

REPORT TO: Cabinet Member – Communities
DATE: 24th February 2010
SUBJECT: Strategy for Older Citizens in Sefton.
WARDS AFFECTED: All
REPORT OF: Charlie Barker, Director of Health & Social Care
Susan Holden, Equalities Director
CONTACT OFFICER: Sue Holden 0151 934 4722
EXEMPT/CONFIDENTIAL: No

PURPOSE/SUMMARY:

The purpose of the report is to present the Cabinet Member with a copy of the draft Strategy for Older Citizens.

REASON WHY DECISION REQUIRED:

To comment on and agree the current draft Strategy for Older Citizens in Sefton.

RECOMMENDATION(S):

The Cabinet Member for Communities is recommended to:-

- i) Endorse the content of the draft Strategy for Older Citizens in Sefton.

KEY DECISION: No

FORWARD PLAN: No

IMPLEMENTATION DATE: Immediately following the expiry of the call-in period for this report

ALTERNATIVE OPTIONS

There are no alternative options.

IMPLICATIONS:

Budget/Policy Framework: N/a

Financial:-

There are no immediate financial implications arising from this report.

<u>CAPITAL EXPENDITURE</u>	2006/ 2007 £	2007/ 2008 £	2008/ 2009 £	2009/ 2010 £
Gross Increase in Capital expenditure				
Funded by:				
Sefton Capital Resources				
Specific Capital Resources				
<u>REVENUE IMPLICATIONS</u>				
Gross Increase in Revenue Expenditure				
Funded by:				
Sefton funded Resources				
Funded from External Resources				
Does the External Funding have an expiry date? Y/N	When?			
How will the service be funded post expiry?				

Legal: Not applicable

Risk Assessment: Not applicable

Asset Management: Not applicable

CONSULTATION UNDERTAKEN/VIEWS:

The Strategy has been strongly grounded in the needs of Sefton's older citizens as identified through the Joint Strategic Needs Assessment (JSNA). The Strategy has been informed by Sefton's older citizens who have also contributed to its content through the Older People's Forums in the North and South of the Borough.

CORPORATE OBJECTIVE MONITORING:

<u>Corporate Objective</u>		<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community	✓		
2	Creating Safe Communities	✓		
3	Jobs and Prosperity	✓		
4	Improving Health and Well-Being	✓		
5	Environmental Sustainability	✓		
6	Creating Inclusive Communities	✓		
7	Improving the Quality of Council Services and Strengthening local Democracy	✓		
8	Children and Young People	✓		

LIST OF BACKGROUND PAPERS RELIED UPON IN THE PREPARATION OF THIS REPORT

None

1. Introduction

- 1.1 The Sefton Partnership for Older Citizens (SPOC) has prepared a draft Strategy for Older Citizens in Sefton (attached as Appendix A). This has been approved formally by SPOC and by the Healthy Communities and Older People Thematic Group of the Sefton Borough Partnership.
- 1.2 The Strategy has been strongly grounded in the needs of Sefton's older citizens as identified through the Joint Strategic Needs Assessment (JSNA). The Strategy has been informed by Sefton's older citizens who are well represented on SPOC, and who have also contributed to its content through the Older People's Forums in the North and South of the Borough.
- 1.3 The core evidence base that has been produced by the Performance and Partnerships Team of the Council, the findings of the Public Health Annual Report, and the outcome of the Audit Commission's Area Assessment all indicate the need to prioritise older people as a cross-cutting theme at both a borough and area level.

2. Developments

- 2.1 Now that the Strategy has reached its final draft stage a detailed Action Plan is being prepared. This will incorporate key issues included within the Strategy, the Equality Impact Assessment and the outcomes from the inspection of Adult Services. The Action Plan will be specific, will focus on actions which can be delivered in the next two years, and it will highlight the organisation that is accountable for the delivery of each action.
- 2.2 SPOC is currently going through a refresh and will assist in focussing its attention on the effective delivery of the Strategy and the Action Plan. The two co-chairs have stepped down; an Executive Chair (Roger Pontefract) has been appointed; and the terms of reference are under review. It will continue to enshrine the participation of older citizens as at least 50% of its membership.
- 2.3 SPOC is rooted in the geographically based Older People's Forums in the North and South of the Borough which will continue to provide advice as the Strategy and Action Plan evolve. Work is underway to establish a third forum to cover the central part of Sefton and to develop a wider engagement process with over 200 voluntary, community and faith groups which engage with or support older people in Sefton.

3. Next Steps

- 3.1 The Strategy will be submitted to the Sefton Borough Partnership for its approval on 24th February 2010.
- 3.2 It will then be published and widely disseminated. Every effort will be made to raise the profile of the needs of Sefton's older citizens, using all available avenues.

4. Recommendations

- 4.1 The Cabinet Member for Communities is recommended to:-
 - i) Endorse the content of the draft Strategy.

SEFTON STRATEGY FOR OLDER CITIZENS

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“It would be so lovely to be able to get an appointment at a time that I can also get public transport to get there”

SEFTON STRATEGY FOR OLDER CITIZENS

Introduction

We are all getting older, that's for certain, and we live in an ageing society. A positive outlook and strong support networks are key to fully enjoying later life. Older people are well represented on the Sefton Partnership for Older Citizens (SPOC) and this is SPOC's Strategy for strengthening the support that SPOC's partners are able to provide within the wider community so that older people can all live their lives in the manner that they would wish.

This Strategy consolidates the learning of recent years that SPOC has gained from extensive community engagement work for the Joint Strategic Needs Assessment for Health and Social Care, the World Class Commissioning Plan, the Housing Strategy for Sefton and the ongoing and invaluable work of Sefton Pensioners Advocacy Centre. SPOC has a clearer picture of the needs, desires and hopes of our fellow older citizens of Sefton. This Strategy combines this view with the latest statutory frameworks and guidance to set out outcomes based direction and actions for Sefton Partnership.¹

Sefton Partnership for Older Citizens : Building a Society for all Ages

Sefton's older population are represented on Sefton Partnership for Older Citizens (SPOC) which is a strategic multi-agency partnership set up with the express intention of bringing support for older people together and providing older people with the opportunity to be part of the planning of services.

This Sefton Older People's Partnership Strategy challenges the stereotypes of older people and sets out how SPOC is responding to the opportunities and challenges of an ageing population.²

¹ Green Paper: Shaping the future of Care Together, Building Britain's Future, June 2009
Government Strategy: Building a Society for All Ages, July 2009
IDeA: Getting on well Together, Councils working with Older People, April 2009

² Government Strategy: Building a Society for All Ages, July 2009

The Strategy aims to:

- set a clear direction for our communities and strives to ensure the needs of people aged 50 and over are met;
- provide a framework of common outcomes which organisations and public services should use to shape their own plans to meet the changing needs of an ageing society;
- Identify the diverse population of older people in Sefton and strives to ensure that organisational and service responses are sensitive to their specific needs;
- bring a shared focus to the work of a wide range of agencies and partners, and strengthen the case for funding from national and regional programmes; and
- involve older people as active and equal partners in the process

There is no road map for a world which is changing so rapidly, where older people outnumber children, and where most older people remain healthy and active long after they have finished work. SPOC will need to adapt its responses to this changing world as it goes along. More than anything, therefore, this Strategy provides an opportunity for older people and all the partner organisations to work together to shape the future through a shared vision and set of values.³

“The fact that we are living longer is cause for celebration – a tribute to human progress, to the success of the welfare state and to the genius of medical science. But we also need to make changes to ensure that we have choices about how we want to live as we grow older – choices about how much to work, how to access the healthcare that will keep us fit for longer, and how best to stay engaged with our communities.”

Prime Minister Gordon Brown “Building a Society for All Ages strategy, 2009

SPOC will monitor and assess action plans to support the Strategy and the changes it seeks to bring about.

Throughout the Strategy there needs to be a commitment to deliver the priorities identified to everyone, whatever their age, gender, race, disability, sexuality, religion and or belief. This is underlined by legal duties to promote equality and diversity for all. The chapter is organised around the themes, outcomes, aims and priorities identified by older people as SPOC were preparing the Strategy.

³ SPOC Document: Feedback from Older People’s Open Space Event
SPOC Document: Older People’s Partnership Board, March 2006

60 is the new 40: how do SPOC define “older people” and “services”?

How do we know when we are “older people”? For the purposes of this Strategy SPOC are defining “older people” as being from the age of 50 onwards⁴. It is so important at this point to note that for most of us that fall within the “older people” category we don’t feel *old*.

Most people don’t need the specialist services that are provided by Health and Social Care so when the document refers to “services” in this Strategy we don’t just mean health or social services. We are referring to whole range of services that contribute to our wellbeing in the more holistic sense of the word: transport, housing, leisure for example. Sefton Partnership for Older Citizens recognises the need to look at the needs and wants of all older people and not just those in need of specialised services. SPOC will work together towards a time and space in which all older citizens are supported to live their life in a manner that they choose.

We are living in a society now where people are living well over 100 years more and more often. SPOC needs to be preparing now for a future where, if people retire at 60 or 65, they may be only just past the half way point in life and will need to be able to afford to live in a comfortable and happy manner.⁵

Older people are a diverse group so the most important thing about this Strategy is that it guides and informs the partner agencies within Sefton Partnership for Older Citizens so that services are delivered appropriately for each stage in life. SPOC needs to consider the differences between those that are 50 and over who are still working, those that are retired but fit, well and active and those of us that are frail and require the support of health and social care services.

“We all rightly expect to lead our lives the way we want to, enjoying our homes, work, family life and leisure and, if we need care and support to help us to do this, we expect to have choice over the care we receive and that it will be of a high quality.”

