## Penistone Area Council

#### Review of the Isolated and Vulnerable Older People Service

#### 1. Introduction

Following a priority review workshop on 17<sup>th</sup> November 2016, Penistone Area Council agreed the following revised priorities:

- Environment
- > The Local Economy including tourism
- > Helping people to connect better
- Health and Wellbeing
- Support to Young People

#### 2. Purpose of this document

At the Penistone Area Council meeting held on the 14<sup>th</sup> April 2016 Members agreed the draft specification of requirements to procure a service to address the needs of isolated and vulnerable older people in the Penistone East and West area as part of its' priority to address Health and Wellbeing in the area.

Age UK were selected as the preferred provider and a 12 month contract with a value of £70,000 started in January 17 for one year with the option to extend the project for a further year at the discretion of the Penistone Area Council.

Following consideration of a six month performance report and presentation at the Penistone Area Council meeting on the 3<sup>rd</sup> August 17, Members agreed a one year extension to run from January 15th 2018- January 14th 2019 at a cost of £70,000 for 12 months.

This service will come to an end on <u>14<sup>th</sup> January 2019</u>

The purpose of this document is to build on the recent review of performance outcomes presented to Members by Age UK on May 17<sup>th</sup> 2018, to consider potential future options to provide a more sustained approach to addressing the needs of isolated and vulnerable older people in the Penistone East and West areas, beyond the existing contract

The aim is to:

- Understand the need, value and benefit of the current service
- Understand the strategic and local context for any future Penistone Area Council intervention/s.
- Consider a way forward to address the identified need going forward.

# 3. Background and Context

It has been well documented that reducing loneliness and isolation leads to an improvement in health and wellbeing and can reduce the need for more acute care and health services.

In the Penistone area a number of factors contribute to loneliness and isolation which therefore impact directly on health and wellbeing:

- The Penistone East and West areas has the highest rate across the Borough of one person households in the 65+ age group
- 39% of the population of Penistone East and West are known to be aged 60+ compared to 23% nationally.
- the rural nature of Penistone East and West- geographical coverage of 50% of the Barnsley Borough but with only 10% of its population, with many people living large distances apart in villages and small hamlets which are not all well served by local transport
- Evidence of the lack of facilities and amenities in some of the outlying rural areas coupled with the lack of access to suitable transport services for amenities which are available in Penistone Town and some of the larger villages and parishes as well as Barnsley Town Centre

The Penistone Area Council therefore sought to address some of this through the commissioning of the Isolated and Vulnerable Older People service which would meet the following aims and objectives:

- Provide universal access to good quality information about local services, promoting health and active lifestyles
- Promote a positive image of older people, and enabling contact between older and vulnerable people.
- Increase awareness of and access to shops, leisure, health services, housing services, libraries,
- Support vulnerable and older people to access the services of their choice.
- Ensure people have greater choice and control over meeting their needs.
- Fill gaps in service provision that otherwise people could not access
- Reduce loneliness and isolation and improve physical health and emotional wellbeing
- Increase independence and social inclusion in the home and in the Community enabling older people to participate in community life
- Increase the opportunities for volunteers and volunteering and encourage neighbourhoods of the local parishes, villages and hamlets to identify ways they can reach out to lonely isolated people in their community.
- Supporting people to take part in the local community, having social contact and experiencing friendships, which is critical to a good quality of life, health and wellbeing.

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- Motivating and incentivising volunteers to 'give something back' and becoming valued contributors by providing opportunities to use their skills, knowledge and expertise to help others live independently.
- Working with other service providers in an integrated way to tackle some of the key issues which prevent vulnerable and older people from living healthy, active lives.

In November 2016 Age UK were selected as the preferred provider, and have been delivering a service since January 2017. Age UK have delivered the specified service to a satisfactory level with no significant area of concern highlighted at any time.

