AGEING BETTER

CONNECT HACKNEY -

reducing social isolation and loneliness in Hackney

2018-2021

Introduction

Due to the complexity of social isolation and its causes, the revised programme model has been designed to recognise this, including commissioning priorities in relation to achieving Outcomes 1 and 2. The recognition of social isolation and its potential impact on individuals is of increasing concern to policy makers and commissioners and one of the key principles underpinning the Ageing Better programme, is the commitment to building a robust evidence base focused on learning from interventions that are successful in reducing isolation. The impact of social isolation is considered as being harmful as some physical illnesses.

We want to acknowledge that we are aware that we are working within a climate of significant change (NHS reforms, significant changes social care policy, no compulsory retirement age) and there is no doubt that this has a direct influence on the older people that we are aiming to work with. It's also important to remain attuned to the fact that the 50+ age group is not a homogenous group of people and we are working with a cohort of people whose difference in age, can span a 60 year time period, if not longer.

The proposals for the revised programme model seek to recognise the diversity of older people by providing more opportunities for older people to take a lead in determining the things that are of interest to them. Alongside this, there is also a need to be more targeted with the interventions proposed, in recognition of the impact of isolation on particular population groups.

Connect Hackney is now 2.5 years into programme delivery and has the opportunity to learn from the initial phase of delivery, by implementing a revised programme model for 2018-2021. It should be noted that whilst the outcomes are not expected to change significantly as a result of the revised programme model, we are proposing a reduction in the number of programme participants in order to provide a greater focus on the collection on data and learning. We also welcome the opportunity for further flexibility through the 'test and learn' approach, as we expect our programme to evolve, with an increased focus on data collection and learning, which may lead to further adjustments to the model in future.

The programme has the following definition of social isolation and we are not proposing a change to this at present:

Definition of social isolation

Connect Hackney has been working to the following definitions of social isolation since the start of the programme in 2015:

Social isolation: Having no or very limited social networks (at most having once 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 a low level of education, being LGBT or living in rented accommodation

Connect Hackney Programme Outcomes

Connect Hackney has the following programme outcomes and we are proposing a change to Outcome 3, which is explained on page 15 of this paper:

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: Hackney sees a positive shift in attitudes towards ageing and older people, where the latter are more actively engaged in the community and valued for the contributions they make.

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.

Please be advised that this paper should be read in conjunction with the accompanying paper that outlines the evidence base for the proposals outlined in this document and the rationale for the recommendations proposed.

Updating the Programme Model

The revised model has been based on the following:

- Learning from Phase 1 of the programme including feedback from providers, Evaluation Reports from the Tavistock Institute and Community Researchers
- Data from the Common Measurement Framework
- 14 on-line surveys have been completed on social preferences and barriers to participation
- A review of research and reports linked to ageing and isolation
- Community Conversations with 275 people on their social habits and interests
- A stakeholder event attended by 28 people, representing 16 organisations

- Discussions with colleagues from partner organisations in the public and voluntary sectors.
- Learning from other Ageing Better areas

  - Bristol – Programme Model
  - Cheshire – Social Prescribing
  - Camden – Community Navigators
  - Middlesbrough – Specialist Support Team and approaches to Test and learn
  - Manchester – Employment Support and work with BAMER communities

Due to Hackney's position as one of the health and social care devolution pilots, we are also keen to ensure that we continue to engage with the developing agenda around Transformation and the Accountable Care Model, with a particular interest in the prevention (secondary prevention) work stream and the development of the neighbourhood model within the unplanned care workstream.

Evaluation and Learning

One of the biggest challenges of the current programme model has been a lack of data and learning, to demonstrate at a base level whether commissioned activities have had an impact on reducing social isolation. There has also been a need to ensure that the programme remains focused on the key outcomes expected from the Ageing Better funding stream nationally, and that we do not move away from this as we deliver the ambitions of this programme at a local level. The revised model therefore includes a more explicit focus on data collection and learning.

