

Detail of all 97 unanswered questions for Multiple Conditions in Later Life Priority Setting Partnership

Ranked position of question at priority setting workshop, 24 April 2018	Uncertainty	Examples of original survey submissions	Evidence	Source of Uncertainty
1	How can <u>current health, social care and voluntary sectors in the UK be optimised</u> to more effectively meet the needs of older people living with multiple conditions?	How do we sustain longer term support rather than brief interventions? Health professional. 'How can we as GPs best work with patients with multiple conditions to both optimise their healthcare and reduce their treatment burden? Health professional 'My relative with a severe stroke lives with her husband who has dementia and is unable to walk. They each have 24 hour carers which my brother and I are fortunately able to afford privately in their own home. If we were unable to afford this the options for care would probably mean they would be separated.' Carer 'I also worry about the Doctors, as it is practically impossible to see ones own doctor as none of them now work full time. This means there s no continuity of care. Every time you see a doctor he is starting from scratch again.' Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
2	What are the most effective, cost effective and acceptable <u>ways to reduce social isolation</u> in older people with multiple conditions?	The subject of loneliness has been highlighted in the media, usually among pensioners who have lost their partners. Often people are shown enjoying themselves, mostly women, relatively fit, well dressed and coiffured and less than the age of 80. Loneliness is more prevalent as one gets older, less active, with fewer friends and younger relatives, if any, have their own busy lives to lead. It can also be more common in larger towns where one often doesn't know ones neighbours and each day passes without contact with another human being. Perhaps this is a subjects that might justify more research. Religion plays and important role in the lives of some communities, could research be made into whether or not religion, or religious activity can play a part in the case of the elderly with multiple conditions in much the same way as hospices and the terminally ill? Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
3	What are the most effective, cost effective and acceptable strategies for the <u>prevention of multiple conditions in later life</u> .	what can we do to prevent the conditions occurring in the first instance, i.e a baseline of what we can do to tackle comorbidity? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
4	In what ways can <u>carers</u> of older people with multiple conditions be <u>supported to maintain their own physical and psychological wellbeing</u> ?	How can we identify and prioritise the needs of carers, especially when they have multiple needs of their own? Health professional 'I think I is very easy to forget about the effect that looking after an older person with health problems can have on carers. This in return can eventually impact on the effectiveness of the care being given.' Carer	None identified that applied directly to all conditions in the over 85s	All forms of respondent
5	What is the most effective, cost effective and acceptable form of <u>exercise therapy</u> in different health and social care settings with older people with multiple conditions? How does exercise therapy affect outcomes in this population?	Could an exercise program help my walking? Older person. 'How many symptoms could be alleviated by exercise? Health professional. 'Does Tai Chi help patients?' Health professional 'There are so many words written about exercise being the answer for combating fatigue, stress, depression all of which hang around the elderly with or without health problems. Yoga, Pilates, etc may be fine for the fit and young but what is there for those who laid on the floor cannot get up? I can walk about my house, what on earth can the wheelchair bound do? Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
6	How can the <u>recognition and management of frailty</u> be improved in older, multimorbid people? Would this lead to an increase in perceived quality of life?	how can we better manage frailty so as to improve overall self perception of health and wellbeing ' Health and social care professionals. 'how can we develop prognostic indicators for frailty? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
7	How can <u>Comprehensive Geriatric Assessment</u> be optimally delivered in different patient populations experiencing multiple conditions in older age	How best to deliver CGA in different population groups especially community? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
8	What are the most effective, cost effective and acceptable interventions to <u>improve the psychological wellbeing</u> of older people with multiple conditions?	I suspect my mum who has dementia may possibly have underlying depression, she has recently become very withdrawn. I have highlighted this to a member of the nursing home staff. Carer ' Use and value of talking therapies to individual's with multiple health conditions? Health and social care professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
9	How can <u>independent living</u> be most effectively and acceptably enabled in older people with multiple conditions in the UK?	Last year, because she knew she was losing her eyesight she had to organise putting herself into a care home. She started to sell and give away her possessions. She met with the care home manager who told her that she wasn't ready for a home yet, because mentally she is too sound and is not suffering with dementia. So she is still trying to live independently. She has organised a carer that comes three times a week, takes her shopping, does the cleaning. Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
10	How do older people with multiple conditions <u>perceive and manage their risk of falls</u> ? How can <u>fear of falling</u> be effectively addressed?	Also how to manage fear of falling - this is a big problem. Often older people become more isolated because they may have fallen and as a result may not leave their house. Some even have anxiety as a result. Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
11	What are the most effective and acceptable ways <u>to train and regulate carers</u> of older people with multiple conditions? Would this improve outcomes for this population?	Is message a safe and effective way to relieve the discomfort caused by odema in older, multimorbid people? Carer 'What information regarding health conditions do carers of older, multimorbid people want? How can this information be most effectively communicated to them? Carer 'What are the most effective and acceptable mechanisms to regulate the care provided by informal carers to older people living with multimorbidity? Carer	None identified that applied directly to all conditions in the over 85s	Carers
12	How do older people with multiple conditions perceive their <u>independence</u> ? What are the most important factors in maintaining this <u>independence</u> ?	She has to balance her need for care with her desire for independence. She just has to accept this balancing act. Because she is well integrated with her family and she can pay for her care she is okay. Older person 'What risks are they prepared to take to maintain independence? Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
