





**Brighton & Hove
City Council**

Older People's Council

Title:	Older People's Council												
Date:	17 April 2012												
Time:	10.00am												
Venue	Room 126, King's House												
Members:	<p>Councillors: Hazelgrove (Chair)</p> <table> <tr> <td>Bojczuk</td> <td>Terry</td> </tr> <tr> <td>Brown</td> <td>Tonks (Vice Chair)</td> </tr> <tr> <td>Carden</td> <td>Vincent</td> </tr> <tr> <td>Eyles</td> <td>Wakeling</td> </tr> <tr> <td>Morley</td> <td></td> </tr> <tr> <td>Steer</td> <td></td> </tr> </table>	Bojczuk	Terry	Brown	Tonks (Vice Chair)	Carden	Vincent	Eyles	Wakeling	Morley		Steer	
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Steer													
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36. Apologies and Declarations of Interest
37. Minutes of the last meeting 20 March 2012 and matters arising **1 - 8**
38. Transport Issues Affecting Older People
- Discussion with Councillor Ian Davey, Cabinet Member for Transport and the Public Realm
39. Buses in Brighton & Hove
- Presentation by Mike Best, Operations Director Brighton & Hove Bus and Coach Co Ltd
40. Approach to the Council's Consultation Portal Topics, the Council's Forward Plan and Letters to the Press **9 - 10**
41. Grey Matters
42. Medical Cards Scheme - could it be rejuvenated?
43. Reports from Members, the Chair, Secretary and Treasurer
- Plus Round-up. Verbal Updates.
44. OPC Work Programme and Update **11 - 20**
45. Any Other Business

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

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For further details and general enquiries about this meeting contact Mary van Beinum, (01273-291062–emailmary.vanbeinum@brighton-hove.gov.uk) or email scrutiny@brighton-hove.gov.uk

Date of Publication Tuesday 10 April

BRIGHTON & HOVE CITY COUNCIL

OLDER PEOPLE'S COUNCIL

10.00am 20 MARCH 2012

JUBILEE LIBRARY JUBILEE STREET BRIGHTON

MINUTES

Present: Jack Hazelgrove (Chair), Mike Bojczuk, Val Brown, Penny Morley (Co-optee), Harry Steer, Peter Terry, Francis Tonks (Vice Chair), Colin Vincent and Janet Wakeling (Co-optee)

PART ONE

27. FUNDING FOR ADULT SOCIAL CARE

Introductions

The Chair of the Older People's Council Jack Hazelgrove welcomed everyone to the meeting. It was pleasing to see members of the public (around 20 people) and representatives of local groups here today.

Delegates of older people's organisations introduced themselves and later made comments as follows:

Sue Howley, Chair of Pensioner Action (funded by Primary Care Trust/NHS; publishes 'The Pensioner' and organises public city-wide and neighbourhood meetings). Sue Howley said a long-term view was needed. How to mobilise volunteers was a key issue. Neither older nor younger people should be stereotyped. There were concerns about end of life care and care homes. Older people did not necessarily want choices, only a quality service, she said.

Isla Robertson of Brighton & Hove Pensioners' Association (holds monthly meetings; everyone is welcome to attend). Isla Robertson strongly emphasised that everyone gets older. Funding care for older people should not be shelved or regarded as just an 'add-on.' That message was not glamorous, so it was difficult to get it across. The quality of care becomes more important as a person ages. Attitudes had to change.

Kat Pearce Interim Director of Age UK Brighton & Hove (formerly called Age Concern; a change of name only – not a change to the work being done.) Kat Pearce said Age UK was happy to work collaboratively. The organisation was working locally and at a national level, and continuing to campaign for dignity and respect in care provided by residential and nursing home and in NHS settings. The Care in Crisis Campaign launched in February aimed to collect 100,000 signatures. People were encouraged to look to sign this. Age UK can advise on benefits for older people. A range of Information and Advice Services are available. Preventive Services needed to be looked at, as a whole, she said.

Funding the Future of Adult Social Care - Discussion

Councillor Rob Jarrett (RJ), Cabinet Member for Adult Social Care and Health; Terry Parkin (TP), Strategic Director, People, and Brian Doughty (BD), Head of Adults' Assessment gave short presentations and later replied to questions.

Councillor Rob Jarrett was currently Cabinet Member for Adult Social Care and Health. Under new governance arrangements from May, the ASCH Committee would have 10 Members including a Chair.

