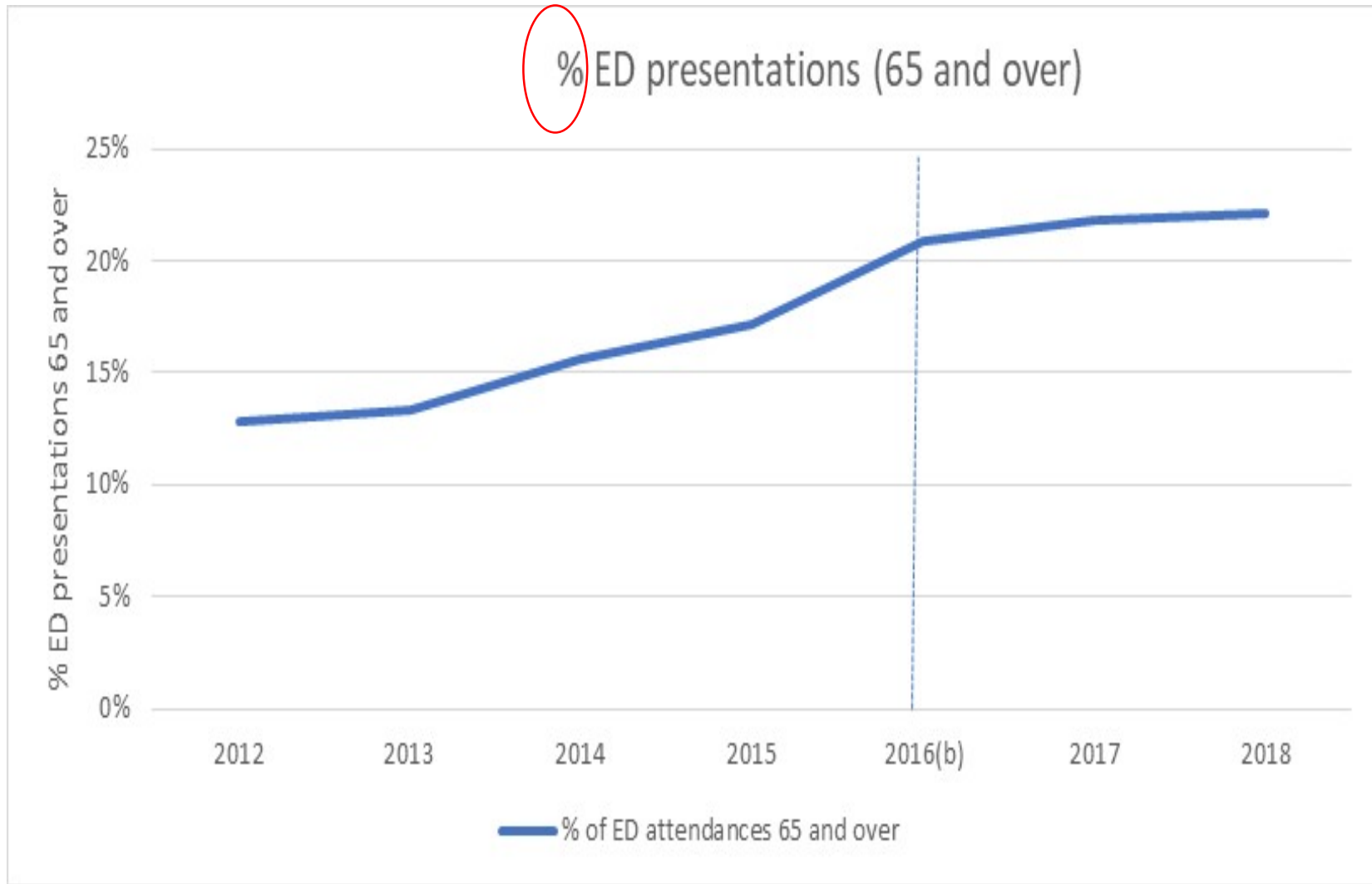
# 2020 – 2030 Policy and Legislative approach?