Shaping the Future of Care Together, Green Paper 2009

“Old people are not ill people”

⁴ In line with Government guidelines, Audit Commission

⁵ Government Strategy: Building a Society for All Ages, July 2009

Green Paper: Shaping the Future of Care Together, 2009

IDeA: Getting on SPOCII Together, Councils working with Older People, April 2009

SPOC Membership

SPOC is made up of a mixture of people: representatives of the older population of Sefton and Directors and Senior Managers from the key public and community, voluntary and faith sector agencies in Sefton that deliver services to older people. The aim of this cross section of people is ensure that when services are being planned, developed and delivered for older people there is a co-ordinating force that ensures that the needs and wishes of older people are taken into account.

Community Engagement

Sefton is working hard to improve not only the consultation and engagement methods but also the way that information gathered in consultation is used and the results fed back to the people that informed it. Many of the services that are provided for older people are governed by law and government guidance and yet SPOC finds that older people in general know this and are happy with that. The key points that have come up strongly in recent consultation are:-

- Communications – between partners and with the community
- Information, advice and support – knowing where to go for help
- Social networks, activities and learning
- Financial support
- Wellbeing as a holistic concept rather than just “Health”

The methods used to undertake this engagement and consultation have really centred on older people themselves. SPOC partners have brought people together for tea and cake and we have talked (albeit in a structured and facilitated way) about what matters to older people in general, then in smaller groups we examined key issues more closely and then this was all supplemented with one to one interviews with people with complex needs. This has been supported by questionnaires that were sent to a cross section of the Sefton community which provide us with a wide ranging response.

The most important part of the consultation for everyone is the ability to go back to the same groups and report progress and in the past 3 years SPOC has been able to do that to great effect. Most recently, to look at this Strategy and to mark the International Older Person’s Day and to raise awareness of the Strategy and to get feedback from Sefton’s older citizens, SPOC held two community debates entitled “**Age of Celebration**”.

The public debates took place in Southport and Bootle and a panel of SPOC members heard representation from the older citizens of Sefton as they offered arguments for and against the motion that *age is something to celebrate*.

The events were considered a success by those that attended and the overall feeling of the days was that age is indeed something to be celebrated and many positive and inspiring stories were shared. At the same time participants were encouraged to share the barriers they experience to enjoying their old age and these comments have been captured and are included throughout this Strategy. The full report from these events is appendix 1 of the Strategy.

Objectives of the Strategy

The Strategy will strive to:-

1. Strengthen the financial security of our older people
2. Improve customer service quality and consistency
3. Join up health and wellbeing services
4. Improve a sense of personal safety and social connection
5. Improve communications, participation and engagement
6. Raise the profile of older people's contribution and value

Outcomes

1. Older people have financial security.
2. Older people experience consistently high quality services.
3. Health and wellbeing services to older people are joined up and effective.
4. Older people are personally safe and socially connected.
5. Older people are well informed and are able to make a positive contribution.
6. All agencies genuinely value the contribution older people make

Action Planning: the way forward

An Action Plan emerging from this Strategy will involve all the key partners and will endeavour to bring about the outcomes of this Strategy in a consistent and focussed manner. The timetable will be as fast and as practicable as possible for this work. Sefton Partnership for Older Citizens sits beneath the Sefton Borough Partnership and is able to influence the decision makers of the key agencies that deliver public services in Sefton. There are three main areas of focus that come out of the development of this Strategy that SPOC will seek to address:-

- Improved Communications;
- Raise Standards; and
- Strengthen Networks and Communications.

A discussion paper on these themes is found at Appendix 2 of this Strategy.

*“We know someone who lived to nearly 100 and she had a really lovely life;
other people should be able to have that too”*

Breakdown of Strategy by Outcome

Outcome 1 Older People have Financial Security

Sefton's older people have financial security and support, education and employment

Sefton Partnership for Older Citizens considers financial security and support to be a very high priority for Sefton. The people whom SPOC has consulted have told us:-

"We would like to be financially supported to live as independently as possible"⁶

So this Strategy aims to strengthen the financial security of our older people so that:-

- Older people will have the opportunity to work if they want⁷
- Older people will receive the information, advice and support they need around finances and to maximise their income

Context

Financial and material security is central to wellbeing and quality of life in older age. Key elements of this are:-

- Having a suitable income
- Having the opportunity to work flexibly between work and retirement
- Getting the best information, advice and support around finances

The links between poverty and good health, life expectancy and wellbeing are now widely recognised. There are wide variations in terms of wealth and income across Sefton. There are also major issues in terms of maintaining a large enough workforce to meet the Borough's future economic needs.

Changes in the population will demand a radical change in the way SPOC thinks about older people, from viewing them as a burden on society to valuing them as an asset that is central to the future prosperity and wellbeing of the borough.

⁶ Joint Strategic Needs Assessment for Health and Social Care

⁷ Government Strategy: Building a society for all ages, June 2009

AIM Older people will have an adequate income

Older people involved in developing this Strategy and taking part in other research identified three priorities for improving their financial security:-

- improved financial planning for older age;
- increasing older people's incomes; and
- reducing costs for older people.

To achieve this, one of the Local Area Agreement outcomes is to reduce financial poverty amongst Sefton's older people. This will be measured by the number of new awards of attendance allowance, disability allowance, pension credit, housing benefit, Council Tax benefit and carer's allowance to people over 65, as a result of help provided by Sefton Council.

AIM Older people will have the opportunity to work if they want

Our consultation events and other research with older people identified several priority issues relating to employment.

These are:-

- challenging stereotypes and promoting positive images of older people to create more employment opportunities for them;
- valuing, using and promoting the skills and experience of older people to employers and the wider community;
- creating more flexible and phased retirement opportunities, including part-time work and job-sharing;
- providing training opportunities so that older people can re-train;
- offering support to older people in setting up new businesses; and
- increasing opportunities and support for older people to continue to use their life skills through volunteering.

AIM Older people get the best information, advice and support around finances

Outcome 1 - Actions

Sefton Partnership for Older Citizens will facilitate the following actions by its member agencies:-

1. Establish a single reference point for Information, Advice and Support for Older People
2. Work with older people to maximise income
3. Reduce costs (where possible) of public facilities for Older People
4. Strengthen opportunities for employment for Older People
5. Challenge myths and negative perceptions of Older People by employers

Outcome 2 Older People experience consistently high quality services

Sefton's older people have easy access to high quality services

Sefton Partnership for Older Citizens firmly believes that consistently high quality, easy to access services that meet local demand are key to ensuring the wellbeing of Sefton's older people now and into the future. People we have consulted confirm that:-

"We would like a consistent high quality service when we attend public facilities" and "we would like services for older people to be delivered from one place".⁸

Context

Traditionally, strategies for older people have focused on specialist services for the 15% of older people who require support from Health and Social Care. This has helped to reinforce the view that all older people are frail and need specialist help. This Strategy challenges that view and aims to promote access to mainstream services for older people. It recognises that these services need to change to make this a reality and to help older people maintain or regain a good quality of life.⁹ This section looks at three key issues that older people have identified as a priority if they are to access mainstream services.

AIM Services for older people are local, accessible and of the highest quality

AIM Local agencies consider the needs of older people when planning services (age proofing)

Sefton Partnership for Older Citizens needs to reinforce the statutory duty placed on local authorities to undertake Equality Impact Assessments on all services and as part of that process the impact on Older Citizens must be a consideration. This is what we call "age proofing" and training is offered to officers that need to undertake such assessments.

⁸ Joint Strategic Needs Assessment for Health and Social Care for Sefton
Sefton Joint Commissioning Plan
Housing Strategy Consultation

⁹ Government Green Paper: Shaping the Future of Care Together

AIM The public transport of Sefton meets the needs of older people using public services

Having the ability to go shopping when you want, meet friends and family, take part in activities and do a range of other things most of us take for granted is vital for people to feel independent and in control of their life. SPOC is committed to improving public transport routes and to link this with health and wellbeing services.

Outcome 2 - Actions

Sefton Partnership for Older Citizens will facilitate the following actions by its member agencies:-

1. Age proofing of public services¹⁰
2. Delivering health and wellbeing services in the community
3. Joining up public transport and public service delivery

¹⁰ SPOC Document: Age Proofing: Putting Older People at the Heart of Service Design, November 2008
Government Green Paper: Shaping the Future of Care Together

Outcome 3 Health and wellbeing services to older people are joined up and effective

Sefton's older people enjoy high levels of health and wellbeing

Sefton Partnership for Older Citizens recognises the need for an holistic approach to health and wellbeing. SPOC considers the health and wellbeing of older people to be absolutely key to our quality of life. When SPOC consulted the communities of Sefton older people have commented to us that keeping busy is key to being able to remain healthy and active and also that health and wellbeing services need to consider the requirements of older people as a very high priority.

Context

Good health is about more than just physical wellbeing, it's about people's happiness and mental wellbeing too. For all people over 50 having access to community activities and good social networks is as vital as being free from illness or disability. So this section of the Strategy is about promoting health in its broadest sense – about access to services such as leisure and learning opportunities, as well as health services. Other issues, dealt with elsewhere in this Strategy, are vital too – things such as choice, independence, the home environment and transport. Promoting good health and quality of life is something that underpins the whole of our approach. Sefton Council has worked with partners from a range of agencies and older people to develop a strategy which helps older people and other adults to remain in their own homes. The Strategy identifies the need for non-specialist support with, for example, daily living skills, practical tasks, emotional support, and access to learning that promotes independence and quality of life.¹¹

The Strategy also recognises and understands gender, sexuality, race, cultural and religious needs in connecting older people to communities to ensure inclusiveness in the range of health and wellbeing services available, and to discourage isolation in the home.

¹¹ Government Strategy: "Building a Society for all Ages" 2009
Green Paper: Shaping the Future of Care, 2009
JSNA, Health and Housing consultations

AIM Older people will be physically, mentally and emotionally healthy

Our consultation and engagement events identified several priority issues for health and wellbeing. These include:

- That health and wellbeing services for older people are joined up and holistic
- Local services and amenities are consistent and committed to older people's health and wellbeing
- a strategy for wellbeing, including mental health and happiness
- no ageism in healthcare
- local NHS dental surgeries
- health checks for older people
- services that are available when they are needed
- better information about what services are available
- more flexible services, including ones that can help with practical tasks; and
- more self-help schemes.

