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Ageing population will have huge impact on social services, Lords told

Committee to report startling findings of wide-ranging investigation into over-65s and implications for British society

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Startling details about Britain's rapidly ageing population and its potential impact on social services have emerged in evidence to a parliamentary inquiry, prompting warnings that no proper plan is in place to cope with the dramatic increase in those aged over 65.

Next month a Lords committee will reveal the results of its investigation into the growth of the section of society above retirement age. Its chair, Lord Filkin, warned that the NHS, social care, public spending and the rest of society face dramatic change as a result. The committee has been told:

- Half of those born after 2007 can expect to live to over 100.
- Between 2010 and 2030 the number of people aged over 65 will increase by 51%.
- . The number of people aged over 85 will double during the same period.

Filkin, 68, said the prospect of living longer was a "gift", and added that studies suggest people's happiness peaks after retirement. But six months of evidence gathering revealed the huge impact such changes would have on almost every aspect of public life.

There had to be an agreement on the values and vision of the government, he said. "Is it trying to support people to live independently and well, and if so what does that imply?", he asked. "If you have big changes coming and/or those changes require you to make significant changes in services and systems over time, you have to have some kind of plan."

The most dramatic warnings to the Lords committee, which focused on 2020-2030, were for the NHS. Filkin criticises health bosses for not making detailed forecasts, and evidence from experts showed the scale of the crisis facing hospitals, specialist services and care homes.

The Nuffield Trust predicted a 32% increase in elderly people with moderate or severe disability, and a 32%-50% rise in over-65s with chronic diseases.

Professor Carol Jagger, of Newcastle University, forecast that unless treatment and cures

were improved, the incidence of the five most common chronic conditions among the over-65s - arthritis, heart disease, stroke, diabetes and dementia - would increase by 25% by 2020 and more than 50% by 2030.

As a result of such stresses, the Nuffield Trust and the Institute for Fiscal Studies calculated that, even assuming "heroic" productivity improvements, the NHS would have a \pounds 28bn- \pounds 34bn shortfall – a significant proportion of its \pounds 110bn annual budget.

Such forecasts are often simple extrapolations of the forecast growth in the number of elderly people, based on existing disease and disability rates.

Sarah Harper, professor of gerontology at Oxford University, told the peers there were about 8 million people in the UK who would be expected to live to at least 100, and some experts believe at least 50% of children born since 2007 will live until 103.

In the shorter term, the Department of Health expects the number of elderly people aged over 65 to grow by 51% in the two decades to 2030, and those aged over 85 to rise even more steeply, by 101%.

Throughout the inquiry however, experts have cautioned that the level of certainty about population ageing forecasts drops noticeably with regard to later years.

The problem is not simply one of numbers: experts warned that the NHS was not well set up to help elderly people with long-term and complicated health problems.

In one of the more damming submissions, a Department of Health official admitted older people are "systematically getting a worse deal than younger people ... worse levels of treatment and assessment".

Giving evidence to the inquiry last month, the health secretary, Jeremy Hunt, said the coalition was tackling the issue head-on in many areas, citing a big productivity drive in the NHS to free up money, a government focus on dementia, and changes to social care funding and state and private pensions to make it easier to encourage more people to save for old age.

"We have made good first steps, but is there more we can do? There certainly is," said Hunt. But he also criticised the "false comfort" of a "wonderful strategy document".

He said: "My belief is that governments should be judged by what they do, not what they say, and this government has been doing a lot."

In the committee, Filkin, who cannot discuss what is in the report, was visibly impatient with the cabinet's failure to co-ordinate a wider strategy, or even provide detailed forecasts of the impact of an ageing population on, for example, health services, forcing the committee to rely on outside experts.

"We asked the question: is the system coping with the current level [of health pressures] and the evidence we got is it isn't," he said. "[So] how is it going to cope in a near future,

seven to 17 years' time, when we have massively increased demand coming into the system?"

Filkin, a Labour peer, said there needed to be at least a strategy along the lines of those developed for future defence needs, climate change and energy security.

"Given the sort of data given to us in evidence, it's pretty clear we have major social change coming and we'd expect them [ministers] to have some sort of idea."

The report will not just draw attention to problems ahead and recommend solutions; other issues it will highlight include pensions, the public cost of rising health and elderly care and pensions, and how to keep more elderly people who want to work in jobs.

"Today's older people are in the vanguard of an extraordinary revolution in longevity that is radically changing the structure of our society," said Michelle Mitchell, director general of the charity Age UK.

"However, the wider implications of a changing population are often viewed by parliamentarians through a narrow lens, defined by the remit of specific committees.

"In having such a breadth of scope, the Lords committee has compiled the evidence base to take the long, expert view on demographic change. This will help to address public service reform on health, care, housing, income and age equality issues, which if thoughtfully integrated and effectively delivered, will create the foundation point for a good quality of life in old age."

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