QUALITY IN HEALTH CARE

Editorials

Quality in health care: a focus on the care of older people

The population profile in western societies is changing. People are living longer, there are more older people, and the disease profile has changed too. People who survive into old age are, for example, more likely to have degenerative disease, cerebrovascular disease, and dementia. Older people are more likely than younger people to require long term residential care or be dependent on the attention of carers. The particular health problems and healthcare needs associated with aging and aging populations require particular attention and study. In recognition of this the *Journal of the American Medical Association* has coordinated a global theme issue on aging. Ninety journals from over 30 countries will publish papers related to health and health care associated with aging in October 1997. *Quality in Health Care* is one of the participating journals. In this September issue of the *journal*—as a quarterly journal there is no October issue—we have included several papers that focus on issues relevant to the quality of care of older people.

All consumers of health care regardless of age have a right to care that is effective, appropriate to their needs, delivered competently and with sensitivity; and should have information that enables them to make choices about their care. And all consumers of care should expect to be cared for by healthcare professionals who have a commitment to quality improvement. But although the principles and practice of quality improvement are applicable to all patients there are aspects of care that have particular relevance to older people. For example, for those that are too frail to be cared for at home long term residential care

may become a necessity. In this area, where social care and health care converge, assuring quality is crucial but may not be straightforward. Two papers in this issue examine the practicalities and results of the use of two quality assurance packages that provide a framework for quality assurance in the long term care of elderly people. Some diseases are more common in elderly people. Stroke is one. Finding the best approach to assessing long term outcome is important and Wilkinson and colleagues compare the Barthel index with several other measures. Alzheimer's disease also particularly affects older people and has a huge impact on their carers. Hunter and colleagues examine the social and economic burden of this debilitating disease and the impact of new initiatives in care. Higginson and colleagues present some of the practical considerations that need to be taken into account if outcome measures are to be assessed in routine practice by healthcare professionals looking after people with dementia. Finally the dental care of older people is important as the first step in ensuring good nutrition. Better dental care over the past decades will result in many more older people with their own dentition, and as Steele and Walls argue, strategies to ensure good quality dental care for older people are needed. These papers will be of interest to all healthcare professionals and should stimulate readers to think about the particular healthcare needs of older people.

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