Councillor Jarrett said he had no prior experience when he was elected in May 2011. There was a lot of good work to see in the City; he had visited care homes, nursing homes, sheltered housing, and day services, plus third sector organisations in the City and had attended regional and national meetings eg Local Government Association. Much was happening on funding Adult Social Care at present; the government reply was still long-awaited to the Dilnot Commission.

It was beneficial to everyone locally, that there was a large number of actively interested and engaged people in Brighton & Hove and it was hoped to build on this involvement, potentially with some influence at a national level.

TP said officers' role was to implement politicians' decisions. A balance had to be achieved between local decisions and the national picture. In recent years ASCH spending in the City had been maintained at a time when other authorities had seen significant reductions.

Nationally there was now a move away from Council-run services, to more independence for service users, who themselves were best placed to decide how money for their care is spent. This meant a change in Councils' roles – towards supporting service users in their spending, focussing on those for whom the funding is intended. A change to personal budgets has shown that people don't necessarily choose to use the Council's day centres, for example.

BD explained he was responsible for assessing people's social care needs and responsible for the Adult Social Care budget. Demographic changes, especially in the numbers of people over 80 years of age would have a 'critical' effect on the budget in future years, so changes were essential.

The Council was looking to protect services for vulnerable and older people. Unlike some Local Authorities, significant savings, improvements in effectiveness and efficiency had been achieved in the ASC budget without changing the eligibility criteria.

The clear strategy was to divert people away from nursing homes and to keep people in their own homes as long as possible. The number of people newly going into nursing homes was continuing to decline but many had been living in nursing homes for a considerable time and this indicated scope for further improvements. The focus now was on new techniques and technology enabling people to stay in their homes for longer.

Brighton & Hove had considerably exceeded the former government target of 30% uptake of personalised budgets. The target was now 100% and service users would continue to be offered personal choice. It was important to raise awareness, and strengthen safeguarding, of people at risk.

Councillor Jarrett said there were some 10 million people in the UK over 65 years old and the number was expected to grow by 5 million over the next 20 years. The proportion of those in work compared with retired people would decline considerably, leading to enormous extra costs. The Dilnot report had recommended a cap on an individual's expenditure on care of £35,000, which could cost some £1.7 billion annually.

Crisis and emergency services would always be needed. Severe financial pressures meant that it would be impossible to continue to protect the total social care budget. However ways could be found to protect the amount that individuals receive.

Community support was key; by helping neighbours a single volunteer can save £100,000 per year of public costs. Money should not be the prime consideration but public money did have to be spent wisely.

Typically, councils had a reputation of 'doing things to people.' One size did not 'fit all' but it was increasingly important to hear what people want and work towards providing it, he said.

Mike Bojczuk outlined a palliative care project run by Kings College Hospital investigating better ways of caring. There was plenty of care for cancer patients, that was not necessarily available for people with other illnesses.

Francis Tonks said 'Well-being in Old Age' was a Brighton University project in partnership with Age UK and older co-researchers, due to launch its findings on 3 April in the Brighthelm Centre. Related to this project, 'As Time Goes By' was a guide written by older people for older people. Details would be circulated to OPC.

Colin Vincent said he was working on the consultation on the current draft 'local account' that showed how well Adult Social Care is provided.

Other comments and questions were:

Some BME families have a different approach to looking after older people; this should be taken into account in the City, where there are significant minority communities.

Should we as parents or grandparents spend our children's/grandchildren's inheritance?

Why are younger family members/friends not paid to look after older people?

As an 80-year-old, how do I find out about all the benefits that I'm entitled to?

Why are care and nursing homes free in Scotland but not free in England?

What can be done about the fraudulent use of blue badges?

How can I find out about meals on wheels?

There is high demand for sheltered accommodation in the City – and care for people in their own homes can be inadequate. How will extra care work in future, for example, for the increasing number of people with dementia?

TP said it was important that people knew how to get information. He gave details of the Council's Access Point that provided information and advice on adult social care.

How can I contact the Adult Social Care Access Point?

Telephone: (01273) 295555

Minicom: (01273) 296388

Write to: Access Point

3rd Floor Barts House

Bartholomew's Square, BN1 1JE

Email: accesspoint@brighton-hove.gov.uk

This is a secure email address which is part of the [GCSX](#) network that is used for all Government departments, including the NHS and Police.

