

Ageing Well in Norfolk

Ayesha Janjua and Clive Miller

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OPM
252B Gray's Inn Road,
London WC1X 8XG

tel: 0845 055 3900
fax: 0845 055 1700
email: office@opm.co.uk
web: www.opm.co.uk

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Executive summary

The Ageing Well programme aims to support local authorities to promote the independence and wellbeing of older people age 50 years onwards whose needs fall below the FACS threshold, to enjoy a good quality of life and remain as independent as possible, for as long as possible. Norfolk's approach to Ageing Well was based on its Older People's Strategy 'Living Longer, Living Well' which has a clear focus on prevention and is supported by a dedicated, one-off £1.5m Prevention Fund. The way in which the Ageing Well place-based approach was to be delivered in Norfolk was agreed through discussions between the Local Government Association, the partner organisations in Norfolk and OPM.

Objectives

- To develop a coherent whole-system model for promoting the health and wellbeing of older people in Norfolk that is affordable, sustainable and outcomes-focussed and can be adopted by strategic partners including the council and the Health and Wellbeing Board.
- The model was to be co-produced with older people and developed through project work in three localities, Breckland, Great Yarmouth and Norwich.

Key activities

- **Initial event with older people** – on 8 September that brought together older people and local organisations and those with a Norfolk wide brief. This explained the rationale behind the Ageing Well programme and how the approach would be developed and tested in three localities.
- **Support to the three localities** – through half-day workshops from November through January. Attended by older people and local organisations and facilitated by OPM, these enabled participants to apply the asset based approach to their local area and develop good ideas for making them better places in which to age well.
- **A final whole systems workshop** – on 1 February, attended by people who had taken part in the work in the three localities and others who had attended the initial whole systems workshop. In the morning, participants were enabled to get under the skin of the good ideas that the localities had formulated and add their own suggestions for making them more effective. During the afternoon participants drew on the learning from the work in all three localities and identified what would need to happen at local and a Norfolk wide level to enable the Ageing Well asset based approach to be rolled out Norfolk wide.
- **Universal Services Ageing Well Key Decisions Meeting** – on 16 March at which the draft project report was discussed and the strategic recommendations developed.
- The project was overseen by an Ageing Well Project group that met monthly to assess progress and advise on the project.

Recommendations for strategic partners

The main report provides detailed recommendations on how the Ageing Well approach can be used at locality level and the operational support required to do so county wide. For this to

be successful the following strategic backing will be required from the Health and Well Being Board, Older People's Strategic Partnership Board and the Scrutiny Committee:

- **All partners should raise the profile of Ageing Well** - and help promote positive perceptions and the creation of an environment to be promoted where people can 'age well' and where older people are valued within their communities.
 - All partners should therefore explicitly sign up to a statement committing them to this.
 - The experience of the three pilot localities could be showcased
 - Specific Communications and PR activity could be implemented to raise the profile of Ageing Well and older people's lives through the media.
- **The asset based approach should be rolled out across the county** - not as a uniform, comprehensive programme, but by adopting a 'place by place' approach. The aim is a strategic approach that is loose and subtle rather than cumbersome, bureaucratic or prescriptive. The role of the strategic partners is to enable local communities to take forward the asset based approach if they want and work to remove constraints, blockages and barriers. Partners should aim to build on the energy of local older people, councils and community organisations and enable them to decide on and control their own local developments
- **The asset based approach should be supported by a shift in mindset amongst professionals** - to value what older people and local communities can do for themselves and the value and principles of the asset based approach. Operational managers will be key to enabling this culture change and should be support to do so through training, showcase events and workshop. Managers should be given permission to take a more risk tolerant approach to community development initiatives and feel supported if things do not succeed, as they sometimes may not.
- **Members have a crucial role to play in championing the asset based approach** - Town and parish councils are also important, for example through the development of parish plans. Members should be supported to understand and implement the asset based approach in their areas and in their scrutiny role.
- **Grassroots community champions or agents** - at a local community level, should be established to bridge the gap between information resources and older people in need.
- **Agreed outcomes and measures** – linked to the existing local prevention strategy should be used by the Health & Well Being Board, Older People's Strategic Partnership Board and the Scrutiny Committee to track the performance of Ageing Well.
- **Ageing Well should be embedded in key partnership strategies and documents** - for example:
 - *Joint Strategic Needs Assessment* - link Ageing Well in to the JSNA by providing an analysis of what older people identify as their issues, and the availability and use of individual and community assets to meet them.
 - *Embed the asset based approach in the Prevention Strategy* – making its roll out and support a key priority. Also ensuring that the Prevention Strategy considers the role of universal services in preventative approaches for older people such as such as community safety, housing, leisure, libraries and public transport.
 - *Align commissioning and providing with Ageing Well* – whilst many of the good ideas that are developed and implemented in different localities will be self sufficient some will require collaboration with statutory services. For

example, improving the quality of bus services so that older people who are less steady on their feet feel it is safe for them to use them or linking with GP surgeries to provide local information giving session to older people. The asset based approach needs to link into older people needs via the JSNA and the commissioning cycle, including enabling partners to target resources in areas of higher need and lower assets.

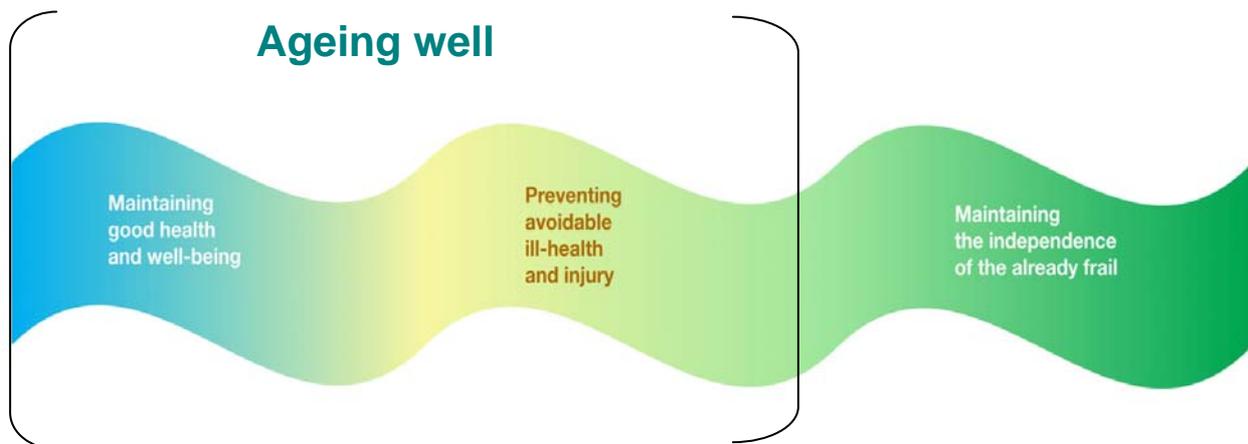
Introduction – The Ageing Well Programme

The Ageing Well programme is a national programme funded by the Department of Work and Pensions and led by the Local Government Group. The programme aims to support local authorities to promote the independence and wellbeing of older people. One of the programme's components provides support to 19 local authorities to develop 'place based projects' aimed to enable them to 'develop good places to grow older'.

Norfolk County Council is one of these local authorities, and this report describes how the place-based approach was applied across Norfolk, specifically the outcomes achieved in Breckland, Great Yarmouth and Norwich. The report also makes recommendations for rolling out the approach Norfolk-wide. Norfolk was supported by the Office for Public Management (OPM) - an employee owned, not-for-profit consultancy specialising in public services.

The Ageing Well programme is focused on people aged 50+ who are currently either completely independent or whose level of need is below the Fair Access to Care Services (FACS) threshold as shown in the diagram below. The aim is to enable these older people to enjoy a good quality of life and remain as independent as possible, for as long as possible, by building on the evidence that preventative services can "produce significant gains in the quality of life of older people"¹.

Figure 1: the spectrum of prevention



Investing in prevention also makes good economic sense. The Wanless Social Care review calculated that provision of 'upstream' services can reduce the need for more intensive and expensive services². The Department of Health argues that "as part of place-based approaches, primary prevention delivered via a range of community based interventions can

¹ Department of Health, Practical Approaches to Improving the Lives of Disabled and Older People through Building Stronger Communities (November 2010)

² Social Care Needs and Outcomes, a Background paper for the Wanless Social Care Review, Kings Fund July 2005 p 8

build capacity and reduce demand by helping people avoid or minimise their use of targeted social care services”³.

The Think Local Act Personal Partnership led by the social care sector, calls for councils and their partners to “encourage and help local communities and groups to provide networks of support,” and to influence and support a ‘wide range of local resources and opportunities regardless of how they are paid for or who provides them’⁴.

The Ageing Well place based projects have focused on finding ways of making better use of the resources already available in local communities. These include:

- The skills and resources of older people and other members of local communities
- Voluntary and community sector organisations
- Commercial providers of goods and services such as cafes, shops and pubs
- Providers of mainstream public services such as health, housing, transport and leisure services

The Norfolk Ageing Well Project

Prior to its engagement with the Ageing Well programme, Norfolk's Older People's Strategy 'Living Longer, Living Well' already had a clear focus on supporting prevention as a means to protecting and improving outcomes for older people. This included primary prevention and promoting wellbeing. Norfolk also has a Prevention Strategy which is supported by a dedicated, one-off £1.5m Prevention Fund aimed at “providing the kind of support people want so they can have independence, choice and good health for as long as possible.”

Norfolk's approach to prevention is wide-ranging and encompasses more than just traditional adult health and social care. This includes using culture, leisure, learning, housing, employment, safeguarding and safety services as a means of improving individual well-being and strengthening communities. It is both its focus on prevention, and on making best use of existing assets that attracted the Norfolk Older People's Strategic Partnership and other partner organisations in Norfolk to bid for support from the national Ageing Well programme.

The way in which the Ageing Well place-based approach was to be delivered in Norfolk was agreed through discussions between the Local Government Group, the partner organisations in Norfolk and OPM.

Aims

- To develop a coherent whole-system model for promoting the health and wellbeing of older people in Norfolk that is affordable, sustainable and outcomes-focussed and can be adopted by strategic partners including the council and the Health and Wellbeing Board.
- The model was to be co-produced with older people and developed through project work in three localities, Breckland, Great Yarmouth and Norwich.