Remaining focused on the programme outcomes and embedding a clear delivery plan for how each outcome will be achieved and evaluated has also been part of this process. Due to the significance of evaluation and learning which is a core element of this programme, we have identified a number of questions for consideration, which provide a focus for what Connect Hackney is trying to achieve for the remainder of the programme. Please note that we are not suggesting that this is an exhaustive list, as we recognise that there may be a need to respond to emerging data or to take a more detailed look at particular aspects of delivery linked to participant experience, policy, research or other activities linked to achieving the programmes outcomes.

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

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 - 12months 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 CH connector model been in engaging older people in sustained activities (6-12months 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 CH Ambassadors, in influencing the way services are designed locally? What has that meant for the individuals involved?

12. Has partnership working (as a result of CH) 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 CH 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 CH programme? If so, how?

Our target cohort

In acknowledging the complexity of social isolation, we have also found it useful to use the personas developed by the Centre for Ageing Better to assist with the programme revision. This has enabled us to target programme activities towards the 'middle cohort' of potential participants who are already experiencing some isolation or at increased risk of social isolation.

The two profiles are as follows:

WORRIED AND DISCONNECTED

These people are older, aged 70 or above and have retired. The house where they live is increasingly unsuitable for them – some changes to it to address this. They feel isolated – they need people more than they used to but don't want to be a burden.

They have enough money to spend on their needs – including the odd treat – but find that going out is more difficult which adds to their sense of loneliness.

This segment have weaker social connections than average – over one in ten (13%) do not have an friend or family member that they can rely on if they have a serious problem. This social isolation contributes to their lower wellbeing. http://laterlife.ageing-better.org.uk/segment4.html

STRUGGLING AND ALONE

This segment are distributed across the age range but are most likely to be aged 50-59 or 80+. While not the case for all in this segment, many of them live on their own. Further, while some own their own home, some still rent – a significant drain on their finances and they often find they are short of money at the end of each month. They are less likely than average to have enough money for their needs and are more likely to be in poverty. Many have a long standing illness and suffer with frequent pain – this affects every aspect of their life. They are also socially isolated which makes them feel dissatisfied with their life.

Those in this segment are more likely to be single and many live alone. They report low levels of engagement with the arts, and are much more likely to lack companionship compared to the average. http://laterlife.ageing-better.org.uk/segment6.html

In addition to this, we also found it useful to consider the positive 'life statements' which underpin the work of the Centre for Ageing Better and are helpful in thinking about the impact that Connect Hackney is seeking to support older people to achieve in relation to having a more socially connected life.

**Centre for Ageing Better**

I feel prepared for later life
- I feel confident managing major life changes
- I have made plans for my later life
- I have the skills I need for later life

I am active and connected
- I am in fulfilling work and/or I am making a contribution to my community
- I have regular social contact with other people and some close relationships
- I keep physically and mentally healthy and active

