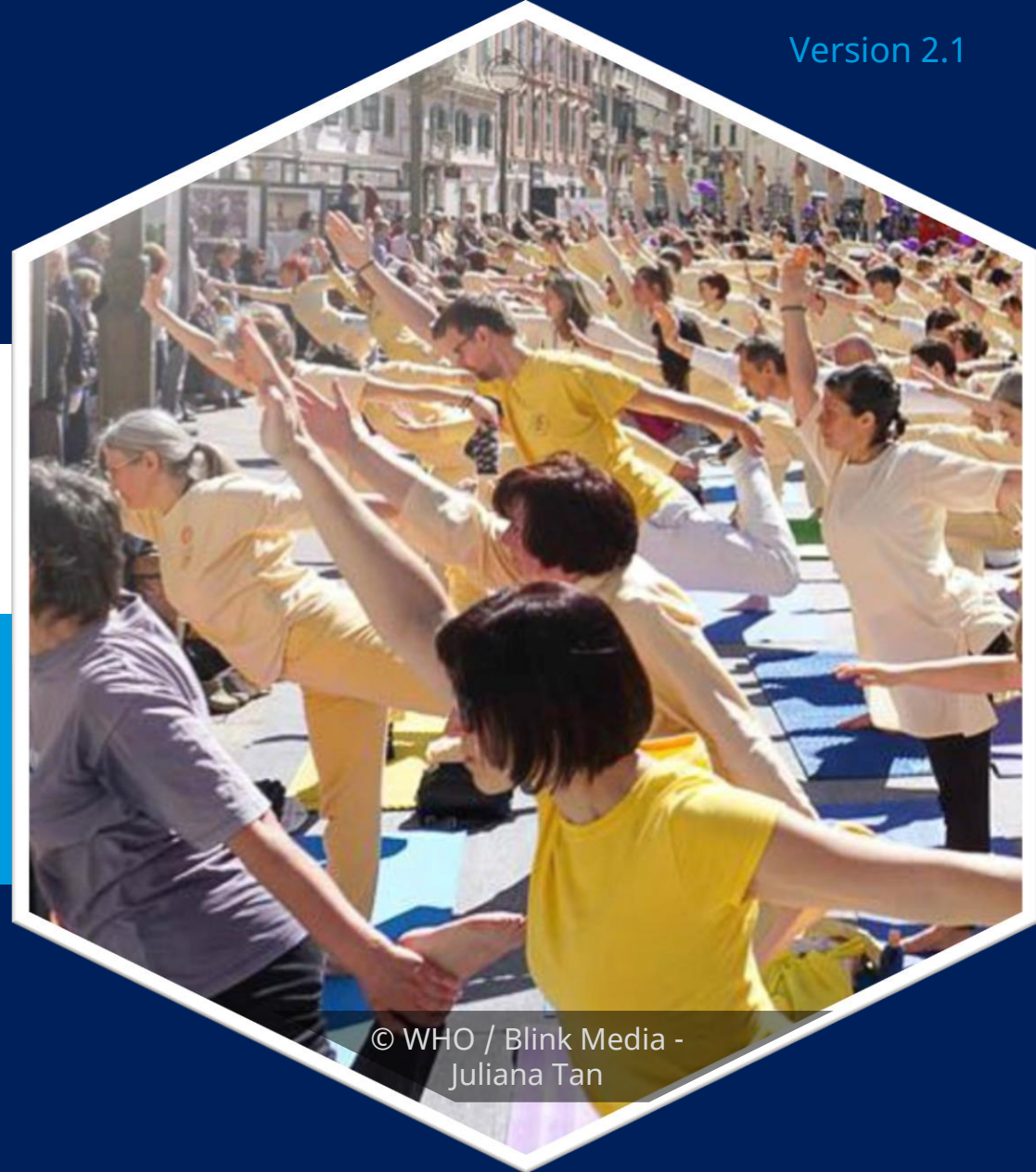


ICOP E

INTEGRATED CARE FOR OLDER PEOPLE

Age-friendly environments



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Learning objectives

By the end of this module, you will be able to:

- Define age-friendly primary health care (PHC) and explain its importance
- Relate the age-friendly cities and communities' principles with ICOPE to support healthy ageing
- Describe the challenges in caring for older people in primary care
- Explain the fundamental principles for developing age-friendly PHC, including training, community care systems and the physical environment
- Identify the design considerations for creating an age-friendly PHC



Age-friendly environments and functional ability

Age-friendly environments enable all people to:

- age well in a place that is right for them
- continue to develop personally
- be included
- contribute to their communities
- enjoy independence and good health.

