

**Norfolk Older People's Strategic Partnership
Awayday 3rd December 2014**

Priorities for Older People in 2015

Top Priorities

1. Draw up a new 'Living Longer, Living Well, the Norfolk Older People's Strategy' plan for 2015 – 2017

Concerns:

- people don't want to be labelled e.g. as having dementia, so focus on age-friendly services and support

1.1 First review 'Living Longer, Living Well, the Norfolk Older People's Strategy: Promoting Independence and Wellbeing 2011-2014'

1.2 Develop a new prevention strategy/action plan, and hold agencies to account for their delivery of what they plan to provide

1.3 Publicise this and the other work we do

2. Make sure Older People in Norfolk can get the Information and Advice they need when they need it

Concerns:

- we don't publicise enough the support and services that are already available
- some older people are reluctant to accept help
- 'word of mouth' is a very effective way of sharing information about support and services
- County and District Councillors don't always know what support is available for older people in their area
- housing is often seen as separate from health and social care, but good housing is a key aspect of living well and housing advice isn't always available

2.1 Work with Statutory and Voluntary Agencies to provide a paper handbook, promote across the county, evaluate and plan for sustainability if effective

3. Increase Access to Services in each Locality through more/better co-ordinated Transport

Concerns:

- this has been one of our top priorities for many years, and little progress has been made
- this is really about accessing services
- older people who suddenly lose access to a car can be totally cut off from services
- changes to bus routes without consultation can mean older people can no longer access the bus, or may have to wait until late for the return journey
- there is no proper evening service in many areas and even in some parts of Norwich

- some volunteer car schemes only provide transport for health appointments
- there is no additional funding for transport including community transport
- people are diagnosed with dementia, and then told they can't drive any more
- some older people who aren't on bus routes are reluctant to pay for community transport as they feel they should be able to use their free bus pass for all transport

3.1 Older people's forums should work in their locality with Norfolk County Council departments (including Adult Social Care and the separate Passenger Transport section – Niki Park and Doug Bennett) to map the services of independent and subsidised bus services and community transport, and share data on demand and identify the gaps

- make sure the voices of older people are heard as well as those of other more vulnerable groups such as people with young children and people with disabilities
- make sure accessible transport is included at the strategic planning stage

3.2 Investigate new ways of filling the gaps e.g. working with through shops/supermarkets to sponsor transport for shopping; looking for sponsorship for community transport

3.3 Make sure information about all types of available transport is easily accessible

3.4 Work with GP surgeries to make sure their patients are aware of transport available locally so they can get to the surgery and other services, and find out if they can co-ordinate patients with similar needs, e.g. for flu injections, coming on the same day so transport can be co-ordinated

3.5 Make sure that national eligibility criteria for statutory transport to take people to hospitals and specialist GP surgeries is interpreted sufficiently widely for escorts/carers to be properly included

3.6 Publicise Norfolk County Council's Guidance for Older Drivers Programme (GOLD).

http://www.norfolk.gov.uk/Travel_and_transport/Roads/Road_safety/Keep_your_mind_on_the_road/Guidance_for_Older_Drivers_-_GOLD/index.htm

3.7 Explore ways in which the Norfolk Older People's Strategic Partnership can get more involved with county and locality transport strategies

4. Improve the quality of the care provided by paid home care and residential care staff by professionalising the care industry

Concerns:

- every older person needing care is unique – what is important to that individual?
- why aren't they paid appropriately?
- the Dementia Coaches are a great resource and 275 have now been trained to work alongside their colleagues in nursing and residential homes, home care, health and day care, and to promote good practice; how could they be used more widely and better publicised?

4.1 Promote the importance of caring work as a profession – a positive image in the media, recruitment of people with strong caring values (these can't always be taught), the payment of at the very least a living wage, payment for their travel time, the provision of proper training for staff, and career progression; use personal stories to make it come to life.

4.2 Promote and reward outstanding performers

4.3 Develop and promote clear quality standards for Norfolk including around Adult Safeguarding

4.4 Explore ways that agencies can share training and purchase of equipment etc to reduce costs

4.5 Consider the lessons to be learnt from the December 2014 evaluation of the initial cohort of Dementia Champions, and how this model could be promoted

5. Promote the Value of Volunteering

Concerns:

- the legislation removing the compulsory retirement age may make it more difficult to recruit 'younger older' volunteers
- too few young people are becoming volunteers
- in some areas there is a real shortage of volunteers of any age, and this can lead to agencies competing to use the same volunteer
- schools can find the red tape involved a barrier
- lack of evening buses in rural areas can also be a barrier for young people wanting to volunteer
- young people don't always know what will be involved or that they may benefit as well as the person they are supporting, or they may feel they have nothing to offer
- the cost of managing a volunteer (recruitment, training, supervision, travel, materials/equipment etc) is often set far too low

