**PART A**

1. **Invitation to Tender**
	1. This Invitation to Tender is issued by Hackney Council for Voluntary Service (HCVS). HCVS is funded by the National Lottery Community Fund to deliver the Connect Hackney Programme and is solely responsible for meeting the terms and conditions of the contract with the National Lottery Community Fund.
	2. The deadline for responses to this tender is **5pm on 20 March 2019**.
	3. HCVS is responsible for the disbursement of funds received from the National Lottery Community Fund to deliver Connect Hackney and reserves the right to issue service level agreements (SLA’s) to deliver aspects of the Connect Hackney programme.
	4. Where service level agreements are issued, HCVS will agree arrangements with delivery providers and reserves the right to terminate or withhold funding, if the terms of the funding agreement are not being met.
	5. HCVS is not liable for releasing any payments for the delivery of services outlined within the SLA, until grant payments from the National Lottery Community Fund have been received. HCVS is required to submit performance and financial reports to the Connect Hackney Strategic Partnership Board and National Lottery Community Fund on a quarterly basis.
	6. HCVS reserves the right to cancel or amend the information contained in this tender at any time. This also relates to changes to the timing or any other aspect of the procurement process, including cancelling the procurement process at any stage, without prior notice.
	7. HCVS is not liable for any costs or expenses incurred by bidders during this procurement process.
	8. HCVS intends to accept the tender which scores the most marks against the criteria set out in this document. HCVS shall normally accept the tender submission that scores the highest and offers best value. However, if we are made aware of any information known by the bidder during the tendering process, that would have disqualified the bidder from being invited to tender, the bidder may then be excluded from the process. If this should happen, HCVS reserves the right to appoint the next highest placed bidder (based on the same assessment and due diligence processes).
	9. HCVS will carry out due diligence checks as part of the tendering process, to ensure that bidders have the capacity and financial capability to enter into a service level agreement to deliver a project on behalf of the Connect Hackney programme. This will include reviewing audited accounts and if required, the most recent management accounts.
	10. If the due diligence process indicates that a bidder does not have the organisational capacity or financial capability to deliver this service level agreement, HCVS reserves the right to appoint the next highest placed bidder (based on the same assessment and due diligence processes).
2. **Timetable**

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| **Action** | **Dates** |
| Invitation to Tender is issued | 14 February 2019 |
| Deadline for Tender Submissions | 20 March 2019 |
| Assessment of Tenders including panel interviews with shortlisted bidders | 21 March – 5 April 2019 |
| Confirmation of preferred bidder/s, clarification of any outstanding issues and service level agreements issued. | w/c 8 April 2019 |
| Induction meeting  | **w/c 15 April 2019** |

1. **Tender Documents**
	1. The bidder is expected to review this tender document in full, including all supporting appendices.
	2. Bidders must respond to the criteria outlined in **Part B** of this tender and ensure that all of the information requested, is provided. If any of the information is not provided, HCVS reserves the right to reject the tender on that basis.
	3. Bidders must submit a budget breakdown as requested in Part B, Section B, 3, detailing a total and full charge for the provision of the proposed project or service.
	4. The charges must be quoted in pounds sterling and inclusive of VAT (where applicable) and includes all expenses relating to the delivery of the project.
	5. HCVS reserves the right to discuss the expenses outlined and agree with the contractor a maximum sum for all expenses.
	6. If the submission for this tender is a joint bid, the bidders will need to have in place a partnership agreement detailing the roles and responsibilities of each bidder in the delivery of the contract.
	7. A lead bidder must be named in the tender submission and they will have ultimate responsibility for the delivery of the service level agreement. A signed partnership agreement must be submitted with the tender submission.
	8. Unless detailed in the tender submission, the named bidders are expected to deliver all aspects of the service level agreement. The Connect Hackney team at HCVS should be notified immediately, if this is expected to change.
	9. Bidders must declare any known or potential conflicts of interest in Part B, Section B, 4.
	10. Any questions relating to the tender and tendering process must be submitted in writing to tony@connecthackney.org.uk prior to the tender deadline.
2. **Submission of Tenders**
	1. Bidders must submit an electronic copy of their tender submission (including all supporting documents) to info@connecthackney.org.uk by **5pm on 20 March 2019.** Please note that tenders received after the deadline will not be considered.
	2. By submitting a tender, the bidder agrees to participate in the tendering process, which may include a panel interview involving staff and volunteers. Scores may then be moderated based on information provided at the interview.
	3. By submitting a tender, the bidder agrees to keep the tender open for acceptance by HCVS for up to 60 days following the deadline for tender submissions.
3. **Notification of Award**