The current focus on older people's health is overwhelmingly concerned with the 15% of older people who are ill and need support from health and social services, but the overall focus needs to shift to a much greater emphasis on supporting older people to remain healthy and independent for as long as possible. Older people asked that services should be provided:-

- based on need, without age-related discrimination
- as accessibly as possible
- close to home and easy to gain entry to;
- with a focus on promoting good health as much as tackling ill health;
- with attention to good mental health as well as physical health;
- with dignity and respect;
- which meet the needs that they have identified; and
- in a way that gives them freedom of choice.

AIM Older People will have good social networks

Our ongoing engagement processes have identified several factors, apart from poor health, that people thought would be most important to avoid for their lifestyle in older age. The most important factors related to maintaining independence, being able to get about, and financial security. Loneliness was the seventh-ranked factor, with 29% of people identifying this as something they would want to avoid. This response rate was steady across all age groups from 45 to 75 and over. Most older people have high levels of contact with family, friends and neighbours and do not experience loneliness.

However, reduced social contact, isolation and being alone do reduce older people's quality of life. Taking action to tackle these issues and help older people maintain their social networks is an important part of this Strategy. Recent research has suggested that the following factors need to be taken into account in finding solutions to this problem:-

- Older people must retain a sense of purpose and continue to have a role in society
- SPOC must distinguish between loneliness – often experienced as a sense of loss, for example following a bereavement – and isolation from normal social networks.

People who are isolated often need practical support or resources, whereas people who are lonely need social support and improved networks:-

- As people's ability to take part in some activities declines, they need to learn and share new skills.
- One-to-one support – such as befriending schemes – is highly valued.
- There is a significant gap between the responses often offered and what older people want. Too often services such as day centres are seen as encouraging a culture of helplessness. What people are often looking for is not new opportunities, but support to still take part in their current activities such as visiting a friend down the street.
- Different groups of older people are looking for different things – for example, men do not want the same as women.
- Services need to be more flexible – for example, available at weekends.
- If older people have been actively involved in designing and delivering services, those services are more likely to be appropriate and appeal to that age group.

- A person's sense of isolation can be heightened by difficulties in communicating, so services need to be accessible – for example, to people with speech or hearing difficulties.

AIM Older people will have access to a range of activities

Being able to take part in different activities is very important for older people. Many older people take advantage of the opportunities that are available – but too often people face barriers to taking part. This issue covers a range of activities and services too wide to be covered in this document. However, our consultation events identified several priority issues for involving older people in a range of activities. These include:-

- involving older people more in planning activities;
- free access to adult education;
- better access to sport and leisure services; and
- more exciting opportunities.

To address these issues SPOC needs to:-

- improve access to all leisure, learning and cultural activities, especially for people who are usually the most excluded from them;
- make sure that information about leisure, learning and cultural activities is readily available;
- improve access to adult education by providing a wide range of lifelong learning opportunities; and
- increase the availability of leisure facilities for older people.

AIM Older people will have access to Green Spaces and a sustainable environment

The role of green space in the lives of older people is mentioned by our older citizens at consultation and it stands to reason that a safe and welcoming environment within the urban setting is conducive to better health and general wellbeing. Older people also reported that when out and about there was a lack of public conveniences which deterred them from going too far from home.

To address these issues SPOC needs to:-

- ensure that planned developments provide decent green spaces for older people to enjoy;
- ensure that the green spaces that do exist are clean and safe to use; and
- increase the availability of public conveniences for older people.

Outcome 3 - Actions

Sefton Partnership for Older Citizens will facilitate the following actions by its member agencies:-

1. The joining up of health and wellbeing services for older people
2. Local services and amenities are consistent and committed to older people's health and wellbeing (age proofing)

Outcome 4 Older People are personally safe and socially connected

Sefton's older people feel safe in their community

Sefton Partnership for Older Citizens shares the view that all people want to feel safe in their homes and in the wider community. Working with partners to increase levels of community safety and to tackle the fear of crime is something that SPOC is completely committed to. In our consultations people shared with us their need to be reassured that if they need help they know who to ask and how but also that they don't want to feel isolated or lonely while maintaining our independence. Sefton Partnership for Older Citizens recognises that feeling safe is an issue for all agencies and is clearly linked not just to the community safety agenda but also Housing and to people's ability to network and be social.¹²

Context

Older people are concerned about feeling safe – whether it is in their own homes or outside in the local community or town centre. The extent of this concern is sometimes exaggerated. However, living in decent accommodation and getting support when needed are fundamental human needs.

In many ways what older people want is no different from other groups in our communities. Older people want to be in control of their support services, to choose, for example, when they get up in the morning or go to bed at night. But there is growing awareness that offering that choice and working with older people to maintain their independence delivers a higher quality of life and better long-term prospects.

AIM Older people and carers will receive suitable support.

Our consultation and engagement events and other research with older people identified several priority issues. These include:-

- Bereavement and the need for support from both public and community, voluntary and faith sector
- more information about where to go for help
- an overall aim of improving quality of life
- support services to maintain independence – including shopping, cleaning and preventative measures

¹² Sefton CDRP Age Perceptions Report, 2008 – 2009, Perceptions of Older People, pub July 2009
Sefton Housing Strategy consultation, January 2009

- volunteers to help older people with practical tasks
- reliable, accessible and flexible services, including home care and occupational therapy
- self-help strategies, building on local groups, with community development workers to support the process
- better integration of health and social care, and integration of these with other services such as leisure and housing; and
- buddying a younger person with an older person through school and education.

AIM Older people will feel safe at home and in the community

Our consultation and engagement events and other research with older people identified several priority issues. These include:

- safety at home, including suitably adapted, secure housing
- investing in smart technology to help people live in their own homes
- feeling safe in the neighbourhood, including better street lighting
- reducing anti-social behaviour
- road safety, including better and more pedestrian crossings
- more policemen on the beat and Neighbourhood Watch
- increased drug and alcohol programmes
- facilities for young people
- neighbourhood contact
- giving people confidence to live as they wish; and
- promoting respect and understanding between older and young people.

The following aims have been identified to meet these priorities:-

- To make sure that all community safety strategies address the needs of older people
- To develop a co-ordinated approach to providing community safety information

- To develop 'older people friendly' environments.
- To develop citizenship modules in schools.
- To promote positive images of community safety that build confidence.
- To make sure older people are safe in their own homes.
- To make sure older people are safe from abuse and exploitation.

AIM Older people will have suitable and decent accommodation

Our consultation events and other research with older people identified several priority issues. These include:-

- flexible, safe, secure, good standard housing of all kinds and for all income groups to support people at different stages of their lives and promote independence and quality of life
- help with home improvements, adaptations, equipment, practical services and financial assistance to help older people remain in their own homes
- a planning approach that encourages the housing market to provide housing and neighbourhoods which are suitable for Older People, and that takes account of changes in older people's lifestyles
- a wider range of housing options to meet different needs, including alternatives to residential care, such as extra care and retirement villages
- better information and advice (including financial advice) to help older people make suitable housing and service choices
- a more imaginative, flexible, co-ordinated and person-centred approach to services; and
- improvements and investment in technology to help older people remain in their homes – for example, to monitor their health or give them more control of their home environment.

SPOC aims to:-

- improve housing choices that meet the needs and expectations of Sefton's diverse ageing population; and
- make sure that older people have access to information, advice and support services to help them make their own informed decisions.

Outcome 4 - Actions

Sefton Partnership for Older Citizens will facilitate the following actions by its member agencies:-

1. Working with older people to ensure they feel safe in their community
2. Making sure no older person feels alone if they don't want to
3. Older people have opportunities for social contact and interaction
4. Community Safety concerns of older people are addressed
5. Housing issues for older people are addressed

“Somebody knows what it is they personally need and if they suggest something the professionals should listen to them”

Outcome 5 Older People are well informed and are able to make a positive contribution

Sefton's older people are well informed and make a positive and valued contribution

Sefton Partnership for Older Citizens wants all older people in Sefton, if they wish, to be fully informed of the services that are available to them, how they are planned and how they can take part.¹³

When SPOC consulted people on these issues it regularly receives feedback such as:-

"...we need an opportunity to contribute to the planning of services"

and

"...we would like to be kept informed of developments in public services".

Context

Active citizenship among older people is at the core of central government and local policies and plans for meeting the needs of older people.

'Improve public services for older people by better meeting their needs, listening to their views and encouraging and recognising their contribution to modernisation of services.'

The Local Area Agreement also sets the target for 'Sefton's older people to have a greater say in how local services are developed and delivered'.

¹³ Government Strategy: "Building a Society for all Ages" 2009
Green Paper: Shaping the Future of Care, 2009
JSNA, Health and Housing consultations

AIM Older people will be able to contribute to community life

Older people involved in developing this Strategy, and other research with older people, identified several priority issues for making a valued contribution to community life. These include:-

- involving older people in wider development work to build local communities and target isolation and alienation
- involving older people in civic activities such as Sefton Locals, area forums, area and parish councils and patient and public involvement forums
- providing local community resource centres with long-term funding which focus on the needs of older people and will encourage more community involvement
- developing older people's neighbourhood watch, health and wellbeing schemes
- maintaining or reinstating local facilities such as shops, banks and post offices
- developing community neighbourhood schemes to bring together local workers; and
- providing practical and effective support for voluntary organisations and volunteers – for example, through a volunteers' charter.

AIM Older people will be able to build links with younger people

Older people involved in developing this Strategy, and other research with older people, identified several priority issues for activities involving older and younger people. These include:

- breaking down barriers between older and younger people and improving community safety
- encouraging young people and older people to feel part of the same community; and
- setting up partnerships between schools and older people's organisations to encourage older people to provide support to young people by sharing their skills, experience and knowledge.