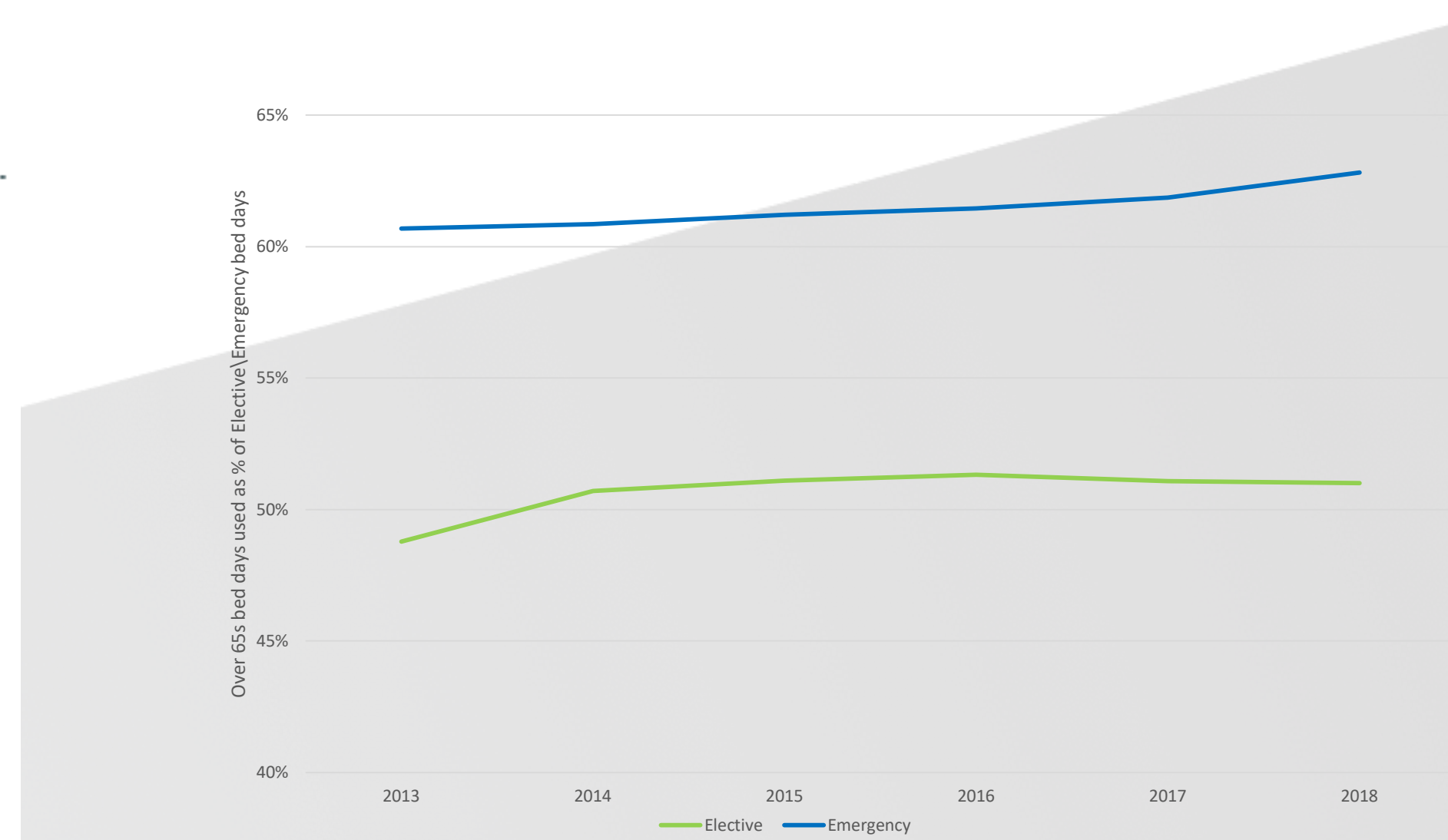


Source: HIPE  
 (b.) Break in series in 2016 therefore data not comparable between periods. 2016 data onwards uses PET time. Pre 2016 data source BIU