5.1 HCVS will issue a signed Service Level Agreement to the successful bidder, to constitute acceptance of the tender.

1. **About Connect Hackney**

6.1 Connect Hackney is a £5.8m programme aimed at enabling Hackney residents aged 50 plus to improve their wellbeing, by reducing or preventing isolation and the programme is managed by Hackney CVS and is one of fourteen programme areas in England funded through the six year National Lottery Community Fund - Fulfilling Lives, Ageing Better programme. The ultimate aim of the programme is to learn which kinds of projects and interventions work best to reduce and prevent the social isolation of older people.

6.2 Connect Hackney started as a programme in 2015 and will run until March 2021.

The programme has the following outcomes:

**OUTCOME 1:** Increased numbers of older people who are socially isolated, engage in meaningful and enjoyable activities which result in new friendships, sustained networks, improved resourcefulness, more confidence and thus, ultimately, a better quality of life.

**OUTCOME 2:** Increased numbers of older people who are at risk of social isolation, engage in meaningful and enjoyable activities which result in new friendships, sustained networks, improved resourcefulness, more confidence and thus, ultimately, a better quality of life.

**OUTCOME 3:** Embed an asset model towards ageing and older people, where the latter are more actively engaged in the community and valued for the contributions they make (updated October 2017).

**OUTCOME 4:** Increased direct involvement of older people and people as they age in shaping policy and holding key stakeholders to account, leading to stronger partnerships and more effective, better coordinated delivery which reduces social isolation.

6.3 **Connect Hackney – Key statistics from the programme to date**

* 2,611 participants to date have been involved in activities delivered across 23 projects.
* Approximately 27% of participants are male.
* Most activities have been group based, with some 1:1 provision.
* 60% of participants are aged over 65, with 9% aged 50-55.
* The programme has high participation rates from White, Black Caribbean and Black African individuals.
* One third of participants has a longstanding illness or disability.
* 15% of participants are carers.
* Social activities, coffee mornings and craft groups are the most popular activities, followed by physical activities, designing or delivering activities and learning new skills.
1. **Understanding social isolation**

7.1 Connect Hackney uses the following definitions of social isolation:

**Social isolation:** Having no or very limited social networks (at most having once a week/weekly contact with friends, family or neighbours).

**Being at risk of social isolation:** Experiencing transitional life phases such as retirement, bereavement or divorce especially when living on a low income, experiencing ill health or disability, having less formal education, being LGBT or living in rented accommodation.

7.2 Our understanding of how people become isolated and the difficulties with trying to stay socially connected in later life has been informed by many different sources – statistical data including the 2011 census, the London Borough of Hackney demographic profile and research such as the English Longitudinal Study on Ageing.

7.3 Our understanding of the interrelated issues affecting older people has also been informed by older people and the expertise of our strategic partners including colleagues from health and social care, within the voluntary and public sectors.

7.4 We have produced the following documents as an updated evidence base for Connect Hackney and they are available as supporting documents to this tendering process. We strongly encourage all interested bidders to review the documents before completing their tender submission.