³ Department of health Practical Approaches to Improving the Lives of disabled and older people through building stronger communities November 2010 p 10

⁴ Think local Act personal - A sector-wide commitment to moving forward with personalisation and community-based support January 2011 p2

Approach

The principles underpinning the approach included:

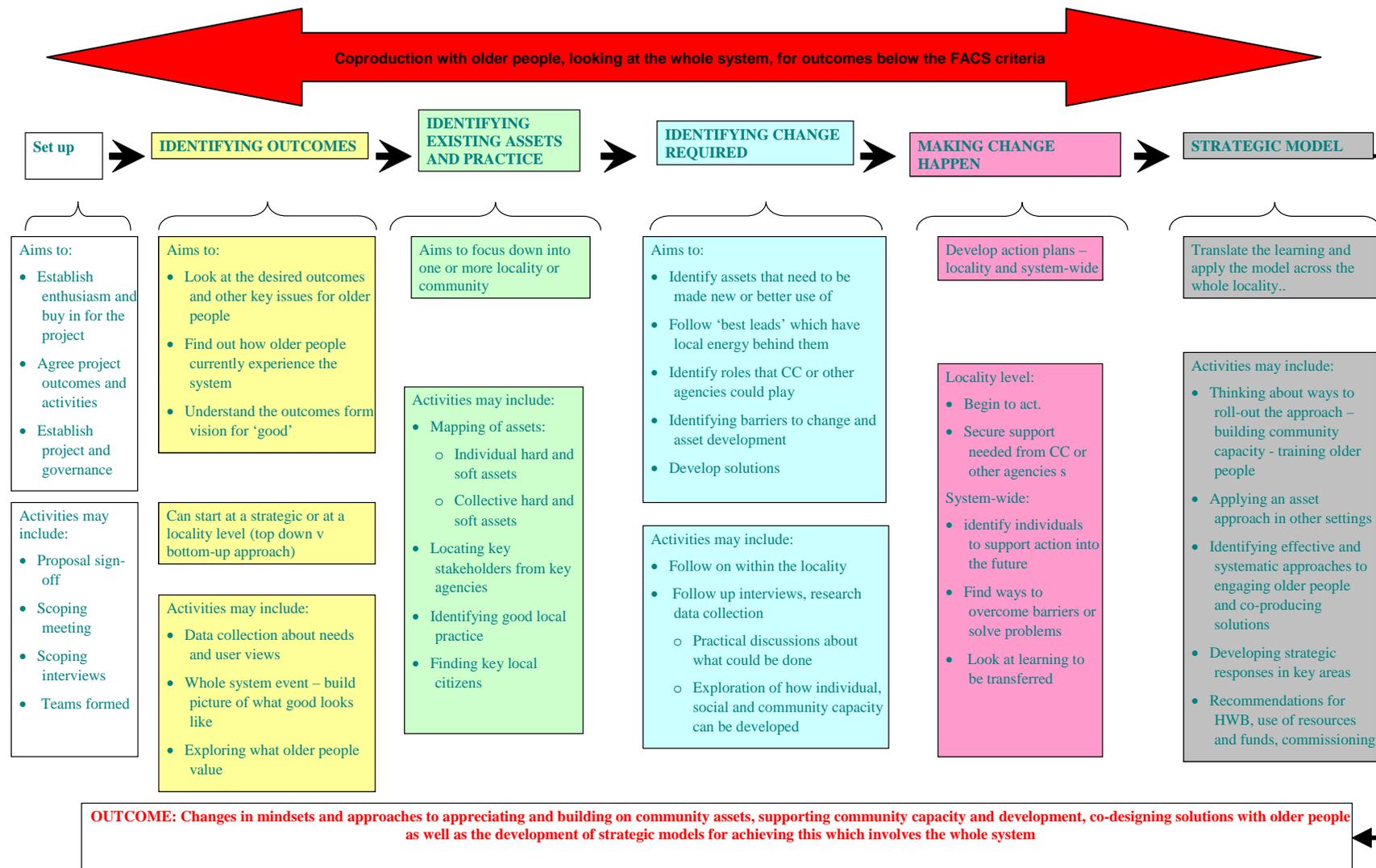
- Engaging the community and older people in **co-producing** the model using existing older people's forums at district and county levels as well as a variety of approaches to ensure more vulnerable older people and those who are harder to reach or socially isolated are also engaged in the work.
- Looking at **wellbeing in its widest** sense (not just clinical outcomes) which includes different ways of reducing social isolation and a **whole-system** approach that involves a wide range of partners.
- Understanding and developing **sustainable community development** and building community capacity.
- Finding out about and using good practice from elsewhere, as well as building on what is already happening in Norfolk to develop best practice.
- The improved **use of resources** in a locality and between localities with recognition that there will be reduced resources of the next few years
- Promoting a forward thinking, **innovative** approach that is not returning to traditional solutions that considers renegotiating the relationship between state and citizens with a more **proactive** approach to identify older people at risk of worsening outcomes.

Key project stages

An overview of the project plan is provided in Figure 2. Central to the project was to gain as wide an engagement as possible of all interested parties. This was achieved through:

- **Initial event with older people** – on 8 September that brought together older people and local organisations and those with a Norfolk wide brief. This explained the rationale behind the Ageing Well programme and how the approach would be developed and tested in three localities.
- **Support to the three localities** – through half-day workshops from November through January. Attended by older people and local organisations and facilitated by OPM, these enabled participants to apply the asset based approach to their local area and develop good ideas for making them better places in which to age well.
- **A final whole systems workshop** – on the first of February, attended by people who had taken part in the work in the three localities and others who had attended the initial whole systems workshop. In the morning, participants were enabled to get under the skin of the good ideas that the localities had formulated and add their own suggestions for making them more effective. During the afternoon participants drew on the learning from the work in all three localities and identified what would need to happen at local and a Norfolk wide level to enable the Ageing Well asset based approach to be rolled out Norfolk wide.
- The project was overseen by an Ageing Well Project group that met monthly to assess progress and advise on the project.

Figure 2: The project plan



Identifying outcomes

The first stage of the project identified the key outcomes for older people in Norfolk, building on the priority areas for supporting older people in Norfolk set out in 'Living Longer, Living Well':

- Information, advice and advocacy
- Getting help with unexpected needs
- Integrated working
- Practical help in the home
- Social activities and health improvement
- Community support and development
- Valuing older peoples contribution and ending age discrimination

Building on these areas, the key outcomes for older people in Norfolk were established through an initial co-production meeting with over 20 older people from Norfolk.

Information, advice and guidance is a cross cutting theme in achieving all of the outcomes below:

- Respect in the community and feeling useful and valued (includes having good social networks, being listened to etc)
- Being fear free and confident (includes freedom from fear about health, security, money, emotional and mental wellbeing etc)
- Being independent to live in my own home for as long as I want (housing, equipment etc.)
- Transport and access

The Ageing Well Programme covered all of these outcomes through the locality workshops and the whole system event.

The locality projects

Given the diversity of Norfolk it was agreed that the project should focus on three very different localities. Expressions of interest were invited and Breckland, Great Yarmouth and Norwich City were accepted. These were chosen as they represented a mix of rural, coastal town and city environments.

The three localities varied not only in terms of their local environments but also in the degree to which they already had community-based initiatives in place. Breckland was just starting to develop a dialogue with older people by creating its own older people's forum. Norwich City already had a well developed older people's consultative process in place and wanted to build on this. Great Yarmouth had a range of well developed forums and processes for engaging with older people and already had a number of community based initiatives involving and supporting older people.

Whilst the actual process used in each of the localities varied, the core method was comprised of two half-day workshops, (See Appendix 1) which brought together mostly older people to focus on mapping local assets and deciding how to make best use of them to enable older people to age well. Outline programmes for the two workshops are available in Appendix 1.

Older people were invited to the workshops through a variety of different approaches. Perhaps the most successful was encouraging people to invite other actively engaged friends and acquaintances to join in. Where required transport was provided and participants were paid honorariums in recognition of the time, skills and knowledge that they were contributing. Tea, coffee and lunch were also acknowledged as good incentives to participation.

Workshop 1: Asset mapping

The agreed approach was to start by focusing on the assets of older people who live that in the three localities. This approach enabled older people to identify ways in which they themselves could be better used to create places in which to age well.

The locality projects reinforced the value of an asset-based approach. Older people enjoyed the experience of identifying their own skills and resources, and gained confidence and a sense of personal worth. At a local level, the asset-based approach has succeeded at:

- Generating new and imaginative ideas
- Bringing key people together
- Engaging a wider group of people in ageing well
- Linking public sector agencies with the ideas and efforts of the voluntary and community sectors

OPM learnt a lot about the importance of asking older people to contribute to their communities and to support others, and of listening to and responding to their choices. There is a lot of enthusiasm and energy among older people which can be tapped into a variety of innovative and creative local schemes.

This approach can help to identify and strengthen the social networks in each locality, and create the basis for a thriving independent sector of social, leisure and cultural activities as well as opportunities for older people to volunteer and contribute to activities that would enhance their own lives and those of others.

The asset mapping techniques have been very useful as a way of building individual and community confidence, creating a positive atmosphere and offering a shared forward agenda.

The first workshop began by introducing people to the overall Ageing Well programme and the idea of the asset based approach. Working in small groups the participants then developed an 'asset map' of their local area and good ideas for making use of the assets. These were developed in three stages:

Identifying individual assets

In their groups, working in pairs, people were asked to list examples of the personal assets that they would be prepared to share with others to make their local area a place in which to age well. They were asked to consider both 'hard assets', such as cars, gardens and equipment, and 'soft assets', such as skills, knowledge and experience. Box 1 – provides examples of the assets people identified. The pairs were then asked to share their findings and a consolidated list was produced.

Enabling people to identify especially 'soft' individual assets sometimes required a little coaxing. Many people said they didn't have any that anybody else would want, as all they had to offer were ordinary skills and knowledge. However, when it was explained by others

that what was an ordinary skill to them, such as jam making, was a completely new skill to others, people began to value and volunteer a wide range of skills.

Box 1 – individual assets from Breckland

- Families, experience – this is passed on to children
- Life experience – work/history
- Time and energy – e.g. providing relatives childcare
- Part of the community
- Often has a car
- Maybe affluent/house owner
- Retired – Breckland is an area targeted to retire to
- Rural population – high percentage of older people
- Local knowledge – Some have lived in some villages all of their lives
- Lots of individual assets and passion to help out but bureaucracy makes it difficult to use these assets.

Mapping community assets

Each group was provided with a map of its local area that had already marked on it community assets that older people were known to use and value. This included: community groups such as allotment associations; voluntary organisations such as lunch clubs; commercial outlets such as shops and pubs; and public sector facilities such as GP surgeries. Groups were then asked to identify further examples and plot them on the map. Box 2 – provides examples of the assets that people identified.

In one locality the initial map provided to the groups already contained an extensive range of organisations and facilities. However by the time the groups had completed their work the number of community assets identified had more than doubled. This illustrates the importance of directly involving older people in the development process.

