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Care at the Crossroads: CCC Care Census Points the Way Forward

The UK's largest ever census of UK care home residents provides compelling information that no policy-maker can afford to ignore when shaping care services to meet the needs of our most frail older people.

The result of a ground-breaking collaboration, CCC's 2006 census mapped the care needs of over 32,000 people resident in 751 care homes across the UK. The census found that:

- 89% of residents had required care as a result of the disabilities arising from long-term medical conditions
- 54% required care related to dementia, stroke or Parkinsonism
- 72% of residents were immobile or reliant on assistance
- 62% were confused or forgetful
- 24% were confused *and* immobile *and* incontinent

The census highlighted the impact of chronic diseases including Alzheimer's disease and stroke. The large numbers in care homes where loss of mental functioning is particularly significant.

The census findings reinforce the role of care homes within a spectrum of care for older people.

Delegates at an expert conference convened by CCC¹ and the Clinical Effectiveness and Evaluation Unit of the Royal College of Physicians of London, were united in their enthusiasm to move forward. Delegates were keen:

- to build on partnership working and bring together stakeholders to develop integrated models of care
- to revisit the recommendations of a key report [*footnote 7*], which would go a long way toward improving the health and care of older people in care homes
- for the census approach to be repeated and extended in future years to ensure that policy planning reflects evolving needs

However, as speakers and delegates stressed, sustainable funding for care is needed. The results underline the important work of the Wanless Review and by the Joseph Rowntree Foundation (JRF) on paying for care.

CCC will offer the census findings, and the detailed analysis being undertaken, as a sound evidence base for its submission to the Department of Health's current consultation on the national framework for NHS continuing healthcare and NHS funded nursing care in England. CCC also expects its extensive data to be helpful within the comprehensive spending review (CSR) process.

¹ CCC is a broad-based, independent coalition of commercial, charitable and public service organisations with a shared interest in providing better long-term care for older people.



Dr Clive Bowman, CCC's Chairman, said,

“Whilst the overall health and longevity of the population is improving, our census makes clear that there is an important group of older people greatly burdened by disabilities arising from long term medical conditions that are accompanied by high levels of care need. These people need continual care and support that can most practically be provided in care homes. Whilst promoting various welcome community care options, policy makers and commissioners must take careful notice of the needs of people for whom independent living is not possible.”

- ENDS -

Notes for Editors:

1. Contacts for further information:

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2. CCC is a broad-based, independent coalition of commercial, charitable and public service organisations with a shared interest in providing better long-term care for older people. CCC has been acting as an advocate for managed change since it was established in 1992 as the Continuing Care Conference with the objectives of:
 - o increasing awareness and developing understanding of long-term care of older people as a political issue
 - o raising the standards of care available to older people
 - o developing the standards of financial products used to fund long-term care
3. CCC's 2006 Care Home Census was carried out in spring 2006 by BUPA Care Homes, the National Care Forum (NCF), the Registered Nursing Home Association (RNHA) and the Cornwall Registered Homes Action Group (CRHAG).
4. The conference convened by CCC and the Royal College of Physicians' Clinical Effectiveness and Evaluation Unit (CEEU) on 30 June 2006 considered the census findings from a broad policy perspective and from specialist but complementary perspectives, including those of care providers; consumers, notably self-funders; regulators; nurses and clinicians. Further information about the conference, including the programme, speakers and presentations are available here: <http://www.ccc-ltc.org.uk/conferences/2006-06-30/>.
5. CCC believes that all older people in Britain should live their lives in dignity, comfort and in a place of their choosing. We want all elements of society to make the necessary individual and social investment to ensure that happens. Our task is to ensure that policy-makers pursue this goal and to encourage the public to join with us in our mission to persuade them to do so.
6. *The Best Care Possible?* (http://www.ccc-ltc.org.uk/publications/the_best_care_possible.pdf), CCC's long-term care policy 'healthcheck', identifies a wide range of issues and outlines measures needed to enable people to get the best care possible to meet their needs.
7. *The health and care of older people in care homes a comprehensive interdisciplinary approach*. A report of a joint working party of the RCP London, Royal College of Nursing (RCN) and the British Geriatrics Society (BGS) *Royal College of Physicians of London July 2000*. Executive Summary: http://www.rcplondon.ac.uk/pubs/wp_ch_summary.htm
8. CCC's Chairman is Dr Clive Bowman FRCP, Medical Director, BUPA Care Services. CCC's Steering Group members are listed at www.ccc-ltc.org.uk/about/steering-group

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