TP said better procurement via intelligent commissioning had already saved £3.5 million for children and adult services. However similar savings were unlikely in future contracts with care homes and carers suppliers. Social care formed a large part - around half - of government spending. Therefore even large scale cuts in other spending areas could not cover the publicly-funded social care demand at current levels, that would be created by future demographic changes.

Regarding dementia services, TP told the meeting that the Sussex Partnership Foundation Trust was investing significantly over the next three years.

Councillor Jarrett said that people who had saved for their retirement should not be penalised. There were national pressures and local government was taking a share of the budget cuts. There were ways of improving the efficiency of delivering care to older people and these were being pursued. Personal budgets did give increase older people's choices.

Councillor Jarrett emphasised the Council's statutory duties and additional work with partners including supporting the third sector, and signposting. Preventive work eg on trip prevention and fire safety checks, plus benefits advice was available.

He said a wide variety of community support was in place – the 'Embrace' information project with the Federation of Disabled People was working to collect details of all the available services/activities. Local services needed to be better known and better joined up.

Prevention could be improved by helping people that had not been in contact with the council. One local authority had contacted all those over 65 years of age, offering visits from trained volunteers to give relevant information and advice; that approach could be considered in Brighton & Hove.

BD pointed out that overall spending can be reduced significantly by preventative investment. Re-ablement interventions in the first six weeks of leaving hospital were shown to be beneficial.

BD noted that 90% of the adult care budget was spent on non-Council services and 'the quality was not always great.' Cost and quality had to be balanced. Providers often found it difficult to recruit staff.

BD pointed out that in line with 80—90% of other local authorities, BHCC had agreed eligibility for publicly funding of services for people with 'Substantial' and 'Critical' needs. These criteria were kept under review but neither the staff to assess people nor the funding to buy services was available to support a move to including people with 'Moderate' needs. Prevention was important to stop people with 'Low' or 'Moderate' needs moving to 'Substantial' category.

Increased capacity for dementia care was being planned. A peer support system in Lancashire had been successful in putting families and carers in touch, to help share information and ideas.

Councillor Jarrett summarised by pointing out that some authorities had moved to funding only those assessed to be in 'Critical' need. Anyone in need was entitled to an assessment. He wanted to ensure that support was given fairly.

Councillor Jarrett encouraged older people and carers to contact the Council via the Access Point with their issues and suggestions for improvements in services. The Council could offer advice guidance and referrals and was open to new ideas. This would also help improve knowledge about the level of need in the City.

The Chair Jack Hazelgrove thanked all the speakers and visitors for attending this part of the meeting.

28. APOLOGIES AND DECLARATIONS OF INTEREST

John Eyles had given his apologies. Colin Carden would be contacted.

29. MINUTES OF THE LAST MEETING 17 JANUARY 2012 AND MATTERS ARISING

The minutes of the meeting held on 21 February were agreed and signed by the Chair.

30. CURRENT CONSULTATION TOPICS

OPC would aim to respond to council consultations via the portal on:

Valley Gardens – Jack Hazelgrove – issues re traffic and buses

Corporate Plan – Penny Morley – older people issues not specifically addressed

Waste Strategy – Penny Morley

Local Account - Colin Vincent involved

Beach Huts – Janet interested in replying

Sports and Physical Activity Consultation – Francis Tonks and Janet Wakeling to look at issues around the Level

31. THE COUNCIL'S FORWARD PLAN

OPC asked for copies of reports on:

The Fee Level for Adult Social Care Services (12 March ASCH CMM)
 Community Meals Service (12 March ASCH CMM)

These would be circulated.

32. REPORTS FROM MEMBERS, THE CHAIR, SECRETARY AND TREASURER

Jack Hazelgrove would attend event on 24 March on Mental Health Stigma organised by Mind in New England Street. Had attended a useful Pensioner Action meeting on Mental Health; quarterly meeting with the Council Leader has been moved from 3 April to 10 April – Jack, Francis and Mike to attend.

Francis Tonks was attending steering group meetings for People's Day on 14 July. Several groups were working together and planning stands in the Health and Wellbeing Zone. Had been to the Active Ageing Seminar that was 'high-level' academic.

Harry Steer had been to a meeting of the Practitioners Alliance for Safeguarding Adults and heard a presentation from ESFRS. ESFRS will be asked to speak to OPC and can provide leaflets for People's Day. Grey Matters had received further Council funding and is to move to closer working with Age UK.. Colin Vincent is proposed to join the Board at Grey Matters AGM.