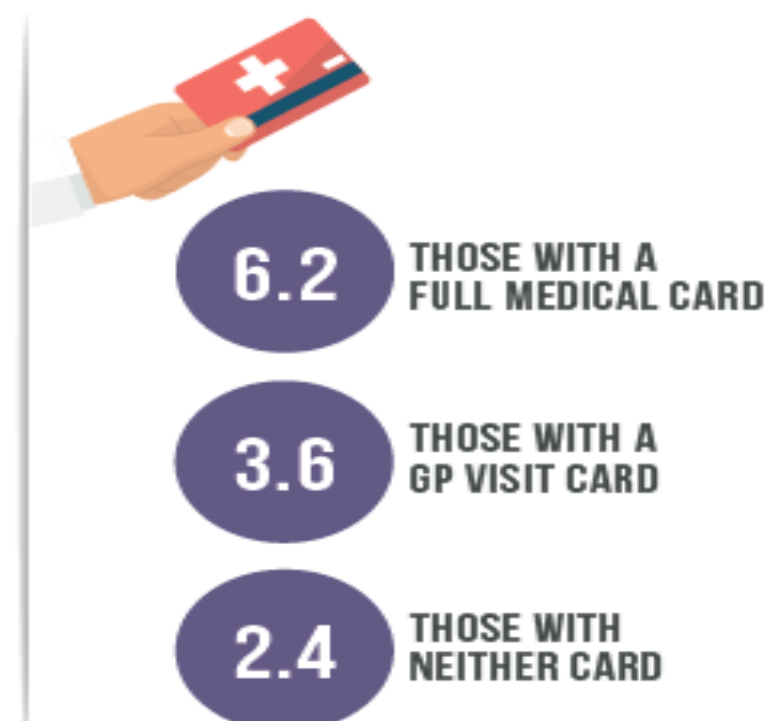
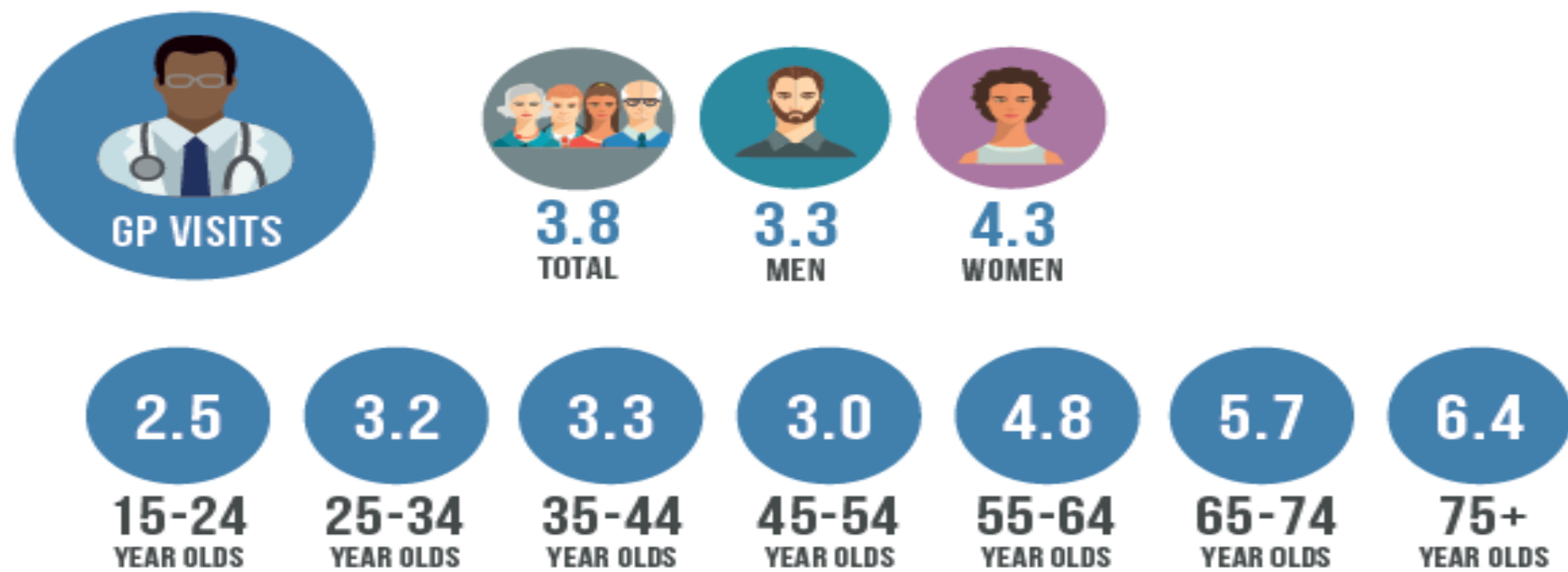
# Healthcare Utilisation



