

Age And Stage Podcast - What makes good care – episode 2 Transcript

SPEAKERS

Daisy McAndrew, Annabel James, Stephen Burke

Daisy McAndrew 00:04

Hello and welcome to 'Age & Stage'. This is a new podcast for everyone caring for or supporting elderly parents, relatives, friends or neighbours. Now in this episode, what makes a great care home and what are the costs?

Stephen Burke 00:18

My whole life started with my grandmother, who was the key person in bringing me up and moved through care for her before she moved into a residential care home and then care for my own mother, now looking after a grandson ourselves, who'll be that grandson who at some point will be helping provide some of my care in 20 years time. Every one will be a caregiver or will need care at some point in their lives. And it's about people waking up to that and trying to find out much more about care before they actually need it, and plan ahead.

Annabel James 00:51

That was Stephen Burke, a campaigner, policy maker, and someone really passionate about the care sector, plus he's become a friend after we met on a train on the way to the Care Show in Birmingham, Stephen started the Good Care Guide, which was the first directory of care homes and care provision. He chairs various charities and organisations, most recently, the Relatives and Residents Association, which campaigned for the rights of care home residents and their families during the pandemic. Stephen cared for his mum, who initially received care at home, and later became a care home resident until she died in October 2024, so he has very recent, very personal experience of the system. Well, it's very lovely to have Stephen Burke here with us today, including Sparky the dog as well. We really wanted to answer the question "what makes great care?". And actually, I think that somebody like Stephen is brilliantly placed to do so with all your experience in and out of various organisations.

Daisy McAndrew 01:56

And Stephen, as Annabel was saying, we want to answer the question of what makes great care, and obviously, how do you find it? And so on, and you set up the Good Care Guide?

Stephen Burke 02:07

Yes, we did that just over 10 years ago, and it was the first review site where families could go on and assess and rate and leave reviews about care homes and about home care services and other support that they used. Inevitably, a lot of providers didn't like it because families were quite honest, either

tended to leave very good reviews because they were really chuffed with the care they got, or very bad reviews because the care was appalling. That site no longer exists because we were bought out.

Daisy McAndrew 02:39

But I suppose that brings us back to a sort of more basic question about complaining about the care you're getting is a really big issue, either the care you're paying for if it's a care home, or the care you're not paying for, but you're getting, through the goodness of somebody's heart, actually complaining about that is a difficult process in itself, and we've seen this throughout the NHS also, people are very reticent to complain, because they think then the care they'll get will be even worse if you start to be a troublemaker.

Stephen Burke 03:11

That's very much the case we are, at the end of the day, we're all consumers of care, and people should comment about that in the same way that they comment about all sorts of other things that they consume. But as you say, they are very worried, particularly, I think families with an older relative perhaps in a care home. They're very worried about what might happen if they make a major complaint, and what happens to their relative who's still having to live in that same care home. It's perhaps easier to change home care providers, but even that can be fraught with difficulties.

Daisy McAndrew 03:43

Let's just go back to basics. If you're thinking, okay, I've got a relative who clearly needs some extra help, and you're at the beginning of that thought process and those practicalities, what are the options that are available to you? What should you be thinking about when you start this process?

Stephen Burke 04:00

Clearly, you and the relative need to be clear about what those needs are for the starting point, so discussing it with your relative and finding out what they're having difficulty doing. Quite often, these things are triggered by an incident of one sort or another. Someone has a fall or an illness, and as a result, that tends to exacerbate other underlying issues and conditions. But it is obviously crucial to talk with the individual involved and to find out if they think life could be made easier by getting some initial support in, and that can be anything from a kind of practical home help support so it might be help with cleaning and shopping and washing and everything else through to full home care, whether it's help with personal hygiene, toileting, washing and showering and so on, getting up in the morning, going to bed, and preparation of meals. That's one of the key things for a lot of people, is continuing to eat well.