13	How can <u>hospital admission and readmission rates be reduced</u> for older people with multiple conditions?	How can we provide better care in the community to prevent hospital admissions for people with multiple health conditions? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
14	How can <u>cognitive decline due to lack of sensory stimulation</u> input be prevented in people who are older and experiencing multiple conditions?	How can cognitive decline due to lack of sensory stimulation/ input be prevented? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
15	What is the prevalence and causes of <u>inadequately controlled pain</u> amongst older people living with multiple conditions?	How many older people are living with pain they feel is adequately addressed by their current healthcare? Health professional 'Managing pain when told cant take tablets that help regularly because they might damage kidneys? Carer	None identified that applied directly to all conditions in the over 85s	All forms of respondent
16	What are the most effective, cost effective and acceptable <u>deprescribing interventions</u> for older people living with multiple conditions?	Further evidence to support rationalisation of medications and how medications should be stopped? started in older people with multiple health conditions. Health professional 'How do we know whether medication is needed or effective? Told not to stop dorepez because it might be working. Can I start reducing pain killers if there is no obvious sign of pain? Why cant number of pills be rationalised/ coordinated so I only have to request a prescription 4 weekly instead of every week? Why were we not told catheter supplies could be obtained direct from manufacturer who can raise prescription with surgery? Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
17	How can <u>exercises to reduce the prevalence of falls</u> in older people with multiple conditions be effectively <u>incorporated into routine care</u> pathways?	We have robust evidence for exercise to reduce falls - how do we implement this into care pathways in terms of duration, dose, intensity, skills? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
18	What is the <u>impact of social isolation</u> upon the mental and physical wellbeing of older people living with multiple conditions?	The impact of social interaction on health outcomes; I see from an inpatient perspective patients sitting in day rooms and lounges, day in, day out and I often wonder how things might be different for them if there was as much focus on social interaction, occupation and activities as there was on medicine. ' Health professional 'What's the impact of social isolation on declining health and how could early interventions prevent decline. Personal experience as a carer to an 81 year old mum with Alzheimer's (still fairly early stage, still living independently, but with care 2 a day for last 9 months) has been a spiralling decline in physical and mental health which started around a year ago - possibly triggered initially by a loss in confidence related to Alzheimer's and forgetfulness. After a year of not going out and being physically active mum's mobility has significantly decreased - walks with a zimmer, quickly gets tired and breathless, constant lower back pain, had at least 8 falls getting out of bed in the last 6 months.... Reflecting on this a year on, I wonder if this decline in physical health would have happened anyway - or could it have been avoided by tackling the issues early on that stopped mum taking part in the activities she had always been involved in (or at least an alternative) the year before the decline she was bowling 5 days a week and going out with friends twice a week. The lack of physical activity and social interaction has had a noticeable impact on her physical and mental health. ' Carer	None identified that applied directly to all conditions in the over 85s	All forms of respondent

19	What is the cause and impact of poor sleep on older, multimorbid people? What are the most effective ways to address it?	Is any research being done into sleep problems. I feel that insufficient notice is taken of poor sleep patterns which can leave the patient and carer very tired during the day, and consequently less able to take advantage of the services that are available.' Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
20	Is there a correlation between poor outcomes in older people with multiple conditions and inadequate levels of care received by them?	Whether a lack of appropriate support/cuts to care budgets contributes to patients falling?' Health and social care professional. 'Effect of social care cuts to budget and impacts of this on early death due to lack of support or admission to a care home setting when previously they might have stayed at home.' Health and social care professional.	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
21	What are the most effective and acceptable methods to support medication adherence in older people with multiple conditions?	'Attitudes of older adults toward medication, care and treatment - I hear a lot about how people don't want to feel dependent on or ruled by pills and I think understanding the psychology behind this will be pivotal for future work in understanding the targeted interventions a Pharmacist could make to empower many people to have a lead role in their care and treatment.' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	In older people with multiple conditions, can symptoms or conditions be prioritised? How can the links between conditions be best understood?	It would be helpful to know more about the links to different health conditions, including loss of hearing and eyesight for those with dementia and stroke after-effects'. Carer 'What is the inter-impact of multiple health conditions and if one condition is addressed over the others, would this have a positive consequence on the other conditions.' Social care professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	For older people living with multiple conditions, what are their perceptions of care? What impact does this have upon them?	How best can I keep her safe and get help when she is confused and her husband is main carer and says he doesn't want help- but does need it' Carer. 'I feel fobbed off, the district nurse does her thing, but I feel left out - a bit...'. Older person 'How much they understand about invasive investigations e.g. Endoscopy. How much they realise or are informed about the reality of operation risks, complications and slow recovery periods in frail people. The reality of resuscitation success in the over 75s. The risks of hospital emergency admissions and limited benefits.' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the most effective ways to manage periods of acute illness in older people with multiple conditions?	To investigate how to manage acute illness in the context of multi-morbidity.' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are health and social care professionals' views on care in the community for older people with multiple conditions?	