AIM Older people will play an active part in decision-making

Older people involved in our consultation and engagement developing this Strategy, and other research with older people, identified several priority issues for getting involved in decision-making. These include:

- creating real partnerships between older people and authorities, which involve them in designing, planning, delivering and monitoring services through a direct link or specific representatives in local decision-making groups
- making it possible for older people from all communities in Sefton to take part, including those with learning difficulties, physical disabilities and mental health needs, and those who are from black and minority ethnic communities, gay or lesbian, and people of different faiths; and
- recognising and catering for the different needs and expectations of people aged over 50, people living in both rural and urban areas, and people on low incomes.

Outcome 5 - Actions

So this Strategy aims to improve communications, participation and engagement and Sefton Partnership for Older Citizens will facilitate the following actions by our partners:

1. Local agencies engage and consult older people in line with our public engagement and consultation policy and standards
2. Mechanisms are in place for ongoing dialogue and feedback between partners and older people
3. Signposting and networking services are strengthened for older people

Outcome 6 All agencies genuinely value the contribution older people make

AIM Older people will be free from discrimination

Older people involved in developing this Strategy, and other research with older people, identified several priority issues for tackling inequalities and discrimination. These include:-

- challenging the myths and stereotypes about older people
- tackling ageism and age discrimination and breaking down age barriers
- valuing the experience of older people in the workforce through retraining
- providing equal access to health services, especially NHS dentistry which is becoming too expensive for older people
- • encouraging older learners and involving them in developing lifetime learning courses
- providing access to leisure and social activities at times and places identified in consultation with older people
- encouraging older people to claim all the benefits they are entitled to;
- providing more financial discounts for older people – for example, on fuel, healthy food options, and access to sport and leisure facilities
- recognise the distinctive cultural needs of black and minority ethnic older people in our community and provide access to suitable services.

“For me it’s all about social interaction, having contact with people and not being lonely”

Safeguarding Vulnerable Adults

Background

The Safeguarding Adult Framework for Action relates to responses made to a person aged 18 years or over *'who is or may be in need of community care services by reason of mental or other disability, age or illness and is or maybe unable to take care of him or herself, or unable to protect him or herself, against significant harm or exploitation'* (*'No secrets'* DH 2000) *Safeguarding Adults (ADSS 2005) identifies a duty of care to all adults 'whose independence and well being is at risk due to abuse or neglect'*.

Abuse

The definition of abuse within *'No secrets'* (DH 2000) reads *'abuse is a violation of an individual's human and civil rights by any other person or persons'* Abuse may be categorised by physical, discriminatory, sexual, psychological, financial or an act of neglect or omission to act. It may happen when a vulnerable person is persuaded to enter into a financial or sexual transaction to which she or he has not or cannot consented.

An individual, group or organisation may perpetrate abuse. It may consist of a single act or repeated acts over time and may be intentional or unintentional. Abuse can take place in any relationship or setting and may result in significant harm to or exploitation of the person subjected to it. All forms of abuse have negative emotional impact on individuals which will subsequently impact on a person's physical and mental health. Domestic Violence and Forced Marriage may also involve the abuse of a vulnerable person.

Domestic Violence is defined by the Government as *'any incident of threatening behaviour violence or abuse' (physical, psychological, sexual, financial or emotional) between adults who are or have been intimate partners or family members regardless of gender or sexuality'*. Domestic violence can be evidenced across all aspects of society regardless of age, gender, race, wealth or geography.

Forced Marriage is one where one or both parties do not consent to the act of marriage and some elements of duress are involved, involving the use of physical or psychological pressure.

Safeguarding Adults procedures must be considered when the concern raised indicates harm or exploitation of a person. *'No secrets'* (DH2000) defines harm as *'harm should be taken to include not only ill treatment (including sexual abuse and forms of ill treatment which are not physical) but also the impairment, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioural development'*. (Law Commission 1995).

SPOC is committed to Sefton Safeguarding Adults : A Framework for Action, and aims to ensure that standards are raised to ensure anyone working with older citizens in Sefton is aware of the correct procedure to follow if a person is aware of, or suspect that abuse is taking place.

Equalities and Human Rights of Older People

Background

It is important to recognize the relationship between Equalities programmes and Human Rights. Whilst this Strategy is highlighting programmes to meet need based on age, it also keeps in view that service provision should safeguard fundamental standards of human decency, aspirations and expectations.

Sefton Partnership for Older Citizens observes the guidelines coming out of the Equalities Review in Sefton and the recent report on Community Cohesion. Older people experience prejudice, discrimination and disadvantage because of their age. Age discrimination is widespread and can have serious adverse consequences. Whatever their other characteristics, everybody gets older - therefore everyone in the UK will benefit from efforts to promote greater age equality.¹⁴

Multiple discrimination or disadvantage occurs when those who experience discrimination for other reasons grow old, and age discrimination compounds other forms of inequality and disadvantage.

Disadvantage earlier in life results in increased likelihood of serious disadvantage in old age. Disadvantage amongst older people cannot be effectively tackled without taking account of both the discrimination that people carry with them into old age and the impact of age discrimination itself.

Minority Groups within our older population

Older women and older men

- Older women are considerably poorer than older men – on average, women's income in retirement is only 57% of men's.
- The gender pay gap increases with age.
- Older women are much less likely to have access to a car than older men.
- Older women are much more likely to live alone than older men.

Gay, lesbian and bi-sexual and trans-gender older people¹⁵

¹⁴ Department of Health: National Review of Discrimination in Health and Social Care Consultation, July 2009
Age Reference Group on Equalities: Age and Multiple Discrimination, October 2005
Equality and Human Rights Commission: SafetyNet Springboard Publication, February 2009

¹⁵ Get Heard: Social Care Needs of Older Gay Men and Lesbians on Merseyside, Sefton Pensioners Advocacy Centre and Get Heard publication, 2003

- Providers of frontline services are not always aware of the specific needs of older gay and lesbian people
- Information available to older people does not always take into consideration the needs of older gay and lesbian people

Disabled Older People

- Those who become disabled over State Pension Age are more likely to be disadvantaged.
- The disability benefit system is overtly discriminatory on grounds of age.
- Social care services for older disabled people are more restricted than those for younger adults.

Black and Minority Ethnic Older People

- Older people from ethnic minority groups are more likely to live in poverty than older people in general
- Housing problems are more acute for older people from ethnic minority groups due to higher levels of deprivation in areas where they live.
- Older people from ethnic minority groups have difficulty accessing health and social care services because religious, dietary and language needs are not met.

A Strategy for a diverse and changing population¹⁶

SPOC knows that Sefton's population is changing and getting older. For most older people, this will mean:-

- leading full, active and healthy lives for longer
- playing a key role in the local community through continued employment or voluntary work
- enjoying sport, social and leisure activities; and
- using computers and other forms of technology to stay in touch with family and friends, to shop and to find information.

For only a minority, living longer will mean increased dependence, poor health and frailty. Challenging the myths of older people:-

- 4 in 5 people over the age of 80 do not suffer from dementia
- Over 350,000 people aged 65 and over provide 50 hours or more of unpaid care each week
- 41% of people aged 55 to 64 use the internet
- 43% of older internet users use it every day
- 73% of people are living independently at the age of 97, and 35% are still independent at the age of 100.

If SPOC wants Sefton to be a place where old age is enjoyed rather than endured, SPOC needs to take action now, planning to meet the varied needs and expectations of our older people in the future. This Strategy strives to respond to the challenge by:-

- setting a clear direction for our communities to ensure the needs of people aged 50 and over are met

¹⁶ Equality and Human Rights Strategy for Sefton, 2009
Department of Health: National Review of Discrimination in Health and Social Care Consultation, July 2009
Age Reference Group on Equalities: Age and Multiple Discrimination, October 2005
Equality and Human Rights Commission: SafetyNet Springboard Publication, February 2009

- providing a framework of common outcomes which organisations and public services should use to shape their own plans to meet the changing needs of an ageing society
- Identifying the diverse population of older people in Sefton and ensure organisational and service responses are sensitive to their specific needs
- bringing a shared focus to the work of a wide range of agencies and partners, and strengthen the case for funding from national and regional programmes; and
- involving older people as active and equal partners in the process

A Final Word

SPOC would like to see this Strategy implemented by all partner agencies that work together to support us to enjoy our lives and we would like to thank everyone that has contributed to the development of this important document:-

- All members of Sefton Partnership for Older Citizens
- Sefton Pensioners Advocacy Centre especially Margaret Lambert and Andrew Booth
- Representatives of SPAC who attended our focus group
- Sue Holden and Sefton Equalities Partnership
- Kevin Thorne, NHS Sefton
- Robina Critchley, Margaret Milne and Lou Fashioni Sefton Council, Adult Social Care Department.

In addition SPOC also would like to thank all those that have previously contributed to the Joint Strategic Needs Assessment for Health and Social Care, Housing Strategy consultations and the world class commissioning plan (all of which greatly informed this Strategy) including but not limited to:-

- The Carers' Centre
- The Expert Patients Forum
- The members of the Equalities working groups

***“We should focus on everyone’s wellbeing rather than just medical health;
“wellbeing” is for everybody”***

References and Resources

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Age of Celebration

Community Engagement Report

1. Background
2. The Events
3. "Ageing is to be Celebrated"
4. "Barriers to enjoying getting older"
5. The panel's response
6. Summary of key points
7. Next steps

1. Background

Sefton Partnership for Older Citizens will publish its Strategy for Older Citizens early in 2010. This Strategy will set out how the public agencies that form part of SPOC will work together to develop and deliver top quality services for Sefton's ageing population.

This report details the responses received during community engagement process for the Sefton Strategy for Older Citizens.

2. The Events

Held on 30th September and 1st October 2009 to mark the International Older Person's Day and to raise awareness of the Strategy and to get feedback from Sefton's older citizens we held two community debates entitled "**Age of Celebration**".