Box 2 – Community assets in Great Yarmouth

- Neighbourhood Boards x 3
- Make it Happen – CLHRC
- MESH – Magdalen, Shrublands, Elmhurst Court
- Hate Crime Forum
- Bid for Community worker
- Rural Support Officer
- Perception Questionnaire
- Rambouillet Close,
- Gorleston- Community Club,
- Trinity Avenue – Bingo, Coffee Morning, ‘
- Talk’ Club, past-times, Wii, Bridge Club, Computer club, open to people outside local area , outings
- Gardens – own/communal

- Keep fit/WW – mixed groups
- Ageless Opportunities Directory – ‘Activities /Opportunities in GY’

Developing good ideas

Finally the groups were asked to stand back from their work, think about what older people need in their local area to be able to age well and come up with one or two good ideas for using the assets they had identified to improve older people’s lives across their community.

Some recurrent issues were identified along with some good ideas for tackling them:

- *Isolation* – resulting from, for example, bereavement, no longer being able to drive or afford to do so, not being as steady on one’s feet as before, being fearful of going out.

Good ideas included – inter-generational projects bringing together older and younger people in a community, tackling icy paths that prevent older people from getting out and about.

- *Being valued and able to contribute* – not being written off because one is older or retired; wanting to be part of the community and contribute especially to the lives of children and young people.

Good ideas included – increasing volunteering opportunities and structures, timebanking,

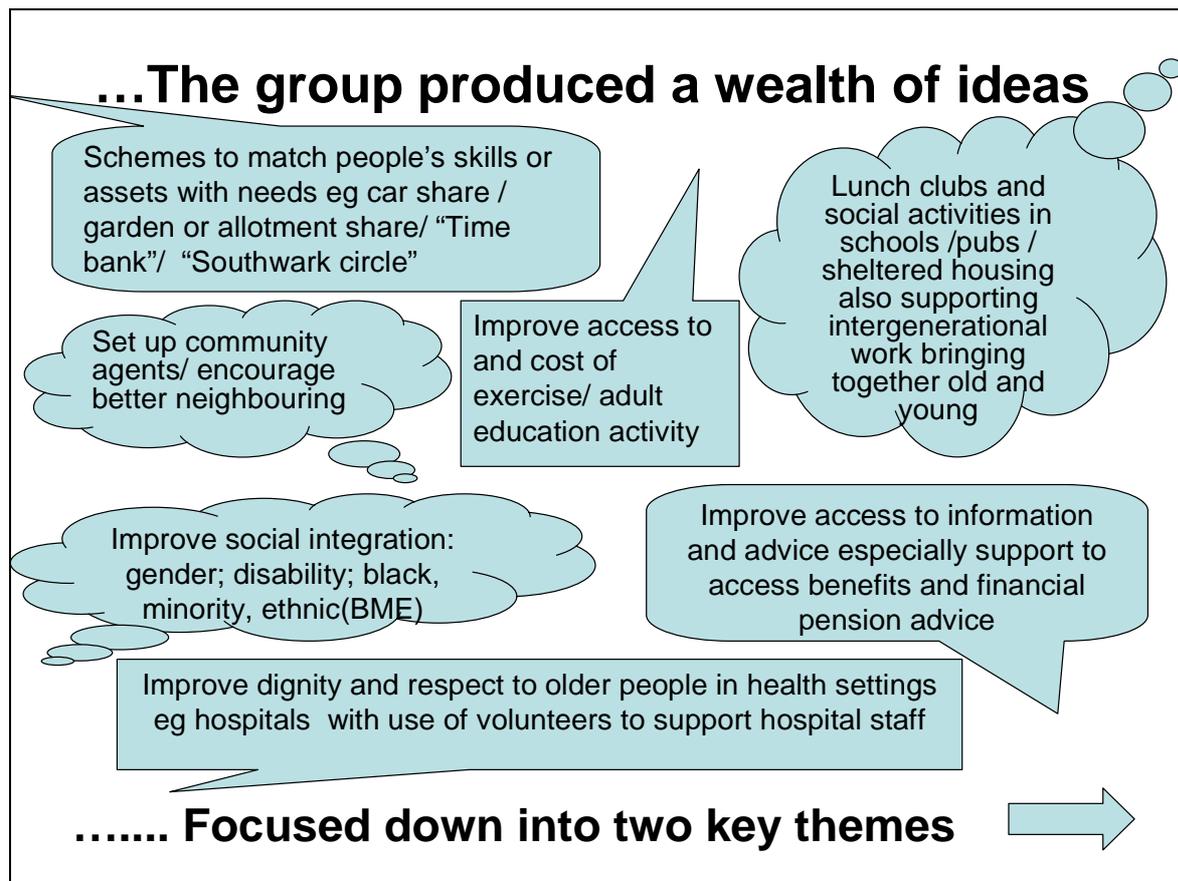
- *Information* - Older people need a lot of advice and information - about housing, finance, legal issues, bereavement, hospital discharge, health and healthy living, care and support and available services. It needs to be clear, easy to follow, and offered in ways that make the recipient comfortable and reduces anxiety. While a lot of information is available, our workshops suggested the value of all older people knowing ‘where to go’ when people feel they cannot cope, or new problems arise. It was important that when older people were very anxious, they had someone to talk things over with.

Good ideas included - having an information hub in GP surgeries, welcome packs for new arrivals into a community and developing an online portal.

- *Transport* - Frail older people will need access to transport for any vital journeys, including hospital appointments or GP appointments, shopping etc. It needs to be available when needed, to work and to be affordable.

Good ideas included - improving the quality of bus services, community transport schemes and affordable private transport such as local taxis.

At the end of each workshop a shortlist of good ideas was selected for further work.

Box 3 – ideas generated in Norwich City**Workshop 2: Making best use of the assets**

Prior to the second workshop each of the shortlisted good ideas was summarised on one side of A4 with details added from similar developments elsewhere. At the workshop each idea was allocated a table, and participants were invited to move to the table that would be focusing on their preferred good idea. It was more important that people were working on an idea about which they were enthusiastic than trying to ensure all ideas were covered. Each group was then asked to undertake two pieces of work: detailing their good idea; and developing an action plan to get it up and running:

Detailing the ideas

Each group was asked to imagine that 'at a snap of their fingers' they had got their good idea up and running, and that they had been asked to explain how it works to someone visiting their area. In their explanation they were asked to cover:

- Why do it? – what issues facing older people does the good idea help tackle
- What will it provide and how could it be organised? – what does the good idea do, how older people and others are involved, and who does what to organise and provide it.
- Is this a new idea, if not what is the evidence base for it working? – where else it in use in Norfolk or elsewhere or from what examples of related developments is it borrowing

Groups reported their ideas to one another and asked whether anyone else knew of organisations that were already providing the same service elsewhere in Norfolk. The aim

was to both avoid duplication and to build on existing expertise. Descriptions of the key ideas are provided in Appendix 2.

Developing an implementation plan

Having detailed their ideas groups were encouraged to start from now and describe the main things that need to be done to get their good idea up and running. In each case the aim was to make use of existing assets, hence minimising the costs of innovation and ensure the overall approach is sustainable. Examples of changes that illustrate how different people and organisations can contribute are below.

Providing information advice and guidance in face to face setting in Norwich

- *Where?* GP surgeries are accessed by large numbers of older people, men, women, ethnic minority groups.
- *How?* Develop a volunteer base of trained advisors, accredited and with CRB clearance. There would need to be a paid coordinator who would organise a rota of volunteers to provide information, or simply signpost to information. Coordinator could also organise specific sessions run by organisations focusing for example on benefit advice.
- *Linkages and further learning:*
 - Supports the Norfolk older people's strategy 2011 – 2014 section 1.2 and also supports Norwich Clinical Commissioning group key priority.
 - Supports proposals for a new outreach type support service so that older people living in the community can benefit from outreach and support.
 - Draws upon good practice in North Norfolk and Great Yarmouth
 - Councils' commissioning of information, advice and guidance services

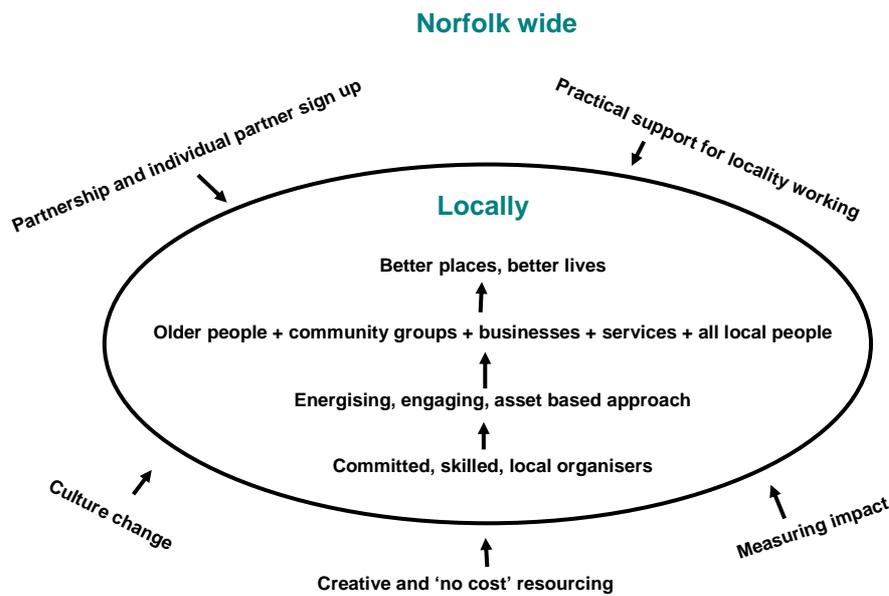
Building a Norfolk-wide model

A bottom-up, Norfolk-wide, asset based model drawn from the learning and success of the locality working is a key intended outcome from the Ageing Well project. From the outset it was recognised that the model will need to include support and action at both a local and strategic level. In broad terms this would involve:

- Developing a strategic framework of community development activity across the county focussing on improving the wellbeing of older people
- Adopting and supporting an asset-based strategy across localities
- This would also agree strategic action between the county council and partners to identify key roles, governance issues and to join-up activity

The first of February whole-systems workshop helped develop a Norfolk-wide model by drawing on the learning from the work in the three localities. Participants from the three localities and others from across Norfolk were asked to identify what needs to happen at the local and Norfolk wide levels to roll-out the Ageing Well approach across the whole of the county. The learning from these events and the main elements of the recommended model are depicted in Figure 3 and summarised below.

Figure 3: Making Ageing Well work



Locality level

Our experience suggests that asset-based approach only really works well where it is locally driven. It will not be successful if it is imposed as a top-down, must-do policy from the local council. The asset mapping approach proved to be a good way of doing this but to hook people's interest they need to understand why it is worthwhile. Older people identified three selling points:

- What you say will make a difference
- It will help people live fulfilling and happy lives
- Support from the county council (e.g. the Prevention Fund)

Older people who have already taken part in the work in the three pilot localities could be a very effective sales force.