How can it be made simple for people to decide to stay at home for as long as possible if that is their choice? At the moment they have to negotiate this with many health and social care professionals as well as housing agencies and everyone else 'knows best'. Social Workers can advocate for that choice but everyone is so risk adverse and health professionals still have a very deficit approach to managing risk'. Social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the impact of the 6 week non-chargeable care period on the outcomes of older people with multiple conditions?	Does the 6 week non chargeable period provide the best opportunities for everyone to improve or maximise their independence or does it promote success/failure for older people whose conditions are worsening?' Social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the most effective way to monitor health outcomes for older people with multiple conditions that live independently?	For people living in their own homes cared for by very frequently changing external carers, how can long term health conditions be monitored?' Health and social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	How can environmental design improve the care provision for people living with multiple conditions in older age?	how much would environmental support contribute to care of people (better design of living spaces, communication spaces etc.)' Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Is supported housing an acceptable and effective mechanism to enable older people with multiple conditions to maintain independence and improve health outcomes?	'He likes the fact that in his sheltered housing he can maintain some independence, he still looks after himself.' Older person 'Do supportive housing projects compared to living at home or in a care home, delay the onset of further needs in later life? If so, at what stage in a person's timeline of developing these conditions / needs does the person benefit most from such a transition?' Social worker.	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and older people
Not discussed at workshop	What are the most effective and acceptable ways to facilitate behaviour change in older people with multiple conditions?	what is the best way to engage with people regarding behaviour change and long term adherence to behaviours that will improve their health?' There is a move towards self care but perhaps we need to be more bespoke about this?' Health and social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	For older people with multiple conditions, does the use of antidepressants impact upon adherence to rehabilitation programmes?	Effect of anti depressant medication on rehabilitation / patient engagement with Rehabilitation?' Health and social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	How do older people living with multiple conditions perceive their management of their health conditions? Is self-management an appropriate model of care for this population?	How do people with new hip/knee replacements manage their condition on their own?' Carer 'who should care for person?' Role of self / family / community' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the facilitators and barriers to older people with multiple conditions presenting to a healthcare professional with physical symptoms?	What triggers GP consultations regarding symptoms?' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	How do older people living with multiple conditions perceive their role in their care? Is shared decision making an appropriate mode of care for this population?	Are old people truly empowered to choose treatment, especially as many come from a Doctor knows best tradition - what can be done to improve decision making options?' Health professional 'What's wrong with sleeping in a chair? Its where nan is most comfy but people tell her she should have a fancy bed. Which she doesn't like. Who knows best? (they dont listen to nan)' Carer ' She has to be approached in the right way, she cant be told. She wants to be involved in the discussion. Its about respect and being treated like an adult. She wants her independence.' Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	Can health professionals be trained to understand how older people with multiple conditions understand and communicate about their symptoms in order to engage in more meaningful communication?	How do we help the elderly to have realistic expectations about their conditions? Health professional 'I accept the symptoms associated with my health conditions, so far as I am aware. However, it is possible that I may misinterpret these symptoms if I had to explain them over the phone. I am not confident that those who respond to 111 and 999 emergency calls can always correctly identify the problems, through no fault of their own. The elderly person who may need to contact the emergency services may be confused, injured or in pain and be unable to access a phone, especially if they live alone'. Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	Is the use of new technologies and social media an effective and acceptable method of information dissemination and support for older people with multiple conditions?	Could TV put on a programme maybe once a week to inform us how mobile homes (smart phones etc work tablets),More for dementia patients. Reminders of the past news, music etc. Our short memories need a booster there has been more this year of battles etc WWII. My Husband was in the merchant navy, yet people have not heard of them alone with royal navy saved our country.' Older person 'To investigate the use of social media support groups in this patient population - are they helpful, appropriate, used, can they be improved?' Health care professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	How can medical devices for older people with multiple conditions be better designed, regulated, tested and improved?	How can medical devices for older people with multiple conditions, including hospital beds, hoists, pressure relieving mattresses, walking frames and wheelchairs be better designed, regulated, tested and improved?' Carer	None identified that applied directly to all conditions in the over 85s	Carers
Not discussed at workshop	Can technology be implemented to enable better support of older people with multiple conditions at end of life?	At present trying to find out how to support someone at the end of life using technology and ensuring that legislation is abided by.' Carer	None identified that applied directly to all conditions in the over 85s	Carers

