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Reading list

Age discrimination
July 2014

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- hold a database of over 110,000 bibliographic records, catalogued using an authoritative thesaurus of over 11,000 indexing terms
- contribute health policy and management content to NICE Evidence Search Go to: http://www.evidence.nhs.uk/

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- free reading lists on our web pages at <u>www.kingsfund.org.uk/readinglists</u> on a wide range of health and social care topics
- free sign-up to our regular policy and news alerts: www.kingsfund.org.uk/alerts
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- photocopies of journal articles (for a small fee).
- Internet access to our database from http://www.kingsfund.org.uk/library.

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BOOKS/REPORTS

Royal College of Surgeons and Age UK

Access all ages 2 : exploring variations in access to surgery among older people.

London: RCS, 2014 Web publication

This analysis of surgery rates across England's 211 clinical commissioning groups (CCGs), for six common procedures which are known to be effective in older people, shows there was widespread variation in the rates of surgery for people aged over 65 and 75, depending on where they live. The report urges commissioners to explore their data and understand why they may have higher or lower rates of surgical intervention to make sure they are providing the best health service possible for the population they serve.

http://www.rcseng.ac.uk/news/docs/access-all-ages-2

Accompanying datasheet:

http://www.rcseng.ac.uk/news/docs/access-all-ages-2-datasheet

All Party Parliamentary Group on Breast Cancer (APPG on Breast Cancer)

Age is just a number: the report of the parliamentary enquiry into older age and breast cancer.

London: Breakthrough Breast Cancer, [2013]

Web publication

This is a report of an inquiry which aimed to examine the variations and barriers preventing all patients diagnosed with breast cancer having access to the services, treatments and care that will benefit them most, regardless of their age. It lays out a series of key recommendations on ways to improve diagnosis, treatment and care, representing the culmination of the findings of the inquiry.

http://www.breakthrough.org.uk/sites/default/files/media/Campaigns/Age%20is%20just%20a%20number%20-%20APPG%20report%20on%20older%20people%20and%20breast%20cancer.pdf

NHS England

A refreshed Equality Delivery System for the NHS : EDS2 : making sure everyone counts.

[Redditch]: NHS England, 2013

Web publication

The main purpose of the EDS was, and remains, to help local NHS organisations, in discussion with local partners including local people, review and improve their performance for people with characteristics protected by the Equality Act 2010. By using the EDS, NHS organisations can also be helped to deliver on the public sector Equality Duty (PSED).

http://www.england.nhs.uk/wp-content/uploads/2013/11/eds-nov131.pdf Associated documentation http://www.england.nhs.uk/ourwork/gov/edc/eds/

Social Care Institute for Excellence

GP services for older people : a guide for care home managers.

Adults Services SCIE guide; 52

London: SCIE, 2013

Web publication

The health and wellbeing of older people in care homes depends on them accessing GP services in a timely way. Effective joint working between GP and care home management, the involvement of residents and their relatives and the engagement of care staff are factors that can affect the outcome and lead to quality improvements. This guide is primarily written for managers and senior staff of care homes but it has also been written with GPs in mind, as well as members of clinical commissioning groups and joint health and wellbeing boards.

http://www.scie.org.uk/publications/guides/guide52/files/guide52.pdf

Associated documentation:

http://www.scie.org.uk/publications/quides/guide52/?dm_i=405,21F9A,2QSPZ8,7CGFZ,1

Brand, Paul

Social Care Institute for Excellence

Improving access to and experience of GP services for older people living in care homes: practice survey.

London: SCIE, 2013 Web publication

This practice survey was carried out between February and May, 2013. It consisted of three focus groups of managers representing care homes from the voluntary and private sectors.

 $\underline{http://www.scie.org.uk/publications/guides/guide52/files/practice-survey.pdf}$

Associated documentation: http://www.scie.org.uk/publications/guides/guide52/?dm_i=405,21F9A,2QSPZ8,7CGFZ,1

Asthana, Sheena

University of Plymouth. Faculty of Health, Education and Society

Variations in access to social care for vulnerable older people in

England: is there a rural dimension?

London: DEFRA, 2012 Web publication

This research report to the Commission for Rural Communities suggests that people's access to social care is subject to systematic geographical variation. Rural authorities, which tend to have older and less deprived populations receive lower grant allocations, spend less on social care, charge more for home care and allocate lower personal budgets than local authorities serving younger, more urban and more deprived populations. The research will inform the Commission's forthcoming report into social isolation experienced by older people in rural areas.

 $\underline{http://webarchive.nationalarchives.gov.uk/20130822084033/http://www.defra.gov.uk/crc/files/Asthana-Variations-in-Social-Care-Final.pdf}$

Associated documentation:

http://webarchive.nationalarchives.gov.uk/20130822084033/http://www.defra.gov.uk/crc/variations-in-access-to-social-care/

Great Britain. Department of Health

Implementing a ban on age discrimination in the NHS: making effective, appropriate decisions.

Leeds: DH, 2012 Web publication

This briefing gives a short overview of the ban on age discrimination. It is specifically aimed at those who plan, commission or provide NHS services, whether in the NHS, voluntary or private sectors.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/212944/ban-on-age-discrimination.pdf

ISBN: 9781849879354

Great Britain. Government Equalities Office

Equality Act 2010 : banning age discrimination in services : an overview for service providers and customers.

London: Government Equalities Office, 2012

Web publication

http://www.homeoffice.gov.uk/publications/equalities/equality-act-publications/equality-act-guidance/age-discrimination-ban?view=Binary

Stephens, Peter IMS Health

Bridging the gap: why some people are not offered the medicines that NICE recommends.

London: IMS Health, 2012 Web publication

This report highlights a number of different factors which together help to explain the variation in the uptake of NICE recommended medicines. It makes a number of recommendations which, if implemented, could make a positive difference to care across multiple therapy areas.

http://www.imshealth.com/deployedfiles/ims/Global/Content/Insights/IMS%20Institute%20for%20 Healthcare%20Informatics/NICE%20report/IMS_Health_Bridging_the_Gap_2012.pdf Watson, Jessica and Bamford, Sally-Marie

International Longevity Centre - UK

Undetected sight loss in care homes: an evidence review.