# 4. Delivery of the Service: January 2017-December 2017

This section provides more general service delivery information and builds on the recent presentation to Members by Age UK on 17<sup>th</sup> May 2018.

The Service has been delivered primarily through 2 Social Inclusion Workers both based in Penistone Library, one of whom has focussed on group support, group development, community asset mapping and eyes on the group, and the second providing individual support, recruiting and training volunteers as Good Neighbours, Car Drivers and other informal support as well as acting as the liaison to the Community Car Scheme provided by Barnsley Dial-a-ride.

The outcomes identified in the service specification have been achieved in the following ways:

## Group support.

The focus of this work has been to build a map of existing groups and activities available to Older people in the Penistone area; to enhance and support these, identify where there are gaps in this provision and support new groups to establish and become sustainable in the longer term. In addition a number of 'Eyes on the Ground' activities have been carried out to consult and help identify individuals in need of support. These have included the Penistone Big Knit and Keeping Penistone Warm event attended by over 70 people, who were then registered for support on the Winter register. Working together with the University of the Third Age ( U3A) 10 new sustainable groups were established in year one of the programme ( against a target of 6) with 217 Older people attending new groups and activities as a result of the service intervention. Year two of the contract has focussed on events based in villages through the Sloppy Slipper Exchange where to date 80 pairs of slippers have been exchanged as a result.

#### Individual support

At an individual level a total of 733 interventions were made during year one of the contract. Individual intervention can lead to signposting to groups, accessing services (such as GP appointments) and referral for support from the Good Neighbour/ Be-friending volunteers. Detailed knowledge is required to deal with varied personal situations, and continues to provide much needed evidence of the complexity of social isolation.

#### Volunteers.

Volunteer outcomes have been a major aspect of the service, and provide a route for sustainability, although requiring intensive support initially from Age UK staff. Volunteers include both formal roles such as the Good Neighbours (of which 27 are currently in place) and informal roles supporting groups and events. 63 volunteers were deployed during year one of the contract providing 1328 hours of support.

#### Community Car Scheme

In response to accessibility and connectivity, Age UK has worked with Barnsley Dial a Ride to establish a Community Car Scheme. Over the course of year one of the contract, 165 journeys have been made with 6 volunteer drivers in place. This provides service users with the opportunity to access vital appointments as well as social activities.

#### Measuring loneliness and wellbeing

In addition to monitoring outcomes based on intervention listed above, Age UK has also been asked to provide a measure of service user improvement in terms of feeling less lonely and increased wellbeing. This has been achieved using the UCLA Loneliness Scale to measure loneliness responses and the Shortened Warwick Edinburgh Mental Wellbeing Scale (SWEMWBs) to measure wellbeing. These are widely used and accredited tools and both require service users to look at a set of statements and see which describes their current position. Service Users are asked to set a base measurement before the service is delivered and then again after 3 months or on ending the service if this happens sooner. Looking at these as averages across all service users gives strong indicators that the service is alleviating loneliness and improving wellbeing. However, while 81% of people who scored themselves showed an increase in Wellbeing after 3 months, only 63% of people scoring showed a reduction in Loneliness.

## 5. Current Situation

At the outset of the commissioning process in April 2016, Penistone Area Council identified that by reducing loneliness and isolation there would be an improvement in health and wellbeing for particularly older residents in the area. This in turn will enable the Area Council to contribute to wider public health outcomes and support

the aspirations of the Borough to reduce the need for more acute care and health services. Whilst a significant impact has been made to date by the service commissioned to support isolated and vulnerable older people, Age UK have through delivery of the service so far provided the Area Council with evidence to suggest that there is a further need for consideration.

Areas of need identified:

# Development of existing provision

There is scope and need to develop the volunteer offer to support older people through the Good Neighbours scheme, and volunteer drivers. This will require some further input to develop and train volunteers but would in turn ensure improved outcomes to reduce isolation overall, and in particular support with the winter register, which has currently provided support to 34 individual during this last winter.

