

## SEEFA Policy Panel on Later Life and Ageing

### Summary of the Key Issues for Older Consumers

There is a strengthening market place approach to provision of health and care services - but what of the older consumer in this market place? It seems that older consumers are often neglected when it comes to choice and quality of goods and services. Below we have set out some of the key issues of concern to older consumers as well as making some suggestions about what could be done to improve things.

**Meeting changing consumer needs.** Although the older consumer represents a significant potential market we appear to be neglected in terms of innovative product design and in developing new models of service delivery. Far more appears to be known about the changing wishes, consumer needs and spending patterns of younger age groups. Outdated stereotypes further exclude the older consumer and obscure the reality of constantly changing demand.

We are concerned that **negative attitudes to ageing** mean that older people are not always seen as equal partners in their interactions as consumers. We would like to see a shift in thinking so that older people are viewed as active contributors and a valuable asset. Age discrimination and the negative view of older people as a burden on society serve only to disempower older people as consumers.

Whilst specialist products and services are of course welcome we would like to see all design **being age friendly** on the basis that if it's good for older people it's good for everyone. We want to see more successful products and services which suit all ages. Where products and services specifically target older consumers, design which is non-stigmatising, inclusive and has universal appeal remain fundamental.

We would like to have **greater involvement in design and development processes** for new products and services. We believe this would stimulate new thinking and improved results would benefit people of all ages.

### Products

We have many examples of products which exclude the older consumer and we would like to see more attention paid to product design.

- We think there is scope to drive down prices of products through economies of scale by marketing more effectively to the older consumer. This would apply especially in the IT market.

- Products which are functional but have no style are not likely to succeed with older consumers.
- Inclusive products which are accessible to all regardless of ability have the potential to gain a bigger market share.
- Self fulfilling prophecies can arise e.g. the mobile phone market targets either teenagers or business users and so the older population believe the phones are not for them.

## Health Services

In the delivery of health services the main ingredients of consumerism i.e. power and choice, are often experienced as being in short supply.

- We would like to have **better access to good quality information** about the choices available. We need accessible, reliable and timely information and it should be available in a range of formats to suit all people. We do not want assumptions to be made about our internet access.
- Older consumers need **real opportunities to contribute positive feedback** and suggestions for improvement. If it is done with a genuine desire to learn it will drive up quality.
- We would like to see a positive **partnership with older health consumers at the design stage**. Service commissioners and providers are still not good enough at engaging effectively with the older consumer on co design. So much could be gained if this were done properly. This applies across the board to buildings, seating, adaptations and also to systems, procedures, planning and priorities.
- We would like to see **measures to support and encourage** each older health consumer to become an expert in their own health conditions, be better informed about options and feel confident about raising issues or making suggestions.
- It can be difficult to complain and where complaints go unmade bad practice can flourish. **Safe complaints and whistle blowing** processes will result in better services
- If we have a **strong local network** of grass roots services which promote health and wellbeing by encouraging social interaction and community engagement, demands on health services will be reduced.
- It is often the clumsy and poorly managed **administrative systems** e.g. for GP appointments or between different hospital departments which cause frustration to the older consumer.

## Care Services

We are most concerned that when we are at our **most vulnerable** we may find ourselves taking tough and perhaps irreversible consumer decisions which may well greatly affect our lives. To do this properly we need accessible information about choices as well as support to give us confidence to make good decisions.

- We are disappointed that **personalisation** has not delivered greater choice. We believe the introduction of direct payments has had limited impact and even if individualised budgets were to become a reality, it would achieve little in the absence of a genuine market place for social care.
- We would like to see many more **affordable options** becoming available for the older consumer of care services. Older consumers comprise a diverse group of people and needs vary widely. For those on the lowest incomes there is the least choice of all.
- All the research on **prevention** concludes that support services are crucial in maintaining independence and that they represent good value for money. Cuts in public finance are already resulting in fewer resources being available for prevention and choice will become more restricted as eligibility criteria tighten and service provision becomes even more the subject of cost efficiency.
- We are concerned that the **push to drive down costs** in the domiciliary and personal care markets could come at the expense of dignity and quality.
- There are specific consumer issues when it comes to **long term care** and we believe all consumers are potentially at risk from more powerful vested interests, including the financial markets. We would like this to be investigated.

**SEEFAs Policy Panel** aims to work with policy makers, service providers and planners to actively engage with them to make later life better now and in the future.

The Panel comprises people who by virtue of their own life experiences are experts on later life. All Panel Members have organisations and local forums sitting behind them and although they speak up for themselves they are informed by a larger constituency of older people. ***This is seen as an example of good practice in engagement.***

We know the best way to ensure good policy decisions is to integrate the perspectives of people who are themselves experts in later life and ageing through their own life experiences.

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