1. Connect Hackney: Profile of social isolation amongst older people in Hackney (Appendix 2: <http://www.connecthackney.org.uk/wp-content/uploads/2019/02/CH-Appendix-2-Profile-of-social-isolation.pdf>)
2. Connect Hackney: Community Conversations Report (Appendix 3: <http://www.connecthackney.org.uk/wp-content/uploads/2019/02/CH-Appendix-3-Community-Convs.pdf>)
3. Connect Hackney Programme Model 2018-2021(Appendix 4: <http://www.connecthackney.org.uk/wp-content/uploads/2019/02/CH-Appendix-4-Programme-model.pdf>)
4. Connect Hackney – What we learned in Phase 1 (Appendix 5: <http://www.connecthackney.org.uk/wp-content/uploads/2019/02/CH-Appendix-5-What-we-learned-from-Phase-1.pdf>)

**8. Connect Hackney Core Values**

8.1 Connect Hackney is underpinned by the following set of values, which were developed by the Older People’s Reference Group and Connect Hackney staff team:

1. **Upholding human rights:** *upholding older people’s parity of esteem, equal treatment and right to self-determination*

1. **Empowering older people to enable their leadership:** *enabling the participation of older people throughout the project including design, delivery, setting priorities, financial oversight, management and evaluation (co-production); providing high quality training and support for older people; creating accessible and adaptive consultation mechanisms; ensuring all publicity and media content is accessible for people with cognitive or sensory impairments and disabilities (including dementia), working towards a gold standard of older people’s participation*
2. **Collecting and deploying evidence to increase our understanding of social isolation, its causes and associated factors:** *gathering data from multiple sources to illuminate the concept of social isolation, delivering effective and wide ranging outreach mechanisms to engage socially isolated older people.*
3. **Equality of access:** *increasing the provision of accessible, adaptable, reliable and flexible services and interventions, increase weekend, evening and public holiday provision, providing low level practical assistance.*
4. **Respecting diversity (including diversity of needs, interests, attitudes and capabilities:** *providing adaptable, flexible, tailored interventions, providing culturally appropriate services and interventions.*
5. **Providing protection and care for older people while preserving their dignity.**
6. **Ensuring freedom of (informed) choice and control.**
7. **Honest and transparent partnership working (for all stakeholders):** *operating with clear terms of reference, clarity of decision-making procedures and the recognition and reconciliation of the diverse interests of stakeholders (including service users, carers and providers), maximizing community assets to serve the project.*
8. **Setting and maintaining high standards of commissioned services:** *ensuring adherence to the Older People’s Reference Group’s Older People’s Dignity Code and the 2010 Equalities Act, ensuring the continuity and adaptability of services, quality assurance of providers, dissemination of best practice in delivery, staff and volunteer management and service user involvement in staff recruitment and development*
9. **Co-production and the role of Older People**

9.1 Central to the delivery of the Ageing Better programme is a commitment to working with older people to influence and steer the development of Connect Hackney and the funded programmes. All Connect Hackney projects should include older people in their design, delivery and governance

This includes older people being involved with:

* identifying the priorities for addressing social isolation
* planning how and where to address these priorities
* helping to manage or deliver new or better services where appropriate
* supporting the learning, evaluation and improvement of any approaches.

9.2 Connect Hackney has been committed to working in this way from the inception stages of the programme and older people are involved in programme governance, commissioning, evaluation, communications and more. More information about the work of Connect Hackney can be found by visiting: [www.connecthackney.org.uk](http://www.connecthackney.org.uk)

1. **Evaluation, Evidence and Learning**

10.1 Building an evidence base and sharing learning across projects and programme areas is a key feature of the Ageing Better programme and Connect Hackney is required to gather data to contribute to the national Ageing Better evaluation. We are also required to develop more in depth local learning and evidence to share across programme areas, with older people and with strategic partners. To help us with this, we have recently appointed a Researcher-in-Residence who will be leading our local evaluation, including both activities delivered by Connect Hackney, and through our commissioned delivery partners. All Connect Hackney funded projects will need to allocate resources to be able to participate in the evaluation – this could include arranging for our researcher to attend focus groups with project participants, or participating in staff interviews.

10.2 The approach to learning applies to both things that work and those that have limited success, as there is also an opportunity to review and amend projects as they develop.