Success factors

A number of factors appeared to underpin the success of the localities work. These factors should be built into any roll-out process:

- **Engage older people** – who are more able, know their local area and some of whom have organising experience. Try to get a gender balance – many more women than men attended the locality workshops, as well as trying to reach out to socially isolated older people. This may be challenging at first, and the more well known older people and older people's groups and organisations may be a route in to identify these isolated people.
- **Work with elected members** – elected members from county, district, town and parish councils can play an important supportive role. In particular, members can provide an oversight and scrutiny support to communities to ensure local organisations are addressing issues for older people

- **Involve organisations** – who have a fine grain knowledge of what is available and what older people want
- **Get local ownership** – of the asset based process by key organisations and individuals that drive it forward. The work in the three localities was co-ordinated by local organisations and district councils.
- **Do detailed organisation** – to ensure people are invited, briefed, paid expenses and venues are booked, equipped and lunch provided.
- **Use an energising process** – that makes making a difference easier. Older people liked the focus on assets as it opened up all sorts of possibilities and built their confidence of their own abilities and skills.
- **Access to ideas** – about how to build on existing assets drawn from across Norfolk and elsewhere.
- **Don't solve everything** – it is fine to work on good ideas that will meet the needs of only some older people. Meeting everyone's needs in one way is unlikely to work. The aim should be to develop and implement a spread of good ideas that between them meet the diverse needs of older people.
- **Start from existing community activity and activities** – it is harder and potentially more inefficient to start from scratch, as opposed to building on what is already there.
- **Communication** – should be effective, regular and two-way, using a variety of different methods. Older people we spoke to said that leaflets are often not read and that word-of-mouth is the most effective way of getting older people involved in things.

Getting started

There is no one right way to use the asset-based approach. Flexing it to fit different local circumstances is essential. Key steps to consider in getting started in any one locality are:

- Find a key organiser who knows about and believes in the asset mapping approach
- If an existing local older people's forum or networks does not exist, start with two or three well connected and active older people.
- Enable them to meet the local older people to meet others from Breckland, Great Yarmouth and Norwich and see what they are doing
- Ask the core group to:
 - define the boundaries of the locality on which to focus. The sense of place will vary from community to community. In a very small area, for example a hamlet, it may be preferable to do asset mapping with the whole community, and not just focussed on older people. In a larger area, you may wish to focus on a specific issue for older people to make it more manageable, e.g. transport, or socially isolated older people.
 - produce a jargon free invitation
 - invite three or four other, perhaps less well know, but active older people to a first meeting – people are more likely to join in if they are invited by someone they know and trust
 - go to the shops and faith organisations that serve BME communities to find more participants

Bringing people together

The two-stage asset mapping workshop approach used in the project is effective at bringing people together, and should be adopted, but also modified, to fit local circumstances. Top tips, from older people, for making the workshops go well are provided in Appendix 3. They include:

- Ensure that the basics of transport, venues, induction loops and refreshments are in place
- A facilitator who knows about asset mapping and can keep people on track
- Make it a jargon free and energising process

Implementation

It is essential not to lose momentum between the initial development workshops and putting the good ideas into action. A typical timescale of 6 months is recommended.

Local organisational back up

Organiser time is crucial in being able to deliver the programme, organise and facilitate workshops. Those who take on this role must be skilled in empowering and engaging with local communities. Localities will vary considerably in terms of the resources they have available to support the asset mapping and implementation process. Sources of organisational support drawn on by the project localities included:

- A councillor and officer in each council with responsibility for Ageing Well, for example, the councillor who is the 'Older People's Champion' and the District Council's development officer
- A trained and supported village/neighbourhood/community agent type of person
- Younger people and organisations, but may be not at the initial stages

Norfolk-wide

Whilst much can be achieved at a local level, it was recognised that to roll-out the asset based approach more widely will require some coordination and support at a Norfolk wide level. It will also be important to embed this approach in the way all relevant statutory agencies commission and deliver services. Specific recommendations arising from the final project whole systems workshop are outlined below.

Partnership arrangements

Recommendations to the Health & Well Being Board, Older People's Strategic Partnership Board and the Scrutiny Committee are:

- All partners should raise the profile of ageing well and help promote positive perceptions and the creation of an environment to be promoted where people can 'age well' and where older people are valued within their communities.
 - All partners should therefore explicitly sign up to a statement committing themselves to this.
 - The experience of the three pilot localities could be showcased
 - Specific Communications and PR activity could be implemented to raise the profile of Ageing Well and older people's lives through the media.

- The asset based approach should be rolled out across the area, not as a uniform, comprehensive programme, but by adopting a ‘place by place’ approach. The aim is a strategic approach that is loose and subtle rather than cumbersome, bureaucratic or prescriptive. The role of the strategic partners is to enable local communities to take forward the asset based approach if they want and work to remove constraints, blockages and barriers. Partners should aim to build on the energy of local older people, councils and community organisations and enable them to decide on and control their own local developments
- The asset based approach needs to be supported by a shift in mindset and understanding amongst professionals to value what older people and local communities can do for themselves and the value and principles of the asset based approach. Operational managers will be key to enabling this culture change and should be support to do so through training, showcase events and workshop. Managers should be given permission to take a more risk tolerant approach to community development initiatives and feel supported if things do not succeed, as they sometimes may not.
- Members have a crucial role to play in championing the asset based approach. Town and parish councils are also important, for example through the development of parish plans. Members should be supported to understand and implement the asset based approach in their areas and in their scrutiny role.
- At a local community level, grassroots community champions or agents should be established to bridge the gap between information resources and older people in need.
- The progress of Ageing Well should be overseen by the Health & Well Being Board, Older People’s Strategic Partnership Board and the Scrutiny Committee based on the outcomes already agreed by key local strategies of these partners.
- Ageing Well should be embedded in key partnership strategies and documents, for example:
 - Link Ageing Well in to the JSNA providing an analysis of what older people identify as their issues, and the availability and use of individual and community assets to meet them.
 - Align commissioning and providing with Ageing Well – whilst many of the good ideas that are developed and implemented in different localities will be self sufficient some may require collaboration with statutory services. For example, improving the quality of bus services so that older people who are less steady on their feet feel it is safe for them to use them or linking with GP surgeries to provide local information giving session to older people. The asset based approach needs to link into older people needs via the JSNA and the commissioning cycle, especially to enable partners to target resources in areas of higher need and lower assets.
 - Embed the asset based approach in the Prevention Strategy – making its roll out and support a key priority. Also ensuring that the Prevention Strategy considers the role of universal services in preventative approaches for older people such as such as community safety, housing, leisure, libraries and public transport.

Operational support

Whilst the day to day running of the Ageing Well approach will be controlled and supported locally, it makes sense to share some of the operational support that will be required. Crucially an Ageing Well support person with energy and creativity is needed to:

- Publicise the Ageing Well approach and initiate discussion with interested districts and localities.
- Provide or commission training and develop and signpost to supportive materials such as toolkits for asset mapping
- Enable people who are using the asset based approach to come together from time to time to exchange and develop their practice
- Spot struggling areas and get people from the other areas to help out
- Help pull together and publicise what is being done across the county
- Keep the HWB informed about new developments and ways in which Norfolk-wide partners could best further support local action.

The Ageing Well support person might be most appropriately hosted by an existing organisation engaged in providing community development support or within Norfolk County Council as part of the prevention strategy.

Culture change

The locality based projects demonstrated that by changing the mindset away from a focus on needs and services to one of assets and opportunities opens up a vast range of ways in which places can be developed in which to age well. The changed mindset should include:

- Seeing older people as assets, not a burden or as simply having needs
- Viewing local communities as a 'glass half full' as opposed to a 'glass half empty'.
- Focusing on people's lives and where they live and how they live them rather than on specific services
- Fostering developments of commercially provided services such as shops, cafes and pubs that benefit older people and are good for business
- Linking up older people, working age adults and younger people and children in ways that are mutually supportive

At local level this change in mindset can be achieved through rolling out the Ageing Well approach place by place. Norfolk wide the adoption of the new mindset can be adopted by:

- Training staff of statutory organisations and their contracted providers in the new approach
- Enabling front line staff, managers and commissioners to identify how the way they carry out their 'day jobs' should change to take on board the approach.
- Regular exchanges with localities developing and implementing bottom up initiatives to enable commissioning and provider staff to keep abreast of developments and develop new ways of supporting them.

Resource implications

Most, if not all, of the ideas that were discussed in the three localities were cost neutral or require a very minimal financial outlay. Some of the localities are hoping to kick-start their ideas by applying for funding from the Living Longer in the Community Fund. However, there is also a locality commitment to support the implementation of the ideas where no funding forthcoming. For example, Breckland's inter-generational project could be set up without funding being required, though older people felt it would be nice to be able to buy some initial

equipment such as video cameras and technology to support the younger people doing research with older people.

Keeping up the energy of older people and other local stakeholders and maintaining momentum will be central to the success of the Ageing Well approach. Ensuring things happen and recognising the contribution of older and other local people is essential. For many older people a simple 'thanks', and having the feeling they were also learning and building their confidence is more important than remuneration. There is also a need to identify and nurture the 'younger' older people early on, as people retire, to capture their energy and link them into the community.

It is therefore recommend that:

- Ageing well should retain its self funding approach
- Regular events should be organised and other approaches used to celebrate and recognise the hard work and achievements of local people
- Consideration should be given to continuing to fund 'start up' grants and devolve the funding decision making to a local level
- There should be a continuing focus on reshaping of existing universal publicly funded services to better meet the requirements of older people

Measuring impact

Whilst there is much evidence relating to the cost effectiveness of preventative interventions in health and social care and for older people's services there has been less, but a growing body of, evidence on the impact and cost effectiveness of community based approaches. OPM, on behalf of the national Think Local Act Personal (TLAP) sector improvement partnership has produced a draft guide on how to measure the cost effectiveness of community based initiatives. This draws on the TLAP funded work undertaken by the London School of Economics. OPM can provide training and support to enable Norfolk to establish continuing monitoring of the effectiveness of the Ageing Well approach

It is therefore recommended that the Health and Well Being Board:

- Establish a means of monitoring the effectiveness of the Ageing Well approach
- Investigate the opportunities to recycle savings made via Ageing Well by reducing demand from older people for more complex and intensive support into developments that further support the preventative approach of Ageing Well.

Conclusion

Older people, community organisations along with locality and strategic partners have demonstrated the potential of the asset based approach to enable local communities to become places in which to age well. Making best use of existing individual and community assets rather than relying on increased funding, supported by strategic level collaboration between all partners, provides a basis for further sustainable development.

Appendices

Appendix 1: Locality based workshops

This appendix provides the programmes used for the two asset mapping workshops and a set of tips, developed by older people, for running them.

Top tips

Developed by older people these top tips provide a jargon free, older person's view of how to ensure the workshops succeed.