London: Thomas Pocklington Trust, 2012

Web publication

This review of sight testing and sight loss in care homes found that lack of a national policy on eye health in care homes leaves many older people without basic eye care. It reveals that eye care and sight testing are neglected in care homes, leading to potential discrimination against those living in them compared to those who are cared for in the community.

http://www.pocklington-

 $\frac{trust.org.uk/Resources/Thomas\%20Pocklington/Documents/PDF/Research\%20Publications/ILC\%20UK\%20Undetected\%20sight\%20loss\%20in\%20care\%20homes.pdf$

Macmillan Cancer Support

Cancer services coming of age : learning from the Improving Cancer Treatment Assessment and Support for Older People Project.

London: Macmillan Cancer Support, 2012

Web publication

This report outlines what health and social care providers in England must do to improve care of older people with cancer. This report is based on the Improving Cancer Treatment, Assessment and Support for Older People Project, which was funded by Macmillan Cancer Support and the Department of Health, and delivered in partnership with Age UK.

http://www.macmillan.org.uk/Documents/AboutUs/Health_professionals/OlderPeoplesProject/Cancer ServicesComingofAge.pdf

Associated documentation:

http://www.macmillan.org.uk/Aboutus/Healthandsocialcareprofessionals/Macmillansprogrammesandservices/Improvingservicesforolderpeople/ProjectImprovingcancertreatment,assessmentandsupportforolderpeople.aspx

Macmillan Cancer Support

The age old excuse: the under treatment of older cancer patients.

London: Macmillan Cancer Support, 2012

Web publication

Under treatment is one of a number of factors contributing to around 14,000 avoidable cancer deaths in patients over 75 in the UK each year. While cancer mortality rates are improving significantly for the under 75s, they are improving at a much slower rate in those aged 74-84 and actually getting worse for people aged 85 and over. This can be attributed to under treatment as well as late diagnosis and high incidence.

http://www.macmillan.org.uk/Documents/GetInvolved/Campaigns/AgeOldExcuse/AgeOldExcuseReport-MacmillanCancerSupport.pdf

Whitaker, Matthew, et al.

Royal College of Surgeons, et al.

Access all ages: assessing the impact of age on access to surgical treatment.

London: RCS, 2012 Web publication

This report summarises the findings of a study to: assess how treatment rates for common surgical interventions vary according to age; explore potential reasons for this variation; and make recommendations about how the profession and other stakeholders can best respond.

http://www.rcseng.ac.uk/publications/docs/access-all-ages

Ageing across Europe.

Cardiff: WRVS, 2012 Web publication

Many European countries, including the UK, are now facing the dual challenge of responding to the demographic changes brought by population ageing, while also implementing tough austerity measures following the 2008 financial and economic crisis. With increasing pressure on public budgets, this is an important moment to consider what it is that makes a country a good place to grow old, and where possible to learn lessons from our European neighbours on the policies and services that are most effective in giving older people a good quality of life. This new evidence will contribute to a national debate in the UK about our aspirations for our older citizens and how we might best achieve them in an increasingly challenging fiscal environment.

http://www.wrvs.org.uk/Uploads/Documents/Reports%20and%20Reviews/ageing_across_europe_may24_2012.pdf

Age UK

Equality and human rights in practice: a guide for practitioners and commissioners of services for older people.

London: Age UK, 2011

Web publication

This document aims to support implementation of the Equality Act 2010 and Human Rights Act 1998 in relation to services for older people. It: introduces equality and human rights themes and what they mean for people in later life; sets equality and human rights work in the context of the developing legal framework; highlights projects and services with a track record of success in promoting equality and human rights; and provides ideas for reaching, engaging and supporting older people who are marginalised or excluded.

http://www.ageuk.org.uk/Documents/EN-GB/Campaigns/Care%20in%20Crisis%20-%20FINAL.pdf?dtrk=true

brap

Equality objectives and public authorities: tips, hints and bright ideas.

Birmingham: brap, 2011

Web publication

With the passing of the Equality Act Specific Duties Regulations, public authorities now have a duty to devise and publish one or more equality objectives. This guide recounts some tips and strategies picked up over 13 years of helping organisations develop equality schemes and policies. It is designed to help you go beyond the law to make equality a reality for staff, customers, and the communities.

http://www.brap.org.uk/index.php/component/docman/doc_download/1-equalityobjectivespublicauthorities

Campbell, Fiona and Heron, Christine

Centre for Public Scrutiny and Local Government Improvement and Development

A good place to grow older? : ten questions to ask if you are scrutinising local preparation for the ageing society.

London: CfPS, 2011 Web publication

http://cfps.org.uk/domains/cfps.org.uk/local/media/uploads/final10gsageing.pdf

ISBN: 9781842063934

Equality and Human Rights Commission

Equality duty: a way forward for the health sector.

London: EHRC, 2011 Web publication

The inquiry has found that although many older people receive care at home which respects and enhances their human rights, this is by no means a universal experience. It uncovered areas of real concern in the treatment of some older people and significant shortcomings in the way that care is commissioned by local authorities.

http://www.equalityhumanrights.com/uploaded_files/EqualityAct/PSED/health_policy_web.pdf

Equality and Human Rights Commission

Close to home: an inquiry into older people and human rights in home care.

London: EHRC, 2011 Web publication

The inquiry has found that although many older people receive care at home which respects and enhances their human rights, this is by no means a universal experience. It uncovered areas of real concern in the treatment of some older people and significant shortcomings in the way that care is commissioned by local authorities.

http://www.equalityhumanrights.com/sites/default/files/publication_pdf/Close%20to%20home.pdf Associated documentation:

http://www.equalityhumanrights.com/legal-and-policy/inquiries-and-assessments/inquiry-into-home-care-of-older-people/close-to-home-report/

Widger, Tom, et al. Focus Consultancy

The performance of the health sector in meeting the public sector equality duties: moving towards effective equality outcomes.