Over 65s as % of total Elective/Emergency bed days used, 2013-2018



## AVERAGE NUMBER OF GP VISITS IN THE PAST 12 MONTHS



Source: Healthy Ireland Survey 2018

# Frailty



**More common**  
- **women**  
- those with **lower education**  
- those **widowed** or **living alone**



**Pre-frail**  
31% adults > 50 years  
40% adults > 65 years



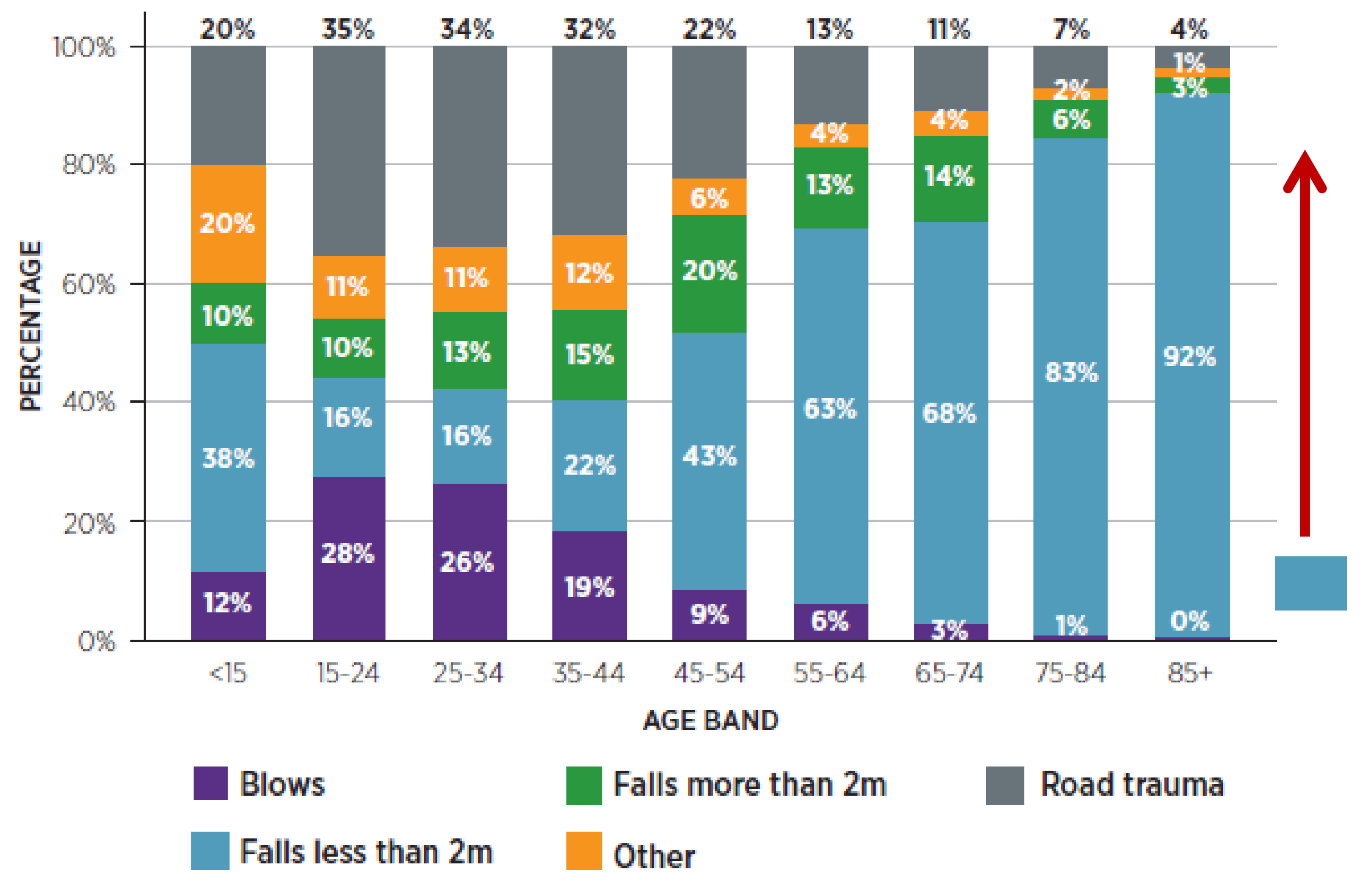
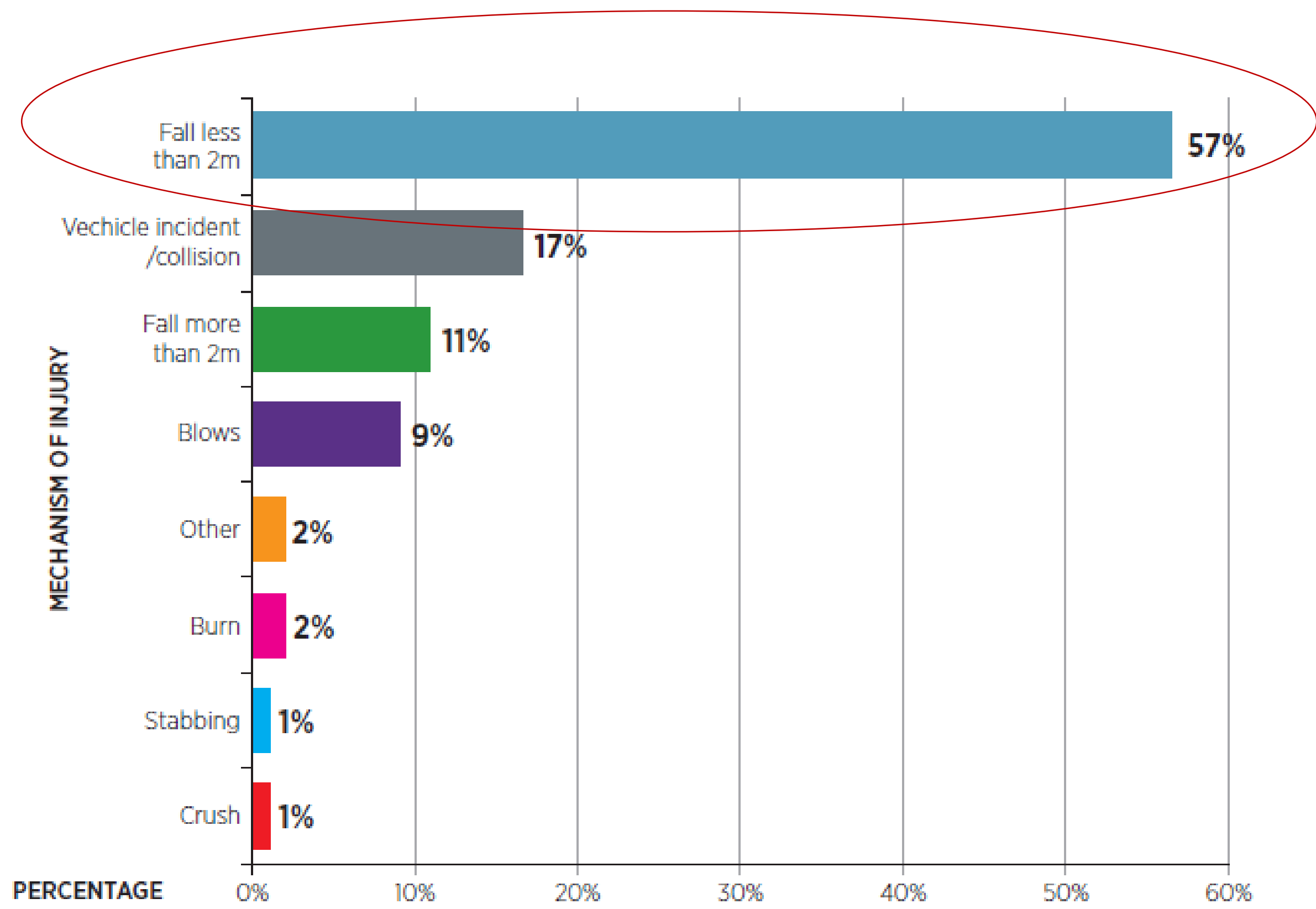
**Frail**  
12.7% adults > 50 years  
21.5% adults > 65 years