All workshops

The basics

- Accessible venue with transport laid on
- Fix volunteers' bus passes so that they work before 09.30
- Tea, coffee, cakes and buns
- Soft chairs or cushions for hard chairs
- Sound system and induction loop
- A facilitator who knows about asset mapping and can keep people on track

The first meeting – the 'gossip session'

- Be clear what the meeting aims to achieve
- Use very plain language:
 - 'what are the services and activities in the community that I can use?', 'what's already going on?' – instead of 'asset mapping'
 - 'what's a week like for you?', 'what do you do?'
 - 'what's missing?' and 'what do I need?'
- Draw out new and existing good ideas e.g. create the equivalent of 'the school gate' for older people, use a 'monthly Mardle session in a pub' to engage older men
- Ask people who they know who they think would be interested in taking part or is already doing something like this and invite them to the next meeting.

The second meeting – the 'taking it forward session'

Developing the good ideas:

- Give each good idea a name that the group feels comfortable with
- Have a range of ideas that between them meet the needs of different groups of older people and men and women.
- For each idea make sure you can argue its case by deciding:
 - Who are the potential participants

- What is the likely up take
- How it helps older people to be able to both give and take
- What you need the money for
- How can it be sustained – think about commercial facilities:

Making an action plan:

- Need to give each good idea time to take off
- Find out who is prepared to continue the work – get name(s) Work out a broad brush overall plan and agree the next steps

Workshop 1: Asset mapping

Aims of workshop

- Focus on identifying how to support older people in Breckland to feel **confident, valued, active, healthy and above all useful, all with minimal assistance**.
- Map the individual and collective tangible and intangible assets in the locality
- Identify ways in which these assets can be used differently, be built upon and be used to improve outcomes for older people

Outputs:

- Asset maps
- A set of proposals for developing the assets
- Agreed actions and immediate next steps for OPM, the locality project teams and any strategic support required

Programme

10.30 – 10.45	Introduction to the event and the project
10.45 – 11.10	<p>Table exercise: Asset mapping - individual assets</p> <p>What personal assets do older people in Breckland have? What assets, skills and talents do older people in Breckland have? What personal relationships and networks can they draw on? Think about yourself and older people you know, and focus on the key issue that have been chosen.</p> <p>Assets are both tangible and intangible resources of a community such as individual's skills and abilities, community networks and associations as well as physical assets like wealth, buildings, and infrastructure.</p> <p>Plenary: Any comments individuals or groups want to share with other tables?</p>
11.10 – 11.55	<p>Table Exercise: Asset mapping - collective tangible and intangible assets</p> <p>Using pre-printed maps of the local area:</p> <p>Use coloured dots to locate and map on the physical community assets:</p> <ul style="list-style-type: none"> ● Public assets (e.g. health services, libraries, schools) ● Housing and homes (e.g. sheltered housing, Extra Care, care homes) ● Places of worship ● Leisure facilities

	<ul style="list-style-type: none"> • Community centres/buildings, village halls • Open spaces • Shops, opticians, chemists • Banks and other financial services • Places where people can do voluntary / paid work <p>Then map onto this the intangible community assets:</p> <ul style="list-style-type: none"> • Formal and informal community groups • Advice or support groups and organisations • Informal links such as between neighbours • Community leaders (formal or informal) and official bodies e.g. parish council • Effective relationships between local organisations e.g. councils / health services / community groups? • Examples of community action (e.g. local campaigns) <p>Feedback and discussion in plenary</p>
11.55 – 12.10	BREAK
12.10 – 13.10	<p>Table Exercise: Ideas for using assets differently</p> <p>In groups brainstorm:</p> <ul style="list-style-type: none"> • How can these assets be used differently or be built? • How can the existing assets remain sustainable and viable for the future? • How can the assets be used to reach older people in Breckland who may be isolated? • How can existing assets (especially intangible community assets) be strengthened and further developed? • What examples of good practice are there in this area or from other places? <p>Feedback and discussion in plenary</p>
13.10 – 13.30	<p>Next steps</p> <p>Explaining the next steps for developing up the ideas for change and making change happen</p> <p>Agree the roles and immediate next steps for:</p> <ul style="list-style-type: none"> • OPM and Ageing Well Programme • Participants • The system or strategic levels <p>Wrap up and Close</p>

Workshop 2: Developing ideas for change

Aims

The workshop aims to enable participants to:

- Put flesh on the bones of ideas for enabling older people to age well that were developed at the previous workshop
- Decide who needs to do what to get the ideas off the ground
- Agree what needs to be done next

Programme

09.30 Arrival and refreshments

10.00 Welcome and overview

- The 'good ideas' for enabling older people to age well that are to be worked on today
- Briefing on which idea will be worked on at which table and an outline of the group work to be undertaken
- Participants move to their chosen table

10.15 Group work – detailing the 'good ideas'

- Facilitator
 - Outlines what is already known about how the idea might work in practice
 - Explains the working process:
 - Put flesh on the bones of the idea
 - Check whether anything like this is already happening and the links that might be made
 - Asks people to introduce themselves and briefly say why they chose to work on the table's key idea
- Facilitator then encourages the group to begin to fill out the idea by pooling their thoughts on the following aspects of the group's key idea and the note taker records them on a flipchart:
 - Providing – what will their key idea provide for older people?
 - Benefits – what are the ways in which older people are intended to benefit?
 - Doing – when the idea is up and running how will it be organised and run on a day to day basis? Who would be doing what?
 - Organising – when the idea is up and running, who would be doing what to organise and manage the doing?
 - Resources – what people, accommodation, equipment and funding might be needed?
- Facilitator checks out with the group about whether anything like their idea is already operating in Norwich and if so what is it and who organises it.

11.15 BREAK

11.30 Plenary - Sharing progress

- Each group describes their idea for the wider group to discuss

12.00 LUNCH

12.30 Group work – tasks and stakeholder mapping

- Facilitator
 - Welcomes the group back and checks out whether anyone made any interesting contacts over lunch that relate to this group's project.
- Encourages the group to pool their ideas by getting them to:
 - List and group the main actions that need to be taken to get this project up and running (note-taker records each task on a separate post-it note)

- Decide who needs to do what to take forward each group of actions
- Stand back from their work to agree:
 - the first two steps and who will do what to make sure that they happen
 - how the group will continue to work on their project.
- Note-taker records the group's conclusions on a flipchart

13.30 Plenary – sharing progress

- Each group briefly gives a couple of examples of actions required to get their project up and running and their first two steps.

13.45 Thank you and keeping things going

- Thank people for participating and agreeing to take forward their projects
- Briefly explains how the Ageing Well work in Norwich will affect what is done in the rest of Norfolk
- Explain the whole system event on 1 Feb and ask if any of the older people would be willing to help us share the work done today at the whole system event

14.00 CLOSE

Appendix 2: Good ideas developed by the three localities

Breckland's Good Ideas

Sloppy Slipper Exchange

Older people are often at increased risk of suffering a fall and injuring themselves. This may sometimes require a stay in hospital for some particularly frail older people. Falls prevention for older people is crucial in supporting the independence and wellbeing of older people as well as decreasing avoidable demand for emergency and acute health services.

According to Help the Aged injury caused by falling is the leading cause of death among older people over 75. It not only affects the individual, but their families and the wider community, thereby having an impact on community resources. On average one hip fracture costs £12,000 in emergency care alone and nationally a total of £1.8 billion is spent on falls related costs.

The aims of slipper exchange are to:

- Provide older people with suitable footwear that will prevent falls and related injuries, and in turn, relieve pressure on GPs and hospitals
- Provide health and wellbeing advice to older people at point of contact

How the project would work

Older people bring in their old, worn out and possibly dangerous slippers to exchange for new and well fitted slippers that have been specially designed for older people to reduce falls. As part of this, they would also get information about health and wellbeing.

Some older people have feet, which because of swellings, change in size throughout the day. Some slipper exchanges provide slippers that are specially made to be adjustable for this reason.

The project would be targeted at those that need it most for example older people who are house bound, socially isolated or frail. It may also be better to target this to older, older people for example 65+.

The preferred method of doing the slipper exchange is to hold an open day where older people can come and have their feet measured, exchange their slippers for new ones and receive further health and other advice.

It may be possible to host the day in non-professional settings for example a leisure centre to introduce older people to the leisure centre and provide exercise and fitness advice.

People can be asked for their sizes prior to ordering. Also, before collecting a new pair of slippers everyone was asked to complete a short questionnaire. This could consist of a series of questions to ascertain important information about foot health, other health conditions, balance and mobility and home situation. This helps to check the suitability of the new slippers and assess the risk of falling, highlighting if the individual would benefit from referral to other services to reduce the risk of falling in the home, e.g. home safety checks and adaptations. Agencies related to accident prevention and health can be on hand with displays and information as part of the health fair to facilitate referrals around a variety of needs, such as Community Falls Assessment Service, Podiatry Services, Fire Service, Care and Repair and GP services.

This could also be delivered in Breckland through the Poultec van, mobile libraries, doctors' surgeries etc.

Cost and sustainability

Funding needs to be sourced for the slippers, if they are to be provided free or at a subsidised rate. Transport, refreshments, publicity and equipment costs also need to be considered

Walsall had run a 'sloppy slipper' campaign at a cost of £4,000 which allowed older people to exchange their old slippers for new and this campaign had been a great success. The Health Promotion Partnership in West Suffolk was given a £3,000 grant from the Local Strategic Partnership and slippers were bought.

This project could be fully funded through for example the Living Longer, Living Well Fund, or subsidised with means testing.

Sustainability – this could include putting together an information pack containing ordering details, which the groups can use in the future when replacement slippers are required.

The Leeds Slipper Exchange toolkit has an accompanying Education Session to train people on how to correctly fit slippers. Involving voluntary sector staff and community volunteers in particular means that the fitting can be delivered to older people by their peers. Providing the Education Session for a voluntary sector organisation can build in some sustainability or create a different model of delivery. For example, a Neighbourhood Network Scheme could put on subsequent events or deliver the initiative on a one to one basis in small groups or on home visits to new members.

Another way to build in sustainability is to involve young people through the inter-generational project (below). For example there is potential for young people to film or help with publicising this scheme.

Who?

This would need to be a multi-agency approach involving PCT, Falls Prevention Team and slipper providers (e.g. a local firm / Hotter / Cosyfeet (have experience in dealing with problem feet)).

Other partners would include doctors surgeries, Podiatry teams, physiotherapists, nutritionists, osteoporosis and bone health experts, specialist aids providers, volunteers and the VCS

Evidence base and further information

Statistics have demonstrated that where this scheme has been implemented there have been savings on costs by reduction in numbers experiencing a fall.

The British Health Journal, November 2003, points out that "*Replications [of sloppy slipper exchanges] across the country would save 600,000 bad days a year*".