A Focus Consultancy Report; July 2011

Manchester: EHRC, 2011 Web publication

The Commission undertook a study assessing the performance of a sample of strategic health authorities and primary care trusts in England with regard to the race, gender and disability equality duties. It found that many bodies were not taking sufficient action to address the diverse needs of people in Britain and to protect the rights of disadvantaged groups. The Commission concluded that without a major re-think by new health bodies on how they tackle discrimination and advance equality some groups will continue to experience poorer health.

http://www.equalityhumanrights.com/uploaded_files/research/psed_health.pdf

Public sector equality duty:

http://www.equalityhumanrights.com/advice-and-quidance/public-sector-equality-duty/

National Development Team for Inclusion

A long time coming: part 1: strategies for achieving age equality in mental health services.

Bath: NDTi, 2011 Web publication

This paper reports on the findings of a National Learning Network established to inform the development of age equal mental health services. It is one of two papers produced to share the key messages and lessons arising from this work, including national and local priorities for developing mental health services that improve the life chances of older people with mental health support needs whilst meeting the requirements of the Equality Act 2010.

http://www.ndti.org.uk/uploads/files/A Long Time Coming Part 1 -

_Strategies_for_Achieving_Age_Equality_in_Mental_Health.pdf

Associated publications:

http://www.ndti.org.uk/publications/ndti-publications/a-long-time-coming

National Development Team for Inclusion

A long time coming : part 2 : achieving age equality in local mental health services.

Bath: NDTi, 2011 Web publication

This report shares the findings, lessons and recommended actions arising from a National Learning Network established to inform the development of age equal mental health services in the Midlands.

http://www.ndti.org.uk/uploads/files/A Long Time Coming A Long Time Coming Part 2 - Working Together to Achieve Age Equality in Local Mental Health Services.pdf
Associated publications:

http://www.ndti.org.uk/publications/ndti-publications/a-long-time-coming/

Social Care Institute for Excellence

Implications of the Equality Act 2010.

At a glance; 41 (April 2011)

London: SCIE, 2011 Web publication

This At a glance briefing examines the implications of the Equality Act 2010 for personalised adult social care. The Equality Act 2010 provides a legal framework

which can support personalisation in adult social care.

http://www.scie.org.uk/publications/ataglance/ataglance41.pdf

Associated documentation:

http://www.scie.org.uk/publications/ataglance/ataglance41.asp?dm_i=405,ES19,2QSPZ8,1603W,1

Levenson, Ros, et al.

NHS South West

Achieving age equality in health and social care: NHS practice guide.

[Taunton]: NHS South West, 2010

Web publication

This guide for the NHS is part of the resource pack that we have produced to help the NHS and local authorities deliver the recommendations made in our report Achieving age equality in health and social care and the government's response Age equality in health and social care. It has been designed to help both primary care trusts and service providers look at what they are doing now and identify improvements that can be implemented over the next few years.

http://age-equality.southwest.nhs.uk/downloads/guides/age-equality-nhs-practice-guide-ALL-chapters.pdf

Audit tool: http://age-equality.southwest.nhs.uk/

Great Britain. Department of Health

Age equality in health and social care: a report on the consultation.

London: DH, 2010 Web publication

This is a report on the consultation that the Department of Health (DH) conducted from November 2009 to February 2010 on age equality in health and social care.

http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_113739.pdf

Social Care Institute for Excellence

Age equality and age discrimination in social care: an interim practice guide.

SCIE guide; 35

London: SCIE, 2010 Web publication

http://www.scie.org.uk/publications/guides/guide35/index.asp

Paulden, Mike and Culyer, Anthony J.

University of York. Centre for Health Economics

Does cost-effectiveness analysis discriminate against patients with short life expectancy? : matters of logic and matters of context.

CHE research paper; 55

York: CHE, 2010 Web publication

The aim of this paper is to explore the claim of ageism made against the National Institute for Health Clinical Excellence and like organisations, and to identify circumstances under which ageist discrimination might arise.

http://www.york.ac.uk/media/che/documents/papers/researchpapers/rp55 does costeffectiveness analysis discriminate against patients with short life expectancy.pdf

Age Concern and Help the Aged

One voice: shaping our ageing society.

London: Age Concern and Help the Aged, 2009

Web publication

This report examines issues facing older people in the UK: poverty, age discrimination, isolation and lack of care and support.

http://www.ageuk.org.uk/documents/en-gb/for-

professionals/research/one%20voice%20(2009)_pro.pdf?dtrk=true

Clark, Angela

Centre for Policy on Ageing

Ageism and age discrimination in social care in the United Kingdom : a review from the literature.

London: CPA, 2009 Web publication

http://www.cpa.org.uk/information/reviews/CPA-

%20ageism_and_age_discrimination_in_social_care-report.pdf

Appendices: http://www.cpa.org.uk/information/reviews/agediscriminationinsocialcare.html

Lievesley, Nat

Centre for Policy on Ageing

Ageism and age discrimination in mental health care in the United Kingdom : a review from the literature.

London: CPA, 2009 Web publication

http://www.cpa.org.uk/information/reviews/CPA-

ageism_and_age_discrimination_in_mental_health_care-report.pdf

Appendices: http://www.cpa.org.uk/information/reviews/agediscriminationinmentalhealthcare.html

Lievesley, Nat

Centre for Policy on Ageing

Ageism and age discrimination in secondary health care in the United Kingdom: a review from the literature.

London: CPA, 2009 Web publication

http://www.cpa.org.uk/information/reviews/CPA-

ageism and age discrimination in secondary health care-report.pdf

Appendices:

http://www.cpa.org.uk/information/reviews/agediscriminationinsecondaryhealthcare.html

Clark, Angela

Centre for Policy on Ageing

Ageism and age discrimination in primary and community health care in the United Kingdom: a review from the literature.

London: CPA, 2009 Web publication

http://www.cpa.org.uk/information/reviews/CPA-

ageism and age discrimination in primary and community health care-report.pdf

Appendices:

http://www.cpa.org.uk/information/reviews/agediscriminationinprimaryandcommunityhealthcare.html

Carruthers, Ian <u>and</u> Ormondroyd, Jan Great Britain. Department of Health

Achieving age equality in health and social care.