Not discussed at workshop	How can <u>access to palliative care</u> be improved for older people with multiple conditions?	How to improve access to palliative care services in this client group? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	At what point in the care of older people with multiple conditions <u>should the focus of care become palliative</u> ? How is this decision made and by whom?	I feel very strongly that my mother is frightened of dying but despite contact with many healthcare professionals is focused on what can be 'fixed'. She is 95 and in poor health- the focus of her interactions should now be on quality of life but isn't.' Carer 'Ways to begin conversations about dying. When do older people want to have these conversations.' Health care professional 'When, how and who should initiate end of life care planning.' Health care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	How and why <u>are DNR orders</u> placed in the care of older people with multiple conditions? Who is involved in the decision making process?	Is DNR system fair - many old people are put on it by doctors in general wards routinely just because they are old and have illnesses - whatever they or relatives think.' Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Is an <u>assisted suicide system</u> for older people with multiple conditions a viable and acceptable model of care for the UK?	Is a safe assisted suicide system viable - how do some other countries do it, and what is their experience/evidence? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the ethical considerations in providing non-oral nutrition and fluids in <u>end of life care</u> for older people with multiple conditions?	There needs to be more research also into ethical considerations around feeding and providing fluids non-orally in end of life care, which is still a grey area. Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	How do older people with multiple conditions <u>perceive end of life</u> ? What do they wish to achieve during this process? How can they be enabled to make this time one that they experience positively?	How we as a society can address our negative perceptions and behaviours around end of life (last year or longer, rather than terminal days) to promote more positive attitudes, develop practical solutions - and enable people to approach this phase of life with confidence and dignity? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Does <u>care quality and provision</u> for older people with multiple conditions vary geographically?	Research about care and support differences related to areas where a person lives' Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	In the care of older people with multiple conditions in the UK, how is the <u>decision to enter residential care made</u> ? What is the impact of this move upon the older person? How can older people and their carers be effectively supported in this decision?	How to encourage/ persuade them to move house when the family home is no longer/ cannot be made suitable? Carer	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	What <u>support</u> is required for older people with multiple conditions and their carers during their <u>discharge from hospital</u> ? How can this be facilitated?	As a family member - what is the best way to get help and support following a hospital discharge. Carer	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	What <u>forms of residential care</u> are most effective in improving physical and psychological outcomes in older people with multiple conditions?	How can care homes improve independence of the elderly when they don't have enough staff to support them being independent? Especially if they are visually impaired.' Carer 'The provision of institutionalized care and the role of pets; smaller units; integration with society.' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are healthcare professionals and patients' <u>perceptions of social admissions</u> to hospital for older people with multiple conditions?	Is a 'social admission' to hospital really a 'social admission'? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Does the provision of <u>effective social care</u> have an impact upon the duration of hospital stay for older people with multiple conditions?	Effect of social care on length of stay in hospital' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the <u>long term consequences of stopping medications</u> during an acute hospital admission on older people with multiple conditions?	Long term consequences of stopping medicines during an acute admission.' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	How can <u>the physical and emotional needs</u> of older people with multiple conditions be adequately met during hospital admissions?	Any interaction with hospital is a worry. Previous experiences haven't been that good. Felt that I was an old person and not given the respect that would have helped me feel better. So it's a worry going in with hearing, mobility and memory issues - how that would be tolerated. Older person	None identified that applied directly to all conditions in the over 85s	Older people and carers
Not discussed at workshop	What are the most <u>effective models of 'reablement/enablement'</u> are currently applied in the care of older people with multiple conditions?	Experience says that Speech and Physiotherapist support for re-enablement is the best and government investment should be more to provide for longer periods than the current. This saves more readmissions.' Health and social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the <u>effectiveness and acceptability of intergenerational care</u> for older people with multiple conditions?	Do you understand that making children with old people is extremely rewarding, they can have the attention that parents or carers in childrens homes cannot have the time. some like myself did not have a grandmother, a very important asset in a family and future adults might appreciate the 80 year olds. I do like seeing teenagers from my local comprehensive and trying to keep up with the education changes. Also we can learn much from them, health, food etc. This then will mean less depressions and pain in some old persons. Being needed is important. Grandpa's too for information is rewarding for young people' Older person	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and older people
Not discussed at workshop	What is the most effective way to <u>educate carers about the early symptoms of delirium</u> in older people with multiple conditions?	Can we train carer to spot early delirium/ Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the most effective, cost effective and acceptable form of <u>nutrition intervention</u> in different health and social care settings with older people with multiple conditions? How does nutrition support affect outcomes in this population?	How can older people be best supported to maintain adequate nutrition and hydration to prevent undernutrition impacting on mental and physical health?' Health professional. 'What is the best food to give to my 85 year old mother?' Carer 'How can hydration and healthy eating be taken into consideration?' Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	How do older people perceive a healthy lifestyle, what influences their choices and how can we target interventions in a meaningful way?	How do older people perceive a healthy lifestyle, what influences their choices and how can we target interventions in a meaningful way? Health professional 'Exercise was introduced- but reluctance to pay the small fee that is £4-£5 per week by some tenant or relatives for the service brought this to an end. I thought that was more regrettable.' Older person. 'Hours can we expect people to change behaviours/life long habits to engage with health promotion activities, increasing activity levels etc.' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the barriers and facilitators to <u>health professionals offering lifestyle advice</u> (i.e. diet and exercise) older people with multiple conditions?	I think the benefits of activity should be researched. Inactivity increases mortality but it does not seem to be a priority for some health care professionals. Inactivity can also affect mood & we know depression increases mortality. The focus is always on drugs rather than non-pharmacological treatments.' Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the impact of <u>adequate hydration</u> upon the quality of life of older people with multiple conditions?	How much does hydration influence quality of life? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals

Not discussed at workshop	What is the impact of exercise therapy and nutritional interventions on the physical wellbeing of older people with multiple conditions following an acute illness? What are older people's perceptions of this form of therapy?	Exercise and physical activity in acute care setting, benefit? Health and social care professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	How can the identification of nutritional problems in older people with multiple conditions that live independently be improved?	How best can under nutrition/ nutritional problems be identified in the community? Whose responsibility is it? Health and social care professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the most effective physiotherapy strategies in treating older people with multiple conditions?	What therapy treatment interventions and strategies are most effective to address the varied symptoms experienced by this client group? Health professional.	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the perceptions of older people with multiple conditions regarding physiotherapy and what it can achieve?	What are patients expectations of what Physiotherapy can achieve, what have the medics told them can be achieved and are these aims realistic? Health professional. Why are older people not offered routine consultations with physios when they reach 75 -80? This would enable us to know how to help ourselves retain mobility for as long as possible. Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	Are there any non-pharmaceutical interventions that are effective in controlling symptoms in older people with multiple conditions?	How best to control symptoms such as postural hypotension. Can we use non-pharmacological methods? What additional non-prescribed medications do these groups buy/ acquire to manage their symptoms and why? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and older people
Not discussed at workshop	How can we improve the routine recording of functional status and other parameters (e.g. continence etc.) in hospital records so these can be used in 'big data' research using routinely collected linked health and care data?	How can we improve the routine recording of functional status and other parameters (e.g. continence etc.) in hospital records so these can be used in 'big data' research using routinely collected linked health and care data? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the facilitators and barriers to social prescribing for both older people with multiple conditions and the health care professionals involved in their care?	How can "non-medical" prescriptions be sold as more main stream. Benefits of social prescribing are known but people not always keen to take up the opportunity - why? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	To what extent is group work that focuses upon improving the wellbeing of older people with multiple conditions implemented and utilised across the UK?	NICE guidance recommends group work that focuses on well-being of older people (Lifestyle Matters education and support groups) - how far is this rolled out and used across the country? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the most effective way to measure health related outcomes (objective and self-reported) in research involving older people with multiple conditions	How best to measure symptom control - by the person and by the services supporting the person. It is often measured by number of hospital admissions but this does not reflect that services were in place to prevent admission, and the admission may well have been the best outcome for the person. How do you show that community services were supporting the person and that nothing further would have prevented admission? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the prevalence of problematic alcohol drinking in older people with multiple conditions?	What is the extent of problem alcohol drinking in this group? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	For older people with multiple conditions what is the impact of the quality of their living environment upon their mental and physical wellbeing?	Why did our local council decide to close all the public toilets in the borough? Outings to the shops, library etc have to be curtailed. I wrote to the council but got a very uncaring reply saying it was an easy decision to make! Older person	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and older people
Not discussed at workshop	Can life expectancy / prognosis be accurately predicted in older people with multiple conditions to help inform and contextualise decision making?	Can we better predict life expectancy to contextualise decision making? Health professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Are older people with multiple conditions who are being listed for elective surgery being assessed for risk of delirium ?	Are patients who are being listed for elective surgery being assessed for risk of delirium? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the causes of impaired mobility in older people with multiple conditions?	How to discern causes of impaired mobility. Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Which groups of older people with multiple conditions have the best prognosis ?	What groups of patients "do better" why? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Can symptom status be used as an effective outcome measure in clinical trials involving older people with multiple conditions?	Can we use symptoms (rather than disease states) to: a) recruit into trials b) guide trial outcome? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Is Lasting Power of Attorney effective in ensuring that the desires of the individual are met in those with multiple conditions in older age	Does having a Lasting Power of Attorney actually promote the outcomes for people that they would have wanted for themselves (and not what the LPA wants)? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the health and social outcomes in older people with multiple conditions that have received Bed Based Intermediate Care ?	I would like to see more research into health and social care outcomes in Bed based Intermediate Care. Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is most effective provision of oral health care for older people living with multiple conditions? How can this become a routine part of the care pathway for this population?	