



Audit tool for achieving age equality in health and social care

B3.2: Primary and community care

B3.2.1: Access to information from primary care services

RED

Little information is available about local primary care services including where to go for advice and out of hours services and the scarce information that exists is not available in a variety of formats, languages or locations that can be accessed by older people and those experiencing multiple discrimination.

AMBER

Fragmented information exists about the range and purpose of local primary care services including out of hours services, in a limited range of formats, media, languages and locations that are not accessible to older people and those experiencing multiple discrimination.

GREEN

A comprehensive range of information and advice exists about primary health and community based services including written, Braille, large print, audio, web-based and face-to-face provision in different outlets (post offices, libraries, community centres and shops as well as GP surgeries). People of all ages report that they can access the information they want in a format that suits them best, especially older people.

B3.2.2: Access to enablement and intermediate care services, by age

RED

Community based rehabilitation and intermediate care services are fragmented, commissioned separately, and operate eligibility criteria that restrict access on the basis of condition (such as dementia)/diagnosis and age. Community-based services focus only on prevention of inappropriate admission to hospital/residential care or on early discharge and are not integrated with the wider emergency and urgent care services.

AMBER

A range of enablement and intermediate care services is being developed by health and social care services, but these are not yet fully integrated or commissioned as a coherent package of intermediate care services for all ages.

GREEN

A comprehensive range of jointly commissioned enablement and intermediate care services is available, with entry points from primary care, community social care and hospital care, which aim to help people of all ages achieve their optimum level of independence with the lowest appropriate level of ongoing support/care. These services support older people with mental and physical health co-morbidities who need support. Services to prevent inappropriate admission and to facilitate early discharge and reablement work together and are integrated with wider emergency and urgent care services .