(NB Norfolk County Council is looking at the implications for volunteers of the 2014 Care Act)

5.1 Promote the importance of volunteering, and the value both to the person being supported and the volunteer

- work with voluntary agencies and the media and use real case examples to describe the wide range of volunteering opportunities (e.g. projects that are intergenerational, are with very small or very large agencies or with well-established or new projects) and explain the value to the volunteer including physical, mental and social benefits
- challenge the stereotypes people have of older people
- explore why many younger people don't think of volunteering or are reluctant to do so

6. Promote the Importance of Appropriate Housing so Older People can Remain Living at Home

Concerns:

- some people have no family or friends to help them de-clutter or move
- 76% of older people nationally are home owners with £250 billion in equity yet choices of appropriate, accessible housing to move into are often very limited
- new houses aren't being built to Lifetime standards so, for example, ceiling joists aren't strong enough to take hoists, doorways and rooms are too small for wheelchair users, installation of stair lifts can be problematic and there aren't wet rooms
- not all district councils keep a register of housing that is adapted for people with disabilities
- has the County Council reduced spending on assistive technology?
- housing planners and care planners/providers don't always work together

- many older people want to remain in their own house when they become more frail, and don't want to down-size, so their homes may need to be adapted
- district councils' focus is often homes for younger people and families, but what are their plans for housing for older people?
- sheltered housing built some time ago isn't always fit for purpose now; could it be upgraded, with input from older people?

6.1 Research Lifelong housing and explore ways to promote this with district council and registered social landlord housing officers and architects, district council planners, and independent developers

- involve the local older people's forum

6.2 Provide information and advice on forward planning/finance and downsizing

6.3 Make sure that help to de-clutter and downsize is available across all districts

6.4 Promote and campaign for dementia friendly homes for people with dementia e.g. with coloured handrails, appropriate lighting, assistive technology, and publicise any small grants that are available for this purpose

6.5 Make sure older people can have a choice about the sort of housing they move into e.g. retirement villages are just right for some of those who have funding, but not for many others.

7. Make Every Contact Count: 'whatever door you go through is the right door'

Concerns;

- many of the difficulties older people experience which lead to unnecessary suffering and admissions to hospitals and care homes can be prevented
- some older people living at home are very vulnerable to abuse, particularly financial abuse

7.1 Promote Homeshield

- Make sure agencies working in localities with older people link properly with other specialist agencies to avoid duplication and maximise use of resources

7.2 Identify socially isolated older people and people who are caring for someone but who don't see themselves as carers ('hidden carers') and signpost to appropriate help

7.3 Make sure staff going into people's homes have had the appropriate level of Adult Safeguarding training, and can identify older people who may be at risk

8. Provide Support for Informal Carers

Concerns:

- some carers feel that a carer's 'assessment' will mean they will be judged
- carers often don't have a life of their own

8.1 Provide the right sort of respite care at the right time (both planned and emergency)

- ask them what sort of break they need
- make sure the carer's own health needs can be met e.g. replacement care if they need a hip or knee operation

8.2 Ask Carers what they would like to do for themselves, and support them to do it

8.3 Make sure GP surgeries register carers and assess their health needs, and that their social care needs are assessed

- amend or qualify the term 'carer's assessment' so it can be seen as a way of getting support rather than judgement

8.4 Provide appropriate training for carers in caring skills e.g. strategies for caring with people with dementia; this could also provide them with skills when their caring role ends

9. Reduce loneliness and social isolation by developing activities in communities and supporting older people to use them (prevention)

Concerns:

- how can networks in local communities be encouraged e.g. to support older people to keep physically and mentally well (keep busy)?
- who will support older people lacking in confidence into a new activity, and who will provide the transport in the long-term?
- where agencies have supported the development of a new activity, they don't always then continue to support it

9.1 After developing a new resource, agencies must continue to sustain it and promote/use its resources

9.2 Make greater use of community rooms in villages and sheltered housing complexes for activities for local people

- could the older people's forums identify some of these and promote their use?