## Men accessing support

Age UK figures report three times more female than male residents accessing support through their service in Penistone. Although this may to some extent reflect the demographic make-up of residents in the area, Borough wide evidence shows that males are less likely to participate in group activities than females. Male orientated activities could be a way forward for this such as the Men In Sheds project with a Penistone focus.

## Community Liaison

Much of the work of Age UK has to date been focussed in the Penistone Town centre area, with a recent foray into the outlying villages and hamlets to provide the Slipper exchange. Age UK has identified that there are some hotspot areas such as Tankersley where there are known to be higher rates of social isolation. To address this in the longer term it is identified that some immediate work needs to be done to provide facilitation to link up support and activities where there is no obvious centre in a village or hamlet.

## Promoting physical and mental wellbeing.

Individual work undertaken by Age UK has identified that there are specific gaps available to support with physical wellbeing and in turn mental wellbeing. Support is needed to set up activities which will have more focus on health outcomes such as Walking, light exercise, and getting people moving. There is also growing evidence that this supports people living with dementia.

## Strengthening links to partners within community based services.

Working directly with individuals has revealed the complexity of issues that have contributed to social isolation, and in particular the high levels of Mental Health issues experienced by older people that are not regularly picked up by services.

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There is a need to ensure that services are working more coherently within the community by strengthening the links between such services as Community Pharmacy, Social Prescribing, Dementia Support and GPs, creating a network that links into the activities available to Older people in their community.

# Age Friendly Penistone

There is scope for Penistone to pioneer an idea being adopted by some major cities to create a community in which Older people are at the heart of design, development and planning to create an Age Friendly town. For Penistone this could dovetail into the approach being taken as part of the Principal Towns initiative. Support would be needed to ensure Older people are central to consultation processes, and would create a legacy from any Area Council commissioned or supported intervention.

## Intergenerational work.

Isolation is not just experienced by older people. Recent work provided by the Bumping Spaces project in Penistone to develop peer support has shown that it is possible to bring together all ages through activities where different generations can learn from each other. Age UK have started to work with new Mums, and have been trialling working with young people to engage in activities with older people. Further scope exists to develop this and will enable the Area Council to achieve not just the Health and Wellbeing priority but also support to Young people.

# 6. Proposed Options for Area Council support to address its' health and wellbeing priority

A number of options are available to ensure that the Area Council can continue to achieve the priority to address health and wellbeing by supporting isolated and vulnerable older people. Members are asked to consider the proposed options below for discussion and advise on a preferred option. Further detail can then be worked up for presentation and decision at Area Council on 19<sup>th</sup> July 2018

	Proposed Intervention	Potential to achieve outcomes	Estimated cost /funding
1.	Support to a group of up to 4 small scales projects each targeting specific areas of need as identified above.	Would enable targeting work and encourage a variety of providers especially smaller scale groups to provide innovative solutions. Would encourage	Using Working Together Funds the maximum costs per project would be £20k. Area Council monies would be diverted to Working Together funds instead of £70k to a

		groups to apply for additional funds using Working Together funds as match.	further commission.
2.	Establish Health and Wellbeing network of existing providers to encourage cross working which focusses on specific outcomes as identified above. To include for example : Community Pharmacy, Social Prescribing, GPs, VCS support ( e.g Dementia groups etc) Age UK Barnsley	Would be difficult to monitor and would rely on good will of providers to collate own performance against outcomes agreed.	Nil, but would require staffing resource to help facilitate the network. Could offer some Working Together fund to non- statutory organisations involved
3.	Further commission written to address the specific outcomes identified. Tender process open to the market.	Would enable specific targets to be set to achieve outcomes as part of contract monitoring.	Estimated at £70k based on existing commission.
4.	Do nothing specific. Maintain the priority to encourage an approach that partners would acknowledge and work towards as part of their existing delivery.	Outcomes would be difficult to ascertain	Nil cost

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