**Frailty** - Risk factor for single and recurrent falls

**Frailty is not inevitable and can be avoided, delayed and reversed with timely and appropriate interventions.**





**NOCA** National Office of Clinical Audit

**MTA** Major Trauma Audit

**MAJOR TRAUMA AUDIT**  
NATIONAL REPORT 2017





Over **53,000** people will receive **home support** services, to a total of **17.9m hours**.



Over **230** people will receive **intensive home care** packages through a further **360,000 hours**.



**28,000 places per week** will be provided across **300 day care centres**.



**4,900 long stay** and **1,850 short stay** public residential care **beds** will be **available**.



Over **10,900 people** will be **supported through transitional care** funding in their discharge from acute hospitals.

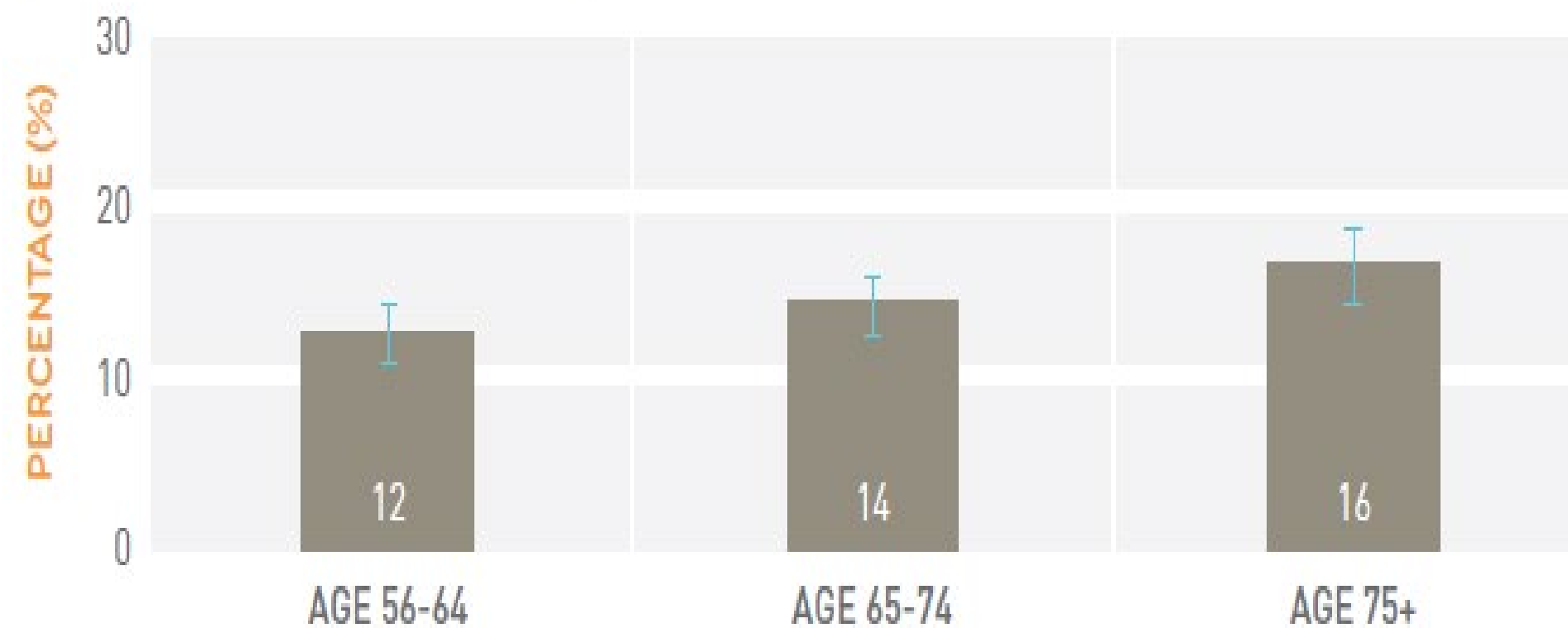


Over **23,042 people** on average at any one time in **long stay care** will be **supported by the NHSS**.

## 13% of people aged 56+ report unmet need for a community care service

**INDICATOR:**  
PERCENTAGE OF  
PEOPLE AGED  
56+ WHO REPORT  
UNMET NEED FOR A  
COMMUNITY CARE  
SERVICE

Community care services include: public health nurse; occupational therapy; chiropody; physiotherapy; speech and language; social work; psychology/counselling; home help; personal care attendant; meals-on-wheels; day centre; optician; dental; hearing; dietician; respite care. Reasons include: never heard of or did not know available; transport difficulties; cost; reluctant/don't have time to apply; not eligible.