The public debates took place in Southport and Bootle and a panel of SPOC members heard representation from the older citizens of Sefton as they offered arguments for and against the motion that age is something to celebrate.

The events were considered a success by those that attended and the overall feeling of the days was that age is indeed something to be celebrated and many positive and inspiring stories were shared. At the same time participants were encouraged to share the barriers they experience to enjoying their old age and these comments have been captured and will be fed back into the Strategy.

3. **“Ageing is to be Celebrated”**

These are the comments received at the Southport event that support the motion that “ageing is to be celebrated”:-

- There are lots of things that we can do in our old age, we can enjoy our leisure time
- We like to meet and talk with each other, we can still learn so much
- Just being alive is wonderful “getting old beats the alternative : dying young”
- Ageing is a privilege and we shouldn’t take it for granted
- As a deaf older person I receive great support, I recently took a lip reading course
- I would like to compliment the NHS hospital services in Ormskirk, the nursing care I received there really was excellent
- We have a lot more freedom in retirement
- Southport Library is excellent
- The Expert Patients Programme (EPP) is invaluable to supporting independence
- Compared to when we were younger waiting times for health services are much shorter and our expectations of getting better are also higher
- Most (the significant majority) of older people don’t need health and social care services – we need to keep people well
- Some of us do feel safe to go out at night in Southport Town Centre

These are the comments received at the Bootle event that support the motion that “ageing is to be celebrated”:

- we get to look after our grand children, we provide childcare while their parents are at work
- we get the chance to volunteer and do things in our community
- Things like the Feelgood factory make a huge difference
- we have more free time
- we like to meet up at events such as this, we learn from each other
- we like to hear speakers at events like this
- we’re just happy to be here

4. “Barriers to enjoying getting older”

These are the comments received at the Southport event that evidence the barriers that people experience to enjoying their old age:-

- Steps and stairs become an issue, I can't get into my bank
- Finances are difficult in old age – managing on a lower income
- Housing problems are a burden for everyone, even people with big houses
- Ill health becomes more of a worry
- My flat has no lift and when I ask for support I feel I don't get listened to
- For those of us living on savings the credit crunch has really affected us
- We don't like going out at night
- I have experienced anti-social behaviour, gangs of teenagers and vandalism (Crossens)

These are the comments received at the Bootle event that evidence the barriers that people experience to enjoying their old age:

- Why is there not an Age Concern Bootle? (long discussion followed but it was resolved – Age Concern Liverpool and Southport have merged, there will be soon)
- Money is a major issue personally and also for organising social events, you don't get rooms for free
- I'm frightened to go out at night
- It takes a lot of courage for some people to attend groups and events, courage to just go through the door
- We don't get our views heard by the people that make the decisions
- Accessibility, the pavements outside of the Strand are a disgrace – the people designing these new developments have no idea what it's like to be old
- How can we get to the Area Committees, we need transport?

5. The panel's response

The panel at the Southport event consisted of:

Andrew Booth	Director, Sefton Pensioners Advocacy Centre
Sue Holden	Director, Sefton Equalities Partnership
Roger Pontefract	Non Exec Director, NHS Sefton
Mary Wall	Head of Service Development, Leisure Services
Maureen Justice	Older People Advocate, Merseyside Fire and Rescue
Margaret Jepson	Homewatch, Merseyside Police
Robina Critchley	Assistant Director, Adult Social Care Department

The panel at the Bootle event consisted of:

Andrew Booth	Director, Sefton Pensioners Advocacy Centre
Sue Holden	Director, Sefton Equalities Partnership
Roger Pontefract	Non Exec Director ,NHS Sefton
Robina Critchley	Assistant Director, Adult Social Care Department

Both events were supported by Margaret Lambert and volunteers from Sefton Pensioners Advocacy Centre, Alexandra Wilson from Sefton Equalities Partnership and Wendy Cocks from Care and Repair.

The Panel's response at the Southport event is summarised below:

Mary Wall thanked the group for the positive comments about the libraries in Southport and said that she had heard what people had said about accessibility issues in getting into buildings such as the banks and that she said that this is something that needs to be noted and addressed by public facilities.

Andrew Booth said that he had been particularly struck by the message that older people need to be listened to and to be able to comment, also the need to socialise and to receive information. He emphasised that the feedback will be really useful for the development of the Strategy.

Sue Holden said that she would write to the bank in Southport and speak to Community Safety about the incidents experienced in Crossens. Sue noted the concerns that people had about finances and said that it was very important that the action plan that comes out of the Strategy assists older people to cope with the impact of the recession.

Roger Pontefract said that he would gladly feedback the positive comments that had been offered about the experience of NHS services.

Robina Critchley noted that Sefton has a population of 280,000 people and 11,000 of those receive health and social care support. Robina added that the task is always to help people to stay healthy and well as long as possible. Robina went on to talk about the real increase in ageing population in Sefton with a significant increase in the numbers of over 85s. The development of Extra Care housing is

on the cards so that people can live at home for longer. Robina concluded by talking about the need for public services to reduce the bureaucracy that goes around provision of services.

Margaret Jepson addressed the points raised about feeling unsafe at night and shared with the group what Homewatch is. Margaret shared with people that they can always call her to report anti-social behaviour and she also went on to say that newspapers paint a dark picture of society and it is actually statistically very safe to go out at night. Older people are the safest group in terms of being victims of crime, young people are at the highest risk.

Maureen Justice shared with the group her role as Older Person's Advocate for Merseyside Fire and Rescue Service.

The panel's response at the Bootle event is summarised below:

Roger Pontefract picked up on the discussions around the Area Committees and shared the fact that in his professional life he was the person who set up the Area Committee network for Sefton. There are 7 Area Committees and they are there to look after the local communities. He suggested that representatives of the group should indeed go to the Area Committees and undertook to get the details of those committees to Margaret Lambert to circulate.

It was then suggested by a lady in the audience that they should form an army and march on the Area Committees to tackle them on loss of funding. This was well received in the spirit it was intended. Andrew Booth said he would be their Sergeant Major and Sue Holden is the General!

Sue Holden responded to the debate by re-asserting the importance of people making use of the democratic mechanisms available to them and encouraged this "army" to make use of their Area Committees which Sue described as "very important". Sue added that forums such as these events were vital in terms of influencing decision makers and shared with the group that she and Andrew had been able to secure funding to re-establish the forums in the South of the Borough.

Robina Critchley made the same points to the Bootle group as the Southport group: the need to keep people healthy, happy and independent, the issues of housing and adaptations needed to keep people living at home and the development of extra care housing.

Andrew Booth picked up on the point about the people planning new developments not knowing what it is like to be older and linked that in with the ongoing discussions around how people can get involved and have a say. Andrew noted that a few people had commented “how can I get that information?” in the course of the day and this shows why networking events and forums are so important.

Comments, Questions and Answers

Once the debate had been heard and the panel had taken their opportunity to make their response then the floor was given the chance to ask any further questions of the panel or to make final comments.

The Questions and Answers session at the Southport event is summarised below:

It was commented that in response to being afraid to go out at night “**Together We Can**” and the older people discussed among themselves how they might share a taxi to the theatre.

A question was raised about the way that the local authority assumes people are **online** and it was pointed out that so many older people are not and that the courses that used to run had been cut.

Mary Wall responded saying that you can get online at libraries but that the funding for adult education had been cut at national level. There are **computer classes** around and Mary undertook to find out more as to what’s available.

A comment came from the floor about the Planning Department and the contributor said they had had a very positive experience when they were supported in stopping a development that they had concerns about.

A comment came from the floor about the numbers of **housebound people** that would love to come to these meetings but cannot.

Andrew Booth responded to say that, thanks to Sue Holden, there is now some more funding available for **additional forums and transport** to them.

Mary Wall brought the **Home Library service** to the attention of the group

A comment came from the floor about **transport**, there isn’t a bus to the cinema anymore. It was noted that the Park and Ride buses are empty but we can’t use our bus passes on them. This response will be fed back to colleagues in Merseytravel.

A comment was received from the floor about **fuel poverty and the costs of house maintenance**. Utility companies charge what they want.

Wendy Cocks from Care and Repair introduced herself and invited people to attend a housing workshop that would seek address those concerns raised.

The event was brought to a close with a wonderful story:

“One thing that I would like to say that is wonderful about getting older is the kindness of strangers. I was on an escalator the other day with my zimmer and I started to topple backwards and I felt as if “this was it” I was going to fall. Then I felt a pair of warm, strong arms around me (and that hasn’t happened for 65 years!) and this young man didn’t patronise me he just put me back on my feet, checked I was alright and we went about our business. The kindness of strangers.”

Shirley

The Questions and Answers session at the Bootle event is summarised below:

There was a comment from the floor that **public toilets** had been closed so people were having to use facilities such as the Feelgood Factory.

There was a question from the floor as to why concessions on **adult learning** had been cut?

Robina Critchley responded that the Learning and Skills Council was due for a restructure and this should result in education grants being available for people.

Wendy Cocks introduced herself and explained about Care and Repair. She explained about a set of standards agreed by the association of architects that Sefton Council had signed up to which included pedestrian access.

A comment was made from the floor about the loss of **green spaces** in favour of new developments. There was a concern that in meeting the demand for housing that really important green space, parks and leisure areas are being lost.

Alexandra Wilson commented that this was not something that was currently addressed in the Strategy and that it would now be included.

There was an acceptance that some green space would be lost or else there would be no homes for people but there needs to be some offset benefits to the community to compensate for development.

6. Summary of key points

“Ageing is to be Celebrated”

- More leisure time, more freedom, the chance to volunteer and do things in our community
- We like to meet and talk with each other, we can still learn so much
- Just being alive is wonderful, ageing is a privilege and we shouldn't take it for granted
- Good services: Support and courses, Expert Patients Programme, NHS hospital services, Library services
- Looking after our grand children
- Events such as this, we learn from each other and hear speakers

“Barriers to enjoying getting older”

- Accessibility: Steps and stairs become an issue
- Finances are difficult in old age – managing on a lower income
- Housing problems are a burden for everyone, even people with big houses
- Ill health becomes more of a worry
- Fear of going out, anti social behaviour
- Finding finance for social events
- Getting our views heard by the decision makers
- Transport
- Accessing Adult Education
- Environment: protecting green space
- The need for more public conveniences
- Fuel poverty and the costs of house maintenance

7. Next steps

This invaluable feedback has implications for the Strategy and the draft Strategy will now be revised to ensure that all the comments received at these events are addressed.