10.3 The successful bidders for the commissioning strand targeting socially isolated people aged 50+ with complex needs, will be required to use the Common Measurement Framework to measure the outcomes achieved.

10.4 The Common Measurement Framework (CMF) is the national outcomes measure that the National Lottery Community Fund Ageing Better programmes are required to use. The measurement framework is in the form of a questionnaire that needs to be completed at least twice during an individual’s participation in a project.

10.5 As far as possible, the questionnaires should be completed independently by the project participants, although some support can be given with reading out questions. The CMF questionnaires are also available in the following languages:

• Bengali • Chinese

• Greek • Turkish

• Polish • Vietnamese

• Yiddish

10.6 Successful bidders will be required to attend a compulsory session on ‘Gathering Sensitive Data’ during the first quarter of project delivery.

1. **Connect Hackney – what are we trying to test and learn in relation to reducing social isolation for those aged 50+?**

The following 15 questions have been developed to provide a focus for learning and evaluation across all aspects of Connect Hackney, including commissioned activities.

1. What interventions have had the most success in reducing isolation with the identified target group? What can we learn from these interventions, specifically?
2. What information, referral and access methods have been the most successful in engaging older people in sustained activities (6 – 12 months or more) aimed at reducing their social isolation and loneliness?
3. Has the use of print media, leaflets or mailings increased the level of older people’s involvement in activities?
4. How successful has the Connect Hackney connector model been in engaging older people in sustained activities (6 – 12 months or more) aimed at reducing their social isolation and loneliness?
5. Can the use of technology help to reduce isolation? Has improved confidence in using IT contributed to a reduction in isolation and loneliness, enabling an individual to navigate services, keep in touch with family and friends, meet new people and find leisure and social activities that are of interest to them?
6. What barriers have needed to be addressed in order for older people to engage with the social and leisure activities available?
7. How effective have asset based community development approaches been in facilitating regular contact with older people at risk of social isolation and loneliness?
8. How confident are older people about ageing well in Hackney? What are the biggest concerns in relation to this?
9. What have we learnt about the contributions that older people make to the local community through volunteering or informal community involvement?
10. Has there been an increase in the level of older people’s involvement in influencing the way services are designed and delivered for older people in the borough? What has been achieved?
11. Has there been an increase in the confidence and ability of Connect Hackney Ambassadors (led by Age UK East London), in influencing the way services are designed locally? What has that meant for the individuals involved?
12. Has partnership working (as a result of Connect Hackney) led to improved co-ordination or delivery of any services for those over 50, who are at risk of social isolation? How so?
13. Has evidence and learning from Connect Hackney influenced any of the transformation work streams within the City and Hackney integrated community care model and if so, what outcome/s have been achieved?
14. Does the programme have clear plans for its legacy? What is the likelihood of the legacy being achieved?
15. Has systems change been achieved, as a result of the Connect Hackney programme? If so, how?
16. **Equality and Diversity**

12.1 Hackney CVS is committed to promoting equality and diversity in all aspects of its work and we expect all those that we work with to respect and abide by our policies in this regard.

12.2 We are committed to the principles of the Equality Act 2010 and the duty on public bodies to have due regard to the need to:

* Eliminate unlawful discrimination,
* Harassment and victimisation,
* Advance equality of opportunity,
* Foster good relations between different groups

12.3 Hackney CVS fully upholds the law pertaining to the 9 protected characteristics, which are:

***Age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation***

12.4 We recognise that in our society groups and individuals are and continue to be oppressed, disadvantaged and discriminated against on the basis of race, ethnicity, gender, gender reassignment, marital or civil partnership status, pregnancy or parental status, class, sexuality, disability, age, religious beliefs, health or HIV status and spent criminal convictions.

12.5 In furtherance of the Equality Act we fully recognise our role and legal duty to tackle inequality and take seriously the importance of promoting equality, diversity and inclusion in all areas; including the employment of staff, delivery of services and influencing social local policy.