Daisy McAndrew 05:00

And also there's a problem with the word carer in my experience, particularly in those early stages. When I mean, in this case, it was my mother, but whoever it might be, my sister and I started to say, you know, Mum, we think you need a carer. That was a red flag. And she really did not like that word. So then we just started saying, No, a bit more cleaning help. And I was watching Amandaland, the new comedy, and somebody in there referred to the carer as her mother's PA. And clearly this carer was going to be a carer. But there's a stigma with that word,

Stephen Burke 05:32

There is, and it means so many different things to different people. And it can be literally, a member of the family, or it can be someone who's paid to do that. I think you're right. Actually, just calling it a bit of help is a much better way of describing it, especially early on

Annabel James 05:49

And in terms of that bit of help, it seems to be changing an awful lot in terms of what the providers and the care companies are now offering. They're now talking much more about almost pre care, which is the non care, the sort of housekeeping, the companionship, and then there's visiting care, and then there's daycare, and then there's overnight care, and then there's living care. It's quite complicated for people. I think you know, you may understand somebody's needs a little bit, but how do you then to work out what within all of those different permutations, how do you feel about it from a consumer's perspective, how we should think about all of that?

Stephen Burke 06:27

As you say, there are so many different types of care and levels of care, but it goes back to the individual and their family. About one what are their needs? What do they really need help with? And is it eating, or is it cleaning, or is it shopping, etc, those kind of basic tasks, and we used to have an army of home helps in local communities, helping people with those kind of basics, and they don't really exist anymore. Care agencies provide much higher levels of care. There's a huge onus on the family to continue to provide supports to the individual, because home care agencies can't be there the whole time. They can be there three times a day. They can provide reassurance and so on. But you know, often families need to be around the rest of the day as well. So and we see quite a lot of people having to either give up work or move home or provide long spells living with their parents and so on, just to keep things going, it's much harder than childcare, because so much of it is unplanned. You just don't know what's going to happen and how situation is perhaps going to change, and people need more help.

Annabel James 07:38

Thank you so much for listening to this episode of Age and Stage. Please, if you could share the show with someone you know who might also benefit from listening. We want to make a difference with this series, and with your help, we really can. You can message direct from your podcast app, and we've also included a link in the show notes. Now back to the conversation.

Daisy McAndrew 08:06

Is it worth talking about money? Because we all know all of this extra help costs money, what is or can be provided by the state?

Stephen Burke 08:15

The key thing initially, everyone, regardless of their income and assets, everyone is entitled to have an assessment of their needs by the local authority. So you contact the local authority Adult Social Services, and they should provide you with an assessment. They could also provide an assessment of the needs of a family carer as well. So if you're if you're actually looking after your mum or dad, for example, then the local authority should assess your needs as well, and then the local authority can provide you with advice and information on services that are available in the local community once

they've done the assessment that should meet your needs. But most local authorities have quite tight eligibility criteria as to who will be eligible for getting a service via the local authority, and whether the council will pay for it, most people will end up paying for their own services, whether it's home care services or residential care, but that, again, is subject to a financial assessment. But if you have assets over £23,250, which has been a level that's remained for the last 15 years or so. You're not going to get any help, really, from the local council, apart from some advice and information and that free assessment.

Annabel James 09:30

Is it worth, on the basis, if you know that your parents are going to be paying for their own care, is it still worth having an assessment?

Stephen Burke 09:39

It's worth having an assessment, because that will help you as a quote, non professional, to understand, perhaps, what the needs are and how they can be met. What are the services out there that could actually enable your parent to remain relatively independent and enjoying a good quality of life and and to empower them? But you know, quite often people don't even get that advice from the local authority. But everyone is entitled to that.

Daisy McAndrew 10:04

We're talking about local authorities. And I was very struck looking at some figures this week about the demographics, the ageing populations of different areas, and how much older coastal and rural areas are, on average, than urban areas, which we understand when you think about it. But you know, those are sort of various places that are traditionally been retirement homes, where they have Bournemouth and places like that, and so, of course, I'm guessing that those local authorities have more people to look after per capita than urban areas. Does that necessarily mean that they're better or worse assets? I was wondering, does that mean that they're overrun, or does that mean that they're quite expert?

Stephen Burke 10:43

First of all, we're very geographically polarised as a country in terms of where we live. So you've hit the nail on the head in the sense that some local authorities have relatively high levels of numbers of older people. But it doesn't necessarily mean that those counties have better care services. Quite often it means a couple of things. One is that it's quite difficult to get hold of, say, home care services for people in those areas. And secondly, a lot of people often move there because they want to live by the coast, and then realise that actually that's probably the worst place to be in many respects, in terms of accessing services that they need on a more regular basis, like GP's, like hospitals as well as local shops and other support, and you have to travel miles in many of those rural areas and coastal areas to get to good health services. One of the key things about all of this debate is about planning ahead and getting people to think about what's life going to be like when I'm in my late 70s, 80s, 90s, and what can I do to ensure that I continue to do, be able to do the things I want to do as an older person? And so housing is probably the first thing everyone needs to think about. Are you living in the right place? Does it provide any support? My mum ended up living in a small village, miles away from anywhere, and as a result, she was unable to find home care services when her needs really got a lot higher,. You really need to plan these things much earlier to make sure that you're close to where facilities and services