The feedback also has implications for Sefton Partnership for Older Citizens and the partner agencies that make up SPOC. This report will be sent to the relevant individuals within the partner organisations and will be presented to SPOC.

All those that attended the events will get a copy of the final Strategy and a feedback presentation on what has happened with the information they gave us.

“Working together towards a common vision”

In the development of this Strategy the three themes of:-

- **Communications;**
- **Standards; and**
- **Networks and Collaboration**

emerged as areas for SPOC to focus on. In this paper a future direction for SPOC is visioned:

Sefton Partnership for Older Citizens will adopt these 3 headline actions and will work with the agencies within the Partnership to examine and develop their plans so that they support us in our vision that all of us are able to live our lives in the manner that we wish.

Here is the breakdown of the roles and interests within each of these themes:-

Improve Communications

- A single point of reference for Information, Advice and Support
- Strengthen Engagement and Consultation practice
- Strengthen opportunities for employment for Older People
- Challenge myths and negative perceptions of Older People by employers
- Mechanisms are in place for ongoing dialogue and feedback between partners and older people
- Signposting and networking services are strengthened for older people

Raise Standards

- Age proofing of Services
- Influencing front-line service delivery
- Work with older people to maximise income
- Reduce costs (where possible) of public facilities for Older People
- Community Safety concerns of older people are addressed
- Housing issues for older people are addressed

Strengthen Networks and Collaboration

- Networking and social interaction
- The joining up of health and wellbeing services for older people
- Joining up public transport and public service delivery
- Working with older people to ensure they feel safe in their community
- Making sure no older person feels alone if they don't want to
- Older people have opportunities for social contact and interaction

Profiling Older People (POPPI) profile for Sefton

Projecting Older People's Population

Sefton Report

Population aged 65 and over, in five year age bands, projected to 2025

	<u>2008</u>	<u>2010</u>	<u>2015</u>	<u>2020</u>	<u>2025</u>
People aged 65-69	14,500	14,900	17,200	16,400	18,100
People aged 70-74	14,200	14,000	13,900	16,300	15,600
People aged 75-79	11,600	11,800	12,400	12,500	14,800
People aged 80-84	8,200	8,500	9,400	10,300	10,500
People aged 85 and over	6,900	7,100	8,200	9,800	11,800
Total population 65 and over	55,400	56,300	61,100	65,300	70,800

65 and over population by gender and age band (65-74, 75-84, 85 and over), as a percentage of the total 65 and over population, projected to 2025

	<u>2008</u> <u>%</u>	<u>2010</u> <u>%</u>	<u>2015</u> <u>%</u>	<u>2020</u> <u>%</u>	<u>2025</u> <u>%</u>
Males aged 65-74	23.29	23.09	23.73	23.43	22.03
Males aged 75-84	14.62	15.28	15.38	15.01	16.10
Males aged 85 and over	3.79	4.09	4.91	5.97	6.78
Total males 65 and over	41.70	42.45	44.03	44.41	44.92
Females aged 65-74	28.52	28.42	27.33	26.65	25.28
Females aged 75-84	21.12	20.96	20.29	19.75	19.77
Females aged 85 and over	8.66	8.53	8.67	9.04	9.75
Total females 65 and over	58.30	57.90	56.30	55.44	54.80

65 and over population by gender and age band (65-74, 75-84, 85 and over), as a percentage of the total 65 and over population, projected to 2025

	<u>2008</u> %	<u>2010</u> %	<u>2015</u> %	<u>2020</u> %	<u>2025</u> %
Males aged 65-74	23.29	23.09	23.73	23.43	22.03
Males aged 75-84	14.62	15.28	15.38	15.01	16.10
Males aged 85 and over	3.79	4.09	4.91	5.97	6.78
Total males 65 and over	41.70	42.45	44.03	44.41	44.92
Females aged 65-74	28.52	28.42	27.33	26.65	25.28
Females aged 75-84	21.12	20.96	20.29	19.75	19.77
Females aged 85 and over	8.66	8.53	8.67	9.04	9.75
Total females 65 and over	58.30	57.90	56.30	55.44	54.80

People aged 65 and over predicted to attend hospital Accident and Emergency (A&E) departments as a result of falls, by age group (65-69, 70-74 and 75 and over), projected to 2025

	<u>2008</u>	<u>2010</u>	<u>2015</u>	<u>2020</u>	<u>2025</u>
People aged 65-69 predicted to attend hospital A&E departments as a result of falls	417	428	494	471	520
People aged 70-74 predicted to attend hospital A&E departments as a result of falls	522	515	511	600	574
People aged 75 and over predicted to attend hospital A&E departments as a result of falls	2,524	2,590	2,836	3,082	3,507
Total population aged 65 and over predicted to attend hospital A&E departments as a result of falls	3,463	3,533	3,841	4,153	4,601

Previous Consultations

This paper summarises the findings of consultations with older people in the years 2007 – 2009 including Joint Strategic Needs Assessment, Strategic Commissioning Plan and Housing Strategy Consultation.

There are key themes that emerge that cut across these themes:

- Getting the right information, advice and support
- The sense of loneliness that comes as a side effect of independence
- The need for an increased sense of community and feeling supported in one's own environment
- The importance of Housing, Transport and Leisure Services
- The prohibitive costs of healthy living – whether food or leisure facilities
- The need for social networks and safe places to socialise
- Everyone recognises the need to support carers more

There are particular insights into the needs of those groups:

Older People:-

- would like a single point of contact “one stop shop” for information
- can and do use computers but electronic communication is limited – face to face contact is preferred
- need the social contact and opportunities for support that community based facilities such as Post Offices provide

Young People:-

- like Walk in Centres but would like discrete services for young people
- will use the internet to get information but would like their school and youth services to provide them with, for example, sex education and they would like their parents to be better informed and willing to talk on these subjects
- The media has the greatest influence on young people and their behaviours

People with Long Term Health Conditions:-

- really value the Expert Patients programme and believe it should be wider
- put a strong emphasis on “prevention” and healthy living
- in particular put emphasis on the prevalence of depression and how that affects people getting help

People Facing Health Inequalities:-

- may not be lacking awareness of how to lead a healthier life but the cost and accessibility of healthy food and leisure services are prohibitive
- may require activities that raise aspirations and self esteem before they will be receptive to health advice
- Inequalities exist beyond the boundaries of our deprived areas – need to ensure those people who are “asset rich cash poor” are not overlooked

In terms of local services inevitably everyone wants services as close to home as possible but we have seen from our surveys that “**local**” for the majority of people **means within 2 miles**. While people are more willing to travel further for high quality specialised services there was a very strong expression of approval for Walk in Services.

Details of consultation : Older People

Method: Plenary discussion
Focus Group
Workshop with small group work

Key Partner: Sefton Pensioners Advocacy Centre

What we did:

The consultation with older people took place in stages. We brought the former Older People’s *South Network back together* for an afternoon where the individuals present were able to highlight any gaps in the Better Life Better Health report and to offer their insights into particular issues faced by Older People. The report from this session was then discussed in a *focus group* where we were able to discuss the points in more detail and plan the *workshop* which was held a week later. The participants of the focus group took a topic each and *facilitated discussions* around that topic at the workshop.

In support of this we also held workshops about older people and services at the Community Empowerment Network consultation event.

Summary of Key Points emerging from Older People’s Consultation:

The people we spoke to generally agreed with the priority areas highlighted in the Joint Strategic Needs Assessment but highlight the following as gaps they would like to see addressed:

1. Mental Health Services
2. “Wellbeing” services in the holistic sense

The people we spoke to made the following recommendations that they feel, if implemented, would make a genuine impact on improving their health and wellbeing:-

1. Better networking and community based support
2. Services supporting independent lifestyles – handyman services for example
3. “One Stop Shops” for older people’s services – single point of contact
4. Increased support for carers
5. Further investment in Expert Patients and in people looking after own health
6. A comprehensive older people’s Strategy

There were some very strong themes that ran through all our discussions with and about Older People’s health and well being. The following is a list of those particular subjects:

- Long Term Health Conditions
- Financial Matters
- Housing (inc accessibility)
- Leisure
- Transport
- Communication – information and support
- Carers
- Community and Social

In terms of understanding Older People’s accessibility requirements the following comments are highlighted:-

- Electronic Communication is really useful for older people but it still does not meet the needs of many. Rather than websites many older people said that they value face to face interaction with someone who knows how to signpost them to the services they need.
- Older People indicate that they value high quality services and would like them to be local but are prepared where necessary to travel by public transport to get them.
- For those people that are confined to home they would like to know who the first point of contact should be for getting help and support.

Details of Consultation : Long Term Health Conditions

Method: Open Plenary
One to one interviews

Key Partner: Expert Patients Forum and Community Empowerment Network

What we did:

Working with the Expert Patients Forum we presented the Joint Strategic Needs Assessment and asked participants to voluntarily comment with feedback and with issues and challenges that they face in terms of their health and wellbeing. Later we had the opportunity to take up those points in more detail in the form of one to one interviews.

In support of this we also held workshops about long term health conditions at the Community Empowerment Network consultation event.