Janet Wakeling and Val Brown will be looking at Planning applications. Next planning meetings are 4 April and 25 April.

Peter Terry will be attending a Community Safety Forum meeting in Queens Hotel on 24 March. Notes that a list of toilets in Brighton & Hove is available. Suggests website includes a list of toilet-friendly companies. Will raise issues of cyclists on pavements.

Mike Bojczuk had written to the Council Leader and the Argus re: applying for WHO status as an Age-Friendly City. Will send details to all OPC. An Older People's Strategy is being developed with Partners; Annie Alexander is contact; Suggest invite her to OPC in Autumn. Had attended launch of the European Year of Active Ageing event with Colin Vincent; Manchester and Dorset had active ageing policies. European and/or WHO funding is available for age-related work. OPC website is updated. Has started a petition to promote Older People's organisations. OPC to take a stand at Sussex Safer Roads Partnership 'Older Drivers' event on 22 March in Jubilee Square.

Colin Vincent attended Grey Matters planning meeting. Keen to follow up European Year of Active Ageing by pursuing Age Friendly City status; good for tourists and residents. Had attended Active Ageing seminar on remaining active for physical and mental health. Will continue to attend and report back on Palliative Care user group – a 3-year project.

Penny Morley – is contributing to consultation on waste strategy. Suggests a 2-page briefing for OPC on how the budget changes impact on older people's services. Budget papers are not clear. Will liaise with FT on developments on the Level.

Val Brown would be going to the 'Well-being in Old Age' launch of findings of 3-year research project including Age Concern Brighton & Hove and older co-researchers on 3 April.

33. LETTER TO THE PRESS

Colin was looking at inequalities in care issues for a letter to the press.

34. OPC WORK PROGRAMME AND UPDATE

Francis would like to add Libraries and Fire Service to work plan.
Wished to invite older celebrities to a future meeting.

35. ANY OTHER BUSINESS

35.1 There was none

The meeting concluded at 12.30

Signed

Chair

Dated this

day of

Selection of Consultations Open (mid April 2012) on the Council's Consultation Portal (end date in brackets)

<http://consult.brighton-hove.gov.uk/portal>

The Level Skatepark Consultation (25 April)

Adult Social Care Local Account (30 April)

New Woodingdean Library and Medical Centre Consultation (31 May)

Sport and Physical Activity Consultation (31 Dec 2012)

NB: Consultation responses submitted on behalf of OPC to date on:

Public Toilets

*Waste Strategy and
Corporate Plan*

Agenda items/ Speakers	Reason for the agenda item	Outcome & Monitoring
15 November 2011		
John Barradell (10am)	Present the Council's priorities and what the OPC can get involved in	Colin Vincent agreed to get involved with the City Forum groups.
Ageing Well - Consultant	Scrutiny had been successful in getting 3 consultancy days for the Ageing Well programme	Individual interviews set for the 28 November & 1 December
28 November & 1 December		
Individual interviews with OPC members and Ageing Well programme Consultant and Palliative Care Consultant (1 December only)		
13 December 2011		
Bill Randall (10-10.40am)	Present priorities and challenges of the administration. Follow up previous private meeting with the Leader.	Information on personalisation, the Council's budget, communication with groups of older people. OPC is to take part in the consultation on public toilets.
Ageing Well - Consultant	Present the findings from the interviews and potential work programme	OPC to develop a range of work to produce outcomes
17 January 2012		
Finance	Mark Ireland and James Hengeveld to present the Council's proposed budget. Pensioner Action, pensioner Association & Age Concern invited.	Replies to key questions on the budget. Quarterly joint meetings to be held with Age UK Brighton & Hove and Pensioner Action. Joint letter sent to Cllr J Kitcat and response received. Changes were made to the budget as a result of the consultation and OPC letter was referenced in final

budget papers.	
21 February 2012	
Independent Sector Care Home Contract - Jane MacDonald	Current arrangements and to consult on our Core Principles
Robert Griffiths (Director of Fundraising) The Martletts	Future budget and service provision
20 March 2012- JOINT PUBLIC MEETING – Funding the future of Social Care for Older People – Jubilee Library	
(10.10 – 11.15am) Councillor Rob Jarrett Cabinet Member for Adult Social Care and Health Strategic Director, Terry Parkin And Head of Adults Assessment Brian Doughty	How are the Council funding day care services, how do older people access care services. Open Public Services White Paper and the Personalisation Agenda - Case studies
17 April 2012	
Transport issues affecting Older People – discussion with Councillor Ian Davey Cabinet Member for Transport and the Public Mike Best , Operations Director Brighton & Hove Bus and Coach	
OPC members to take an active part in consultation	Opportunities for volunteering and raising awareness Discussion on wider issues re end of life care and areas of possible future joint work
	Good public turnout (circa 20 people) with lively and informed discussion on key issues. Good profile raising event, with positive informal feedback. Venue worked well and should be used again. First outing for new pop-up stands.