are. You can do lots of other things, in terms of ageing well, in terms of keeping fit, keeping connected, maintaining your network of friends and so on. All of those are really important. But as I said, a lot of this is done in a crisis. So people have a fall, and then they have to make a decision, or their memory has been getting worse, and then family visit at Christmas or whatever, and realise that a lot of stuff is going wrong. So it's about getting prepared and not leaving it to the crisis, where you fall, you're in hospital, and you've got to make a decision almost there and then about, can I go home, or do I need to move into residential care, which many families are faced with.

Annabel James 12:59

On the subject of hospital discharge. You know, that seems to be a daily news item. Are there things that we as family members can do to facilitate somebody leaving hospital sooner? It seems that there seems to be such a problem, and trying to co ordinate or triage care at home or a move to a care home seems to be the stumbling block for lots of NHS Trusts. I may be incorrect. I don't know whether you had a view on that?

Stephen Burke 13:25

There are a number of things. One is obviously people should stand up for their relatives in hospital and provide the sharp elbows and all of that sort of thing that no one should be discharged from a hospital without a proper discharge plan. And relatives have got an important role to play in arguing for that, to make sure that they don't leave until services and support are put in place in the local community. And that's part of the issue at the moment, I think, is that it's actually increasingly hard for social workers and others to make arrangements because there aren't enough carers around. They're not enough home care services. But rehabilitation, the first six weeks out of hospital are the critical time. They're the time when people should hopefully regain independence back at home after fall or an operation, get fitter and then be able to live on their own. What we're seeing at the moment now is that either people are stuck in hospital because there, there isn't a support out there, they can't be provided, or they leave without proper support in place, and there's a kind of revolving door. So they they come back in because they fall ill again, or have another fall, or whatever it is that is very problematic, and we're in that kind of crisis situation. We're going from crisis to crisis, literally lurching from crisis to crisis.

Annabel James 14:49

Is your job as a family member to find the discharge manager in the hospital and facilitate those conversations?

Stephen Burke 14:56

Every hospital will have that person responsible for managing discharge with the team and making sure that they actually put a proper plan in place. And in many areas, you should be able to get up to six weeks free rehabilitation, care and support, and also getting the equipment you need at home as well. You might need a wheelchair, or you might need a walker, or you might need the stick or handrails, or whatever it is to support you at home as well.

Daisy McAndrew 15:24

And rehabilitation care, are we talking about Residential Rehabilitation, or are we talking about, you know, home visits with a physio. What do you mean by rehabilitation care?

Stephen Burke 15:35

It will depend on your needs. Some people have rehab in in the residential care setting or some kind of respite care setting, and others will be in their own home, but with quite intensive support.

Annabel James 15:48

Thank you so much for listening to Age and Stage from Age Space. If you'd like to find out more about how we can help, then go straight to agespace.org. We've got loads of resources, information and guidance on all aspects of elderly care, from different care options to funding, the legal things, as well as some of the practicalities of the day to day. Now back to the conversation,

Daisy McAndrew 16:15

Going back to care homes, residential care, before we even talk about what's out there and how much it costs and how you choose. How do you know that the time is right? And how common is it? Because my assumption is very common, that the family thinks it's right, but the individual is still resistant.

