



I C O P E

INTEGRATED CARE FOR OLDER PEOPLE

AGE-FRIENDLY
ENVIRONMENTS

Learning Objectives

By the end of this module, you will:

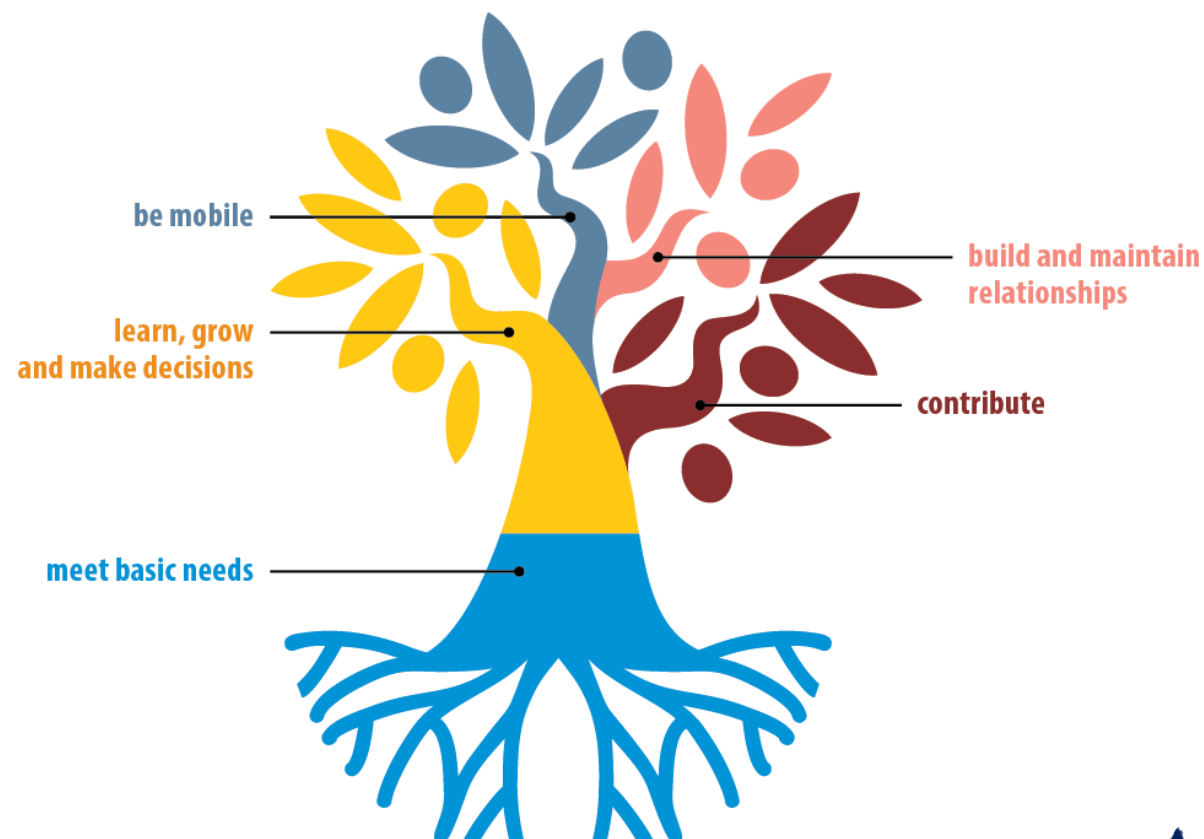
- Define age-friendly primary health care (PHC) and understand its importance.
- Describe the challenges faced in providing care for older people in PHC.
- Explain the fundamental principles for developing age-friendly primary care settings, focusing on information, education and training, community-based health care management systems, and the physical environment.
- Identify the design considerations necessary for creating an age-friendly PHC.
- Discuss the principles for the design, placement, and personnel identification signage in clinical settings.



Key Benefits of Age-Friendly Environments

Age-friendly environments enable all people to:

