

# BARNSLEY METROPOLITAN BOROUGH COUNCIL

**South Area Council Meeting:**

**20<sup>th</sup> October 2017**

**Report of South Area Council  
Manager.**

## Tackling social isolation – an options appraisal

### **1. Purpose of Report**

- 1.1 For members to consider options for the development of a social isolation project in the South Area.

### **2. Recommendations**

- 2.1 That members agree to further consider one of the options outlined in Section 4 in the context of the wider contract review and subsequent financial pressures. .

### **3. Background & progress to date**

3.1 Over the past 12 months, the South Area Council and its three Ward Alliances have been discussing the problem of social isolation. This has arisen from both available data around the issue, and from real examples of isolated individuals coming into contact with local projects, ranging from Sloppy Slippers to Luncheon Clubs.

3.2 A workshop was held with members of the South Area Council on 28<sup>th</sup> April 2017 where it was agreed that a list of options available to reduce the number of socially isolated people living in the South Area should be produced. The options paper was presented to the South Area Council on 16<sup>th</sup> June 2017.

3.3 Members agreed to further consider the development of a social isolation project and requested further information on options for either a part time or full time programme worker.

3.4 It was agreed that a final decision would not be made until the South Area contract review workshop had taken place in September 2017.

3.5 Evaluations have found “that for every £1 invested in social isolation interventions, there was a social return on investment of £1.20; cost-savings for the NHS also come through early intervention that avoids later stage, more expensive treatments (Public Health England, 2015).

#### **4. Options available to the South Area Council to tackle social isolation through funding of a programme worker:**

4.1 Area Council to commission a partner organisation to employ either:

- a) A part time worker (0.6 FTE ) to co-ordinate a Good Neighbours Scheme;
- b) A part time worker (0.6 FTE) to ensure exiting community groups proactively address social isolation; or
- c) A full time worker (1.0 FTE) to co-ordinate a Good Neighbours Scheme and co-ordinate existing community groups.

#### **4.2 Option A:**

To employ a part time worker (0.6 FTE) to co-ordinate a Good Neighbours Scheme  
The Good Neighbours Scheme would help by improving the quality of life of the residents such as those found in the case studies in appendix one. The part time worker would co-ordinator a Good Neighbours Scheme which would consist of:

- The coordination of a volunteer befriending (to act as or become a friend to someone, especially when they are in need of help or support) programme. The befriending programme would offer older people company and practical support which would make a positive contribution to their health, wellbeing, independence and happiness.
- Examples of practical support offered by the Good Neighbours Scheme would include help with shopping, changing a light bulb, collecting a prescription, gardening, transport and support with technology.
- The Good Neighbours Scheme would incorporate national and international best practice.
- The part time worker would conduct research to identify who in the South Area is isolated, where isolated residents are located and the best method of identifying them.
- The Good Neighbours Scheme would not provide personal care, cooking or cleaning activities.
- Approximately £14,250 per annum including on-costs.

#### **4.3 Option B:**

To employ a part time worker (0.6 FTE) to co-ordinate exiting community groups.

- The worker's expertise would be used within an advisory role to support current community groups working in the South Area. The worker could provide specialist skills and knowledge to grow and strengthen existing provision and/or deliver training to community groups.
- The part time worker could work with groups such as the Pop-Up Club in Jump, luncheon clubs and Loxley Community Garden, to help them extend their welcome and ensure that activities are inclusive of older and/or socially isolated residents.
- The part time worker would conduct research to identify who in the South Area is isolated, where isolated residents are located and the best method of identifying them.
- The part time worker could help groups to draw down external funding.
- Approximately £14,250 per annum including on-costs.

#### **4.4 Option C:**

To employ a full time worker to manage a Good Neighbours Scheme and co-ordinate existing community groups.

- The full time post would have capacity to deliver the Good Neighbours Scheme and support existing community groups, as explained in option A and option B.
- Approximately £23,750 per annum including on-costs.

#### **5. Next Steps:**

5.1 For members to consider options for a social isolation project in relation to the forthcoming review of South Area Council contracts.

5.2 Member to agree their preferred option for delivering a social isolation project.

#### **Appendix A: Social Isolation Case Studies**

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## Appendix One Social Isolation Case Studies

### **Case Study One: Older female experience of social isolation**

When Jean's husband of 50 years died of cancer, she fell into a downward spiral of depression. Jean and Thomas had little family and had always done everything together. Jean had relied on Thomas as her personal taxi driver as she had never learnt to drive. With no local friends, Jean was left with an empty void she could not fill. Jean herself is unsteady on her feet and has a fear of falling. She is nervous to go out on her own, and as a result has become isolated in her home. Jean is able to get to her local shop and GP with the use of her walking stick but is unable to go much further. She misses the independence that Thomas provided her and is worried people will forget about her.