Summary of Key Points emerging from consultation on Long term Health Conditions:

The people we spoke to generally agreed with the priority areas highlighted in the Joint Strategic Needs Assessment but highlight the following as gaps they would like to see addressed:-

- It was felt that Mental Health Services should be a priority in its own right

There were some very strong themes that ran through all our discussions with and about Long Term Health Condition. The following is a list of those particular subjects:-

- The challenges we face are not necessarily with “health” or “social care” services but living life in between
- It feels like the support that one used to get from your community is diminishing, loneliness and isolation were key themes
- The need for increased focus and investment in Mental Health services
- The need for GPs and services in the Community to work better together
- The financial barrier of the Cost of fruit and veg
- The need for increased awareness of Depression in people with long term health conditions
- The need to cut waiting times for occupational therapy and equipment
- The opinion that forcing people into work including new mothers may have a detrimental effect on health

- The importance of investing in self help groups and networks

In terms of understanding the accessibility requirements of people with long term health conditions the following comments are highlighted:

- There needs to be a better understanding of the needs of people with visual impairment who use health services. The example was given that a nurse might call the patient from the waiting room, turn and walk away and expect that person to be able to see where they have gone in order to follow.

What mechanisms are already in place?

- Not much
- Sefton Council
- Sheltered housing / supported housing
- Internet - older people don't use
- Depends what kind of info people want e.g. housing, health . . .
- Sefton Plus
- Health & Social Care
- People don't like recorded telephone messages or long waiting times on the telephone
- Needs to be 1st point of call
- Need to raise awareness of services available
- Directory of services needed and accessible to all
- People may know of services but don't know how to access them

How should we be getting information out to people?

- One stop shop
- Door knocking
- Information stalls at supermarkets
- Leafleting, newspapers
- Community support officers
- Emergency services
- One telephone number (advice line) - easy to remember, free phone number, 24hrs
 - ❖ Advertised
 - ❖ Jointly commissioned
 - ❖ Quick referral times
 - ❖ No long-winded recorded message
- Centralise information for service users
- Change perception of 'social services' so people are more willing to access
- 2 phone numbers - one for emergencies one for general information (helpline)

How do you prevent social isolation?

- Must be careful not to put our own judgements on older people in terms of 'happiness' and 'isolation'
- Information on services sent to all houses / door knocking
 - ❖ e.g. calendar with services/contact information and/or on Council Tax bill
 - ❖ key rings, fridge magnets
 - ❖ T.V.
- Let families know how to access services, on behalf of older family members

IDeA Case Studies

The following are just some examples of how local authorities are working in partnership with older people to improve public services used by older people.

Case Study One – How Knowsley’s Older People’s Voice is driving the vision and Strategy for older people

There is real engagement with older people in Knowsley in shaping services. This influences all of the services provided by Knowsley MBC and NHS Knowsley. This approach goes far beyond age-proofing services. It recognises the valuable contribution of older people as citizens and the importance of their views as consumers of all public services.

What are they doing?

A *Positive Age* is a Strategy developed by older people in Knowsley. It was not shaped by managers or commissioners it was driven by the vision of Knowsley Older People’s Voice (KOPV), a 500-strong group of older people. The vision began with KOPV setting out what is important to older people in Knowsley. This was stated in the following themes:

- finance and benefits
- health and wellbeing
- crime and personal safety
- transport
- housing and local environment
- lifelong learning and libraries
- leisure and culture
- communication.

There was recognition that what matters to older people, matters to everyone. The aim was far greater than providing better health and social care. It was about promoting active citizenship and developing universal services. The Strategy was developed by KOPV and will be evaluated by them at the end of the first year.

How did they do this?

The vision for A Positive Age came from KOPV identifying what older people said were important to them at the KOPV annual conference. These were categorised by theme.

The Strategy was developed by Expert Panel sessions that brought together older people as experts by experience with senior managers from public services and heads of independent agencies to set the priorities for action under each theme.

Knowsley's Older People's Voice is supported by an involvement officer whose post is funded jointly by Knowsley MBC and NHS Knowsley. Its membership is constantly growing as older people hear about the group through contact with IKAN (I know a man who can), which is an information and signposting service, or through events organised by KOPV. For example, the *Older People's Olympics*, an annual event that includes swimming, wellythrowing, connect four and volleyball, or other contacts.

There are elected members from KOPV on the Older People Partnership Board (OPPB). The representation of officers to members of KOPV is 50:50.

The involvement officer ensures that the representatives are briefed and have an opportunity to discuss papers.

The involvement officer also runs a programme for KOPV representatives on how to operate and be effective in meetings. As a result of this support and preparation, the OPPB operates as a well-integrated team of peers with different areas of expertise and experience.

Representatives from KOPV that are on the OPPB report back to older people in the areas through the KOPV locality bases.

Older people are 'future-proofing' all strategies with particular attention to community and cross-generational issues. There is recognition that older people are not separate from the rest of the community – they are citizens with much to offer, demanding changes that benefit the whole community.

There is a member of KOPV and an officer responsible for each theme. They sit on the Strategy groups for these themes and hold the Strategy group to account on the delivery of the agreed actions.

Measuring outcomes

The OPPB review progress on the action plans for two themes at each meeting. At the end of the first year KOPV will assess whether the outcomes for older people are being achieved.

Key indicators are being identified for each theme against specific actions. For example, 'older people will access library services', will be measured by the number of older people that have used the library service, identifying any groups that are not well represented.

NI 138, 'Satisfaction of people over 65 with home and neighbourhood', is the overarching performance measure.

By understanding what older people want and need, and using this to shape all council services, Knowsley MBC is working to improve older people's lives. They have identified with older people key actions to help achieve this outcome and are measuring progress with key performance indicators against each action.

What helped?

- The investment in an involvement officer, which is viewed as extremely worthwhile.
- The expert panels. “From our perspective, this was an invaluable resource that you could not buy!”

Future challenges

- Trying to ensure that the views of people under 70 and people from black and minority ethnic groups are represented in the Strategy, and that they are encouraged to join KOPV where appropriate.
- Continuing to develop the Strategy

Case Study Two – How branding positive ageing has changed perceptions of people who live and work in Manchester

Manchester City Council has used a brand, *Valuing Older People*, to raise awareness of people who live and work in Manchester, of the important contribution that older people make to the community. This aims to change perceptions about whether or not Manchester is a good place in which to grow old.

What are they doing?

The Council has a dedicated team which focuses on engagement with older people and the promotion of older people as valued citizens. The team and the programme are called *Valuing Older People*. The team coordinates a ‘mainstreaming ageing’ programme, working with academic partners on a number of research projects and leading the city’s inter-generational programme.

The logo for Valuing Older People is used widely across the Council. Posters showing positive images of older people are displayed at 85 Council-owned city-centre advertising sites. These aim to influence people of all ages who live and work in the city.

The *Valuing Older People* team works across the Council to ensure that all departments engage with older people and take account of their needs and wishes in developing services. The Strategy for older people is cross-cutting and has an annually updated action plan. Often Council departments contact the team to find out how they can improve services for older people. The team believe that this is due to the strong branding.

The programme has led to:-

- an older peoples’ board and city-wide forum

- an older people's Strategy
- task groups of officers and older people to implement the Strategy
- a quarterly newspaper with a print run of 12,000
- an A-Z of services
- a calendar of positive ageing produced each year (30,000 copies distributed over four years)
- free swimming for people over 60
- an annual *Full of Life* festival, with access to information from around 80 organisations working with older people across the city
- initiatives aimed at reducing crime and fear of crime among older people
- local networks that bring together older people with local agencies within a geographical area to identify areas of concern, share ideas and find local solutions.

Measuring outcomes

National and local indicators will be identified to measure progress with implementing the Strategy for older people in Manchester. Although NI 137, 'Healthy life expectancy at age 65', was initially part of Manchester City Council's Local Area Agreement, it was dropped because Manchester Council did not think it could be effectively measured at a local authority level.

The Council carries out a quality of life survey and includes the question, 'is this area a good place in which to grow old?' This differs from the BVPI question, 'is this area a good place to live?' There was a big difference in perceptions to these differently worded questions.

The quality of life survey found a significant increase in the percentage of people of all ages between 2004/05 and 2007/08 who agreed that their local area is a good place to grow old. The *Valuing Older People* Strategy was launched in 2004.

What helped?

- Having a dedicated team to work across the Council.
- The branding and advertising campaign raised awareness and improved perceptions.

Future challenges

- To recognise diversity and provide an equitable service across the county.
- The areas with the lowest numbers of older people often have the highest level of exclusion.

Case Study Three – How Neighbourhood Network Schemes are reducing social isolation and improving health and wellbeing in Leeds

There are 38 Neighbourhood Network Schemes in Leeds. Run by older people for older people, they facilitate mutual support and address everything that older people might want or need to lead happy, healthy and independent lives. One of the Neighbourhood Network Schemes, Armley Helping Hands, has applauded the innovative ways in which this is achieved.

What are they doing?

The Neighbourhood Network Schemes (NNS) in Leeds started to develop in the 1990s and continued to evolve according to local demand and funding available. At the beginning of 2000 action was taken to expand the network to cover all areas of the City. Council and PCT commissioners are currently carrying out a joint review of the NNS to ensure consistent and equitable service delivery across the city.

The NNS' key role is to reduce social isolation and increase participation of older people in the community, through both social activities and long term individual support. They function as gateways to information, advice and support and provide a wide range of practical activities and services.

The values of the NNS and how they work with older people is as important to achieving improved outcomes for older people as the activities provided. As one NNS co-ordinator said, "our activities are only a small part of what we do. Our whole emphasis is not on what we do for people, but rather how we make them feel when they are with us, and enabling them to feel good when we are not there". The NNS create a caring community.

How do they do this?