Stephen Burke 16:33

This is one of the biggest issues for every family. It's heartbreaking and leaves you feeling guilty, whereas it should actually reassure you, because you know that your family member is being well looked after, is safe. I mean, the best homes are places where people actually thrive. So they really are empowering. They do provide new relationships for people, they provide activities, they provide security, which is quite important, I think, in this day and age, I think the key thing is spending time at a home you're thinking about choosing and spending quite a long time there. We tend to spend much more time choosing a car or a new house than we do in finding a care home, partially because it's difficult, but also, you know, we're not quite sure what to ask, but there's no reason why you shouldn't go to a home. Have a meal at the home, see what the activities are, meet other residents, talk to them, as well as to the manager. I mean, obviously the manager will show you around, but you need to speak to as many different people and get a view, not just of how nice it looks, because a lot of homes look great, but also what's going on there and what the people who live there think of the home. And unfortunately, we've seen from the Care Quality Commission recently, even their chief inspector doesn't think their reports are worth very much. Sadly, they are the main thing that a lot of people go on, because people still rely on them in the same way that people rely on Ofsted reports about schools as well. But the other thing is about communication. I mean, this is ultimately where things go wrong in care is about poor communication. And it's about communication between the individual and the family, with those who are providing care, and the managers. And that's normally where there's a problem arises. So you just got to keep those channels really open. Keep talking with the with the staff again. Ultimately, the quality of care is dependent on the staff. You need to find out when you visit how long they've been working there, what their experience is, and so ideally, you'll find a care home where there is a very low turnover of staff, for example, so there's much more consistency of care and quality. The other thing is, in terms of choosing a care home, there is a number of care homes do suggest that perhaps you might want to spend a couple of weeks doing respite care, for example, in a care home to see what it's like to give your relative that experience of that particular home, just to, you know, put their toe in the water really.

Daisy McAndrew 19:04

What should you expect to pay? I'm sure that's like, how long is a piece of string? But what are we talking about here? For people that haven't even looked yet?

Annabel James 19:13

What happens when the money does run out. So local authorities are beholden to provide care, and if you've if you're somebody's mum has been in a lovely, expensive care home, what happens at that point if the local authority steps in?

Stephen Burke 19:13

Well, you'll be lucky to get a care home now under £1000 a week. Currently, councils don't even pay that much. There are a lot of care homes that charge between £1000 and £2000, but there are quite a few high range top ends of care homes which charge well over £2000 a week. This is again, another reason for planning ahead. You either pay for it out of your existing resources, whether it's selling your home, or from your own savings and pension and everything else, or there are some financial tools to enable you to buy what's called an immediate needs annuity, which is basically, it's a bit of a gamble, but if you think someone's going to be living for four years at 100,000 pounds a year, it's certainly worth 10. Taking immediate needs annuity out to cover those costs, you need a financial advisor, basically. But people just don't know about these things, because you never had to use them. And most people encounter with the care system is for the very first time, whether it's their own parents or their grandparents. If your own personal money's run out and you've sold the house and everything else, so you've got no assets, basically, the local authority will have to pay for your care. The question is, where will they pay for your care? There'd be one or two solutions, really. One is they might expect you to move or they might say, well, you can stay here, but you'll have to top up what we pay the carehome, and that might come from the individual or it might come from the family.

Daisy McAndrew 21:02

We can hear your chocolate lab barking, and my Sparky dog is behind me, which is making me think about the elderly and their pets and care homes, because the few times I've looked at some of these care homes, certainly none of the ones near me will accept dogs, and that would be an absolute deal breaker for my mother, there is no way she would leave her beloved Huey behind.

Stephen Burke 21:27

This is one of the things you need to check out when you're searching for care homes, is whether or not they'll allow you to take your pet with you. Some people take cats into care homes. Some people take dogs into care homes, but they're relatively few and far between. Inevitably, though, care homes also recognise the value of pets. So quite often there are therapy dogs that go into care homes and people take the miniature donkeys I've seen in care homes, horses taken around, you, name it. So there is something about having animals around which is therapeutic and beneficial, but some care homes are just very, very nervous about having pets there at all.

Daisy McAndrew 22:06

You're obviously a real expert. You've said, spend as much time as you can visiting, you know, really embed yourself, get to talk to people, try to scratch on the surface. Are there any warning signals that you would want people to be aware of? Of what is a second rate care home?

Stephen Burke 22:23

I mentioned the issues around staffing and turnover of staffing. For example, what you don't want is high turnover of staff and inconsistent staffing.

Daisy McAndrew 22:31

Presumably staff ratio is important as well. You want somewhere to have enough members of staff.

Stephen Burke 22:37

You want somewhere to have enough people enough staff. But unlike childcare, where in the nursery you have to have a certain number of staff for every age group, there isn't a legal ratio in a care home. So you need care homes that seem to have a good level of staffing, and that's for you to assess. The other things, I would listen to what other people are saying about the care home, so speak to other family members of other residents. Speak to the residents if you can, speak to the staff. Quite often, staff are fairly open when they actually start talking to you about situation, and do the Googling, see if anything's happened. You just need to use as many different sources of intelligence, and there are quite a few review sites now. My only caveat would be that a lot of them are PR jobs. They're not really review sites.