12.6 Bidders are required to submit their Equality policies with their tender submission.

1. **Safeguarding**

13.1 Connect Hackney is committed to safeguarding adults with care and support needs, children and young people; and bidders will need to provide information on their safeguarding practices as part of this tendering process.

13.2 Bidders will need to ensure that the following is in place:

* Safeguarding policy (needs to be submitted with this tender).
* Robust recruitment and selection processes for staff and volunteers.  This should include checking disclosure (DBS) and taking up references where necessary.
* Disclosure and Barring Service (DBS) checks are in place for all appropriate staff and volunteers, before any work with adults with care and support needs takes place.
* Staff and volunteers are aware of their Safeguarding responsibilities for both children and adults.
* Risk assessments are carried out and additional insurances secured, if needed.
1. **Communications and Marketing**

14.1 Successful bidders will need to comply with the Connect Hackney and the National Lottery Community Fund branding guidelines. Organisations will also be expected to respond to proportionate requests for further information and photographs that can be used for promotional material to showcase Connect Hackney funded projects and provide evidence of our learning.

1. **Data Sharing Protocol and GDPR**

15.1 Please see Appendix 7 (<http://www.connecthackney.org.uk/wp-content/uploads/2019/02/CH-Appendix-7-Data-Sharing-Protocol.pdf>) for information on the data sharing protocol that successful bidders that will form part of our service level agreement with successful bidders. Please note that it is likely that the agreement will be amended in the next few months, to reflect the legislation on General Data Protection Regulation (GDPR) coming into effect later this year.

15.2 The closing date for this tender is: **5pm on 20 March 2019. Please be aware that late submissions will not be accepted.**

15.3 If you have any questions relating to this tender, please submit them in writing to Tony Wong, Connect Hackney Programme Director by e-mail to tony@connecthackney.org.uk

15.4 Please return your completed application/submission and all supporting documentation to info@connecthackney.org.uk and we will acknowledge receipt of your application, within 3 working days.

15.5 Alternatively you can send a hard copy of your application, marked for the attention of

Kim-Lien Ong to Hackney CVS, The Adiaha Antigha Centre, 24-30 Dalston Lane, London, E8 3AZ.

1. **Additional Information**

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| **Supporting Document** | **Appendices** |
| Introduction to the National Lottery Community Fund Fulfilling Lives: Ageing Better programme (detailed below in Section 19) | **N/A**  |
| Connect Hackney Projects Phase 1 2016 - 2018 | **Appendix 1** |
| Connect Hackney Profile on Social Isolation  | **Appendix 2** |
| Connect Hackney Community Conversations Report  | **Appendix 3** |
| Connect Hackney – reducing social isolation and loneliness in Hackney (2018-2021)  | **Appendix 4** |
| Connect Hackney – What we learned in Phase 1 | **Appendix 5** |
| City and Hackney Co-production Charter | **Appendix 6** |
| Data Sharing Protocol | **Appendix 7** |
| Common Measurement Framework Questionnaire | **Appendix 8** |
| Hackney CVS Code of Conduct | **Appendix 9a and 9b** |

**SERVICE SPECIFICATION**

17.1 Connect Hackney is a programme aimed at improving the wellbeing of people aged over 50 by preventing and reducing loneliness and social isolation. It is one of 14 programmes funded through The National Lottery Community Fund’s Ageing Better programme and will receive £5.8m over six years (2015-2021).