London: DH, 2009 Web publication

The report analyses the nature, extent and variability of age discrimination in health and social care services. It also highlights what reforms are already in progress to tackle age discrimination and support greater age equality.

http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_107398.pdf

Bakewell, Joan

Great Britain. Government Equalities Office

Voice of Older People: annual report 2008/09.

London: Government Equalities Office, 2009

This is an informal report, setting out the most important issues that have reached the author in her year as the government's Voice of Older People. It also outlines her response to them, and indicates the many ways the government is moving to improve the situation.

http://www.globalaging.org/elderrights/world/2009/voice.pdf

Web publication

ISBN: 9781845622237 Healthcare Commission

Equality in later life: a national study of older people's mental

health services.

London: Healthcare Commission, 2009

Web publication

IJH (Men)

This study combined an analysis of national data with visits to a representative sample of mental health trusts. The study covered four themes: age discrimination in mental health services; quality of inpatient care; how comprehensive services are; and how organisations work together to provide services.

http://lx.iriss.org.uk/sites/default/files/resources/equality_in_later_life.pdf

ISBN: 9781906162344 Mental Health Foundation

All things being equal: age equality in mental health care for older people in England.

London: Mental Health Foundation, 2009

http://www.mentalhealth.org.uk/content/assets/PDF/publications/all_things_being_equal.pdf

Royal College of Psychiatrists

Age discrimination in mental health services: making equality a reality.

Royal College of Psychiatrists' position statement; PS2/2009

London: RCPSYCH, 2009 Web publication

http://www.rcpsych.ac.uk/pdf/PS02_2009x.pdf

Anderson, David, et al. Royal College of Psychiatrists

The need to tackle age discrimination in mental health: a compendium of evidence.

London: RCPSYCH, 2009 Web publication

http://www.rcpsych.ac.uk/pdf/Royal%20College%20of%20Psychiatrists%20-

%20The%20Need%20to%20Tackle%20Age%20Discrimination%20in%20Mental%20Health%20Services%20-%20Oct09.pdf

ISBN: 9781901097115

Ward, Richard and Bytheway, Bill, editors

Centre for Policy on Ageing and Open University. Centre for

Ageing and Biographical Studies

Researching age and multiple discrimination.

London: Centre for Policy on Ageing, 2008

Representation of older people in ageing research; 8

QBF (War)

Help the Aged

Spotlight report 2008: spotlight on older people in the UK.

London: Help the Aged, 2008

Web publication

This report looks at the facts and figures on poverty, and on how people dependent on a state pension cope with daily living costs; on isolation, mobility and access to essential services; on levels of satisfaction with quality of life; on the scarcity of employment and learning opportunities; and on the way our society's attitudes to age have tacitly supported the institutionalised ageism within our health and social care systems.

http://www.ageuk.org.uk/documents/en-gb/for-

professionals/research/spotlight%20report%202008_pro.pdf?dtrk=true

Beecham, Jennifer, et al.

London School of Economics. Personal Social Services Research Unit

Age discrimination in mental health services.

PSSRU Discussion Paper; 2536 (May 2008)

London: PSSRU, 2008

http://www.pssru.ac.uk/pdf/dp2536.pdf

IJH (Bee)

ISBN: 9780007226467 ISBN: 0007226462

Neuberger, Julia

Not dead yet: a manifesto for old age.

London: HarperCollins, 2008 QBFA (Neu)

Forder, Julien

Personal Social Services Research Unit

The costs of addressing age discrimination in social care.

Canterbury: PSSRU, 2008 QAD (For)

http://www.pssru.ac.uk/pdf/dp2538.pdf

Edlin, Richard, et al.

University of Leeds. Leeds Institute of Health Sciences. Faculty of

Medicine and Health, et al.

Cost-effectiveness analysis and ageism: a review of the theoretical literature.

Leeds: University of Leeds, 2008

QBF (Uni)

This report was commissioned by the Department of Health.

Associated documentation:

http://www.researchgate.net/publication/251979952_Cost-

effectiveness_analysis_and_ageism_a_review_of_the_theoretical_literature/file/3deec51f6bf7066f04.pdf

ISBN: 9781903629499

Lee, Michele

Age Concern England

Improving services and support for older people with mental health problems: the second report from the UK Inquiry into Mental Health and Well-Being in Later Life.

London: Age Concern England, 2007

IJH: QHA (Lee)

 $\underline{http://www.mentalhealthpromotion.net/resources/improving-services-and-support-for-older-people-services-and-services$

with-mental-health-problems.pdf

Centre for Policy on Ageing

A literature review of the likely costs and benefits of legislation to prohibit age discrimination in health, social care and mental health services and definitions of age discrimination that might be operationalised for measurement.

London: CPA, 2007 QBFA (Cen)

This review was carried out on behalf of the Department of Health.

http://www.cpa.org.uk/information/reviews/CPA-age_discrimination_costs_report.pdf

Associated documentation:

http://www.cpa.org.uk/information/reviews/age_discrimination.html

ISBN: 9781845621575 Healthcare Commission

Caring for dignity: a national report on dignity in care for older people while in hospital.

London: Commission for Healthcare Audit and Inspection, 2007 QBFA (Hea)

ISBN: 1845980204 Bytheway, Bill, et al.

Open University. Faculty of Health and Social Care

Too old :older people's accounts of discrimination, exclusion and rejection.

London: Help the Aged, 2007 Web publication

http://www.open.ac.uk/hsc/_assets/dh4bwtxdy7tqjqvhe2.pdf

Associated documentation:

http://www.open.ac.uk/hsc/research/research-projects/road/the-road-reports.php

ISBN: 184562081X

Healthcare Commission, et al.

Living well in later life: a review of progress against the National Service

Framework for Older People.

London: Commission for Healthcare Audit and Inspection, 2006

HPPR (Hea)

http://www.audit-

 $\underline{commission.gov.uk/SiteCollectionDocuments/AuditCommissionReports/NationalStudies/HCC_olderPermissionReports$

opleREP.pdf

Executive summary: http://www.audit-

 $\underline{commission.gov.uk/SiteCollectionDocuments/AuditCommissionReports/NationalStudies/HCC_olderSummary.pdf$

Age Reference Group on Equality and Human Rights

Age and multiple discrimination and older people : a discussion paper.