Developing the Programme Model

Using the information that we have gathered to inform this process, we have used the Loneliness Framework developed by the Campaign to End Loneliness to test the interventions proposed for commissioning. We have also tested the proposals against the existing Theory of Change and we are in the process of developing an up-to-date logic model to illustrate how we envisage the outcomes being achieved.
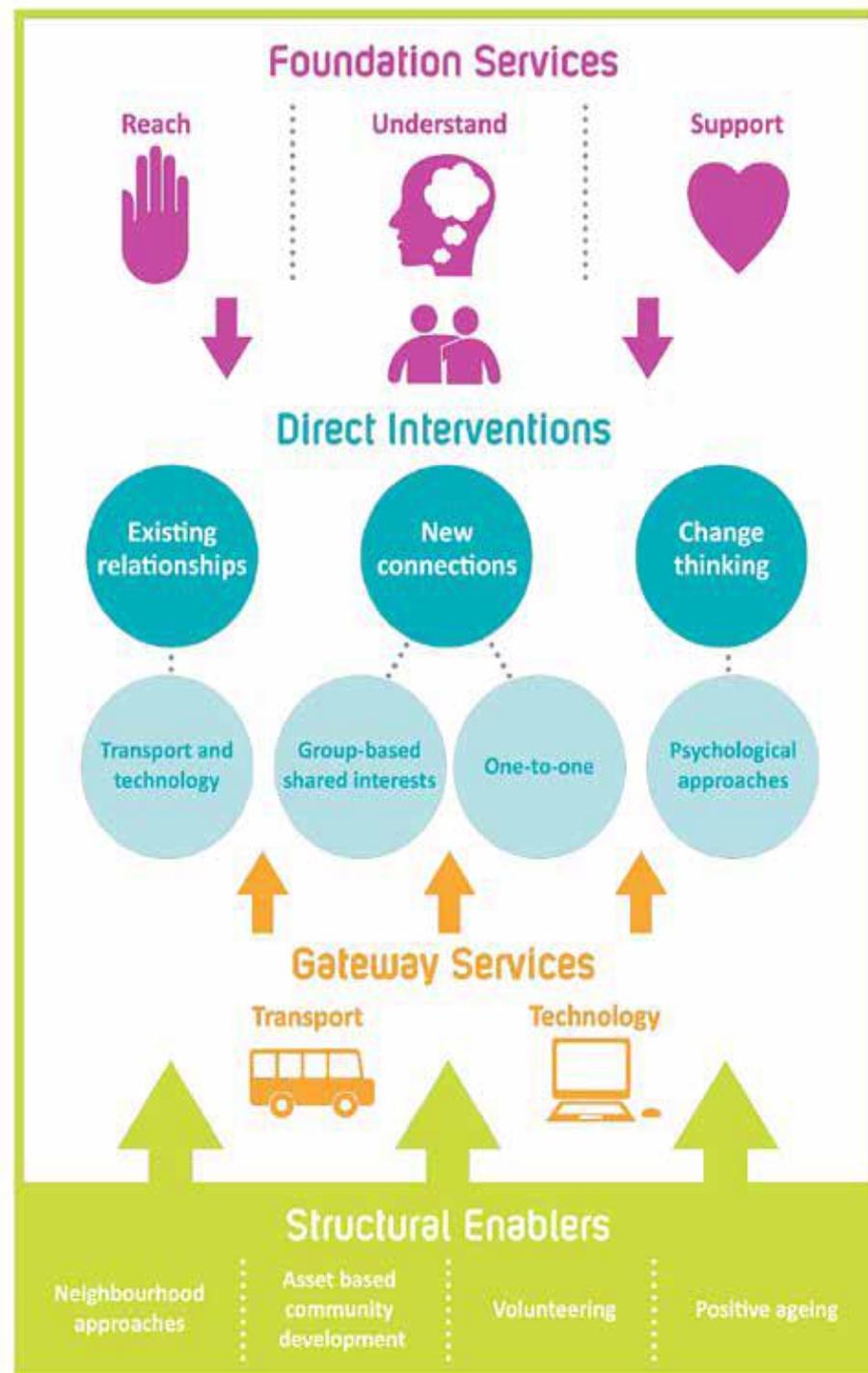
Recommendations for future Commissioning

Information and Access (Foundation and Gateway Services)

It is evident from the evidence review and feedback from our community conversations, that access to information on activities and services in the community, in a variety of mediums could be an important factor in helping to reduce social isolation and loneliness. Without information on what is happening in the borough and beyond, it can be difficult for people to find ways of engaging with activities of their own accord. The diversity of the 50+ age group means that we need a range of ways to communicate and engage with people. For those, who are already feeling quite isolated, there is likely to be a need for a more supported approach to not only finding out about activities, but also taking the first steps to engage with them or encouraging them to remain engaged.

The issues relating to the absence of a referral pathway in the first phase of Connect Hackney has been previously acknowledged and we are seeking to address this in the proposed delivery model from 2018 onwards.