9.3 When linking an older person into a community activity, make sure they can get to it in the longer term – i.e. that transport will be available

9.4 Have information about local activities and services available in GP surgeries e.g. provided by a trained volunteer who can support people to join them if needed

Other Priorities

10. Promote Healthy Living and Wellbeing for Older People

10.1 Promote the message about making the most of retirement and later years, looking after yourself, considering volunteering etc and link people to relevant health and wellbeing information

10.2 Link this to the importance of younger people leading a healthy and active life

11. Support Older People with Depression and Anxiety

Concerns:

- depression and anxiety can be a serious health issue for older people, e.g. after a bereavement or a hospital stay, and is often unrecognised
- community health staff can identify older people who are depressed

12. Promote a positive image of older people

Concerns:

- older people (aged around 60 – 105), who make up around 30% of the Norfolk

population, are often stereotyped as a uniform, dependent group, whereas they include different generations and individuals who contribute so much to the community as well as sometimes needing support

- challenge the stereotypes

13. Integrated Care Pathway

Concerns:

- will this be seamless and sustainable?

14. Use the knowledge of Age UK Norfolk and Age UK Norwich

14.1 Explore ways their expertise could be shared

Accessibility *n.* **1.** capable of being easily reached and/or is available to as many people as possible. **2.** as a spatial concept, relates to inclusive design principles. **3.** a legal requirement under the Disability Discrimination Act (1995 and 2002). **4.** may, more broadly, be interpreted as a form of spatial inclusiveness. **RISKS:** can overlook the way in which people's interaction with urban space is experienced 'unevenly and unequally.' **5.** literally, easily used, read and seen.

Inclusive design *adj.* **1.** a design approach where the built environment (and/or any fabricated service or product) is designed and/or adapted in such a way that it meets the needs of all, regardless of age or ability. Often used interchangeably with terms such as 'design for all' or 'Universal Design' (US). **HISTORIC ORIGINS:** emerges as a response to demographic trends of population ageing and growing movement to integrate disabled people into society *tone:* HOPEFUL.¹