Leeds Slipper Exchange Toolkit:

[http://olderpeopleleeds.info/clients/infostore/files/Leeds%20Slipper%20Exchange%20Toolkit\(2\).pdf](http://olderpeopleleeds.info/clients/infostore/files/Leeds%20Slipper%20Exchange%20Toolkit(2).pdf)

Intergenerational project

Intergenerational practice aims to bring people together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations and contributes to building more cohesive communities. Intergenerational practice is inclusive, building on the positive resources that the young and old have to offer each other and those around them (Definition of Intergenerational Practice: Beth Johnson Foundation, 2001)

Changes in society have led to generations frequently becoming segregated from one another, this separation can lead to unrealistic and negative stereotypes, and a decrease in positive exchanges between them. Yet these separated generations do have resources of value to each other and furthermore share areas of concern.

Younger and older people are the two groups most affected by ageist attitudes and when we talk about abuse, poverty, lack of political voice and marginalisation these two groups are the most affected.

Intergenerational approaches are an effective way to address issues such as building active communities, promoting citizenship, regenerating neighbourhoods and addressing inequality.

Intergenerational initiatives have direct impacts on those involved, as well as on their communities. Participants may feel increased self-esteem from being able to give to and receive from others. They can experience improvements in health and a greater sense of being valued members of their communities.

How the project would work

Intergenerational initiatives often fall into three categories:

- members of one generation supporting another
- people from different generations working together to address community issues
- people from different generations learning together

The project in Breckland could encompass a variety of approaches and activities, and these could vary between villages/towns and depending on the local community.

Specific suggestions for intergenerational activities include:

- The development of a local welcome pack for those communities that do not already have one. The young people would carry out the research about what is available locally for older people and would design and develop the pack. The research would involve speaking to older people to get information.
- A project to explore the history and experiences of older people in a community or across Breckland. This would utilise a variety of media including film, photography, music, storytelling, and debate e.g. what is it like for an older or a disabled person? What is the life experience of older people / access issues confronting older people / contributing articles for parish magazines? School students may need to work solely in their own locality to avoid problems of transportation etc.
- Other intergenerational activities include role exchange and visits to local attractions, bicycle maintenance, gardening/growing produce and first aid, school allotment project, neighbourhood family workshops (including grandparents) which could be the catalysts for skills exchange including preparation of food and nutrition and budgeting, etc.

- Courses involving young people mentoring older people in computer and mobile phone skills and drama training where younger and older people create their own performances.
- A volunteer scheme for young people to become PCT volunteers with older people around health, fitness, support in healthcare settings.
- Bring older and younger people together to share their ideas about the concept of ‘a *sense of place*’ and to communicate their ideas to a wider audience through for example community or local radio.
- Specific activities in school such as knitting in older people reading in schools, knitting in schools, WWII reminiscence sessions bringing history to life with the real-life stories and memorabilia of participating volunteers, older people in the community regularly attending luncheon clubs at the school where they are shown around the school, entertained, and participate in activities organised by the pupils.

Who?

Primary and secondary schools, colleges, nurseries, course providers, health, community safety, local councillors, Duke of Edinburgh Awards scheme / Prince’s Trust, local youth schemes / clubs, guides and scouts (possibility of awarding badges for undertaking specific duties in community).

Specifically approach heads of local secondary schools for engagement with sixth form students as they are required to carry out some community-based activities as part of their studies.

Costs and evidence from elsewhere

An intergenerational project called Big Together was funded by a £13.5K grant from the Local Area Agreement Innovations Fund. In some areas, additional funds and resources were provided by the partner organisations. The local partners decided what themes to choose, how to recruit participants, when to run their activities and which media to work in. Each project was genuinely a product of the local area, reflecting on local themes, concerns and ways of working.

Although the opportunities for intergenerational interaction were time-limited and sessional, the overall quality of interactions was high and the friendships forged by older and young people were exciting and sincere. Most of the 31 organisations involved have continued to do intergenerational work and many inter-agency partnerships formed during the project have continued to grow.

Village Agents (example of Gloucestershire)

What is the Gloucester Village Agents Project?

Village Agents are employed for 10 hours a week to visit older people and signpost them to the services which they need. They do not provide advice but identify the appropriate service, from help with claiming benefits to finding someone to repair a grandfather clock.

What does it do and how can older people contribute and use it?

Village Agents visit an older person and complete a gateway form which includes all the services that person might need. The idea is that the information is given just once and then the form is sent out to all the relevant agencies: a single gateway to a range of countywide services. The service is monitored to see what the emerging trends are, which allows the

districts and county to plan for and deliver the right kinds of services based on identified need.

How to get involved?

Older people find out about Village Agents through local older people's groups or the village agents website. Village Agents do not 'cold call' people, but once they are in contact with an older person they place an emphasis on listening to their needs. For example what may start out as a request for help fixing a door lock may lead to identifying a more ongoing need that can be met by an appropriate service.

How is it organised and funded?

The project started as one of eight national pilots funded by DWP, and since June 2008 has been run as a mainstream service and funded jointly by Gloucestershire County Council and NHS Gloucestershire. It employs 28 Village Agents, covers 80% of Gloucestershire and costs £280,000 per annum. A Village Agent Scheme manager is based at the council.

Evidence base

A report by the Over The Hill campaign reports that the Gloucestershire Village Agents project has enabled older people to remain in their homes, and has attracted praise from senior government figures including former Prime Minister Gordon Brown.

Timebanking

Timebanking enables older people to use their skills and talents and draw on those of others. Because time banking brings together people who want to also help other people it also helps foster a stronger community that allows the community to become more resilient, self-sufficient and energised.

The proposal

Just like in a babysitting circle, people get the help they need and help each other out by taking turns to be responsible for some of the care and practical support that we all need from time to time. For every hour participants 'deposit' in a time bank by giving practical help and support to others, they are able to 'withdraw' equivalent support in time when they themselves need something doing. A real plus about time banking is that people of all ages and abilities can join in and exchange a whole range of skills. Giving or receiving could include time, reading books to others, knitting, housework, cooking, gardening, (online) shopping, help with simple electrics, computing skills, help with mobile phones etc., for example, baby sitting, mending things, cake decoration, teaching people to cook special meals and make ourselves, advising on gardening.

Some time banks grow out of the activities of existing organisations such as community associations or might be something that is supported by a village agent or champion. There is a national association of time banks that can provide lots of help and advice about how to get up and running.

Who?

People often think they don't have anything to offer or that anyone can do what they can do, or do it better. This puts people off joining time banks hence some effort needs to be put into helping people to identify what they have to offer and giving them the confidence to do so. Holding informal meetings where people who are interested in time banking get to know one another and find out what they can offer each other help build the confidence and links between people to get things going.

Costs and sustainability

A formal Evaluation of a timebanking scheme in Salford found:

“The start-up cost of the individual projects is relatively low. Similarly, the central administration function that is responsible for allocating activity and tracking ‘time credits’ is based on pre-existing and relatively inexpensive software. There are franchising opportunities being explored which make long-term sustainability a probability.”

Norwich’s Good Ideas

Improving access to information

Why do it?

Older people, especially more isolated people, still face problems in accessing information, whether that be generally in relation to “what’s on” and “how to get there”, or more specific financial advice and information including support throughout the process of claiming benefits. Some older people require help in both accessing and also making sense of the information provided. Hence both better access to consistent and reliable information and support, including face to face contact, to enable people to absorb the information is required.

What will it provide and how could it be organised?

There are two strands to this:

Providing information and support to older people in a face to face setting – as GP surgeries are accessed by large numbers of older people, men, women, ethnic minority groups a good starting point would be to locate volunteers in surgeries. They would provide a point of access to information for older people on wider social issues in relation to social inclusion, access to benefits, active living, and provision of transport. This will benefit older people but also support GPs in addressing clinical needs of patients.

This would be organised by developing a volunteer base of trained advisors, accredited and with CRB clearance. There would need to be a paid coordinator who would organise a rota of volunteers to provide information, or simply signpost to information. The coordinator could also organise specific sessions run by organisations focusing for example on benefit advice or diet and nutrition.

This supports the Norfolk older people’s strategy 2011 – 2014 section 1.2 and proposals for a new outreach type support service so that older people living in the community can benefit from outreach. Norwich Clinical Commissioning group will be a key route to get this up and running.

Development of Online Portal and supporting materials – This should focus on better coordination of online information across key agencies and provide linkages. For example, where information on activities, lunch clubs, and adult education classes is provided there should also be information on transport options to support people to get to them.

It would involve understanding who provides what information both online, in print and other media. Examples include the Citizen, age UK newsletter, notice-boards in pharmacies, shops, local newspaper, radio etc.

Where required and agreed these sources of information could be enhanced to enable them to provide more comprehensive and up to date information. The key resources would be

brought in by firstly looking to those organisations with statutory obligations to provide information and advice and existing online routes.

Is this a new idea, if not what is the evidence base for it working?

In Great Yarmouth a scheme has been running to provide advisors within GP surgeries a half a day a week to provide support for carers. A similar pilot is being explored in North Norfolk to provide patient support workers within GP surgeries.

Age UK Norwich already provides a volunteer base of advisors. Age UK Northamptonshire are developing a service aimed at recruiting and training health volunteers and placing them in GP surgeries to support the health and well being of older people by enabling them to access information and services which promote independent healthy living. Volunteers also offer telephone welfare calls to older people who have recently been discharged from hospital.

Barnsley Council have introduced a Welfare Rights Service of 2 specialist advisers providing weekly advice sessions in 10 doctors' surgeries for 3 years costing a total of £157,348. This covers a range of people, including but not limited to older people.

Supporting volunteering

Why do it?

Volunteering builds confidence and self worth and reduces social isolation. Volunteering can also identify the needs of older people and the ways in which they can be better met. Timebanking as a form of mutual exchange is one way that volunteering can be increased and there are benefits to both "giver" and "receiver" in terms of getting jobs done, increased social interaction and increased self worth. Volunteering schemes should benefit older people but the scheme could be open to everyone in the community to encourage different parts of the community to come together.

What will it provide?

Community Agents

A network of community agents and volunteers that support older people, reach out to those that are socially isolated, take forward specific areas such as support to sheltered housing. Some older people, carers or neighbours would contact the community agents directly by phone or by meeting them face to face or out and about. Others may be contacted directly by the agent who has been asked to do so, to provide some help and advice. Agents will also ensure that everyone has easy access to information so that they can themselves pass it on to friends, family and neighbours. In this way the agents can build up the knowledge about services and opportunities amongst local community.

Timebank

If the community wants to set up a timebank with the support of the community agents, this would also enable members to share skills, knowledge, time, cars, company and goodwill. Giving or receiving could include time, reading books to others, knitting, housework, cooking, gardening, (online) shopping, help with simple electrics and mobile phones and computers, baby sitting, mending things, cake decoration, teaching people to cook meals etc.

How could it be organised and resourced?