Feedback from some of the older people that we spoke to, also highlighted that there is an over reliance on promoting things using the internet, which contributes to a gap in in how they find out about activities and services. Leaflets, Hackney Today, and word of mouth were all mentioned as having the potential to be effective methods of communication, as well as information from staff in organisations. And, whilst i-Care has the potential to provide useful information and advice about adult social care, health, cultural and wellbeing services across the borough, it's clearly missing a whole cohort of older people who don't access their information in this way.

The Age UK Report on 'Later life in a digital world' highlights the potential risk of moving public services online and the impact on someone who does not use the internet, which could deter people from seeking the support they need. Age UK recommend the following 'three complementary approaches' in order to ensure that those who do not use the internet are not disadvantaged:

- greater support to increase digital inclusion
- user-friendly technology and design
- and appropriate alternatives

It should also be noted that where older people were interested in learning IT, they didn't always own computers at home and wanted more opportunities to put what they were learning into practice in an environment where they did not feel out of place.

In taking the above into consideration, we are therefore recommending that the following **Information and Access** approaches are delivered as part of the revised programme model for Connect Hackney:

Community Connectors (£350k)	2018-2021	Engagement Figure: **500**	CMF Outcome Target: **250**
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.			

We are proposing the commissioning of a person-centred signposting and connecting service to enable older people to engage in activities aimed at reducing isolation and improving wellbeing. The service should target those who live alone (unless they are a carer), who may be experiencing a loss of confidence (as a result of a significant life change or other matter) and/or has difficulties in leaving their home. The model should allow for self-referral or referral from organisations, friends or family members and should provide varying levels of support, ranging from signposting to longer term 1:1 support, which may involve visiting someone at home. The service should be based on coaching, motivational interviewing or similar approaches with the aim of building an individual's resilience and ability to engage with activities/ services to support them with current or future life changes.

Engagement must not be forced and should be on the basis of a person being willing to engage in a discussion aimed at improving their wellbeing. The model should also support individuals to adapt to a change in circumstances that could exacerbate social isolation, i.e. bereavement, retirement, diagnosis of a long term health condition, mobility difficulties etc.

The target population groups should be those living in social housing or sheltered accommodation and we are particularly interested in a service that can reach people living in Kings Park, Hackney Wick and Woodberry Down, which are areas highlighted on the Age UK heat map, as having higher levels of socially isolated older people. We would also like to model to include innovative ways of involving volunteers in the delivery of this service. The involvement of volunteers will provide additional capacity, flexibility and contact with the more isolated individuals accessing the service. We would also expect the providers of this service to work alongside existing social prescribing services in Hackney and this will be facilitated at a programme level.

Digital Inclusion (£100k)	2018-2020	Engagement Figure: **400**	CMF Outcome Target: **120**

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.

Commission creative ways of introducing digital technology which allows people aged 60+ or 65+ to stay in touch with friends, family, health care services etc. and activities linked to daily living and interests.

Improving the programme approach to Communications and Engagement	2018-2021	Engagement Figure: **2,500**	CMF Outcome Target: N/A

- Refresh the Connect Hackney approach to communications and engagement, ensuring that a variety of methods are used to promote the project and engage project participants. This should include better promotion and clarity about the programme offer, increased use of Hackney Today and other publications, two large scale annual engagement events and work with partners to promote programme outcomes, activities and events.

- Commission creative ways of introducing digital technology which allows people aged 60+ to stay in touch with friends, family, health care services etc.

Working with targeted population groups (Foundation Services and Direct Interventions)

Research or the absence of research data highlights that a number of life changes (such as bereavement, retirement, redundancy and changes in family relationships) are all risk factors for social isolation, but there are some population groups who are at even greater risk of social isolation for a number of reasons as outlined in the refreshed evidence base. We would like to explore this further, by commissioning some targeted work with specific communities.

Supporting targeted population groups to improve their social connections (450k)	2018-2020 2019-2021	Engagement Figure: **1500**	CMF Outcome Target: **900**
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.			
We are recommending two commissioning rounds for projects that are able to facilitate regular contact between people who live alone or experience difficulty in retaining connections with other people. Projects should provide opportunities for people to socialise and experience new social activities with the aim of improving wellbeing and reducing isolation, through improved social connections.			