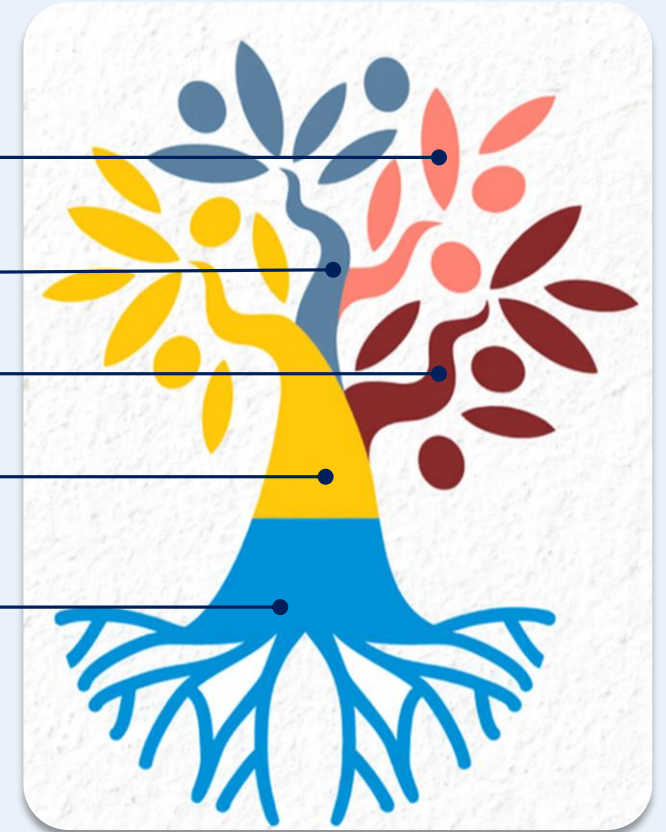
Build and maintain
relationships

Be mobile

Contribute

Learn, grow and
make decisions

Meet basic
needs



Building age-friendly cities and communities

Creating age-friendly cities and communities is an effective way to foster age-friendly environments.

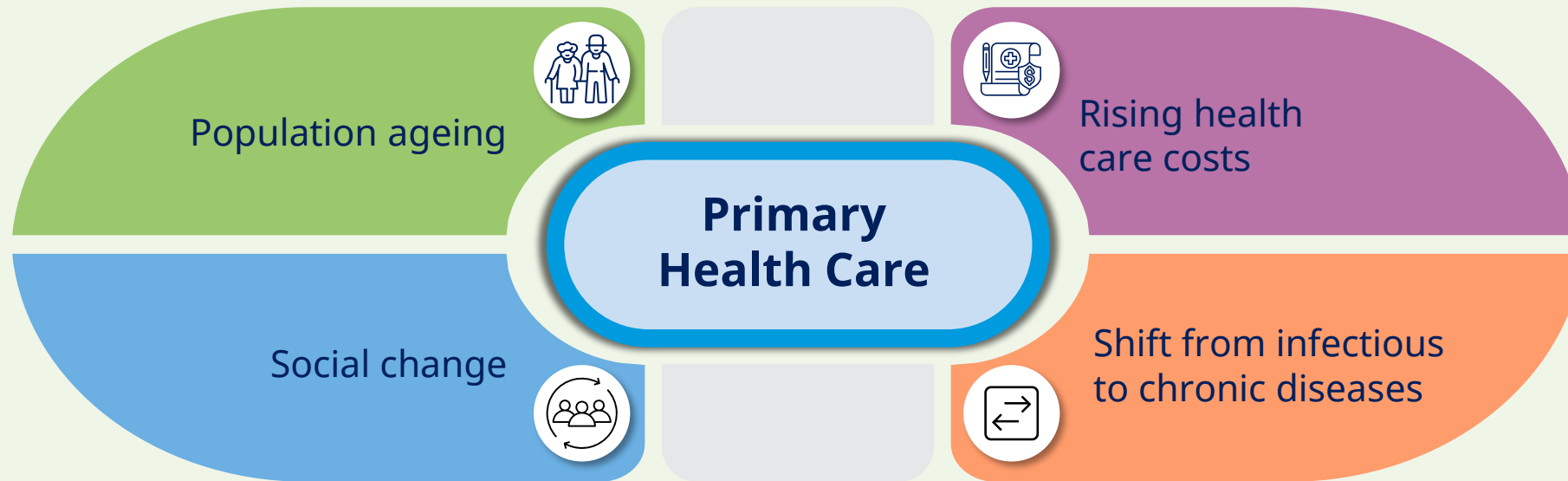
Age-friendly cities and communities enhance access to essential services, allowing individuals to engage in activities they value through initiatives across **eight domains**.