Community Agents

Volunteering activity could be “grown” first in specific wards of Norwich building on existing networks to have a local community focus and build up social relations there. Community agents will be part time, say 10 hours per week, may receive payment and they will need mobile phone and laptop as well as ongoing support and training. These would be resources to enable research activities and information for older people and as a way of contacting people, as well as a resource for older people to get in touch with the agents and ask for advice or information. They would also be supported with any necessary checks and any formalised training such as First Aid etc. They would be recruited from the locality - knowledge of the area is key.

Community agents could have specialities for example:

- supporting the sheltered housing schemes with their calendar of social events in communal spaces
- supporting older people in hospitals
- researching older people’s needs
- signposting to information and advice
- taking forward intergenerational projects

A professional and paid manager (a co-ordinator) is required to ensure community agents are supported, receive training and for quality assurance

Timebank

The community agents, with support from the co-ordinator would look into setting up a timebank in their area. In a timebank, people get the help they need and help each other out by taking turns to support others. For every hour participants ‘deposit’ in a time bank by giving practical help and support to others, they are able to ‘withdraw’ equivalent support in time when they themselves need something doing.

This would be a flexible scheme with both regular contributors and other members who wish to dip in and out. It would need a local organiser with skills of organising and co-ordinating. The timebank would get training and back up e.g. via Time Banks UK. Members would be recruited via leaflets and face to face contacts with ‘warm local contacts’ already active in community and invite to information sessions. Members would then be signed up and able to register their skills and needs.

Links to existing and other initiatives

In Norwich there are links to existing initiatives such as:

- the Norfolk older people’s strategy 2011 – 2014- links to “village agent” and “good neighbour schemes”
- The Greenhouse LETS scheme in Norwich
- UEA

Elsewhere:

- Time Banks UK
- Southwark circle

A formal Evaluation of a timebanking scheme in Salford found:

“The start-up cost of the individual projects is relatively low. Similarly, the central administration function that is responsible for allocating activity and tracking ‘time credits’ is based on pre-existing and relatively inexpensive software. There are franchising opportunities being explored which make long-term sustainability a probability.”

Great Yarmouth Good Ideas

Volunteering

- Look at different ways to involve people e.g. ‘wine and whinge’ rather than formal meetings
- Additional resources for training, supervising and recruiting is required for community organisations who already support volunteer programmes
- Additional support for borough led activity promoting the benefits of volunteering.
- Potential to share skilled volunteers
- Linking volunteering with apprenticeship schemes
- Provide additional transport for volunteers
- Review mechanisms for tapping into ‘community spirit’
- Use time banking to cross generations and individual unemployed – people can give, may be more inclined to ask for help
- Prepare people for retirement and get them into volunteering – work with employers
- Volunteering from industry – encourage. DWP does this in GY
- Public sector and voluntary sector structure opportunities for public sector volunteering and development

Integration

- Example of operation Gunpowder, additional resources could be used to better integrate services, identify shared outcomes and utilise existing structures
- A strong need for agencies and groups on the ground to work together with residents to design better services, reduce duplication and shape services to local needs
- Develop ways of working which improve outcomes and add value without the requirement of high levels of additional funds and resources
- Need to know where to go for information or where to send information
- More networking events like the GYVSP ‘Get in The Mix’
- Organisations need to look at the sustainability of projects, review existing support when considering setting up new projects
- Use each others resources e.g. Caravan for information

- Tap into professional skills of employed staff to support community opportunities
- Parish newsletters as source of information and opportunities
- Create structures that are sustainable (not just based on individuals)
- Use text messages to communicate with individuals
- 'Network' organisations that give out information – 'matrix' to develop
- 'One line' number to signpost people to different services – Suffolk model. Proactive return of calls and follow up
- Tap into Norfolk County Councils joined up approach to Information Advice and Advocacy which includes a portal – needs to link to 'passing on' information and answering questions
- Integrated approach to solving individual problems especially for less vocal people. People like a GY number – need to address this
- Integrated approach in villages e.g. card with Parish Council to identify need e.g. in power cut and resources available e.g. 4 wheel drive vehicle
- Address issue of keeping printed information up to date e.g. in GP Practices
- **Team East** – 8 organisations to support and share – for any voluntary organisation in care and health
- Build on existing joint work e.g. Ageless Opportunities
- More cross organisational working at a practical level e.g. GP's, housing departments, police and community matrons, hot desking.



Ageing Well Case Study – Norfolk

**Norfolk Older Peoples' Strategic Partnership
Board Meeting – 20 June 2012**

About Norfolk

- Norfolk has a population of 862,300 residents, of which:
 - 21% are over the age of 65 – compared with 16% for England overall
 - 10% were aged 75 and over - compared with 8% nationally
 - 3% of which are over the age of 85
- People of pensionable age just exceed the under 16s nationally, though in Norfolk there are currently almost three pensioners for every two children under 16
- Norfolk has the sixth largest land area of the 27 English shire counties, and the seventh highest population, but the sixth lowest population density
- As well as Norfolk being a large county it has a varied mix of urban, rural and coastal communities
- Demographic growth – an ageing population



Norfolk's Priorities

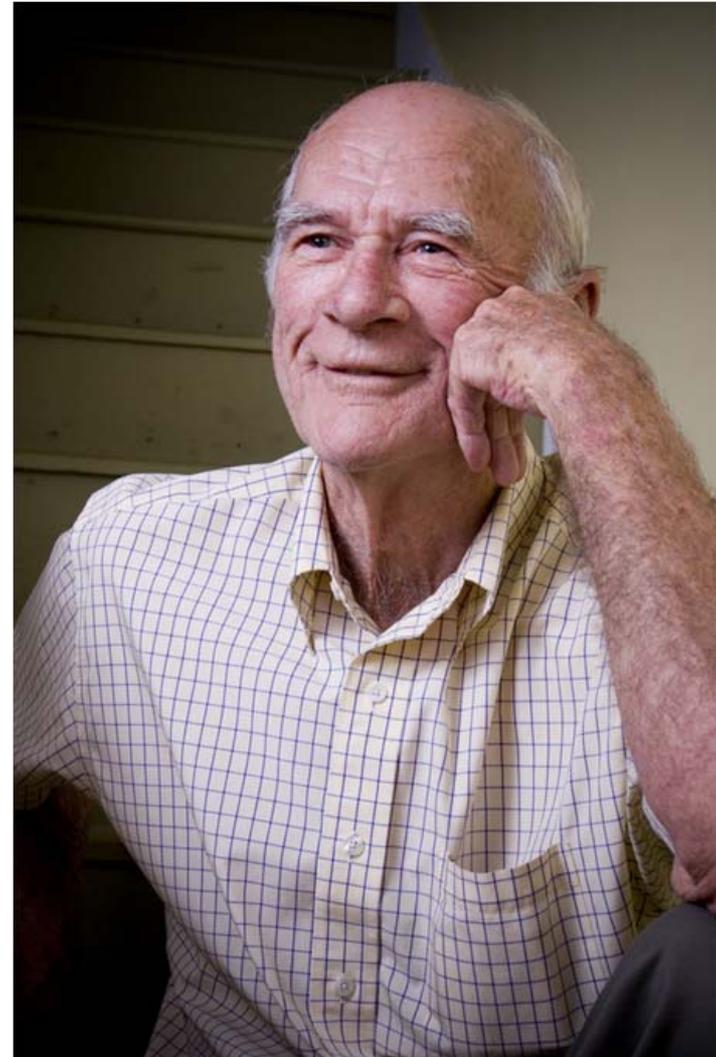
- Promoting prevention and independence
- Social inclusion and cohesion
- Community sector, assets and capacity
- State funding constraints

Community capacity

- Building on what is already there.....
- Living Longer Living Well
- Forums for older people and disabled people
- Information Advice and Advocacy Strategy
- Norfolk's Prevention Strategy

'How' is important

- Linking work with existing commissioning processes
- Health and well-being board
- Co-production and involving people
- Using energy
- Devolution and localism
- Access to new ideas
- Focus on a few issues
- Working with organisational interests
- Using elected members and community leaders



Community concerns

- Concerns were already known but the partnership has galvanised action:
 - Information, advice and advocacy
 - Getting help with unexpected needs
 - Integrated working
 - Practical help in the home
 - Social activities and health improvement
 - Community support and development
 - Valuing older peoples contribution and ending age discrimination

Developing responses

- Practical community ideas to address concerns
- Community development approaches
- Starting with assets not funding
- Incentives with some start up funding - one off Living Well in the Community Fund
- Recycling savings through formal commissioning

Community ideas

Breckland

- Sloppy Slipper Exchange
- Intergenerational Project
- Village Agents
- Timebanking