Achieving Lifelong Housing

Alison Spalding, Norwich City Council

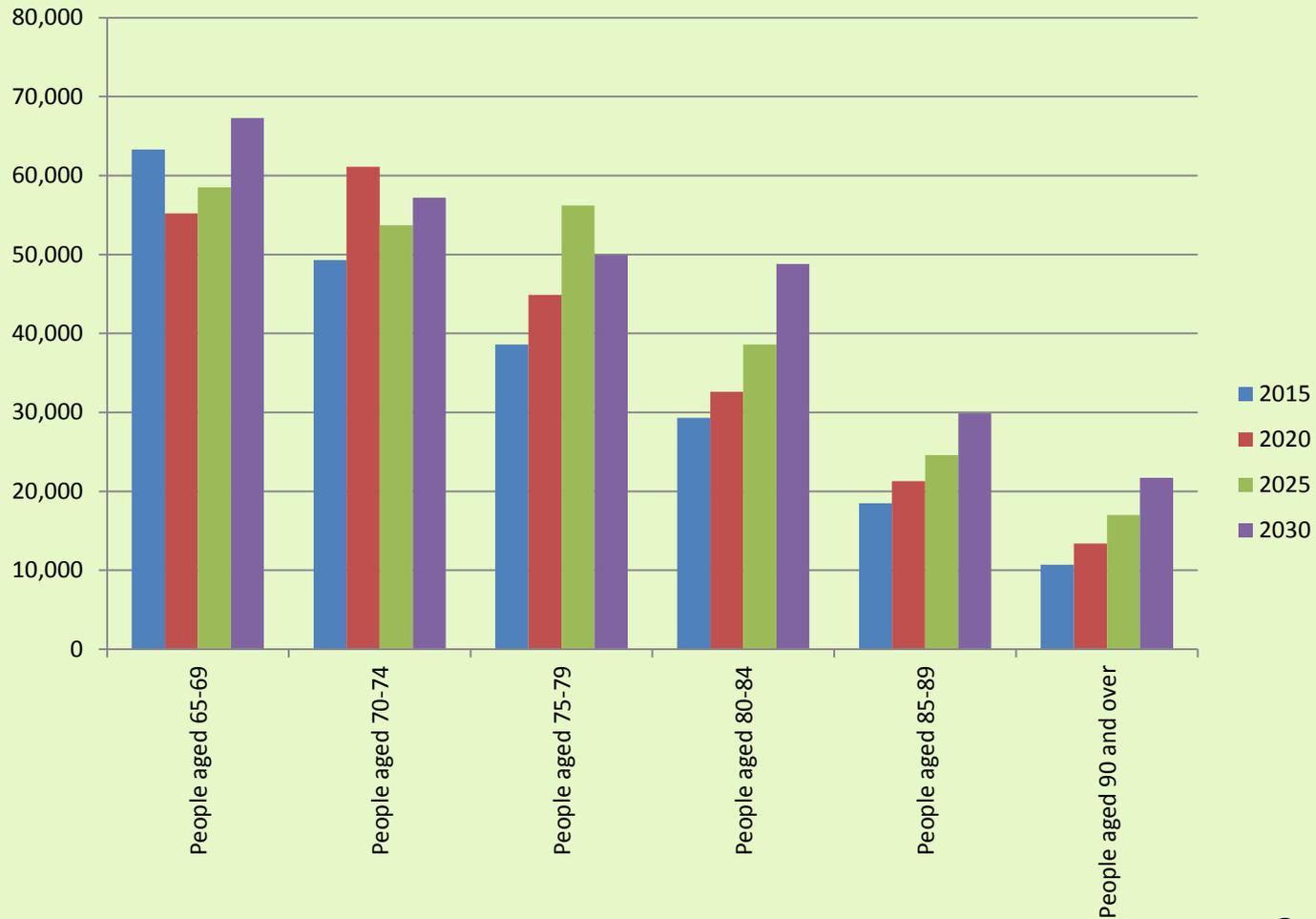
Jane Warnes, Cotman Housing

Norfolk Older People Population Projections 2015 – 2030 (all older people)



Source: POPPI²

Norfolk Older People Population Projections 2015 - 2030



Source: POPPI

Why we need better housing options for Older People

- ✿ Being older can be a long time! 55 – 105
- ✿ To provide real choice and control for people as they get older, before crisis point
- ✿ To help prevent difficulties managing larger properties in later life, particularly where there is frailty, disability or cognitive impairment
- ✿ To help older people release equity or manage their finances better
- ✿ To release family homes back into the housing market, within all tenures

Why we need better housing options for Older People

- ✿ To reduce care costs, and hospital admissions, delayed discharge and readmissions
- ✿ To help prevent mental health deterioration, and poor nutrition and hygiene
- ✿ To help carers assist people manage their conditions with dignity, as health and care services are delivered in or closer to home
- ✿ To allow older people more access to community activities such as volunteering and community activism, using their skills and experience to help others who may experience greater difficulty

Housing offers

Cotman Housing

- ✿ Lifetime homes in New Build
- ✿ Sheltered Housing - rented
- ✿ Leasehold Schemes for the Elderly – buy at 70% market value
- ✿ Tenure neutral Norwich Outreach Support
- ✿ Handyman service for Older People and those with Dementia in Norwich
- ✿ Community Lunch Clubs
- ✿ New partnership between Places for People and Girlings Retirement Rentals who manage 2500 properties in South East







Why should we support building for Older People?

- ✿ 76% of older people are home-owners
- ✿ Large potential pool who should be a key market for developers
- ✿ Yet only 5% older people live in older person's housing
- ✿ Releasing equity allows older people to share responsibility for funding care needs
- ✿ Investment in older person's homes, including moving, would provide better outcomes and be cost-effective
- ✿ Would also be a new market for developers
- ✿ Currently a rare offer with no retirement villages in Norfolk

Why should we support building for Older People?

- ✿ Huge potential growth market in the retirement sector
- ✿ Market is set to grow by 55% in the next 20 years
- ✿ Wish to offer broader mix of housing across all tenures, supported with domiciliary care, financial and other lifestyle products
- ✿ It makes good sense: for communities; for business; for health and social care

Implications of the Care Act 2014

- ✿ Establishes principle of well-being
- ✿ A Duty on Social Care to consider housing as part of the overall well-being assessment
- ✿ A Duty to work with other statutory bodies, including housing and planning departments and housing associations to ensure suitable housing is available
- ✿ To ensure housing advice and information is available for people who need it
- ✿ Increased emphasis on keeping people independent in their own home
- ✿ Emphasis through Better Care Fund on joint health and social care commissioning of community based preventative services

Barriers to building age friendly housing

- ✿ Land availability
- ✿ Viability
- ✿ Government policy use housing as a lever to help boost the economy
- ✿ Public policy concentrating on younger people getting 'a foot on the ladder'
- ✿ Uncertain levels of demand for older and disabled people

Barriers to building age friendly housing

- ✿ Planning policy does not differentiate older persons' housing
- ✿ Lack of specific policies for the provision of older persons' accommodation
- ✿ Specialist accommodation unable to compete with open market housing
- ✿ Lack of joined up thinking between planners and care providers
- ✿ Changes to the building regulations and planning framework
- ✿ Removal of Lifetimes Homes Standards

Breaking down the barriers

- ✿ Providing land and funding to design and build specific housing for older people to live in
- ✿ Work with developers and registered providers to deliver better designed housing schemes which incorporates good inclusive housing and urban design
- ✿ Work with planners to enforce planning obligations such as lifetime homes standards wherever possible, using the Care Act and other relevant legislation to underpin design principles
- ✿ All partners to gather and release relevant, meaningful and up to date information about demand, made available through the JSNA