London: Age Reference Group on Equality and Human Rights, 2005

QBFA (Age)

http://www.ageuk.org.uk/Documents/en-GB/For-

professionals/Research/Age%20and%20Multiple%20Discrimination%20%282005%29 pro.pdf?dtrk=true

ISBN: 1904528953 Harding, Tessa Help the Aged

Rights at risk : older people and human rights.

London: Help the Aged, 2005

QBFA (Har)

ISBN: 1857755499

Matthews, Eric and Russell, Elizabeth

Rationing medical care on the basis of age: the moral dimensions.

Abingdon, Oxon. : Radcliffe Publishing, 2005 HOHC (Mat)

ISBN: 1904528619 Help the Aged

Everyday age discrimination: what older people say.

London: 2004 QBF (Hel)

http://www.ageuk.org.uk/Documents/en-GB/For-

professionals/Research/Everyday%20Age%20Discrimination%20(2005) pro.pdf?dtrk=true

ISBN: 1857174720 Levenson, Ros

Auditing age discrimination : a practical guide to promoting age equality in

health and social care.

London: King's Fund, 2003 QBFA (Lev)

Summary: http://www.kingsfund.org.uk/publications/auditing-age-discrimination

ISBN: 0333993535 Thompson, Neil

Promoting equality: challenging discrimination and oppression.

Basingstoke : Palgrave Macmillan, 2003 IRC (Tho)

Great Britain. Department of Health

National service framework for older people: interim report on age discrimination.

London: DH, 2002 HPPR (Gre)

http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4019556.pdf

Associated documentation:

http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/SocialCare/Deliveringadultsocialcare/Olderpeople/DH_4001924

ISBN: 1857174623 Roberts, Emilie, et al.

Old habits die hard : tackling age discrimination in health and social care.

London: King's Fund, 2002 HPPR (Rob)

Summary: http://www.kingsfund.org.uk/publications/old-habits-die-hard

Robinson, Janice

King's Fund. Health and Social Care Programme, et al.

Age equality in health and social care: a paper.presented to the IPPR seminar,

28 January 2002, at the King's Fund.

London: IPPR, 2002 HPPR (Rob)

http://www.ippr.org/uploadedFiles/projects/Robinson%20Final%20Paper.doc

ISBN: 0905852656 Help the Aged

Age discrimination in public policy: a review of evidence.

London: Help the Aged, 2002 QBF (Hel)

Great Britain. Department of Health

National service framework for older people.

London: DH, 2001 HPPR (Gre)

NB - Standard one is 'Rooting out age discrimination'.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198033/National_S

ervice Framework for Older People.pdf

Associated documentation:

https://www.gov.uk/government/publications/quality-standards-for-care-services-for-older-people

King's Fund

Age discrimination in health and social care. Briefing note

London: King's Fund, 2000 HPPR (Kin)

http://www.kingsfund.org.uk/publications/age-discrimination-health-and-social-care

JOURNAL ARTICLES

Anderson, David, et al.

Mental health service discrimination against older people.

The Psychiatrist 2013; 37 (3): 98-103 (March 2013)

Aims and method: To provide a picture of availability and equality of access to mental health services for older people prior to the Equality Act. In 2010, a questionnaire was sent to health commissioners in England, Scotland and Wales under a Freedom of Information request. Results: Overall, 132 (76%) replied. Of 11 services, 7 were either unavailable or did not provide equality of access to older people in more than a third of commissioning areas. When provided by specialist older people's mental health, services were more often considered to ensure equality. Clinical implications: Increasing need resulting from an ageing population is unlikely to be met in the face of current inequality. Inequality on the basis of age is the result of government policy and not the existence of specialist services for older people. [Abstract]

Rai, Gurcharan and Abdulla, Aza

Treatment of older people.

Clinical Risk 2012; 18 (5): 197-201 (September 2012)

Decisions to treat older people rely on accurate assessment of the patient, on clinical needs of the individual, based on risks and benefits of specific treatment and ethical principles, including the right of individuals to accept or refuse treatment. In those who lack capacity to make decisions, the physician tries to ensure that his decision is based on "best interests" principles set out in the Mental Capacity Act 2005. While no physician will admit to age discrimination, in reality there is evidence of inequalities in care and treatment in hospitals, and it is this fact that has led the government to outlaw discrimination in healthcare under the new provision of the Equality Act 2010. This of course will not mean that all individuals with the same condition will have the right to receive the same treatment - decisions in each case will be based on an individual's clinical need - this fact alone may lead to difficult discussions with relatives and carers, particularly in relation to end-of-life care. This article provides an overview of the basis of management of older patients, and illustrates the importance of taking a holistic approach in the decision-making process. [Introduction]

Bernard, Caroline

Achieving age equality in health and social care.

Working with Older People 2013; 17 (1): 19-24

PURPOSE: The aim of this paper is to provide an overview of the Achieving Age Equality Toolkit, to give the background to its development, and to advise readers of the ways in which it has already been successful in the health and social care arena. DESIGN/METHODOLOGY/APPROACH: The subject of this paper is the ban on age discrimination in goods and services that came into force on 1 October 2012. The objectives of the paper are achieved by setting out the policy context, and by detailing how the age equality recommendations were made through an independent review. FINDINGS: Older people have different experiences of health and social care services, but most want to be able to access support when they need it. Age as a barrier to treatment and screening in areas such as mental health and cancer continue to give cause for concern. Organisations need to ensure they are working in an "age equal" way across services. RESEARCH LIMITATIONS/ IMPLICATIONS: Implications for further research could include an assessment of the extent of "institutional ageism" in services after the ban on age discrimination in goods and services on 1 October 2012. PRACTICAL IMPLICATIONS: The article illustrates through case studies how use of the toolkit enables one organisation to better identify where changes are needed towards embedding anti age discrimination practice. SOCIAL IMPLICATIONS: As well as obeying legal requirements, ending age discrimination in health and social care requires a change in hearts and minds towards encouraging society to think differently about the ways in which older people are supported by health and social care services. ORIGINALITY/VALUE: Since the review, there have been repeated cases of age discrimination in goods and services, illustrating the need for change. [Abstract]

Mitchell, Michelle

End ageism and care will improve for all.