Company Ltd		
22 May 2012		
Parking issues affecting Older People Another Topic to be confirmed WHO Application: Age-friendly City	Consulting on older people's issues What is needed to progress an application? And How to do this.	
19 June 2012 – PUBLIC MEETING	Jubilee Library	
17 July 2012		
21 August 2012		
18 September 2012 – AGM PUBLIC MEETING		
23 October 2012		
20 November 2011		
18 December 2011		

Potential items:

- Libraries
- The Keep
- East Sussex Fire and Rescue
- Community Safety
- Older People's Strategy



Editor
The Argus

Date: 1 March 2012
Our Ref: WHO City

Dear Sir,

Age Friendly City

WHEN people describe Brighton and Hove, adjectives such as trendy, cool, young, energetic and vibrant readily come forward. Words that define our city also attract like-minded people, business and events.

The result is a fantastic diversity of groups who give us great festivals, theatre, music and comedy, and enrich the lives of all who take part.

This is great but there is something else which should be thrown into the mix: "age friendly".

This doesn't mean that suddenly everything is geared towards the older age group, but rather they are included.

Age-friendly means all ages can enjoy city life together.

It means easy accessibility for all of us. The Older People's Council wants to get the ball rolling in this respect. We want the city to gain the World Health Organisation's "Age-Friendly City" status, and will lobby actively for this.

Being age-friendly will turn a good city into a truly great city to live in – for all.

Mike Bojczuk
Secretary
Older People's Council





Checklist of Essential Features of Age-friendly Cities

This checklist of essential age-friendly city features is based on the results of the WHO Global Age-Friendly Cities project consultation in 33 cities in 22 countries. The checklist is a tool for a city's self-assessment and a map for charting progress. More detailed checklists of age-friendly city features are to be found in the WHO Global Age-Friendly Cities Guide.

This checklist is intended to be used by individuals and groups interested in making their city more age-friendly. For the checklist to be effective, older people must be involved as full partners. In assessing a city's strengths and deficiencies, older people will describe how the checklist of features matches their own experience of the city's positive characteristics and barriers. They should play a role in suggesting changes and in implementing and monitoring improvements.

Outdoor spaces and buildings

- Public areas are clean and pleasant.
- Green spaces and outdoor seating are sufficient in number, well-maintained and safe.
- Pavements are well-maintained, free of obstructions and reserved for pedestrians.
- Pavements are non-slip, are wide enough for wheelchairs and have dropped curbs to road level.
- Pedestrian crossings are sufficient in number and safe for people with different levels and types of disability, with non-slip markings, visual and audio cues and adequate crossing times.
- Drivers give way to pedestrians at intersections and pedestrian crossings.
- Cycle paths are separate from pavements and other pedestrian walkways.
- Outdoor safety is promoted by good street lighting, police patrols and community education.

- Services are situated together and are accessible.
- Special customer service arrangements are provided, such as separate queues or service counters for older people.
- Buildings are well-signed outside and inside, with sufficient seating and toilets, accessible elevators, ramps, railings and stairs, and non-slip floors.
- Public toilets outdoors and indoors are sufficient in number, clean, well-maintained and accessible.

Transportation

- Public transportation costs are consistent, clearly displayed and affordable.
- Public transportation is reliable and frequent, including at night and on weekends and holidays.
- All city areas and services are accessible by public transport, with good connections and well-marked routes and vehicles.

- Vehicles are clean, well-maintained, accessible, not overcrowded and have priority seating that is respected.
- Specialized transportation is available for disabled people.
- Drivers stop at designated stops and beside the curb to facilitate boarding and wait for passengers to be seated before driving off.
- Transport stops and stations are conveniently located, accessible, safe, clean, well-lit and well-marked, with adequate seating and shelter.
- Complete and accessible information is provided to users about routes, schedules and special needs facilities.
- A voluntary transport service is available where public transportation is too limited.
- Taxis are accessible and affordable, and drivers are courteous and helpful.
- Roads are well-maintained, with covered drains and good lighting.
- Traffic flow is well-regulated.
- Roadways are free of obstructions that block drivers' vision.
- Traffic signs and intersections are visible and well-placed.
- Driver education and refresher courses are promoted for all drivers.
- Parking and drop-off areas are safe, sufficient in number and conveniently located.
- Priority parking and drop-off spots for people with special needs are available and respected.