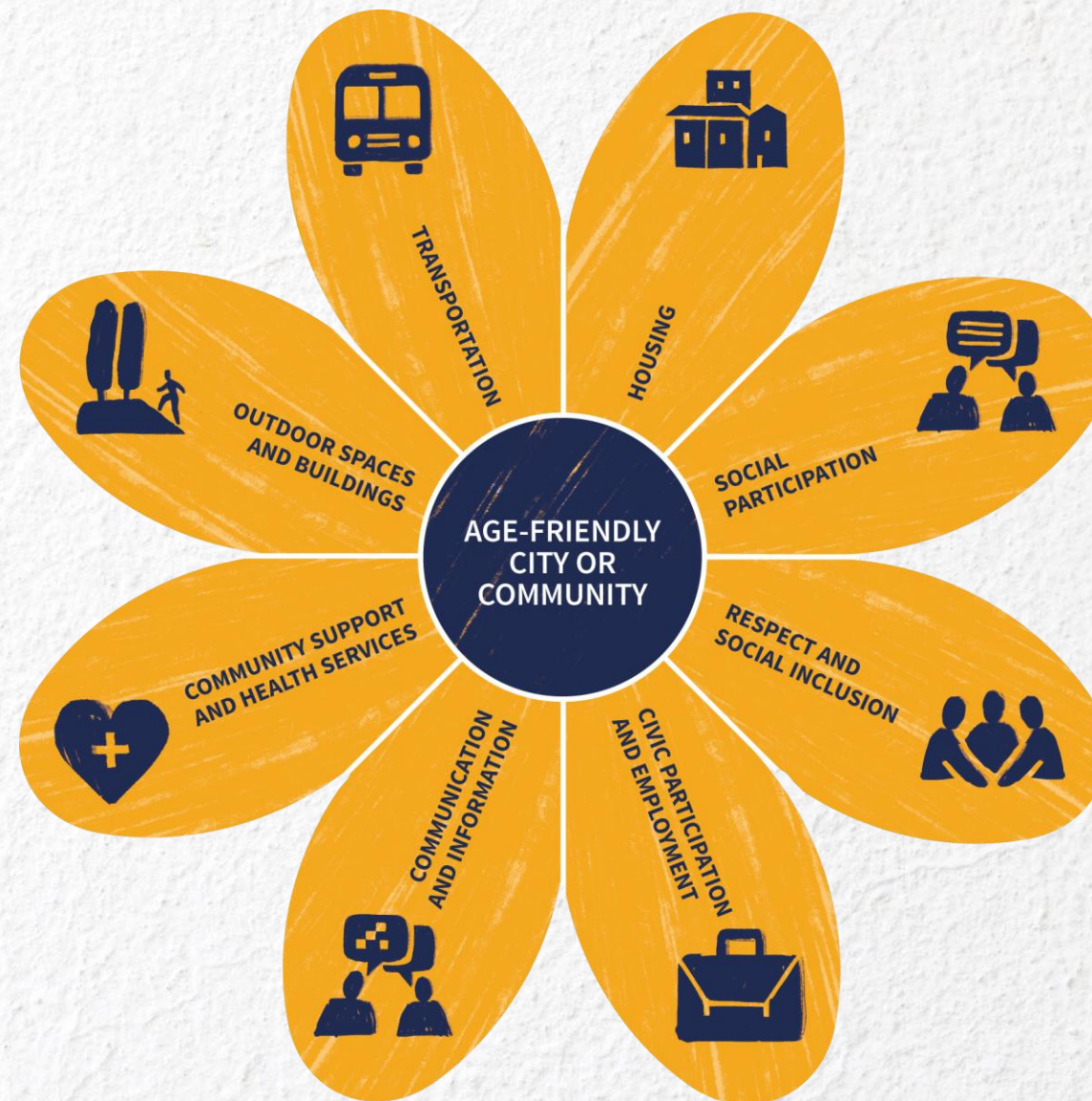
- Age well in a place that is right for them
- Continue to develop personally
- Be included
- Contribute to their communities
- Enjoy independence and good health



