

In the face of an ageing population there are a whole series of challenges for creating a healthy and secure old age. Our insight from 26 years' experience is that we should engage early with older people to reduce threats to their health, independence and wellbeing. By finding out more about their reported needs, we can begin to mobilise support, reduce threat and extend healthy and active ageing.



EC Health

EC Health is a collaborative movement involving a large network of researchers, service providers, practitioners, volunteers and age advocacy partners throughout the world. At its core are the EASYCare Health Standard Assessment instruments which are a unique suite of tools for identifying threats to older people's healthy aging. They allow front-line practitioners, voluntary workers and even the older person to undertake a brief multi-dimensional assessment of the physical, mental and social functioning of the older person. Information obtained can be used to mobilise information, advice and support based on the priorities of an older person.

EASYCare Health Standard Assessment domains (49 items) include: seeing, hearing and communicating, looking after yourself, your mobility, your accommodation and finance, your safety and relationships, staying healthy and mental health and wellbeing.

The method has been refined through a rigorous process of development and evaluation since 1989, and now involved more than 47 poor, middle-income and rich countries throughout the world.

Research

With more than 80 peer reviewed publications, research shows that the EASYCare Health approach can meet the needs which are most important to older people, helping them extend their healthy active life.

On-going research with prestigious academic institutions across the globe is focussed on population studies of needs and outcomes, impact evaluation, development of more in-depth assessment for specific EASYCare items and for carer's needs, and development of a derived outcome measure of Well-being.

For more information, please visit

www.easycarehealth.co.uk

Next Phase – Resources for Scale

EC Health will be mobilising its three year plan for projected activity, with a keen focus on partnership and leadership for project implementation and demonstration. One key area of our plan is strengthening our UK demonstration and expansion into Europe.

Resources for scale –

- **Sponsorship** – A small number of ‘gold’ sponsors are providing grant support and expertise to EC Health. EC Health will continue to seek partners to support the mission to improve the lives of older people throughout the world.
- **Training and Franchising** – Developing a robust licensing and training cost model for development. The license is free, but a commitment is mandatory to receive training.
- **Licensing** – For project development, project implementation for national and international activities and consultancy.
- **Modelling for Best Practice** – Developing models of best practice for EC Health demonstration projects in order to meet diverse need.
- **Data Capture and Sharing** – Develop and maintain a responsive database for management and sharing amongst established partners to underpin national and international work.
- **Reporting and Analysis** – Develop and maintain a responsive database for reporting and analysis of demonstration projects, underpinned by a strong research framework.
- **Partnership** – Building on key relationships with policy, practice, advocacy, research and industry leads to develop demonstration projects.

Case Study: Bridlington, U.K.

The project in Bridlington, East Yorkshire is a fantastic example of how the EASYCare Health approach has positively impacted the health and wellbeing of its older population. The project used a call centre approach to talk about the main concerns of their health and wellbeing.

The project was able offer an assessment to the 75 plus population within the Bridlington area, of whom about 45% took up the offer. Top priorities for support were for financial advice, help within the home, reducing loneliness and managing bodily pain. It was possible to address these needs largely through mobilising voluntary and statutory advisory agencies such as an arthritis support group, the benefits advisory service and befriending agencies. Evaluation is on-going of impact in reducing hospital admissions and need for long-term care.

For more information, please contact

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