Armley Helping Hands (AHH) provides an example of how an NNS works. It was set up in 1995 and is one of the longer and more established schemes. The following are just some of the innovative approaches used:-

- Service Level Agreements (SLAs) with statutory providers to deliver specific outcomes. For example, they provide a screening service for poor eyesight to help reduce the hospital waiting list for ophthalmology out-patient appointments.
- A local electronics company offered to make a donation to the scheme, but the co-ordinator felt that an ongoing relationship would be more productive. The electronics company now provides HR and legal support free of charge. It also offers employees the opportunity to spend some of their paid time working for AHH as drivers, carers or other work as required.
- All of those that attend AHH act as 'eyes and ears', checking on anyone who has not been seen by those at the centre. If anyone goes into hospital, volunteers visit them and arrange to welcome them on their return home, providing extra support if needed.
- There are strong links with local businesses. A loyalty card is given to people who join the network, which they can use to get a discount on goods or services. Posters for the loyalty cards displayed in the shops act as a way to introduce more people to the network. A local florist has got to know many older people through the network and is able to provide a personalised service which is valued when friends or family pass away. Local services, for example florists and hairdressers, have a CRB check before they are invited to visit older people in their homes to provide a service.
- The 'alternative curriculum programme' is a 12-month programme run for young and old people to understand each others' concerns. This has helped to change their perceptions. For example, an older woman was afraid of passing a group of young people on her estate as she walked to church each Sunday. One day she fell and was assisted by one of these younger people who recognised her from the programme. He said that he would not normally have helped her as he would be afraid that he might be accused of pushing her over. He now always looks out for this woman and sees that she is safe.
- A youth worker acquired a barge where groups of young people get trained. They are then asked to invite a group of older people from the network to join them for the day. They are responsible for hosting the event and need to think through how best to meet the older people's needs to sure that they have a good time and are safe.

This benefits both the young and old as they engage in meaningful activity and share experiences and skills. These are just some of the many examples of how one NNS is working with older people and local communities to reduce social isolation and improve quality of life. The key message is to build networks across the local community involving everyone, not just older people. Getting on well together - councils working with older people

Evaluation

As part of their LinkAge Plus pilot, Leeds City Council has evaluated the role of the NNS as enablers of older people's independence and wellbeing through information provision as 'gateways' to services, and their role as community capacity builders. This research was carried out by Leeds University. Part of this involved training older people as researchers to assist with interviews of older people.

NI 139, 'The extent to which older people receive the support they need to live independently at home', is one of the National Indicators that is being used to measure outcomes for older people. The NNS are a key element in Leeds City Council's Strategy to promote active ageing within cohesive communities, and provide evidence about what older people want. Strong messages from the NNS are that older people want support to contribute to the life of their local area and have access to local support and services.

What helped?

- Engaging with older people and the existence and willingness of the NNS to test out innovation e.g. the 'gateway' role.
- Making links in Europe. Leeds is part of a 10-city project called Cities in Balance, which has a focus on improving the way cities respond to the ageing society. Some of this builds on work with the NNS around improving information and developing intergenerational understanding. CIB helps to give an ongoing profile to the work as well as opportunities for learning across the partnership.

Future challenges

The significance of an ageing society and its impact on all public services is often not understood or prioritised by local authorities. The Council is doing work to promote better engagement with this agenda across all departments and partners, and in a focus on local developments such as the NNS, with a link to the Council's place-shaping role.

Case Study Four - Tower Hamlets

In Tower Hamlets, 80 per cent of the population is 50 years or under. The Council recognised the risk of social exclusion for older people living in the borough and set up a LinkAge Plus programme to provide social, leisure and employment opportunities for older people, as well as advice, information and a single access point for services. The programme is supported by 30 partners – five of these are from the third sector and they each host a LinkAge Plus Network Centre in different parts of the borough. The network centres deliver a wide range of opportunities and activities including:

- service navigation
- social activities
- leisure
- advocacy
- benefits
- financial and legal advice
- health services
- employment and volunteering
- educational opportunities.

Older people work as volunteers in the Network Centres for example, acting as service navigators to help others to access services. Each Network Centre has a user forum and involves service users in decisions on service provision.

The LinkAge Plus programme employs 16 staff to provide outreach to older adults and make connections between third sector and statutory organisations – many of which have no history of working together. By bringing together local providers of services across different agencies to work in a collaborative and integrated way, duplication is minimised, resources are used more efficiently and services are delivered more effectively.

Outreach workers often find innovative ways to improve the health and wellbeing of older people. For example, there were few community facilities for the Bengali community, especially for women. A LinkAge Plus outreach worker negotiated a £2 fee per session at a private fitness centre during the off-peak period. At first the older Bengali women were reluctant to use this facility as they did not feel it appropriate given their age and gender. However, gradually more and more older women took up this opportunity. Many said that it was liberating and they felt more confident and healthy as a result.

What were the key challenges?

- As with all partnership working, it can sometimes be difficult to coordinate activities and services.
- The management of joint funding.

What helped?

- The programme was informed by engagement with older people and was user-led.
- Involvement of older people at strategic and operational level through the Older People's Reference Group and Older People's Partnership Board.
- A high-level of commitment to work in partnership.
- A willingness to resolve and innovate.
- Previous success
- A clear vision.

Case Study Five –How Merton's Partnership for Older People is improving access to information for people over 50

In Merton there are a number of initiatives aimed at improving access to information that have been developed and implemented by the Partnership for Older People.

The Head of Service for Libraries is taking the lead for the Council in improving information. The skills and expertise of the library service are often not fully used by councils in developing strategies for improving access to information.

What are they doing?

London Borough of Merton's Strategy for older people, *Celebrating Age – Valuing Experience*, was based on national research and the views of local people. A questionnaire was sent to 2,000 people over 50 years of age, 500 of which were completed and returned. The Strategy highlights the need for improved access to information as many respondents did not know who to contact for information or services when in need.

The Merton Partnership for Older People is improving access to information by:-

- providing a directory of information through all library departments with links to other web sites
- collating databases of people living in the borough over 50 years of age
- identifying gaps in information and taking action, for example, identifying the need for more information about saving energy and then inviting a speaker to speak to local groups
- distributing a newsletter, My Merton, which is sent out to every home
- finding ways to make information more accessible to those who are less likely to receive the information that they need in a way that they can understand, through volunteers and community development workers
- holding an annual Celebrating Age festival for the over 50s.

How did they do this?

The *Celebrating Age* festival has been held in Merton annually for the past six years. It promotes local services for health and wellbeing and leads to an increased take-up of these services.

Ninety-five organisations are involved in the festival. It has led to strong networks developing across community organisations as they work together each year in planning and running the festival. People who attend the event are included on a database. Each year the numbers grow as the festival is very popular and well-attended.

A range of activities take place during the festival week, including:-

- script-writing sessions run by a creative writing group
- South London Gays tennis session and pub lunch
- Wimbledon Theatre's regular classes for people over 50 through an introductory session
- a range of walks
- introductions to support groups such as Diabetes UK and Arthritis Care
- yoga and tai chi offered by the stroke club
- a Caribbean party
- Chinese, Caribbean and Goan performers
- a food fair.

Measuring outcomes

Every year the festival is evaluated by participants and organisers so that it can be improved. The ages, gender and ethnicity of those that attend are analysed as well as how they found out about the festival and how they traveled. This information is used to help improve equal access to all parts of the community.

It is anticipated that improved access to information through the *Celebrating Age* festival and other sources will help to improve the outcome NI 139, 'The extent to which older people receive the support that they need to live independently at home', although the festival should also help to improve outcomes for NI 137, 'Healthy life expectancy at age 65' and NI 138, 'Satisfaction of people over 65 with both home and neighbourhood'.

What helps?

The *Celebrating Age* festival has led to a very strong network of community organisations and a shared database of contacts of people over 50 years of age living in the borough. This provides an excellent network for the distribution of information.

Future challenges

There is a lack of capacity in the Council and NI 139 is not a priority for everyone. *"We need to keep on coming from different angles to embed a cross cutting approach to the well being of older people across the Council"*.

Case Study Six – How Active Living centres are promoting health and wellbeing in Somerset

Somerset County Council has worked with local communities and established a network of Active Living centres. The centres provide people over 50 with opportunities to access activities that promote good health and wellbeing through prevention and early intervention.

What are they doing?

In 2006 the Somerset County Council was one of 19 authorities to receive funding from the DH as part of the Partnerships for Older People (POPP) initiative. Funding was provided for two years as part of a pilot scheme to enable the Council to deliver 50 Active Living centres. In 2008 when the Somerset POPP pilot came to a close, funding was provided from Somerset County Council and Somerset NHS to mainstream activity into the Somerset Active Living Network.

The Somerset Active Living Network now has 94 Active Living centres that provide opportunities for people aged 50 plus to access local services, information and activities that promote keeping active and healthy. Active Living centres are run by volunteers, with older people at the forefront of developing and delivering active living opportunities.

Reciprocal volunteer support arrangements are encouraged through the use of Time Banks. This is a way of swapping and sharing skills and expertise. For example, one person may offer to shop and another to teach somebody else how to email. These favours can be exchanged using points to keep a record of services provided and received.

The Active Living centres provide:

- informal drop-in café style environments for people aged 50 plus
- information on local services
- activities which promote keeping active and healthy
- information on healthy lifestyles and preventing long-term illness and dependency
- drop-in visits from neighbourhood police and community nurses
- assistance in completing forms and applying for benefits
- information and signposting to other services.

A team of staff employed through Somerset County Council supports the Active Living Network and the 94 Active Living centres across Somerset. The development of the wider Active Living Network is supported through the Active Living Partnership. Key partners on the Active Living board include, Age Concern Somerset, Somerset NHS, District Councils, Somerset Disability Federation and Somerset County Council.

In order to share knowledge and create local networks, volunteers and co-ordinators from the Active Living centres come together as part of local cluster arrangements.

The plan is for the Active Living centres to become self supporting over time. A two year spending plan has been agreed with Active Living centres to support them towards becoming self-funded. Groups will work towards becoming self-supporting, by charging small amounts of money for activities and through local fund raising. Many of the Active Living centres established in the first year of the pilot are already self-supporting.

What helped?

Creating opportunities for Active Living to be developed as part existing local community groups has supported local ownership.

Future challenges

Ensuring that Active Living centres are inclusive of all older people in local communities – in particular frail older people, who cannot attend the Active Living centres without assistance.