17.2 Connect Hackney now in its second phase of delivery, after having funded a range of projects and activities that have sought to reduce loneliness and social isolation amongst older people in Hackney. We are now looking commission a range of projects that meet the needs of socially isolated older people with complex needs, and we have shortlisted these to the following three categories:

1. **People living with dementia/alzheimer’s**
2. People with dementia are at high risk for feeling lonely and isolated since the condition can make it harder to maintain social relationships.
3. In a 2013 Alzheimer’s Society survey two thirds of people living with dementia said they had lost friends as a result of the condition, 63% said they were anxious and depressed (risk categories for isolation) and 62% of people with dementia who lived alone said they were lonely (a higher proportion than those living alone without the condition). As dementia progresses the risk of emotional and social withdrawal increases for a number of reasons including difficulty initiating social interaction and feelings of anger, boredom or sadness
4. Withdrawal may also occur as a side effect of medication or as other people stop engaging with the affected person. Additionally, studies show that isolation can also trigger or worsen Alzheimer’s disease. People with dementia are also more likely to suffer a fall which can lead to or exacerbate social isolation.
5. Identifying the number of people in Hackney with dementia is difficult given that many people with the condition are undiagnosed and are missing from the GP register. However, in January 2018 Hackney council estimated that 1,300 Hackney residents have dementia.
6. The chance of developing the condition increases significantly with age and since Hackney’s population aged 85+ is projected to grow, it is anticipated that by 2020 there will be almost 2,000 residents affected.
7. Another important issue locally is that people from BAME communities are underrepresented in dementia services.
8. **People affected by mental health issues, specifically depression and anxiety**
9. Isolation is common in people with mental health problems and can be both a cause and effect of mental ill health. A Mental Health Foundation survey from 2017 found that 57% of respondents who had experienced depression or anxiety said they had isolated themselves from friends and family.
10. Research has shown that feelings of loneliness are greater and social network size is smaller among mental health service users compared to the general population. People living with mental health problems can also be at risk of social exclusion since they are more likely to be long term unemployed and living in poverty
11. Older people from BAME groups who experience mental health problems are known to be one of the most socially excluded groups.
12. There are currently 485 older adults (age 65+) with depression recorded by their GP, of whom two-thirds (318) are aged 65-74, a quarter (127) are age 75-84 and just under one in ten (40) are age 85+. However, older adults are less likely to recognise or seek treatment for depression; instead, both they and their caregivers may dismiss symptoms as a normal part of the aging process. Therefore a different report from 2012 not based on GP records estimated that there were around 1,600 people aged 65 or over in City and Hackney living with depression. Based on this estimate there would be almost 1,900 older people living with depression in Hackney by 2020.
13. **People who find it difficult to leave home regularly**
14. Becoming housebound or finding it difficult to leave home is highly detrimental to physical and emotional health and can lead to depression, cognitive impairment, lower self-perception of health, taking more medications, and increased comorbidity as well as increased symptoms.
15. The clinical condition of frailty which can impact on a person’s ability to leave home has been described as ‘one of the most challenging consequences of population ageing’. However, despite the serious health risks of being unable to leave home this group are acknowledged to be understudied.
16. Hackney has a predominance of Victorian street properties but also a high number of housing estates and medium-high rise blocks. People who live on higher floors and experience falls or increased frailty are at increased risk of social isolation and have reported a number of reasons why it can be difficult to leave the property such as maintenance (lift operation), perceptions of anti-social behaviour, and the ease of ordering delivery services compared to venturing out.
17. It is estimated that 1,817 Hackney residents are considered housebound, though not all of these will be older people.
18. It is likely that the number of older people who find it difficult to leave home will increase since frailty increases with age and the GLA predicts that the number of residents aged over 75 will increase from 8,800 in 2018 to 10,500 by 2025.

17.3 Connect Hackney is inviting organisations to bid to deliver projects that support people living with dementia/Alzheimer’s; people affected by mental health issues, particularly depression and/or anxiety; or people who find it difficult to leave home regularly, to reduce their social isolation, and benefit from reduced feelings of loneliness.

17.4 We are looking to award a minimum of one contract up a value of £85,000 for each of the three complex needs themes, (3 x £85,000 contracts), however we will consider awarding a fourth contract if any one of the three themes generates a strong response. The total funding allocation for this tender is £340,000.

17.5 We are interested in projects that offer socially isolated older people with complex needs, the opportunity to increase the social connections and reduce feelings of loneliness. For example fun activities, sport activities, walks for people with dementia, or using technology which better connect older people who find it difficult to leave home. Whatever project bidders include within their proposal, project specification should be based on robust evidence of need, whether that is national, and/or local evidence, and should contribute towards Connect Hackney outcomes 1 and 2, see 17.8.