### **Case Study One: Older female improved quality of life after the Good Neighbours Intervention**

On Jean's last trip to the GP she picked up a flyer for a local Good Neighbours scheme. After looking at the flyer pinned on her fridge for a couple of weeks, she picked up the courage to call. Jean was greeted with a warm and friendly welcome and given more information. There were different options available to her but she chose the befriending scheme. Since joining the programme, Jean is visited twice a week by Jane (who is only ten years younger than her, and works as part time nurse at Barnsley hospital just as Jean had once done). Once a week Jane takes Jean out in her car. Over the past few months they enjoyed cake and coffee at the Potting Shed in Silkstone, shopped at Corton Wood and visited an exhibition at Cannon Hall. The other day, Jane stopped by on her way home from work to have a cuppa with Jean, often picking up milk and bread.

Jean is feeling much happier and really values her friendship with Jane. She no longer feels alone and has learnt it's OK to ask for help when needed. Jean has really noticed an improvement in her mood and is enjoying getting out and about again. Her confidence in her ability to walk to places has also improved and she is now walking further on her own. Although none of this will bring Thomas back, Jean is at peace knowing he would be proud that she is still enjoying life.

### **Case Study Two: Middle-aged male experience of social isolation**

Michael has always lived alone and coped well with his chronic arthritis. However, due to the worsening pain of his arthritis, Michael has become inactive, which led to weight gain and unfortunately a diagnosis of type two Diabetes. He has regular check-ups at Hoyland Medical Practice to monitor and control both illnesses, but as the Diabetes was diagnosed late, the condition has already affected his feet. Shoes that were once comfortable now cause him problems and he is finding it painful to walk. Also, the progressive nature of Michael's arthritis means he can no longer handle the steering wheel of his car. Losing the ability to drive and the development of Diabetes has led Michael to become dejected, as he feels he's lost the ability to look after himself. Michael feels cut off from the community. He no longer is able to attend the local history group which he loved.

## **Case Study Two: Middle-aged male improved quality of life after social intervention**

Although Michael is no longer attending his local history group, the group chair, Neil calls to see Michael once a month, bringing him reading materials, photos of current projects and uses the time to listen to Michael's ideas and feeds them back to the group. That way, Michael still feels involved, which helps him feel useful and more positive.

Last time Neil visited Michael, he mentioned that his neighbour had just hired a mobility scooter from a shop in Barnsley town centre. Now Michael is no longer able to drive, he's made the decision to sell his car and use some of the money to buy a scooter. To Michael's surprise the scooter can be taken on the bus, so now he is out about all of the time, using public transport daily. He even enjoys waiting for the bus as it's a nice opportunity to talk to neighbours. With Michael's independence back, he is planning on returning to the history group.

## **Case Study Three: Female Carer's experience of social isolation**

Claire has lived happily in Darfield since marrying Tim. Claire and Tim have been married for 25 years, but sadly last year Tim developed early on set Dementia. Claire gave up her job as a nursery teacher to provide full time care for her husband. Claire takes the role of carer very seriously and wants to support Tim the best way she can. Claire's friends and family are trying to persuade her to seek help from the professionals but she is afraid she won't qualify for support and she is unable to afford private care.

As she provides 24 hour care, Claire is becoming tired and in need of a break. She can't remember the last time she caught up with friends. Although they offer to visit her at home, she doesn't want them to see that she is struggling to keep on top of the housework. She know she would be benefit from respite but feels guilty leaving Tim. Claire regularly chats to family on the phone but always turns down invites to family gatherings.

## **Case Study Three: Female Carer's Respite and Social Involvement**

Due to Claire's change in circumstances, Claire is no longer able to engage with the Darfield community, friends and family. One afternoon Claire decided to google carer's support Barnsley and ended up on a webpage for a national charity, Carers UK. The website provides online forums, help and advice which Claire is finding very useful. They have also signposted her to a local monthly support group, provided by the Royal Voluntary Service in the Rockingham area.

Claire has finally accepted help from her sister and attends the support group, while her sister Sue cares for Tim. She is only out of the house for a few hours but she finds the opportunity to speak with other cares invaluable. The group is a real support and she feels comfortable sharing her experiences with others in a similar position. Claire has been attending the group for a year now and along with a couple of the others, is using her organisational skills arrange a 5 day trip to the coast for the group members.