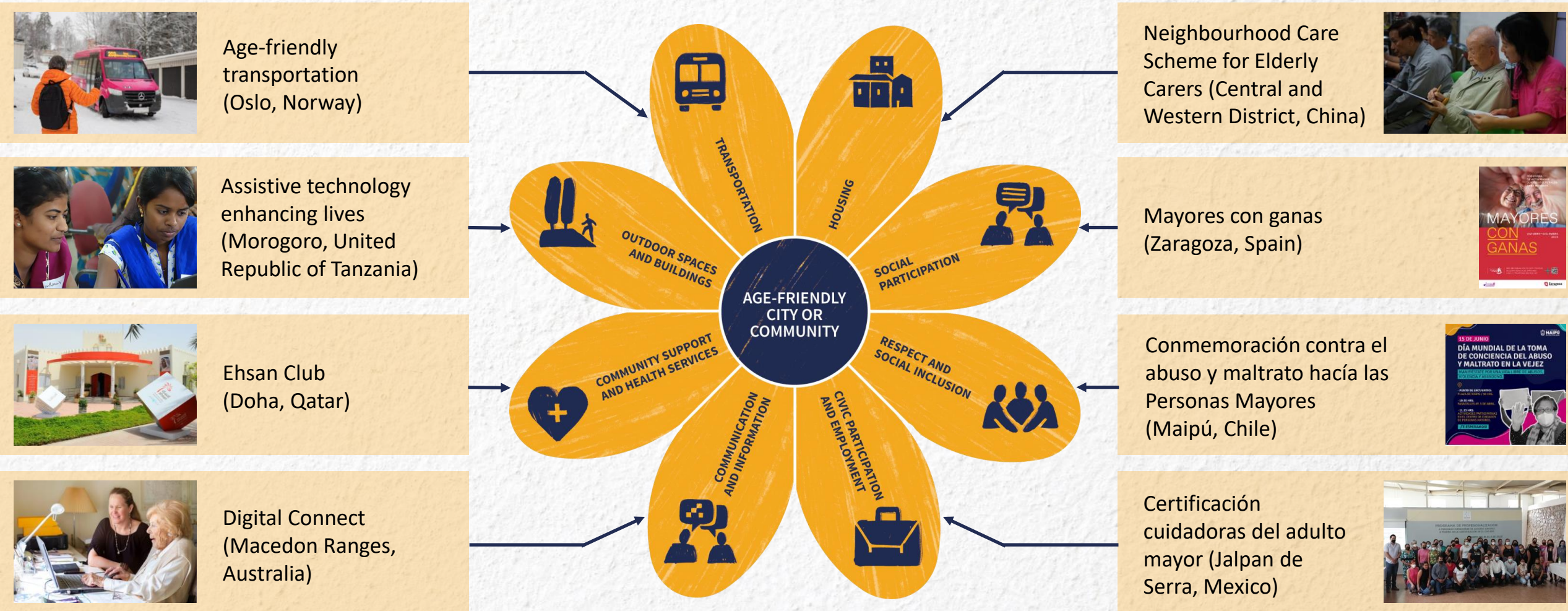
Building Age-Friendly Cities and Communities

Creating age-friendly cities and communities is an effective way for fostering 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**.