Great Yarmouth

- Volunteering
- Integration

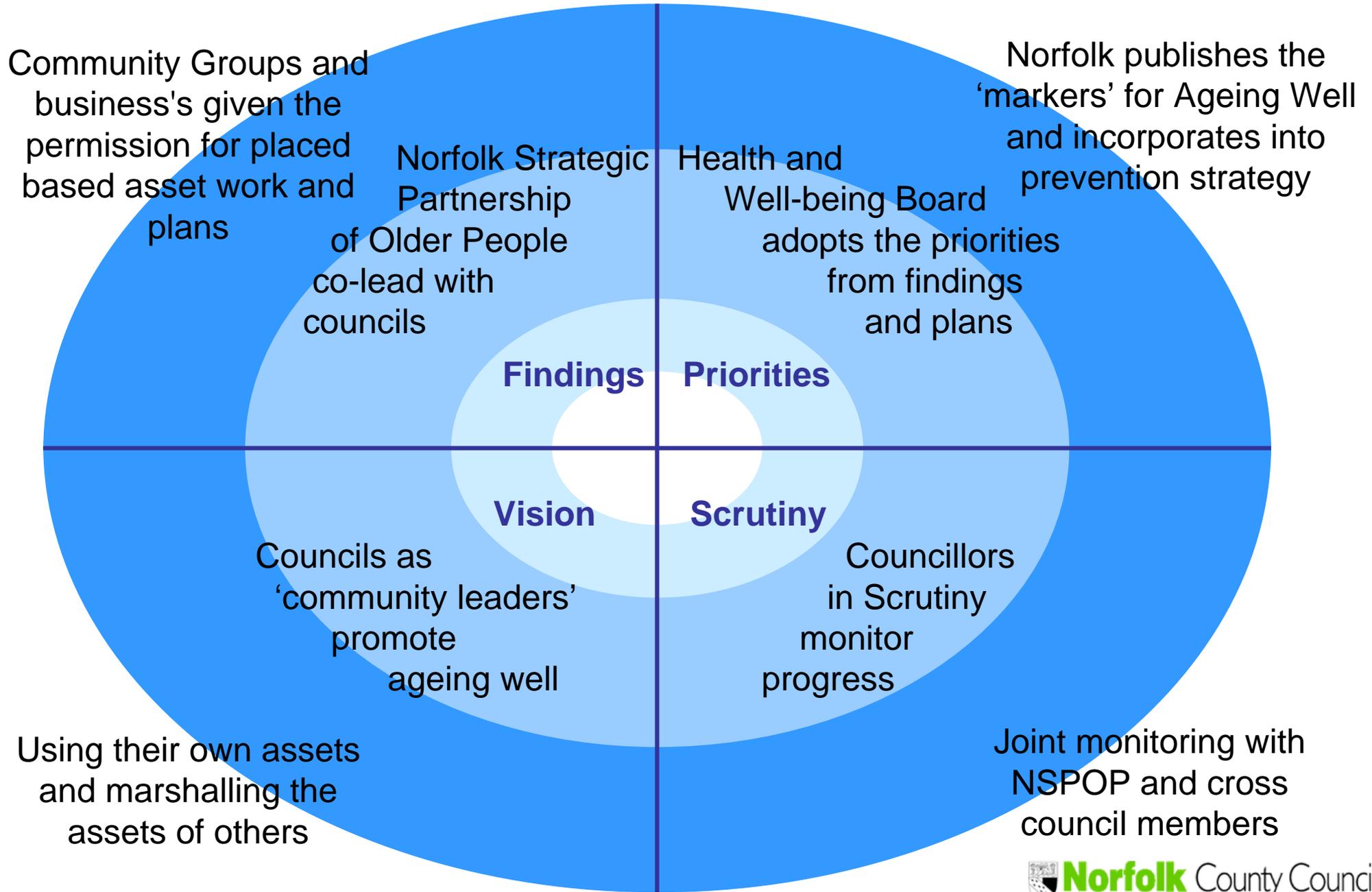
Norwich

- Improving access to information
- Face-to-face settings, e.g. GP surgeries
- Development of Online
- Portal and supporting materials
- Supporting volunteering
- Community Agents
- Timebank

Ageing Well going forwards

- Ageing Well Action Plans
- Rolling out our approach to other areas
- Living Well in the Community Fund
- Locality Commissioning Plans
- Older people's Strategic Partnership
- Health and Well-being Board to promote the priority
- Discussion and agreement about a partnership model

Potential model





Paper for Norfolk Older People's Strategic Partnership Board

Age UKs in Norfolk – role and challenges

Age UKs and Age Concerns in the County have shared aims to enable older people to remain well and independent; our roles depend upon our size and capacity.

We all offer information relevant to ageing and support social activities that enable people to stay connected, keep active and access services in a timely way when needed.

Challenges Faced by Older People in Norfolk

The main issues for older people in Norfolk are access to timely information and advice and isolation.

Whilst we are all aware that funding cuts are having an impact on everyone in Norfolk, the cuts are proving challenging for older people and organisations that support them.

Changes in day care that have been brought about by the shift from block to spot contracts, including the personal budget process, pose significant challenges for both day care groups and their participants, particularly those who find themselves having to pay increased charges. Day services were set up to support older people who were often vulnerable and living in relative isolation. Many are run by volunteers.

We are aware that some older people have found the assessment process particularly difficult. In part, we believe this to be due to the number of people that have never been through an assessment because their local day service has always been funded by Norfolk County Council.

We are also aware that some older people may not be able to afford to pay the increase in day care charges and as a result will no longer be able to attend their day service. Without the safety net that day services provide, people will be in danger of becoming more isolated which will affect their health and wellbeing.

Age UK Norwich

There are five strands to our work:

1. **Information, Advice and Advocacy.** Built around our city centre drop-in advice service, covering all aspects from housing and financial to access to care and statutory services. We supplement this with home visits to people with limited mobility or where information is easier to obtain at home and outreach 'surgeries' especially in outlying areas of deprivation (in sheltered housing, social centres, libraries etc.)

2. **Supporting social activities.** We provide ideas, encouragement, volunteers and start-up finance to enable active older people and other organisations to provide social opportunities. We emphasis healthy activities, intergenerational work and accessibility to isolated people (including LGBT groups and ex-prisoners). As groups learn to run autonomously we offer continuing 'helpline support' as sustainability tends to be a challenge at this age. As part of this we run informal, volunteer-led IT training sessions at our locations and in sheltered housing.
3. **Volunteer support.** Where individuals find it hard to get out, or to join in due to physical limitations or anxiety/depression, we provide volunteers to provide company at home or support and encouragement to attend. This may be short or long term and prioritises people whose isolation is a major factor in their sense of wellbeing and self-esteem.
4. **Day Centre support.** This service is primarily for people with dementia and where a secure location, with ready access to personal care staff is necessary. Many clients have carers who value the break (and the informal support our staff offer them) but some live alone and the time in the centre helps them to remain independent. The days focus on enjoyment, but also a clear set of outcomes to delay and then ease the transition to residential care.
5. **Lobbying and campaigning.** Together with the Norwich Older People's Forum, we ensure that the values and concerns of older people are understood and responded to by statutory organisations as well as our own and other voluntary services.

Of these areas of work, only the Day Centre is primarily funded by the County Council. Our advice work is majority funded by grants and donations and all our other work is entirely charitably funded.

Challenges for the coming years

1. Like all organisations in this field we are caught between two national trends: the decline in public funds for prevention services and the increasing competition for charitable funds. As the Council withdraws support for people in moderate need, we and other organisations need to work with the community to provide wellbeing support through active citizens and volunteers. (Where any vulnerable people may access support it is important to have properly managed volunteers; for everyday 'neighbourliness,' volunteers are too scarce and expensive a resource.)
2. The requirement to 'activate' more people within especially less prosperous communities and to recruit, vet, support and monitor more volunteers comes as our funding becomes more difficult to secure. It is by no means clear that those making the decisions clearly understand how precarious voluntary funding is; to build a prevention strategy on the continuing existence of, let alone expansion in, the voluntary sector is at best a huge gamble with people's wellbeing.
3. Paradoxically, the development of competitive tendering as a way to ensure value for money creates further challenges for voluntary organisations:

- It encourages and rewards organisations with bid-writing capacity to enter the market and undermines smaller groups unable to meet the terms (even if they can actually deliver the services)
 - In monetising the service it makes it difficult to match public funds with (essentially variable) charitable income and donated time. If we include this in the contract, we are then 'forced' to subsidise the contract and the market is driven down. If we exclude it we then find it hard to demonstrate how we achieve more than a commercial bidder.
4. The move towards personal budgets presents three broad challenges for the sector:
- It draws a distinction between those 'eligible' for support and those not. Many valued settings for older people depend for their functioning – and the financing - on providing a service to people in both groups. Essentially the 'eligible' have been subsidising the service for the others. Thus we face losing capacity in these mixed services and a net reduction in 'preventative places'.
 - It requires a level of sophistication in administration and financial management that many smaller groups do not have and for all providers increases costs. The Council is working to help with risks and transition, but the maths remains.
 - It provides possibly significant additional work in supporting people to access, navigate and challenge the social care funding process. Certainly we are seeing an increase in advice and advocacy work as our funding for advice is dramatically cut.

Age UK Norfolk

Age UK Norfolk is an independent charitable organisation providing support to people in later life and their carers across Norfolk. There are three aspects to our work, direct service provision, advocating and campaigning with and behalf of older people and community development and infrastructure working with communities and older people's clubs and groups across the county. Our direct provision comprises:

1. **Respite Services** - short breaks with 24 hour support provided by qualified care staff. We have two respite services situated at Grays Fair Court, New Costessey, Norwich, and Herondale, Acle, Norwich.
2. **Day Services** - a range of activities to suit people's different needs with the aim to increase people's wellbeing and independence. We have four day services across the county; two are based within our respite services at Grays Fair Court in Costessey and Herondale in Acle. Our other services are sited at the Denny Centre in Diss and Methwold.
3. **Household Helpers** – practical help and support around the home with daily household chores which include shopping.
4. **Pabulum** - working to improve the lives and wellbeing of people with dementia and their carers. These are situated across Norfolk based within a café style setting using reminiscence based techniques.

5. **Information, Advice and Advocacy Services** - providing reliable information to enable older people and their carers to make choices and decisions. These services include:

- **Information Advice Helpline** - telephone helpline for older people, carers and families across Norfolk.
- **Benefits and Entitlements** - advice about any benefits and entitlements as well as assisting with claims.
- **Legal Advice Sessions** - a free legal advice session with a solicitor.
- **Advocacy Service** - providing an independent advocate who can support older people to assert their rights when making life decisions.
- **Lasting Power of Attorney** - information about the process, advice about the benefits of having an LPA in place and the procedure, and practical help (if required) with completing the forms and registration.
- **Money Matters** – a financial advocacy service funded by Norfolk County Council - helping people to manage their personal finances so they are able to remain independent for as long as possible.
- **Care Home Advocacy** - a specialist advocacy service supporting people in their care home.
- **Bereavement Advice** - practical help and support to an older person who is recently bereaved.
- **Care Home Finders** - accurate, up to date information for people considering a move into a Care Home either permanently, for respite or day care.
- **Funding Support** - helping families, individuals and their carers to apply for funding from charitable sources.
- **Befriending** - telephone and face-to-face
- **Carers Learning Grants** – administering grants to carers aged 18 or over in Norfolk to help fund learning course fees.

Volunteers play a vital role in helping us to deliver our support services. Currently we have over 300 volunteers and have a rolling programme of recruitment actively seeking volunteers of all ages and experiences to assist with social activities, campaigning, fundraising, befriending, administration, telephone advice and advocacy.

Challenges faced by Age UK Norfolk

One of our key challenges is to be able to respond to the changes in commissioning to ensure that the impact upon older people's lives is carefully monitored and that consequences are minimised by ensuring the vital safety net remains in place. Over the last few years we have been working to strengthen our organisation and the various activities within it to be in a position to respond positively to this very different environment. Among the key steps we have taken are:

- Strengthening our governance, management and quality systems and enlarging our Board of Trustees to ensure we have the skills and experience we need to operate in a market-based environment;
- Developing an internal staff bank and in-house training and development for our staff and volunteers;

- Developing social enterprise, fundraising, marketing and publicity enabling us to increase our independent income;
- Developing a co-production framework.

As part of the personalisation agenda and the need to deliver services locally, we are currently developing our building bases across the county into community hubs with the aim of increasing our reach into surrounding communities. We are also working to develop new hubs in partnership with other organisations to increase older people's access to local activities and services across the county.

In July, we will begin to pilot a new volunteer community mentor programme in West Norfolk which will test out new ways of providing support to people in later life through volunteering, mentoring and the provision of community based information and advice. As part of our community hub development plan we want to continue to test out further ways of developing locally-based support for older people and are currently seeking funding to develop this work with communities.

31 May 2012

Shaun Wilson-Gotobed
Development & Operations Manager
Age UK Norfolk

Phil Wells
CEO
Age UK Norwich