Annabel James 23:27

True reviews. Would you say this sort of same applies to home care and home care agencies in terms of, I mean, there's obviously this big debate about staffing levels and where carers come from, dare I say it, and everybody's squeezed. Is it a similar way with home care agencies, how to judge them?

Stephen Burke 23:45

Yes, I think it's harder with home carers, because you quite often have a higher turnover of staff. You don't know who you're going to get allocated to work for you and whether they'll be with the agency in three weeks, let alone three months or three years time. So there's that. There's also, inevitably, with home care, you're going to have people on different shifts anyway, so you are going to have to have quite a few different people coming into the home. And it's about how you build up the continuity and the consistency relationship between the person who needs the care and the carers over time, that's absolutely critical, as well as monitoring what they're actually doing. Increasingly, home care agencies in particular, are using very good technology to keep in touch with families. You know, they have to communicate about your mum wasn't getting up this morning. We're not quite sure, you know, etc, or we noticed something was missing today, or whatever, that technology does provide some kind of reassurance. One, that there has been a visit, but two, also that there are particular issues to be followed up on.

Daisy McAndrew 24:50

And actually, Annabel, you said, dare I say it, and you were talking about different nationalities, or where these carers have come from, but I think we should dare say it. Because it is actually about

communication and language skills. And I've found from my own experience, when we've had people going in to help mum out, like anybody in her mid 80s, her hearing isn't as good as it was, and she finds foreign accents hard to understand, so you've immediately got a problem there of communication, and I've also was very surprised that they didn't automatically just talk louder, knowing that this, you know. So I found that not only would they have quite an incomprehensible or difficult to understand accent, but they also spoke quite softly. And so there was a constant, you know, what did you say? What did you say? And then a frustration, and then I don't want this person in my house because I can't understand what they're saying. And it's not xenophobia or bigotry, it's just frustration and practicality. And I think it's perfectly okay to say that's not ideal.

Stephen Burke 25:51

As you said, it's all about communication. Communication is the root of poor care, unfortunately, often, so we need to sort out it can also cause more confusion when someone's already confused and maybe have dementia and so on. And I think it's crucial to make sure that the agencies know about the needs of the individual, whether it's hearing impairment or anything else.

Annabel James 26:16

And presumably they should do a care assessment of their own before they start working with you. Is that something? Yeah, and can you demand continuity? I mean, it seems crazy to have different carers popping in and out all week. I guess that's just the way of the world at the moment. Is it?

Stephen Burke 26:34

It's very difficult to find that continuity. This is why care services sometimes are best provided very locally. So it may be someone living in the same street or the same village who is able to come in literally three times a day because they're around about in the local community, whereas their agency wouldn't pay them to drive, say, 10 to 15 miles to do that three times a day. But if someone is living close by, then for most people, it could be quite possible to do that kind of regular visit. And this is an issue for families as well. Are they registered regulated carers, or are they kind of part of that broader range of service and support which is unregulated? And there are lots of those up out there.

Daisy McAndrew 27:22

Stephen, any final sort of top tips that you would give people embarking on this very, very difficult journey?

Stephen Burke 27:31

I think the key thing is just to ask other people who've already been on that journey, use the advice and information services that are available, either through the local authority or through organisations like Age UK, use websites like Age Space, which is a key source of information. But there's nothing like speaking to other families that have gone through similar situations. And there are plenty of us around now.

Daisy McAndrew 27:56

I wonder whether Richard Osman has done the care home industry any favours. Obviously, all his his best selling books, the Thursday Murder Club, are all set in in sheltered accommodation or care home accommodation. And there's a new Ted Danson sitcom which is based in an American care home, making them seem rather more vibrant, maybe, than they used to seem.

Stephen Burke 28:18

His books are really set in retirement communities, so not quite the care homes that people normally think of, but what older people don't have are enough housing options beyond the house or the flat that they're currently living in, unlike the US, Australia and so on, where they've got many different types of options for older people. I mean, one of the things is where a lot of the retirement communities have traditionally been built on the periphery of towns and villages and so on, whereas actually they need to be in right in the heart of those communities, where people can use local facilities, but they can also mix with people of all generations, inside and outside of the community. So yeah.

Daisy McAndrew 28:59

Stephen, thank you so much. We've taken up much too much of your time, but we're so grateful. There was an awful lot of ground to cover, and I think we have covered a lot of it.

Stephen Burke 29:07

Thank you. Good luck to you. Keep going with Age Space.