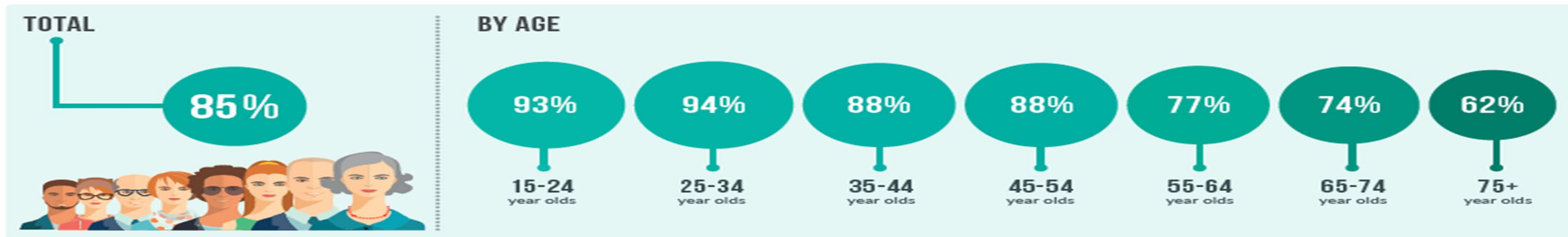


**Figure 75:**  
Unmet need for community care services among people aged 56+, by age group

Source: TILDA (Wave 4: 2016-2017). Note: Error Bars correspond to 95% Confidence Interval. TILDA participants were aged 56+ at Wave 4.



# PROPORTION RATING HEALTH AS GOOD/VERY GOOD



Quality of life reflects the overall wellbeing of an individual.

On average, older people in Ireland experience a good quality of life.

The factors which predominantly influence quality of life are social factors, including social networks and social activities, while health-related factors like functional limitations are also important.

Quality of life decreases with increasing number of chronic health conditions.

Quality of life decreases as the number of activities of daily living (ADL) and instrumental ADL (IADL) limitations increase.

Increased social integration, through maintenance of a large social network and positive supportive relationships with friends is associated with higher quality of life.

**tilda**

Staidéar Fadaimseartha na hÉireann um Dhul in Aois

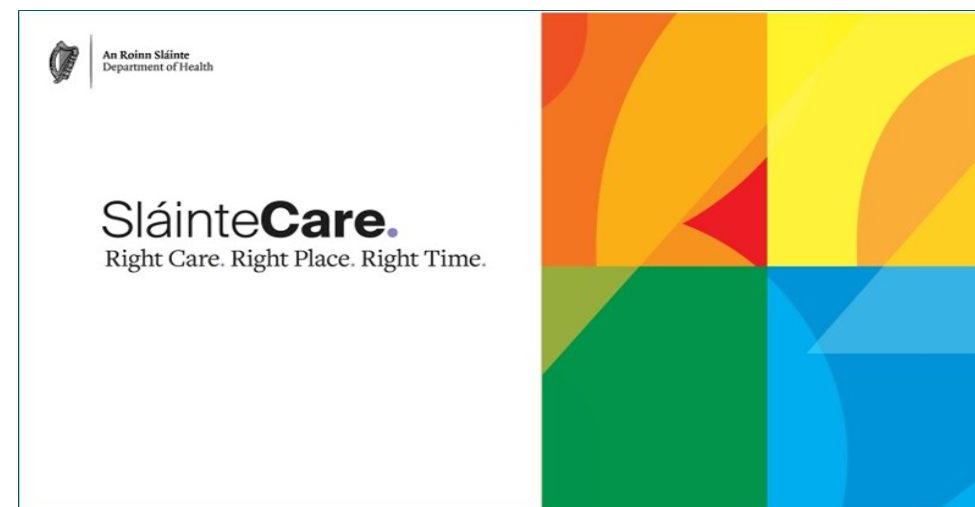
The Irish Longitudinal Study on Ageing







# Big Picture Approach



- An **integrated societal approach**
- Healthcare based on need as close as possible to home using an **integrated model of care** moving towards person-centred primary and community care
- A **population based approach** reflecting health and social care needs using scientific methods to deliver value for money, measuring and reporting on a minimum data set of indicators/ Outcomes Framework
- **eHealth/IT enabled/Single Assessment Tool/Technology**
- **Joined up goals** working across DoH, HSE, Government Departments, Agencies, NGOs Regulators, Researchers, Academics, Voluntary Bodies and the public
- Strong **governance** - corporate and clinical
- Eligibility/ **Resource allocation models**
- **Support for carers**
- **Comprehensive policy** designed to enable access, choice and decisions in order to promote as far as possible independent lives, active participation in the community and enhanced quality of life
- *Planned Sláintecare Action (1.3): 10-Year Social Care Strategy* to set roadmap for triple aim outcomes - health & social care outcomes, patient/caregiver/citizen experience, and value for money



# Key Enablers of Improvement

Reducing data gaps - Community IT systems

Roll out Standardised Assessment Tool

Longer term Workforce Planning

Design community basket of services based on evidence, value and citizen engagement

Review focus of outcome measures

Resource allocation models

Consider homecare quality assurance

Integration across acute care & community care, departments, agencies, voluntary bodies, NGO, Carers, academics, researchers, public .....