The need for age-friendly primary health care

“Primary health care is a whole-of-society approach to health that aims at ensuring the highest possible level of health and well-being and their equitable distribution by focusing on people’s needs as early as possible along the continuum from health promotion and disease prevention to treatment, rehabilitation, and palliative care, and as close as feasible to people’s everyday environment.”

Pressures on primary health care



Challenges in caring for older people in PHC

- **Limited time and resources as well as lack of specific training** reduce capacity for early detection, appropriate management and structured follow-up of intrinsic capacity impairments and geriatric conditions.
- Medical problems often present differently in older people (**atypical symptoms**)
- Health or medical issues may not be the **top priority** for older patients
- **Ageist attitudes** among health and care workers

The engagement of older people and a multidisciplinary approach are essential for enhancing the quality of delivered care.

Primary health care should provide a supportive system for coordinated health and social care.

Development of age-friendly primary health care

PHC objectives + Age-friendly principles = Age-friendly PHC

Availability

Accessibility

Comprehensiveness

Quality

Efficiency

Non-discrimination

Gender and age responsiveness

Informing, education and training

Community-based health care
management systems

Physical environment



General principles for an age-friendly primary health care

1 Information, education and training

- Age, gender and culturally sensitive practices
- Core competencies in older persons' care
- Age, gender and culturally appropriate education and information on health promotion, intrinsic capacity and disease management for older persons
- Promote empowerment of formal and informal caregivers on care tasks, while ensuring their health and well-being



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General principles for an age-friendly primary health care

2 Community-based health care management systems



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- Adaptation of administrative procedures for older persons
- Access to care without financial burden
- Support a continuum of care
- Coordination of care services
- Data and information systems for health and social care
- Participatory decision-making mechanisms

General principles for an age-friendly primary health care

3 Physical environment



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Thane

- Principles of Universal Design
- Age-friendly housing
- Transport and access to the primary care centre should be safe and affordable for everyone
- Simple and easily readable signage
- Primary care staff should be easily identifiable
- Good lighting, non-slip floor surfaces, stable furniture and clear walkways
- Clean and comfortable

Design considerations for primary care settings

Ramps

If the entrance has steps, it must also have a ramp.

Handrails or grab bars

They enable a person to walk and move around safely and independently. Ideally, they should consist of two layers. Additionally, these layers protect the walls, especially the painted areas.

Floor plans

Rooms should be organized so that older persons can access services with minimal stress and movement.

Doors

The doors should be wide enough, with no threshold, for easy movement.

Toilets

Toilets should be spacious, and their doors should match the size of other doors.

Steps, stairs and lift

Typically, most primary care facilities have only one ground floor. If there are two or more floors, stairs with handrails, steps, and a lift must be provided.

Before occupying the building, evaluate the facilities with a checklist (i.e., an access audit). Trained health workers in primary care may conduct the audit annually.

Signage principles for primary care settings



Designing signage

- Use non-glare finishes for signs with contrasting characters for better visibility.
- Choose large, clear letters that are easy to read.
- Keep displays simple for easy understanding.
- Incorporate familiar images and use colour effectively.
- For handmade signs, use a black felt-tip pen on light, non-glossy backgrounds.
- Provide Braille signage according to local regulations.
- Use a friendly, welcoming tone on signage by including phrases such as 'please' and 'thank you'.

Signage principles for primary care settings



Placement of signage

- Position signs at eye level with large lettering for better visibility.
- Use exterior signs to identify accessible facilities.
- Install signs to facilitate the identification of the centre's location.
- Place signs in accessible areas throughout the building.
- Establish a consistent and user-friendly room numbering system.
- Include floor numbers in multi-floor buildings.
- Display directional signs at points where there is a change in direction.
- Clearly mark emergency exits.

Signage principles for primary care settings



Identifying personnel

- Staff should wear easily recognizable name badges with large letters and contrasting backgrounds, including their name and job title.
- Consider using colour-coded badges (e.g., green for nurses, blue for doctors, etc.) to help identify staff categories.
- Display all staff members on duty, including their roles, on boards and, if possible, on the consultation room door.
- Staff should introduce themselves to patients who are blind or visually impaired by stating their name, role and reason for their presence.

Summary



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- Ensure age-friendliness of primary care settings, making them affordable and accessible for all ages.
- Age-friendly primary health care (PHC) supports the early detection and management of intrinsic capacity impairments and geriatric conditions.
- Principles of age-friendly PHC:
 - Focus on training health and care workers, and providing education and support to older people (and their carers)
 - Adapt primary care facilities to meet the needs of older adults and ensure continuity of care
 - Create a clean and comfortable environment according to Universal Design principles

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