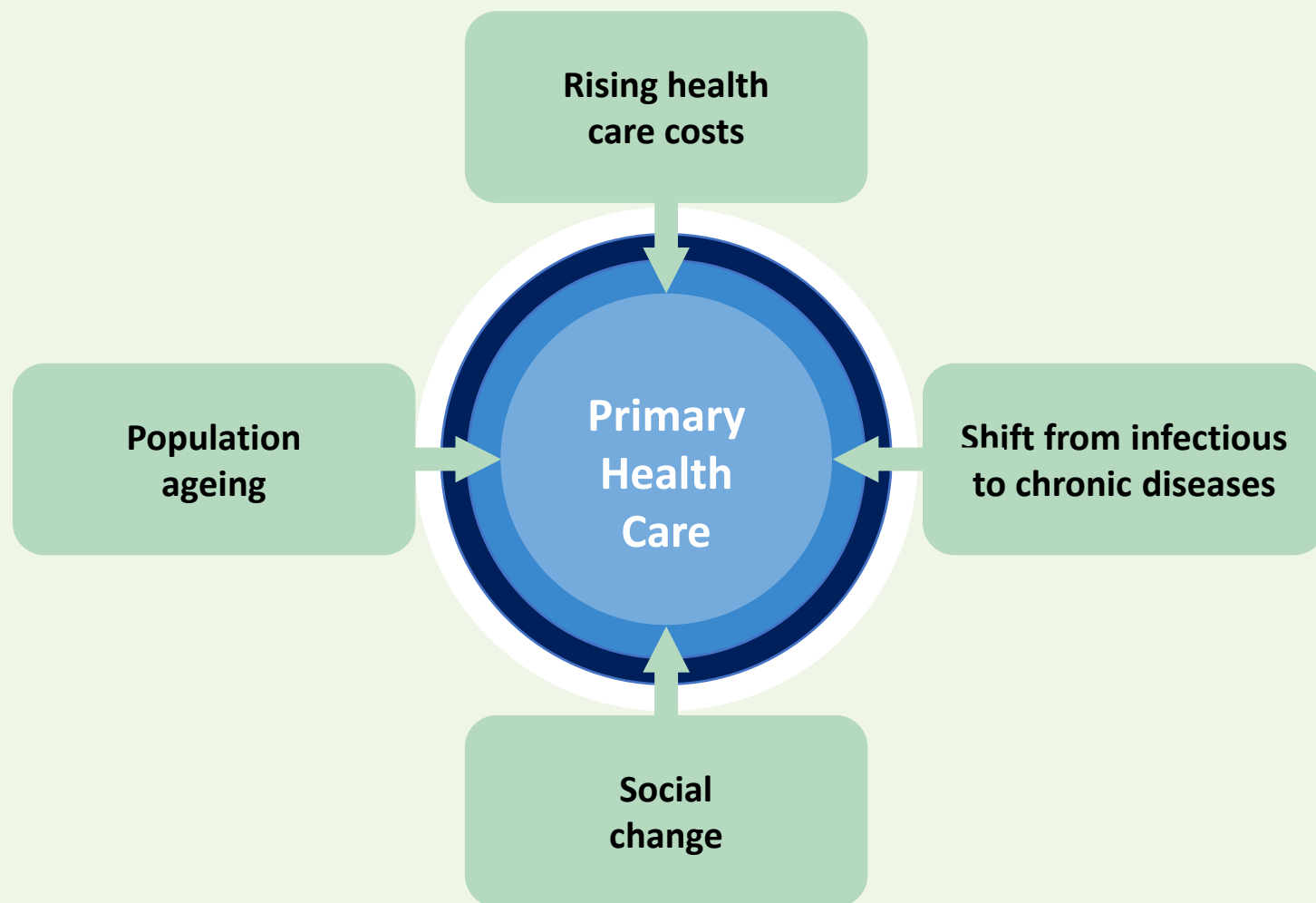


Examples of Age-Friendly Practices



The Need for Age-Friendly Primary Health Care

Pressures on Primary Health Care



Primary health care is a whole-of-society approach to health that aims to ensure 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.

Challenges in Older People's Care in Primary Health Care Centre

- Need for more ***efficient use*** of the limited time and resources
- Importance of ***early detection***, appropriate management and planned follow-up
- Specific ***training*** in the detecting and managing declines in intrinsic capacity and geriatric conditions
- ***Medical problems often present differently in older people***
- Health or medical issues may not be the top ***priority*** for older patients
- ***Ageist attitudes*** among health and care workers

The perspectives of older adults and a multidisciplinary approach are essential for enhancing the ability to address the needs of older people.

Primary Health Care as 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 person's 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 wellbeing



WHO / Lindsay Mackenzie

General Principles for an Age-Friendly Primary Health Care

2. Community-based health care management systems

- 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



WHO / Blink Media -
Juliana Tan

General Principles for an Age-Friendly Primary Health Care

3. Physical environment



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

Design Considerations for Primary Care Settings

Ramps	If the entrance has steps, it also needs to 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 organised so that older persons can access services with minimal stress and movement.
Doors	The doors should be wide enough without any 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). A trained nurse or primary care worker may conduct the audit annually.

Recommendations for Inside and Outside Signage for a Primary Health Care Centre



Designing signage

- Use non-glare finishes for signs, ensuring contrasting characters for better visibility.
- Choose large, clear letters that are easy to read.
- Keep displays simple and straightforward for easy understanding.
- Incorporate familiar images and use colour effectively.
- For handmade signs, use a black felt-tip pen on light, non-glossy backgrounds.
- Use non-glare glass for building directories.
- Provide Braille signage according to local regulations.
- Use a welcoming tone in messages with phrases like "please" and "thank you".

Recommendations for Inside and Outside Signage for a Primary Health Care Centre



Placement of signage

- Position signs at eye level with large lettering for better visibility.
- Use exterior signs to identify accessible facilities.
- Install signs in main lobbies and along traffic routes to indicate the centre's location.
- Place signs in accessible areas throughout the building, not just near designed toilets.
- 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.

Recommendations for Inside and Outside Signage for a Primary Health Care Centre



Identifying personnel

- Staff should wear easily recognisable 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

- Make primary care settings affordable and accessible for all ages by incorporating feedback from older adults and care providers to create age-friendly health centres.
- Optimize resources in primary care for the early detection and management of intrinsic capacity declines and geriatric issues.

Summary

- Principles of Age-Friendly PHC Centers:
 - Focus on training health and care workers at primary care and implementing patient education
 - Adapt primary care facilities to meet the needs of older adults and ensure continuity of care
 - Create clean and comfortable environment using Universal Design principles



Summary

- Ensure PHC facilities are accessible and safe for older adults with features like ramps, handrails, organised layouts, wide doors, and spacious restrooms for multi-floor access.
- Improve communication in primary care with clear Braille signage and visible name badges for staff, using colour-coded roles for easy identification.

References

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