What is done to ensure that poor oral health does not affect nutrition, self esteem and feelings of wellbeing? Health professional 'How are dental services going to cope with the demands of an aging population with complex dental health needs? Health professional 'How to keep their mouth/teeth/dentures in good health so that they can eat nice food and enjoy it?' Carer	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	How do older people with multiple conditions manage their oral health ? What are the barriers and facilitators to accessing dental care?	What are the barriers to the provision of personal oral health care by formal or informal carers for people living with multiple health conditions in later life? Health professional 'What importance is placed on oral health of elderly people (given that it affects their general health, nutritional status and quality of life)? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	What are the causes of poor oral health in older people with multiple conditions?	How much does polypharmacy in people living with multiple health conditions in later life contribute to altered salivary flow and oral function including taste, chewing and swallowing foods and increased risk to oral and dental disease? Health professional 'How is the effect of poor oral health moderated by co-morbidity? Health professional	None identified that applied directly to all conditions in the over 85s	Health and social care professionals

Not discussed at workshop	What are the <u>benefits of dental implants</u> as compared to dentures for older people living with multiple conditions?	what benefits would people living with multiple health conditions in later life who have no natural teeth gain from having implant-stabilised over dentures? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the functional and societal <u>impacts of dry mouth</u> for people living with multiple health conditions in later life?	What are the functional and societal impacts of dry mouth for people living with multiple health conditions in later life? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the prevalence and causes of <u>difficulty swallowing</u> in older people suffering with multiple conditions? Can it be prevented?	How common are swallowing problems, what is the aetiology and how should they be investigated? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Are older people with multiple conditions <u>as likely to seek or be referred</u> for investigations/ treatment for their symptoms <u>as people in younger cohorts</u> ? What influences this?	Do we accept poor/ inadequate care of the elderly as an acceptable consequence of the aging population and would be accept the same level of poor care if a child is being looked after, for example an elderly user being told she will have to lie in a wet bed until the morning and will be changed then because the agency cannot put in a later visit and toilet her again before bedtime as they are too busy. Would we accept this if it were a disabled child told she/he just had to put up with sleeping in a urine soaked bed.' Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	What are <u>health care professional's perceptions of the appropriate levels of care</u> that should be offered to older people with multiple conditions?	Are patients as likely to be referred for investigations (scans etc) as those in younger age groups? If not, why not? As they as likely to be referred for urgent physiotherapy? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	How can the <u>health and social care of older people with multiple conditions be targeted at meeting the priorities</u> of the older people themselves?	Understanding what symptoms patients consider to be the most troublesome and targeting efforts towards these.' Health professional 'Sometimes I feel as though my home is my prison because the care is focused on 'staying put' and not being able to get outside into the garden I see my neighbour across the road who has just come out of hospital (and he's in his 90s) stuck in his home because the care agency comes round 4 times a day and not one carer has suggested than Alan steps into the garden with his zimmer frame, or stood at the garden gate, yet before he went into hospital he could walk to the local shops by himself' Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the barriers and facilitators to <u>accessing psychological services</u> for older people with multiple conditions?	As a family member caring for someone with a number of health issues, why do the mental health issues seem to be being ignored? There is no real help or support out there unless we make a lot of fuss! Carer	None identified that applied directly to all conditions in the over 85s	Health and social care professionals and carers
Not discussed at workshop	Does <u>addressing the psychological health needs</u> of older people with multiple conditions have an <u>effect upon their physical health</u> ?	More research into how low levels of self-esteem and confidence impact patient's day to day conditions/mobility.' Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	Do early discussions of <u>Advanced Care Planning</u> improve psychological well-being in older people with multiple health conditions compared to controls with no early discussions of ACP?	Do early discussions (within two years of a diagnosis) of Advanced Care Planning improve psychological well-being in those with multiple health conditions compared to controls with no early discussions of ACP? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the most effective, cost effective and acceptable <u>medicine optimisation interventions</u> for older people living with multiple conditions?	Are there any protocols for choosing drugs for people with multiple health conditions when the most commonly prescribed drug may not be the best choice for a comorbid condition. I was thinking of a website that could suggest the best and smallest combination of drugs.' Older person 'Managing many conditions and many medication that can ultimately mix. I think there is some research going on looking at groups of drugs that can be used for more than one condition. At the moment patients are often on many medications. If for instance - I have to choose a hypertensive for a patients with heart failure, high blood pressure and renal disease? Which is the best? Many drugs overlap but when they do guidance on which to choose would be helpful. Rather than silo medicine - looking at how to treat a patient as a whole.' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	How can the <u>role of pharmacists</u> in giving advice to older people with multiple conditions be promoted?	List keeps getting longer, but having found out my local pharmacy can help with advice I am more confident, but surprised how few people realize this help is available. Older person	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	Can <u>prescription clusters</u> (i.e. medications commonly prescribed together for one particular condition / event) be a useful tool for research into polypharmacy in older people with multiple conditions?	We have traditionally used 'polypharmacy' (more than a defined number of medications often 4 per day) to define high-risk patients. But this is seems far too simplistic. I think we need more work on clusters of medications that are often prescribed for a particular condition - e.g. a cluster of 3 or 4 medications are routinely prescribed after a heart attack. We now have access to huge databases of prescribing data nationally, but having better methods to understand these prescription clusters would make analysis of polypharmacy much more nuanced and meaningful. Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What is the evidence base for the use of <u>commonly prescribed medicines</u> in older people with multiple conditions?	What is the net benefit of commonly used treatments in this population (given excluded from almost all trials)? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What <u>non-prescribed medications</u> do older people with multiple conditions buy to manage their symptoms and why?	What additional non-prescribed medications do these groups buy/ acquire to manage their symptoms and why? Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	What are the <u>cost implications of polypharmacy</u> in older people with multiple conditions?	Cost implications of polypharmacy in older people with multiple health conditions. Health and social care professionals	None identified that applied directly to all conditions in the over 85s	Health and social care professionals
Not discussed at workshop	In the context of older people with multiple conditions; what is the most effective and acceptable way to allow health professionals, older people and their carers and to access information regarding <u>drug interactions</u> ?	I have been told the medication taken for Myasthenia Gravis may in turn cause fatigue - I would like to know if there are any alternatives' Older person 'Dad is on numerous medication and I worry about how they all act together. Although he doesn't always take them all' Carer 'Information regarding polypharmacy/interactions between drugs?' Health professional	None identified that applied directly to all conditions in the over 85s	All forms of respondent
Not discussed at workshop	What are the most effective, cost effective and acceptable ways to <u>minimise medicine related harm</u> in older people with multiple conditions?	The side effects of the drugs I take are really quite frightening. It seems that some of these are even worse than the effect they are intended for. Older person	None identified that applied directly to all conditions in the over 85s	Older people and carers

Detail of workshop questions for Multiple Conditions in Later Life Priority Setting Partnership

Ranked position of question at priority setting workshop, 24 April 2018	Uncertainty	Explanatory note	Evidence checked
1	How can current health, social care and voluntary sectors in the UK be optimised to most effectively meet the needs of older people living with multiple conditions?	This question represented the most significant level of synthesis from the original narrative submissions. Questions around how to make more care more effective for older people with multiple conditions were very prevalent across all forms of respondent. For example, health professionals and carers would frequently ask about how health and social care could work more effectively together. Older people would frequently express concern about how they would afford care, or how to access care. Many different people accessed the same core issue of effectiveness of care in slightly different ways. In order to make the submissions manageable, all the varying submissions about how care could be optimised were synthesised into this very broad question.	None identified that applied directly to all conditions in the over 85s
2	What are the most effective, cost effective and acceptable ways to reduce social isolation in older people with multiple conditions?	Social isolation was a major concern from all forms respondent. The submissions varied between those that addressed what the impact of social isolation was upon older people and those wishing to address how to most effectively address social isolation. For this reason, there are two different social isolation questions that were included in the Interim Priority Setting exercise.	None identified that applied directly to all conditions in the over 85s
3	What are the most effective, cost effective and acceptable strategies for the prevention of multiple conditions in later life?	Notably, this question arose from the narratives of health and social care professionals only. They saw ill health in older age as something that could be prevented. In contrast, the narratives of older people and carers were more concerned with the current experience of being older and suffering with multiple health conditions.	None identified that applied directly to all conditions in the over 85s
4	In what ways can carers of older people with multiple conditions be supported to maintain their own physical and psychological wellbeing?	There were a lot of submissions from health professionals, carers and older people that were synthesised into this question. This question concerns the need to provide physical and emotional support to carers of older people in order for them to be able to maintain their own wellbeing. Carers frequently talked of the efficacy of looking after older people, how all-consuming it can become. They discussed feeling as though they were having to give up their own lives. Health professionals focused on how best to prevent carer burnout or recognise and intervene when burnout was progressing. Older people talked of not wanting to be a burden to the people looking after them.	None identified that applied directly to all conditions in the over 85s
5	What is the most effective, cost effective and acceptable form of exercise therapy in different health and social care settings with older people with multiple conditions? How does exercise therapy affect outcomes in this population?	This question represents the synthesis of all original submissions concerning exercise therapy. Older people tended to ask questions about the safety of exercise. Face to face work revealed that older people also often thought that exercise was for younger people and they did not view exercise as having a pertinent role in their current lives. Carers frequently asked about the safety of exercise, they also asked how they could encourage the older people they cared for into exercise and how to access to exercise programmes specifically designed for older people with multiple health conditions. Both carers and health professionals also asked whether exercise therapy in people over 80 would have any impact upon the health of the older person. However, health professionals tended to focus on what would be the most effective exercise, both in terms of the form of exercise and also the mode of delivery, and how older people could be encouraged into exercise. Some questions focussed on specific forms of exercise, i.e. yoga or Tai chi.	None identified that applied directly to all conditions in the over 85s
6	How can the recognition and management of frailty be improved in older people with multiple conditions? Would this lead to an increase in perceived quality of life?	This question came from health professionals. 'Frailty' as a medical concept / term / descriptor was not apparent in the narratives from carers or older people themselves.	None identified that applied directly to all conditions in the over 85s