Connect Hackney Neighbourhoods (Structural Enablers and Direct Interventions)

A recurrent theme from older people themselves relates to their interest in opportunities for shared experiences around new or existing interests. This can be facilitated in a range of ways including activities in community spaces, learning new skills, attending events and outings; and socialising with people from other age groups (intergenerational but not just young people) to share skills and life experiences.

A number of older people expressed their interest in exploring the arts and attending events in and outside of the borough, and whilst there appeared to be an interest in attending these events, people did not want to do so alone. And, even in a group setting, people wanted to feel confident and assured that the trip had some elements of facilitation and organisation on their behalf.

Another theme that has emerged relates to older people wanting more access to places where people are able to meet and socialise. This appeared to be in relation to space to meet for activities or more informal spaces where they are able to spend time with others. Transport was cited as a barrier to travelling for a significant number of people, with a preference for locality based services. The programme of work by the World Health Organisation on Age Friendly Cities recognises that 'social participation is easier when the opportunities are close to home and there are many of them. Older people want opportunities to socialize and integrate with other age groups and cultures in their communities, activities and families.'

We are also waiting to see how the development of the work on neighbourhoods develops, within the unplanned care stream of the Accountable Care Model and the opportunities that this may bring for us to learn from locality based services; and whether this type of approach can contribute to reducing social isolation for our target group.

Connect Hackney Neighbourhoods (£150k)	2018- 2021	Engagement Figure: **3000**	CMF Outcome Target: **1000**
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.			
We are recommending that the revised programme model includes locality based activities and events determined by older people and designed to foster social interaction with each other and the wider community. We are proposing a particular focus on activities and micro projects that involve creative use of existing places and spaces within the borough, which can be better utilised in –line with the age-friendly approach to spaces and buildings. We are particularly interested in learning from projects that involve arts, crafts, music, and food.			

Combating isolation and loneliness during peak periods (Structural Enablers, Gateway Service and Direct Interventions)

Combating seasonal isolation and loneliness (£40k)	2018- 2020	Engagement Figure: **2000**	CMF Outcome Target: **N/A**
We are recommending that we develop a programme of facilitated summer activities aimed at bringing people together to explore London (possibly beyond) in the summertime. This should include both free and paid events, with a focus on accessibility. We would also like to hold a number of events between January and March 2021, prior to the end of Connect Hackney, to celebrate the achievements and learning from the programme.			

