



- Date:** Tuesday 13th March 2018
- Time:** 1pm
- Venue:** The Boardroom (2015), ILAS, NUI Galway
- Presenter:** **Dr Austin Warters, PhD,**
Manager of Older Persons Services,
Ballymun Healthcare Facility, Dublin
- Title:** Supporting ageing in place – complexities,
opportunities and research directions. Insights
from an over 80's cohort

Dr Austin Warters, (PhD) has an operations management role within the HSE as well as a research role. He has responsibility for community services for older people which includes the commissioning of home support services to over 2,000 older people. He has a significant role in research. He facilitates a network of academics and practitioners in a programme of work exploring the role of home support services in Ireland. He also has a research role in 2 Horizon 2020 funded studies; Models of Child Health Appraised (MOCHA), where he is leading a task on evaluating the integration of social care with primary care for children across all EU states. Socatel – the Co-creation of an IT platform to assist older people to plan their long-term care needs; where he is facilitating the pilot development of the platform with 3 other pilot sites in 3 other countries.

Abstract

Ireland has an ageing population, by 2030 the number of people over 85 will almost double (ESRI), while this represents a success of our times, inevitably it impacts on health and social care services. Ireland currently spends €1 Billion annually supporting 20,000 older people in nursing homes and €400 million, supporting 50,000 on home care. The demand for these services is set to increase 30% to 54% by 2030. It is government policy, and the desire of older people, to remain at home. There is a dearth of research in Ireland into older people in receipt of

home care, their profile, complexity of needs, outcomes and whether there are opportunities for interventions that maintain health and wellbeing.

Our group have identified a large cohort of community dwelling older adults (n 2000) in North Dublin, (The North Dublin Cohort), who are in receipt of home support. Our goal is to characterise the group, including physical and cognitive function in a geographic area that includes a level of social disadvantage and health inequality. We reported that older people, on less than 5 hours per week of home support (n 1312), mean age of 82.1 years, had a prevalence of frailty of 41.5%. Interestingly, the degree of frailty did not differ until aged over 90. In a further cohort (n 935) we identified, to our knowledge, the first figures for dementia and suspected cognitive impairment at 37.1% and 8.7% respectively in community dwelling adults in receipt of home support. This programme of work also includes a qualitative study into the home care workers experience of supporting older people with dementia.

Ongoing work, is investigating all adults on home support during 2017, (n 1850) their complex profiles and outcomes, particularly in respect to trajectory to institutional care and including cost, Moreover, within this cohort we have a sub-population in receipt of telecare. An aspect of this work includes an approach to population projections and impact on home support service demand and costs for the next 13 years.

Our overarching goal is to design and develop interventions that address complexities and opportunities so that care is not passive – e.g. Reablement, exercise, nutrition, social participation. Significant deterioration of physical function can lead to a 5 fold increase in home care costs. Among 1400 of these older adults, there were 700,000 annual contacts with HSE funded home care staff.