Annabel James 29:10

Thank you. I will

Daisy McAndrew 29:13

Annabel, Stephen was really interesting, and so clearly knows his stuff when it comes to care homes. And, my goodness, there's a lot of stuff to know I know.

Annabel James 29:23

And I think what's really interesting about him as well is he comes also at it from a really personal view. So you get that lovely mix of being really knowing his stuff professionally, but also the real impact on families of having to make these really difficult decisions. And it makes so much sense to spend time in a care home before you pay for somebody to be there. Of course, it makes sense.

Daisy McAndrew 29:44

We're talking of paying 1000 pounds a week, and he was implying minimum and your experience, so that you know that that's probably quite a cheap care home. That's £52,000 a year

Annabel James 29:55

Net as well, isn't it? So you know, that's an awful lot of money. And I think for something like specialist dementia care in a care home is going to be £1600, £2000 a week. So, yeah, it's not for the faint hearted at all. So it's got to be the right decision, if you can possibly. I mean, of course, the nightmare scenario is, is there a bed available in the one you want? Is it close? You know, there's all those moving parts to it as well.

Daisy McAndrew 30:20

You just mentioned, is it close enough? Because, of course, people are very worried and scared about going into a care home, and the one thing they very often want is reassurance they're going to get a lot of visitors and a lot of visits from their family, but if it's a two hour round trip, so do you go for somewhere that you don't like as much, but is more convenient because you think you can visit more often, or do you go for the creme de la creme, which might be further away and probably would be scarier for your relative or parent who's moving in?

Annabel James 30:51

Totally and the awful other piece of that is, you know, if your mum wants to move into a care home near her, to be near her friends, as her friends die off, she's going to have fewer visitors. Any you know, it's, it's all, yeah, awful, actually. So trying to make those good decisions is really, I thought he was so practical, you know, spend more time there before you go. Really interesting about staff turnover. I thought particularly people should also look at how many staff are on at night. And there's a difference also between, you know, there's a residential care home and there's nursing homes. Residential care homes do not have 24/7, nursing care, so they will bring doctors in, whereas a nursing home has to have nursing care on site. So again, it's all you know, you've got to sort of understand what you're looking for and understand what you need.

Daisy McAndrew 31:43

And then you were making the point when you're £23,000, that's the means test that you get for self funding. But as you whittle away any savings or money you might release from selling the family home, as that whittles away, what happens then, does local authorities step in and make your your relative move to a home that they're not familiar with?

Annabel James 32:04

Definitely. I think so the notion of topping up is one area of one thing. I think you can also start, if you're lucky, as well, as part of that is kind of renegotiate the room. So you know, your mum might be in a really lovely room on the ground floor with doors onto a garden, and actually there may be a smaller room at the back. Dare I say it isn't so nice. There's always awful decisions that people possibly have to make, which is kind of goes back to what we say every week, I think, which is planning ahead!

Daisy McAndrew 32:33

And having those difficult conversations, which, of course, is partly what we're here to do, to have those difficult conversations and give some tips on how to approach those subjects. And of course, as we've been saying, lots more to come on this issue, and we do want to hear from people their own experiences. Maybe you've got an amazing top tip that you want to let us know of how you figured out that the care home you were visiting was not a nice one or was fantastic, because when the manager gives you the guided tour, it's going to be rose tinted glasses

Annabel James 33:06

Totally, absolutely, because they want your £1,600 pounds a week.

Daisy McAndrew 33:10

Thank you very much.

Annabel James 33:13

Well, thank you very much, Daisy. It's been lovely,

Daisy McAndrew 33:15

Right! Lots more to discuss very soon. Thank you so much for listening to this episode of Age and Stage. You can find out more about Stephen and his work at hallmarkfoundation.org.uk,

Annabel James 33:30

And we'd really welcome any questions you have on anything you've heard and suggestions for future episodes. You can email ageandstage@agespace.org or follow the links in the show notes to this episode. In the next episode, we'll be talking to Jane Finney from the Society of Later Life Advisors on all things funding later-life and elderly care.

Daisy McAndrew 33:52

So please, if you found this show useful, there's plenty of advice and guidance coming in future programmes. Click follow or subscribe in your podcast app to make sure you don't miss them, and in these early days, it would really help us out, we'd love it if you could leave a rating or a review for the show with your podcast platform. And of course, do spread the word. Tell friends or anyone you know who you think might benefit from hearing Age and Stage

Annabel James 34:18

See you next time