17.6 At least 50% of service users accessing the project/service should be as a result of outreach activities, undertaken to reach the most isolated older people, and project delivery agents should dedicate time within their set-up stage to establish relationships and referral pathways with relevant service providers.

17.7 Project design should be based on both published research on the client group, as well as the experiences and ideas of local older people and wider stakeholders. Where possible projects, should involve the targeted client group in their design, however where this isn’t appropriate, carers, friends, family members or other older people with knowledge or experience of the issue should be involved.

17.8 Project outcomes should be aligned to the Connect Hackney outcomes 1 and 2:

**OUTCOME 1**: Increased numbers of older people who are socially isolated, engage in meaningful and enjoyable activities which result in new friendships, sustained networks, improved resourcefulness, more confidence and thus, ultimately, a better quality of life.

**OUTCOME 2**: Increased numbers of older people who are at risk of social isolation, engage in meaningful and enjoyable activities which result in new friendships, sustained networks, improved resourcefulness, more confidence and thus, ultimately, a better quality of life.

17.9 Please note that organisations will need to be able to deliver their projects between July 2019 and December 2020.

17.10 We anticipate considerable variation in the number of participant’s projects will be able to reach, based on their client group and project design; however bidders will need to include the target number of participant they expect to engage within their bid. The Common Measurement Framework (CMF) will need to be completed with a minimum of 70% of the target number of participants.

17.11 £85,000 is available per contract, to deliver against this contracts, and projects will be funded over 20 months (including two months set-up time), with a minimum of 18 months delivery.

1. **Supporting documents:**
2. Connect Hackney: Profile of social isolation amongst older people in Hackney (Appendix 2)
3. Connect Hackney: Community Conversations Report (Appendix 3)
4. Connect Hackney Programme Model 2018-2021(Appendix 4)
5. Connect Hackney: What we learned in Phase 1 (Appendix 5)
6. **Fulfilling Lives, Ageing Better – National Lottery Community Fund**

19.1 Ageing Better is about reducing social isolation for older people to improve their well-being and give them confidence and support so that they can be more active within their neighbourhoods.

19.2 To do this, we believe older people need a strong voice in the decisions that affect them, and a genuine role in shaping the priorities of their local area. Wider still, we want ageing to be viewed positively as a real asset for communities. This means making sure that the approaches we fund will help to influence the debate on how society supports us all so that we lead more fulfilling lives by ageing better in the future.

19.3 For the first time Britain’s over-65s now outnumber people under the age of 16 and a quarter of the population will be over 65 by 2032. By 2035, the number of people aged 85 or older is projected to increase by 250 per cent, reaching approximately 3.6 million and constituting 5 per cent of the population. This brings both opportunities and challenges. We all want to help current and future generations of older people to live the lives they want to lead as they grow older.

19.4 Older people have much to offer their communities, but more people are living alone today in England than at any other time, with older people much more likely to be vulnerable to social isolation than any other age group.

19.5 Social isolation and loneliness can profoundly damage the physical and mental health of those affected by it with far more serious consequences for older people. This then puts pressures and a cost on public services.

19.6 The goal is that, as older people become less socially isolated, they will be more active, healthier and happier for longer, with the wider public appreciating better the positive role that older people can play in their communities. In doing this, we aim to establish learning and evidence that will inform future policy and practice so that our funding delivers sustainable improvements to reducing social isolation amongst older people.

19.7 In order to achieve this, we will fund projects that can meet all five of our funding outcomes:

1. Older people are less isolated.
2. Older people are actively involved in their communities with their views and participation valued more highly.
3. Older people are more engaged in the design and delivery of services that help reduce their isolation.
4. Services that help to reduce isolation are better planned, co-ordinated and delivered.
5. Better evidence is available to influence the services that help reduce isolation for older people in the future.