Delivering Outcomes 3 and 4

OUTCOME 3: Hackney sees a positive shift in attitudes towards ageing and older people, where the latter are more actively engaged in the community and valued for the contributions they make.
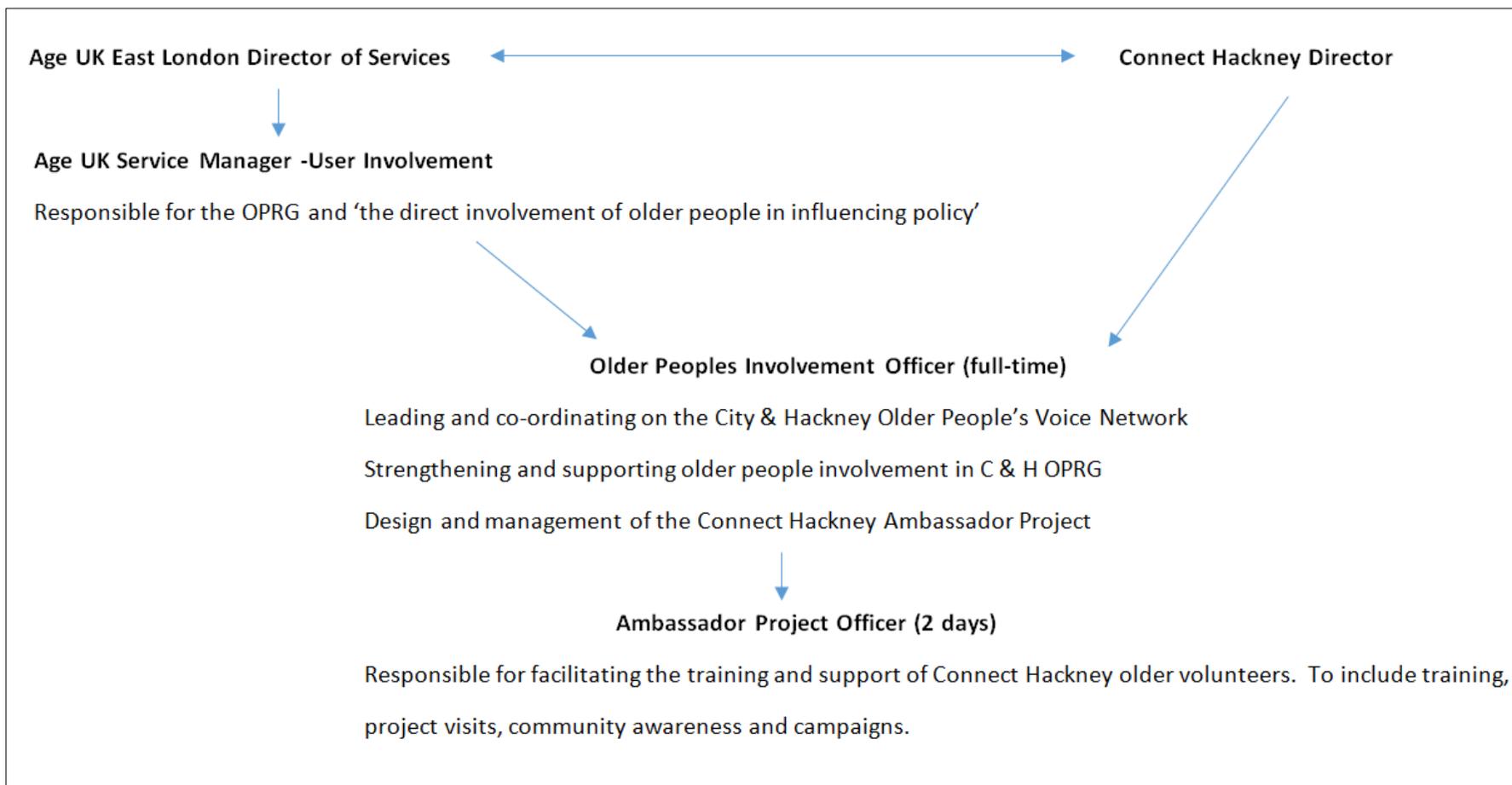
We have discussed this outcome at length with our evaluator and have some concerns about the process for monitoring and evaluating attitudinal shifts, as well as the costs involved in work of this nature. There is also a lack of clarity about what we then do with the measure, post the evaluation.

With this in mind, it has been agreed that the wording is changed to the following:

'Connect Hackney will 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.'

We anticipate doing this in a variety of ways at a programme level, including the work of the OPC, the media group and programme communications. This will be measured through our local evaluation and by actively seeking to understand the involvement of older people in community life in Hackney.

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. Age UK East London and the City and Hackney Older People's Reference Group are leading the delivery of this outcome. The focus of their work is illustrated below:

Age UK East London Director of Services ⟷ Connect Hackney Director

Age UK Service Manager -User Involvement

Responsible for the OPRG and 'the direct involvement of older people in influencing policy'

Older Peoples Involvement Officer (full-time)

Leading and co-ordinating on the City & Hackney Older People's Voice Network

Strengthening and supporting older people involvement in C & H OPRG

Design and management of the Connect Hackney Ambassador Project

Ambassador Project Officer (2 days)

Responsible for facilitating the training and support of Connect Hackney older volunteers. To include training, project visits, community awareness and campaigns.