Health Service Journal 2012; 122 (6311): 16-18 (28 June 2012)

The unequal outcomes experienced by older users of the NHS points to a lack of vision rather than a lack of funding. [Introduction]

Watts, Geoff

Why the exclusion of older people from clinical research must stop.

BMJ 2012; 344 (7858): 23-24 (26 May 2012)

Exclusion of older people from clinical research, and of under-recruitment to clinical trials, is widespread. This problem has stark consequences, according to an expert committee of the European Medicines Agency (EMA). "The drugs we are using in older people have not been properly evaluated." [Introduction]

Dunworth, Moira and Kirwan, Peter

Do nurses and social workers have different values? : an exploratory study of the care for older people.

Journal of Interprofessional Care 2012; 26 (3): 226-231 (May 2012)

This study explored the different values of staff from two care homes for older people in which the managers had different qualifications (social worker vs. nursing). Their views were examined to explore whether the values of the staff might reflect any value difference originating in the professional backgrounds of the managers. There was little evidence of awareness in either home of the ethical principles underlying day-to-day decisions. However, a distinction based on care qualification did appear with "care-qualified" staff (defined in terms of qualification requirements for this care work) demonstrating a more reflective response and fewer ageist assumptions than their non-care-qualified colleagues. The study found no difference in values between the nursing and social worker-led homes. All respondents, regardless of the profession of their manager, were keenly aware that they have a "duty of care" and overwhelmingly they defined that as their duty to keep the resident safe, as opposed to allowing her to exercise autonomy. The study results suggest that value base constitutes a commonality between professions involved in the care of older people rather than a barrier to collaboration, as is sometimes posited. [Abstract]

Fear, Chris, et al.

'Fair Horizons' : a person-centred, non-discriminatory model of mental healthcare delivery.

Psychiatrist 2012; 36 (1): 25-30 (January 2012)

This article is followed by the commentary, 'An innovative service but will it work in practice? : commentary on .. Fair Horizons', by Stephen Patrick Tyrer, pages 30-31.

AIMS AND METHOD: Service access is currently determined primarily by age and intellectual function and, unwittingly, is discriminatory. Our aim is to develop a novel, person-centred, non-discriminatory model of mental healthcare delivery. We sought the views of people who use services, carers, commissioners and local politicians. RESULTS: The model represents a major change programme that commenced in September 2011. CLINICAL IMPLICATIONS: By integrating specialist mental health services, with a single access point, and mapping of care to the person's needs, rather than their circumstances we hope to have developed a greatly improved and fairer service. A similar model could be adopted in other locations nationally. [Abstract]

Davies, Nicola

Reducing inequalties in healthcare provision for older adults.

Nursing Standard 2011; 25 (41): 49-55 (15 June 2011)

The UK has a rapidly ageing population with increasing healthcare needs. Yet social isolation and exclusion, resulting from stigma and age discrimination, means that many older people are faced with unequal access to health care, referral and treatment. Inequalities in health care are particularly prevalent among older people with mental health issues and those from black and minority ethnic backgrounds. Healthcare professionals need to encourage greater involvement of older people in health promotion and community-based healthcare services. Nurses are exemplars for health service delivery and are ideally placed to promote health care that is free from age-related discrimination. [Abstract]

Griffith, Richard

The Equality Act 2010 :strengthening legislation.

British Journal of Healthcare Management 2010; 16 (6): 298-302 (June 2010)

This article outlines the key provisions of the Equality Act 2010, which aims to simplify and extend discrimination law to include socio-economic factors, discrimination by association, and dual discrimination. Significantly for healthcare managers, it will extend discrimination with regard to age and to the provision of services-and this includes health care. [Abstract]

Mullen, Kenneth, et al.

Improving medical students' attitudes towards the chronic sick : a role for social science research.

BMC Medical Education 2010; 10 (84): (22 November 2010)

BACKGROUND: Many medical students are negatively disposed toward the elderly and chronic sick. The present study assessed the impact of a community-based teaching initiative, the Life History Project, on students' attitudes to these groups. METHODS: A questionnaire including Likert based responses and free text comments was distributed to all first-year MBChB students after completion of their Life History coursework. Data was analysed using SPSS and content analysis. RESULTS: A high proportion of students believed the Life History Project had increased their understanding of both psychological and social aspects of health and illness and the role of the humanistic social sciences within this. We discovered that the Life History Project not only gave students first-hand experience of the elderly and chronic sick but also had a positive effect on their attitudes towards these groups. The qualitative free text comments corroborated these views. CONCLUSIONS: It is possible to positively influence medical students' attitudes towards these stigmatised groups; it is therefore important that we continue to enhance opportunities for learning about the impact of chronic illness on individuals and society throughout the curriculum. [Abstract]

http://www.biomedcentral.com/1472-6920/10/84

Lishman, Gordon and Cann, Paul

Still ageist after all these years.

Health Service Journal 2009; 119 (6144): 16 (19 February 2009)

Despite various promises to the contrary, age discrimination is alive and well in the NHS. Directors from two older people's charities [Gordon Lishman and Paul Cann] hope new legislation will change this. [Introduction]

Davis, Carol

Where age is no barrier.

Nursing Standard 2008; 22 (49): 18-19 (13 August 2008)

A determination to stamp out age discrimination in the workplace has resulted in one trust [Royal Liverpool and Broadgreen University Hospitals NHS Trust] becoming an age-positive employment champion. [Summary]

Davys, Deborah

Ageism within occupational therapy?

British Journal of Occupational Therapy 2008; 71 (2): 72-74 (February 2008)

Despite the arrival of the National Service Framework for Older People in 2001, age discrimination continues to exist both in popular society and in health and social care settings. Within this context, the number of older people that are likely to come into contact with occupational therapy services is set to rise because of an increase in the population of older people. This opinion piece provides an overview of ageism towards older people in relation to occupational therapy and suggests basic steps that can be taken by the profession to guard against ageist practice. 14 refs. [Abstract]

Oliver, David

'How do you stand working with all these old people?'

Health Service Journal 2007; 117 (6083): 20-21 (22 November 2007)

Too many NHS staff are prone to ageism and reluctant to work with the elderly. In an ageing population, it's time they changed their attitudes, says David Oliver [Senior Lecturer in Geriatric Medicine at Reading University and Secretary of the British Geriatrics Society]. [Introduction]

Lishman, Gordon

How bias starts at 65.

Community Care 2007; (1688): 30-31 (30 August 2007)

Age Concern's Gordon Lishman examines findings on older people's experience of mental health services indicating that a lot needs to be done before age discrimination is eradicated. [Introduction] http://www.communitycare.co.uk/articles/29/08/2007/105616/financial-abuse-of-the-elderly.htm

Bambra, Clare and Pope, Daniel

What are the effects of anti-discriminatory legislation on socioeconomic inequalities in the employment consequences of ill health and disability?

Journal of Epidemiology and Community Health 2007; 61 (5): 421-426 (May 2007)

OBJECTIVE: To investigate how anti-discrimination legislation in the form of the UK Disability Discrimination Act [DDA] affected socioeconomic disparities in the employment rates of people with a limiting long-term illness [LLTI] or disability. DESIGN: National cross-sectional data on employment rates for people with and without an LLTI or disability were obtained from the General Household Survey [GHS] for a 14-year period (1990-2003; 12 surveys). Representative population samples were analysed. The sample size for the GHS over the study period ranged from 19 193 to 24,657 and the average response rate ranged from 72 per cent to 82 per cent. MAIN OUTCOME MEASURE: Age-standardised employment rates for individuals with and without an LLTI or disability, analysed by sex and socioeconomic status. RESULTS: Analysis of covariance identified that the DDA had had a negative effect on employment rates for individuals with an LLTI or disability during the study period. This negative effect was found to be differential according to social class ranging from no effect in social classes I and II (-2.86 per cent, 95 per cent CI -8.7 per cent to 2.99 per cent), increasing with social class group, to a highly significant effect in social classes IV and V (-10.7 per cent, 95 per cent CI -6.16 per cent to -15.24 per cent). No differential effect was identified by sex. CONCLUSIONS: Anti-discriminatory legislation is not an effective way of overcoming the employment consequences of ill health and disability, nor is it a useful public policy tool in terms of reducing inequalities. 2 boxes 1 table 27 refs. [Abstract]

Billings, Jenny

Staff perceptions of ageist practice in the clinical setting : practice development project. Quality in Ageing 2006; 7 (2): 33-45 (June 2006)

This study was undertaken in response to the audit requirements for the National Service Framework for Older People Standard 1 'Rooting Out Ageism'. The aim of this study was to identify and describe the nature of any age-discriminatory practice in the clinical setting through the perceptions and experiences of staff working with older people. The study adopted a qualitative approach using focus group design. Six focus groups were conducted with 57 members of staff. An aim of the study method was to isolate consensus areas of ageist practice that would facilitate targeted intervention. To assist this, statements relating to common practice experiences were developed following the first two focus groups. This was used as a discussion tool for the subsequent groups. Perceived ageist practice could be grouped under the following themes: access to services; communication and attitudes; treatment and care; the role of relatives; resources. On the basis of the findings, greater choice and control for older people need to be key features of the recommendations, through the development of a co-ordinated development programme involving all stakeholders. 4 tables 33 refs. [Abstract]

Adams, Ann, et al.

The influence of patient's age on clinical decision-making about coronary heart disease in the USA and the UK.

Ageing & Society 2006; 26 (2): 303-321 (March 2006)

This paper examines UK and US primary care doctors' decision-making about older (aged 75 years) and midlife (aged 55 years) patients presenting with coronary heart disease (CHD). Using an analytic approach based on conceptualising clinical decision-making as a classification process, it explores the ways in which doctors' cognitive processes contribute to ageism in health-care at three key decision points during consultations. In each country, 56 randomly selected doctors were shown videotaped vignettes of actors portraying patients with CHD. The patients' ages (55 or 75 years), gender, ethnicity and social class were varied systematically. During the interviews, doctors gave free-recall accounts of their decision-making. The results do not establish that there was substantial ageism in the doctors' decisions, but rather suggest that diagnostic processes pay insufficient attention to the significance of older patients' age and its association with the likelihood of comorbidity and atypical disease presentations. The doctors also demonstrated more limited use of 'knowledge structures' when diagnosing older than midlife patients. With respect to interventions, differences in the national health-care systems rather than patients' age accounted for the differences in doctors' decisions. US doctors were significantly more concerned about the potential for adverse outcomes if important diagnoses were untreated, while UK general practitioners cited greater difficulty in accessing diagnostic tests. 1 fig. 6 tables 50 refs. [Abstract]

Wait, Suzanne

From age discrimination to age equality in health care : a European overview.

Working with Older People 2006; 10 (1): 26-29 (March 2006)

Age discrimination currently occurs in all aspects of society throughout the EU and poses a significant problem for an increasingly ageing population, a recently published report has shown. The report, 'Promoting age equality' (2005), researched and developed by the Alliance for Health and the Future, examines the current social attitudes, conduct and policies towards age and ageing in six areas. In this article, Dr Suzanne Wait, Director of Research at the Alliance for Health and the Future, looks at what can be done in healthcare in Europe to 'root out' age discrimination. 3 refs [Introduction]

Stratton, David and Tadd, Win

Dignity and older people: the voice of society.

Quality in Ageing: Policy, Practice and Research 2005; 6 (1): 37-45 (June 2005)

This paper describes the findings from 89 focus groups held with 505 young (13-39 years) and middle-aged (40-59 years) adults in the UK, Ireland, Spain, France, Slovakia and Sweden. There were many similarities across all countries and most differences were between the different age groups, rather than the different countries. Five major themes were identified from the comparative data: views of dignity; old age and ageing; views of older people's lives; across the generations and adding dignity to older people's lives. Many of these findings confirmed those of the focus groups with older people and health and social care professionals. Dignity was important to people of all ages but particularly to older people. Being treated as an individual was critical for the maintenance of dignity. In the participating countries older people were generally treated negatively and undervalued and seen as vulnerable, second-class citizens. 1 table 1 ref. [Abstract]

Manthorpe, Jill

Older people.

Research Matters 2005; (special issue): 37-42

Studies from four continents into age discrimination in the workplace, home care support and mental health issues give valuable pointers for UK practice. [Introduction]

Smy, Janis

Challenging ageist attitudes.

Nursing Times 2004; 100 (13): 24-25 (30 March 2004)

Janis Smy talks to nurses who champion the needs of older people in an effort to root out ageism. [Introduction]

Eccles, Jim

Ethical considerations in the care of older people.

Clinical Medicine 2003; 3 (5): 416-418 (September/October 2003)

Older people should be treated according to their needs regardless of age. Older people may be subject to abuse especially if they are cognitively impaired. No adult can give consent on behalf of another, incompetent adult. Older people are end to receive all the personal medical information they ask for or need. The mental capacity to perform a task is specific to the task in question. The sharing of confidential information with other care organisations should be subject to the specific consent of the patient. Competent patients have the right to refuse life-prolonging treatment, including refusal in advance of their loss of capacity. Competent patients should normally be included in discussions about their resuscitation status unless attempted resuscitation is physiologically futile. 17 refs. [Summary]

Levenson, Ros

Institutional ageism.

Community Care 2003; (1481): 42-43 (17 July 2003)

Most health and social care professionals agree that age discrimination needs to be rooted out of services but, as researcher Ros Levenson found, ageism is a question of attitude, not policy, and identifying it requires subtlety and imagination. 4 refs. [Introduction]

http://www.communitycare.co.uk/articles/17/08/2003/41456/institutional-ageism.htm

Lee, Kristina, et al.

Trainee clinical psychologists' views on recruitment to work with older people.

Ageing and Society 2003; 23 (1): 83-97 (January 2003)

For some time in Britain, it has been difficult to recruit clinical psychologists and other health professionals to work with older people. This pattern of under-recruitment has also been reported in other countries. With the growing number of older people in western societies, the issue of under-recruitment warrants further attention. This research reported here aimed to explore this issue among the next generation of clinical psychologists: those currently training. Questionnaires were posted to 25 of the clinical psychology training courses in the United Kingdom, and 371 trainees returned questionnaires. Among the questions posed, the trainees were asked to set down their thoughts as to why it might be difficult to recruit to the older adult speciality and how recruitment could be improved. The results suggest that many trainees believe that clinical psychology, despite many recent advances, has less to offer older people than other age groups. The responses contain evidence of both ageism and the fear of ageing and death. To improve recruitment into the older adult speciality of clinical psychology, the predominant recommendations were for good quality placements and teaching during training, as well as a need for improved marketing by clinical psychologists working in this speciality, and also for improved support, terms and conditions. 2 tables 57 refs. [Abstract]

Bond, Matthew, et al.

Does ageism affect the management of ischaemic heart disease?

Journal of Health Services Research and Policy 2003; 8 (1): 40-47 (January 2003)

OBJECTIVES: To analyse access by age to exercise testing, coronary angiography, revascularisation (percutaneous transluminal coronary angioplasty/stent insertion and coronary artery bypass graft surgery) and receipt of thrombolysis, where indicated, for hospital patients with diagnosed cardiovascular disease. METHOD: Retrospective case note analysis, tracking each case backwards and forwards by twelve months from the patient's date of entry to the study. The setting was a district hospital in the eastern part of outer London. The case notes eligible for inclusion were those of elective and emergency in-patients with an in-patient ICD-10 code of ischaemic heart disease, angina pectoris or acute myocardial infarction and a consecutive 20 per cent sample of new cardiac outpatients with these diagnoses. RESULTS: Analysis of 712 case notes showed that older hospital patients with ischaemic heart disease, and with indications for further investigation, were less likely than younger people to be referred for exercise tolerance tests and cardiac catheterisation and angiography. This was independent of both gender and severity of condition. Older patients did not appear to be discriminated against in relation to receipt of indicated treatments (revascularisation or thrombolysis), although, in the case of revascularisation, older patients were more likely to have been filtered out at the investigation stage (catheterisation and angiography), so selection bias partly explains this finding. CONCLUSIONS: The current findings from a single hospital are comparable with the results from a broader study of equity of access by age to cardiological interventions in another district hospital in the same region. Although only two hospitals were analysed, the similarity of findings enhances the generalisability of the results presented here. It appears that age per se causes older cardiac hospital patients to be treated differently. 5 tables 30 refs. [Abstract]

Outhwaite, Wendy

Discrimination and human rights in healthcare.

Health Care Risk Report 2001; 7 (3): 10-11 (February 2001)

Cases of discrimination that persist in the NHS are against patients' best interest. The author argues that clinical need is the only legitimate grounding on which to carry out or refuse medical treatment. [Introduction]

WEB RESOURCES

Age Positive publications

Department for Work and Pensions http://dwp.gov.uk/agepositive/

Age UK:

http://www.ageuk.org.uk/

- Ageism in the health service and social care <u>http://www.ageuk.org.uk/health-wellbeing/your-healthcare-rights/ageism-in-the-health-service/</u>
- Age discrimination: just equal treatment
 http://www.ageuk.org.uk/get-involved/campaign/age-discrimination-just-equal-treatment/
- Age discrimination and rights
 http://www.ageuk.org.uk/work-and-learning/discrimination-and-rights/?gclid=COnOrZbvqL8CFQHlwqodhH8A2w

Audit tool for achieving age equality in health and social care

NHS South West

http://age-equality.southwest.nhs.uk/

Discrimination : your rights - GOV.UK

https://www.gov.uk/discrimination-your-rights/types-of-discrimination

Equality and Human Rights Commission

- Age
- http://www.equalityhumanrights.com/advice-and-quidance/your-rights/age/
- Public sector equality duty <u>http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/</u>