# Statutory Home Support Scheme

...to support people with care-needs to continue to live with confidence, security and dignity in their own homes and communities for as long as possible.

An **integrated approach** to support people with care needs along the **continuum of care**

**Enhanced data-collection** for population-based planning and resource-allocation

The allocation of services and resources **based on assessed need**

A **single assessment tool** for the scheme to support transparent, equitable decision making

**Regular review** of resource-allocation to ensure responsiveness to the changing needs of people

A streamlined **central system of administration** to improve and simplify how people can access services

Coordinated **delivery of services at a local level** in line with a person's care plan, with clinical oversight and governance

**Regulation** of service providers to support the delivery of safe and quality care

## 2019 - PLANNING & DESIGN

- Review of current services
- Continued stakeholder engagement, research and evidence building
- High level plan for scheme

## 2020 - TESTING & EVALUATION

- Develop and/or roll out key enablers of the scheme
- Testing model at local level
- Evaluate & refine the design
- Develop standards & outcome measures
- Citizen engagement


## 2021 – LEGISLATION & IMPLEMENTATION

- Drafting legislation & bringing it through the Houses of the Oireachtas,
- Setting up structures, systems, processes & outcome measurements


**Next steps: building on consultation and evidence review**





 **Rialtas na hÉireann**  
Government of Ireland

## Housing Options for Our Ageing Population Policy Statement



Prepared by the Department of Housing, Planning and Local Government  
and the Department of Health  
[housing.gov.ie](http://housing.gov.ie); [health.gov.ie](http://health.gov.ie)



**Action 2.1**

Publish the second National Positive Ageing Indicators report to highlight changes to the positive and negative aspects of growing old identified in the previous report in 2016.  
  
Lead: DoH

Q3 2019

**Action 5.1**

Develop a statutory scheme and system of regulation for Home Support services, with clear rules in relation to services for which people are eligible and how decisions are made in allocating services. This will improve access to the HSS that people need. Consider how home supports in supported housing models could be incorporated into the Scheme.  
  
Lead: DoH

Commence 2021

**Action 5.2**

In line with Sláintecare explore the structure of community based social care supports and consider the role, model and expansion of services such as day care and ancillary services including meals-on-wheels aimed at keeping older people in their communities.  
  
Lead: DoH

Commence Q3 2019

**Action 5.8**

Continue to invest in primary care facilities across the country to help ensure appropriate provision of, and access to, services in the community. By enhancing and expanding capacity in the primary care sector, we will be able to provide high quality, safe, accessible and sustainable care at the local level and allow people to be cared for in their own homes and communities for as long as possible. Investment in primary care facilities across the country will ensure the appropriate provision of, and access to, services in the community.  
  
Lead: DoH

Ongoing

**Action 5.4**

Utilise the expanded Community Intervention Team and Outpatient Parenteral Antimicrobial Therapy (OPAT) services to prevent unnecessary hospital admission, promote hospital avoidance, and facilitate early discharge of patients to their home with the appropriate range of supports.  
  
Lead: DoH

Ongoing

**Action 5.5**

Under Sláintecare, progress a Programme on Workforce Planning, including the assessment of workforce required to deliver new models of care in the community to meet population growth and demand for community based care services.  
  
Lead: DoH

Commence 2020

**Action 5.6**

Develop the role of Advanced Nurse Practitioner services in older persons care, and in chronic disease management and unscheduled care, both services cater for a high proportion of older people.  
  
Lead: DoH

Ongoing

**Action 5.7**

Promote the use of Support Co-Ordination Services to ensure that a collective approach to the provision of services is delivered at local level. This will include mapping and signposting of all local services such as home supports, befriending, meals on wheels, transport services, activities, services, health and wellbeing programmes, specific services, training & education and technology supports  
  
Lead: DoH

Ongoing

**Action 6.2**

Evaluate the Warmth & Well-being Scheme currently being piloted by Department of Health Healthy Ireland initiative, with Department of Communications, Climate Action & Environment, Sustainable Energy Authority of Ireland and the HSE, with a view to expansion.  
  
Lead: DoH

Q3 2019



# Planning for Success

Older people will have access to the services they need when they need it – right services and care, in the right place at the right time in order to enable and support them to live as full lives in their communities as close to home as possible