<u>Future priorities and commissioning</u>

We have not allocated the full monies available for commissioning, as this provides the programme with the opportunity to extend aspects of its work and to be responsive to new or emerging pieces of work where we are keen to learn something. We anticipate that some of the budget will be needed in the next six months to progress the areas of work highlighted below and will make separate recommendations to the strategic board in relation to this:

- **Research into ageing within BAMER communities – understanding attitudes to isolation and loneliness.**

- **Developing a detailed understanding of the issues relating to transport as a contributor to isolation for people living in the borough.**

- Engaging with the development of the neighbourhood model and the potential opportunities to work in partnership to support the target group for this programme within a locality based model.

- Engaging with social housing providers.

- Exploring options for developing some work on supporting people through transition points, i.e. planning for retirement

- Influencing service design in relation to employment support for those aged 50+ and the findings of the scrutiny report – Barriers to Employment for the over 50's.

- Engaging with the programme of work to make Hackney a Dementia Friendly borough.

Roles and Responsibilities

Programme Management

To achieve successful delivery of the proposed programme model, the core staff team will work alongside volunteers and colleagues to ensure that a robust programme management framework is in place to deliver a programme of this size and complexity. Our work will continue to involve the following, although please note that this is not an exhaustive list:

1. work collaboratively with older people, partners and programme participants to develop and shape the Connect Hackney programme.
2. actively promote positive attitudes towards ageing and older people.
3. support older people as they age in shaping policy and holding key stakeholders to account.
4. collect and collate data to influence programme development and provide a robust evidence base that captures learning.
5. contribute to the evidence base for Ageing Better nationally.
6. develop an asset based approach to delivering the programme.
7. commission projects against the programme priorities.
8. provide effective performance and contract management for commissioned contracts.
9. cascade evidence to a variety of audiences and use this to influence policy and service design where possible.
10. pro-actively develop opportunities for regular dialogue about ageing, loneliness and the impact of isolation.
11. remain up-to-date with developments in this area of work.
12. develop an appropriate legacy for the programme and position it within the local policy context.

The Older People's Committee

To ensure that Connect Hackney continues to be informed and influenced by older people, the revised governance structure includes a larger older people's structure that has the following role:

1. present views and recommendations to the Strategic Partnership Board in relation to the development and delivery of Connect Hackney (CH).
2. work with the staff team to identify programme priorities based on local need, and in line with the aims of the Ageing Better programme.
3. co-produce the programme plan including future commissioning priorities in line with the above.
4. co-produce the communications and engagement plan.
5. represent CH at Ageing Better meetings and events.
6. review, comment and make recommendations on evaluation data and what it tells us about the experiences of older people in Hackney in relation to reducing social isolation; and to consider where/how this can be used to influence services for older people.
7. work with the staff team to deliver aspects of the CH programme including involvement in commissioning processes, specific projects, staff recruitment, attending events, reviewing and producing reports.
8. share learning and outcomes from CH with a wider audience, including other older people's groups.
9. working with the OPC build on opportunities for older people to be involved in the design and delivery of CH across the programme, including work with commissioned providers and our evaluator.

In addition to the above, we also want to explore more opportunities to involve older people in the delivery of elements of the programme, which could be in either a voluntary or paid capacity.

Connect Hackney Strategic Partnership Board

As previously confirmed, the role of the strategic partnership board is to:

1. ensure that CH is considered within the strategic landscape of services for older people in Hackney.
2. provide a scrutiny function for the delivery of the Ageing Better programme in Hackney.
3. ensure that the programme priorities are in line with the aims of Ageing Better nationally and that the resources are available to deliver them within the designated budget.
4. consider practical opportunities to work with CH to deliver shared objectives in delivering services to older people at risk of social isolation.
5. co-produce the programme plan including future commissioning priorities in line with the priorities identified by the Older People's Committee.
6. review and analyse the data available from CH, in line with the local policy landscape and consider where this can be used to influence services for older people at a programme level and beyond.
7. highlight gaps or risks to successful programme delivery.
8. share learning and outcomes from CH with a wider audience.

Other elements of Programme Delivery

We also see delivering the following as a core element of our work (including older people and stakeholders) in order to achieve the programme outcomes and deliver against the agreed programme of work: