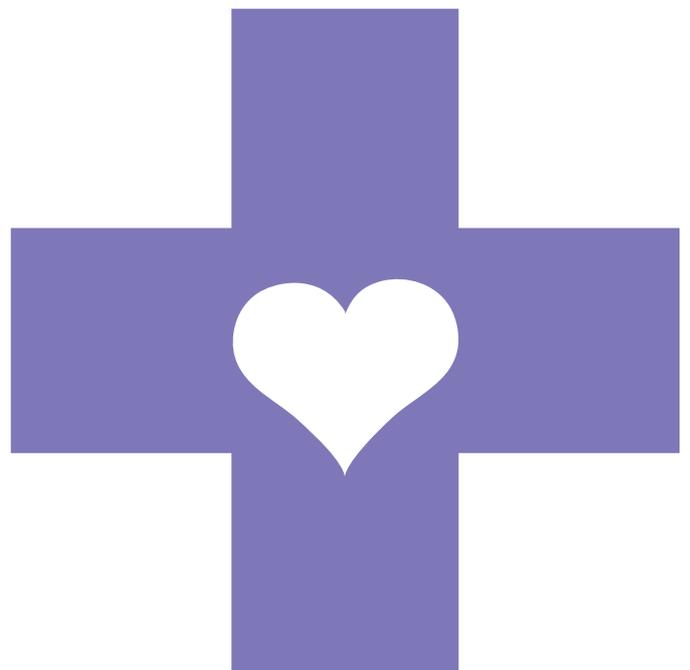# Design for Care

Transforming care for
the 21st century

"

Design for Care is developing new solutions for care in the 21st century, focusing on practical, 'can-do' results, which can be shared widely.

By working with partners in the public, private and voluntary sectors, Design for Care will harness the UK's formidable design talent to innovate and make lives better.

I cannot imagine a more worthwhile application of design to the challenges we face as a society"
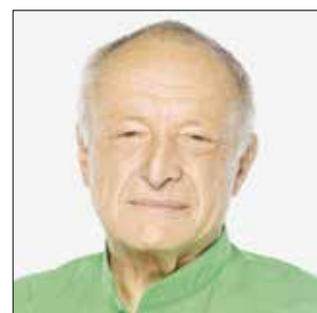
Lord Rogers of Riverside

Introduction

Design Council is launching a major design programme to improve the quality of care. Over the next three to five years Design for Care will apply world-renowned design talent in a drive to invent and develop new systems, processes, products and services to increase wellbeing, to help reduce unnecessary hospital admissions and to help people stay in their own homes.

We wish to create a care system that is more personalised, more connected and more preventative.

To meet this demand we will need to broaden the notion of care from eligibility measured services to the responsibility of a community. It's a challenge of wider collaboration between individuals and carers, family and friends, neighbours and volunteers and professionals.

This more radical approach requires real imagination. We invite you to be a partner in this important mission.

The challenge
The fact that the population is living longer is a good thing. However with increased age comes infirmity.
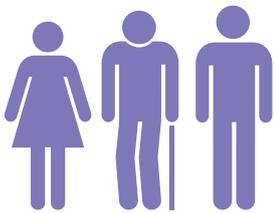
In the UK, by 2026, the number of those older than 75 is expected to have risen from 4.2m to 6.3m.

Recent research indicates that 2m people aged over 65 will lack informal care from adult relatives by 2030.

4 major workstreams, using design, will deliver significant value

1 Growing informal care
How do we increase the care contribution of family, friends and the wider community?

A better integrated health and social care system will be unlikely to possess all of the public resources needed to meet demand. We have to think beyond integration and look to a more collaborative approach – working with families, friends and the wider community to build sustained relationships.

In this workstream, we will generate new ideas via open invitation challenges. We will explore developments in digital technology and support the growth of existing products and services for better care. We will work with the health and social care system to shape change and drive adoption.

2 Transforming our homes
How do we make homes that better support wellbeing?

As our needs change, we have to adapt our living spaces, accommodating our changing physical and cognitive abilities. But how exactly do we do that when there is so little available in the mass market and so little to which to aspire?

In this workstream we will start a national online challenge to draw out what people hope for and what they can imagine. We will engage developers and manufacturers to recognise the latent demand for better solutions. We will work with housing providers and built environment experts to generate better alternatives and greater choice of housing types.

"The challenge facing the NHS is to become truly patient-centred, where patients participate in designing services and are able to exercise choice as customers, whilst seeking always to ensure that no part of a community gets left behind"

NHS England, *Everyone Counts: Planning for patients 2014/15 to 2018/19* **(2013)**

3 Enabling better choices
How can we support people to make effective choices for their own care needs or those of a loved one?

The prospect of personal care budgets could transform care services. We need to support individuals and their carers to plan ahead.

In this workstream, we will develop new ways to help people make effective choices when they have a personal or family crisis. Whether using consumer trusted brands, enabling peer to peer advice or using data analysis, we will combine design and behavioural science techniques to research, develop and pilot solutions.
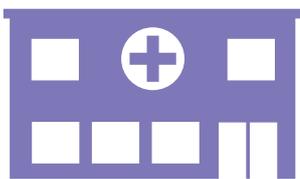
4 Places and spaces for care
What are the best environments in which to deliver collaborative care?

The quality of the built environment has a profound influence on how quickly we recover. The dominant settings for care are GP surgery, hospital, care home, hospice and the domestic home.

In this workstream we will look beyond these familiar archetypes to explore the most appropriate spaces for better collaboration in care and better outcomes for people and their families. We will explore the idea of low-cost, permanent or temporary community hubs that could be rolled out nationally.

Design Council

Design Council is an independent charity and the UK's leading authority on design.

For 70 years, our work has placed design at the heart of creating value by stimulating innovation in business and public services, improving our built environment and tackling complex social issues.

Whether by enabling economic growth, transforming public services, strengthening communities or empowering individuals, we champion great design to improve lives. We provide the means for the private, public and third sectors to imagine new possibilities and put them into practice.

Design Council has a wealth of experience in designing for health and wellbeing. We have supported individuals in creating and launching products and services, such as Dementia Dog, Ode and Casserole Club through running open innovation challenges such as Independence Matters and Living Well with Dementia.

Our work in the built environment, through our Cabe team, has helped shape and inform projects including: Basingstoke Cancer Care Centre, The Royal Liverpool Hospital, Abingdon Malthouse Surgery and Kentish Town Health Centre.

Image © Tim Soar/Allford Hall Monaghan Morris

Images (top to bottom)
1. Ode
2. Dementia Dog
3. Casserole Club
4. Kentish Town Health Centre, London

Join us

John Mathers
CEO, Design Council

"After 2014/15 the NHS across England will have to achieve unprecedented sustained increases in productivity or the supply of funding will have to increase in real terms."

Nuffield Trust, *A Decade of Austerity?* **(2014)**

There are three reasons why Design Council wishes to launch Design for Care now, against the backdrop of the Care Act 2014. The Act empowers collaboration, promotes community participation and confers greater choice.

First, the severe demographic trend described in this prospectus is inescapable; second, the squeeze on UK public finances is unavoidable, and third, the time lag from new ideas and their adoption by the public is inevitable.

New products, services and systems of care need to be stimulated now, if people are to enjoy greater independence and better care in the years to come.

To make this happen, Design Council is seeking funds for Design for Care from trusts, foundations, public and private funds and third sector organisations. We anticipate the programme could last three to five years. We aim to create a lasting legacy.

Our planned timescales are as follows:

June – October 2014
Discussions with prospective partners

14 October 2014
Launch of Design for Care in Parliament

We look forward to continuing the discussions about your support for Design for Care, which we believe has the potential to make a great difference to all of our lives.

Please contact me:
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> *When the NHS was created in 1948, life expectancy for adults was low by today's standards. Nowadays, centenarians are common. Yet while we celebrate this remarkable achievement, we cannot be complacent.*
>
> *For many people, later life is far less healthy and happy than it ought to be. I have seen, first hand, the power of design to imagine and deliver better solutions for health and wellbeing. Design for Care is a much-needed programme and I am delighted to support it."*

**Baroness Greengross
of Notting Hill**