7	How can Comprehensive Geriatric Assessment be optimally delivered in different patient populations experiencing multiple conditions in older age?	This question came from a single health professional. Notably it was shortlisted within the top 10 only after the health professionals within the workshop explained the purpose of the CGA and that it was designed to instigate a holistic, multi-agency system of care for the older person.	None identified that applied directly to all conditions in the over 85s
8	What are the most effective, cost effective and acceptable interventions to improve the psychological wellbeing of older people with multiple conditions?	This question came from all forms of survey respondent however it was predominantly from carers and health professionals. Carers would comment that they were worried that the person that they cared for was suffering from depression but did not know how to address this or access help. Health professionals tended to be more concerned with what was the most effective form of psychological therapy.	None identified that applied directly to all conditions in the over 85s
9	How can independent living be most effectively and acceptably enabled in older people with multiple conditions in the UK?	This question was synthesised from narratives of older people, carers and health professionals. Health professionals asked what were the most effective ways in which older people could be enabled to live in their own homes for longer and how care services could be addressed to enable this. Older people themselves discussed wanting to stay at home in their own homes for as long as they could, frequently discussing how important the familiar environment and community was to them.	None identified that applied directly to all conditions in the over 85s
10	How do older people with multiple conditions perceive and manage their risk of falls? How can fear of falling be effectively addressed?	This question emerged from the narrative of informal carers. They would often ask if there was a way that they could be better informed on what to expect, or on how to care for the older person better in general. They wondered what it was about the relationship between carer and cared for that enabled an effective caring relationship. They also mentioned specific difficulties, for example how to care for outdoors.	None identified that applied directly to all conditions in the over 85s
11	What are the most effective and acceptable ways to train and regulate carers of older people with multiple conditions? Would this improve outcomes for this population?	This question arose from health care professionals originally. They were concerned about the psychological impact of falling. Interestingly, during face to face work in interim priority setting, asking older people directly about this question garnered a rich stream of narrative about the impact that fear of falling had upon them and they frequently shortlisted this question within their top 10.	None identified that applied directly to all conditions in the over 85s
12	How do older people with multiple conditions perceive their independence? What are the most important factors in maintaining this independence?	This question came from health professionals, they were concerned with both the rates of admissions and the rates of subsequent re-admissions.	None identified that applied directly to all conditions in the over 85s
13	How can hospital admission and re-admission rates be reduced for older people with multiple conditions?	This question came from both health professionals and carers. Health professionals worded their concerns very much in the way that the question is asked. However, carers voiced their concerns in a more indirect manner. For example, they would ask whether their relative's cognitive decline could be due to the fact that they didn't see anyone or do anything all day in their care home?	None identified that applied directly to all conditions in the over 85s
14	How can cognitive decline due to lack of sensory stimulation or input be prevented in people who are older and experiencing multiple conditions?	This came from all forms of respondent. The emphasis here is on pain that is not well controlled currently, questions concerning how to address pain from specific conditions etc were not shortlisted.	None identified that applied directly to all conditions in the over 85s
15	What is the prevalence and causes of inadequately controlled pain amongst older people living with multiple conditions?	This largely came from health professionals who wondered how and when to prescribe in the face of multiple conditions. However, both older people and carers also frequently commented on the large number of medications they were taking, how infrequently they had medicine reviews, concerns over whether medicines were interacting with each other and feeling bewildered about whether they actually still needed so many medicines.	None identified that applied directly to all conditions in the over 85s
16	What are the most effective, cost effective and acceptable de-prescribing interventions for older people living with multiple conditions?	This question came from one health professional, it acknowledges the body of evidence that indicates that exercise is beneficial to older people but questions how exercise can be incorporated into routine care pathways.	None identified that applied directly to all conditions in the over 85s
17	How can exercises to reduce the prevalence of falls in older people with multiple conditions be effectively incorporated into routine care pathways?	Social isolation was a major concern from all forms respondent. The submissions varied between those that addressed what the impact of social isolation was upon older people and those wishing to address how to most effectively address social isolation. For this reason, there are two different social isolation questions that were included in the Interim Priority Setting exercise.	None identified that applied directly to all conditions in the over 85s
18	What is the impact of social isolation upon the mental and physical wellbeing of older people living with multiple conditions?	This question came from all forms of survey respondent.	None identified that applied directly to all conditions in the over 85s
19	What is the cause and impact of poor sleep on older people with multiple health conditions? What are the most effective ways to address it?	This question arose from health and social care professionals that were concerned that budget cuts had caused a decrease in the quality and quantity of health and social care provision to older people with multiple health conditions. They wondered if this was having a deleterious impact upon health outcomes of older people.	None identified that applied directly to all conditions in the over 85s
20	Is there a correlation between poor outcomes in older people with multiple conditions and inadequate levels of care received by them?	This came from health and social care professionals who were aware of the need to support older people in adhering to often complex medication regimes.	None identified that applied directly to all conditions in the over 85s
21	What are the most effective and acceptable methods to support medication adherence in older people with multiple conditions?		