Housing

- Sufficient, affordable housing is available in areas that are safe and close to services and the rest of the community.
- Sufficient and affordable home maintenance and support services are available.
- Housing is well-constructed and provides safe and comfortable shelter from the weather.
- Interior spaces and level surfaces allow freedom of movement in all rooms and passageways.
- Home modification options and supplies are available and affordable, and providers understand the needs of older people.
- Public and commercial rental housing is clean, well-maintained and safe.
- Sufficient and affordable housing for frail and disabled older people, with appropriate services, is provided locally.

Social participation

- Venues for events and activities are conveniently located, accessible, well-lit and easily reached by public transport.
- Events are held at times convenient for older people.
- Activities and events can be attended alone or with a companion.
- Activities and attractions are affordable, with no hidden or additional participation costs.

- Good information about activities and events is provided, including details about accessibility of facilities and transportation options for older people.
- A wide variety of activities is offered to appeal to a diverse population of older people.
- Gatherings including older people are held in various local community spots, such as recreation centres, schools, libraries, community centres and parks.
- There is consistent outreach to include people at risk of social isolation.

Respect and social inclusion

- Older people are regularly consulted by public, voluntary and commercial services on how to serve them better.
- Services and products to suit varying needs and preferences are provided by public and commercial services.
- Service staff are courteous and helpful.
- Older people are visible in the media, and are depicted positively and without stereotyping.
- Community-wide settings, activities and events attract all generations by accommodating age-specific needs and preferences.
- Older people are specifically included in community activities for “families”.
- Schools provide opportunities to learn about ageing and older people, and involve older people in school activities.

- Older people are recognized by the community for their past as well as their present contributions.
- Older people who are less well-off have good access to public, voluntary and private services.

Civic participation and employment

- A range of flexible options for older volunteers is available, with training, recognition, guidance and compensation for personal costs.
- The qualities of older employees are well-promoted.
- A range of flexible and appropriately paid opportunities for older people to work is promoted.
- Discrimination on the basis of age alone is forbidden in the hiring, retention, promotion and training of employees.
- Workplaces are adapted to meet the needs of disabled people.
- Self-employment options for older people are promoted and supported.
- Training in post-retirement options is provided for older workers.
- Decision-making bodies in public, private and voluntary sectors encourage and facilitate membership of older people.

Communication and information

- A basic, effective communication system reaches community residents of all ages.
- Regular and widespread distribution of information is assured and a coordinated, centralized access is provided.

- Regular information and broadcasts of interest to older people are offered.
- Oral communication accessible to older people is promoted.
- People at risk of social isolation get one-to-one information from trusted individuals.
- Public and commercial services provide friendly, person-to-person service on request.
- Printed information – including official forms, television captions and text on visual displays – has large lettering and the main ideas are shown by clear headings and bold-face type.
- Print and spoken communication uses simple, familiar words in short, straightforward sentences.
- Telephone answering services give instructions slowly and clearly and tell callers how to repeat the message at any time.
- Electronic equipment, such as mobile telephones, radios, televisions, and bank and ticket machines, has large buttons and big lettering.
- There is wide public access to computers and the Internet, at no or minimal charge, in public places such as government offices, community centres and libraries.

Community and health services

- An adequate range of health and community support services is offered for promoting, maintaining and restoring health.
- Home care services include health and personal care and housekeeping.
- Health and social services are conveniently located and accessible by all means of transport.
- Residential care facilities and designated older people's housing are located close to services and the rest of the community.
- Health and community service facilities are safely constructed and fully accessible.
- Clear and accessible information is provided about health and social services for older people.
- Delivery of services is coordinated and administratively simple.
- All staff are respectful, helpful and trained to serve older people.
- Economic barriers impeding access to health and community support services are minimized.
- Voluntary services by people of all ages are encouraged and supported.
- There are sufficient and accessible burial sites.
- Community emergency planning takes into account the vulnerabilities and capacities of older people.

WHO/FCH/ALC/2007.1

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