

To the Director General
DG Health and Consumer Affairs
European Commission
Via email to: SANCO-health-workforce@ec.europa.eu

27 March 2009

Dear Director General,

Thank you for this opportunity to comment on the European Commission's Green Paper on the European Workforce for Health. This is an area that Age Concern considers to be very important given the direct benefits and impact having a well trained, sustainable health workforce would have on older people's quality of life. Please see our contributions below.

4.1. Demography and the promotion of a sustainable health workforce

The Green Paper recognises that long term health conditions will become more prevalent. As these are to some extent amenable to self care and self management, **Age Concern suggests that the potential for self management of long-term conditions is maximised** in future workforce planning.

A growing body of research has shown that self-management programmes provide important benefits to participants such as reduced severity of symptoms and pain and improved life control, resourcefulness and life satisfaction.

Reference: Department of Health pages on Expert Patients Programme
http://www.dh.gov.uk/en/Aboutus/MinistersandDepartmentLeaders/ChiefMedicalOfficer/ProgressOnPolicy/ProgressBrowsableDocument/DH_4102757

In the UK, the Expert Patients Programme provides lay-led, group-based support for people, in the self-management of their long-term condition. It is delivered locally by a network of trainers and around 1400 volunteer tutors with long-term conditions. The Programme offers a tool-kit of fundamental techniques that patients can undertake to improve their quality of life.

Reference: The Expert Patients Programme www.expertpatients.co.uk

Future health professionals will need training to promote self-care effectively and to work with self-carers.

4.3. Training

The Green Paper highlights the need for the development of specialist skills to treat the changing set of conditions and diseases including those that are prevalent later in life.

Furthermore, planning needs to take into consideration that:

- a. in an ageing society, more patients - almost regardless of their condition - will happen to be an older person.
- b. an important feature of later life is the increasing prevalence of co-morbidities and of general frailty. Patients with physical conditions will happen to suffer from mental health problems and *vice versa*.

Age Concern suggests that training will need to reflect an increased need for holistic treatment and care, taking into account physical and mental health.

In the UK, skills training also tends to focus more on health workers aged 25 and under. More needs to be done to provide appropriate training and re-skilling for older workers, This does not have to happen in the form of long, full-time courses that assume no prior knowledge, but can be delivered in ways that builds on existing knowledge.

Finally, Age Concern would like to raise a concern that the working conditions of health workers is a determining factor in the quality of care given to all patients. In the UK, it has been difficult to attract people to work in certain social care posts. It is not clear what an appropriate response should be, but addressing these issues will help deliver care in a more effective and sustainable manner.

If you have any further questions, please do not hesitate to contact us.

Yours sincerely,

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