



Agenda Item No. 12 Date: 14th June 2018

Report

To the Chair and Members of the Health and Wellbeing Board

AN UPDATE ON LONELINESS & SOCIAL ISOLATION

EXECUTIVE SUMMARY

1. The purpose of this report is to provide an update around the loneliness and social isolation agenda in Doncaster and to ask members to note the progress.

Loneliness has been high on Doncaster agenda since the Adult and Social Care Overview and scrutiny review in 2015. There have been a number of developments since including the commitment for Doncaster to be the least lonely borough in the county by 2021. This reflects the increasingly importance of this issue across all ages and social isolation and loneliness is now recognised to be as detrimental to health as the tobacco.

This report provides an update following the recent Health and Wellbeing Board workshop on loneliness and outlines the next steps for an 'alliance' of interested organisations to take some elements of this work forward.

EXEMPT REPORT

2. There are no exemptions to this report.

RECOMMENDATIONS

3. The Board members are asked to note and endorse the progress in this report and to support the vision to eradicate loneliness in Doncaster by 2021.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. Social isolation and loneliness are increasingly common experiences for Doncaster residents. The Doncaster Talks report discussed at the last Health and Wellbeing Board described how social connection and ability to experience new things was a key driver of health and wellbeing. Loneliness can affect anyone at any time and can be triggered by a number of life changing circumstances whether it be unemployment, homelessness, bereavement, relationship break down, bullying and harassment, geographic location, transport issues or other socioeconomic and life-changing circumstances.

BACKGROUND

5. Nationally loneliness has been identified as an issue for government with the appointment of a Minister for Loneliness, Tracey Crouch and increased focus on civil society building on the work of the Jo Cox Campaign.

Facts around loneliness

Health risks

- Loneliness is as bad for you as smoking 15 cigarettes a day. (Holt-Lunstad, 2010)
- Loneliness is worse for you than obesity. (Holt-Lunstad, 2010)
- Lonely people are more likely to suffer from dementia, heart disease and depression. (Valtorta et al, 2016) (James et al, 2011) (Cacioppo et al, 2006)
- Loneliness is likely to increase your risk of death by 29% (Holt-Lunstad, 2015)

Loneliness and older people

- There are 1.2 million chronically lonely older people in the UK (Age UK 2016, No-one should have no one).
- Half a million older people go at least five or six days a week without seeing or speaking to anyone at all (Age UK 2016, No-one should have no one).
- Over half (51%) of all people aged 75 and over live alone (Office for National Statistics 2010. General Lifestyle Survey 2008).
- Two fifths all older people (about 3.9 million) say the television is their main company (Age, U.K., 2014. Evidence Review: Loneliness in Later Life. London: Age UK).
- There are over 2.2 million people aged 75 and over living alone in Great Britain, an increase of almost a quarter (24%) over the past 20 years (ONS)

Campaign to end Loneliness website

https://www.campaigntoendloneliness.org/home/

A recent Office National Statistics (ONS) report on loneliness in 2018 states that:

- In 2016 to 2017, there were 5% of adults in England who reported feeling lonely "often" or "always".
- Younger adults aged 16 to 24 years reported feeling lonely more often than those in older age groups.
- Women reported feeling lonely more often than men.
- Those single or widowed were at particular risk of experiencing loneliness more often.
- People in poor health or who have conditions they describe as "limiting" were also at particular risk of feeling lonely more often.
- Renters reported feeling lonely more often than homeowners.
- People who feel that they belong less strongly to their neighbourhood reported feeling lonely more often.
- People who have little trust of others in their local area reported feeling lonely more often.

Three profiles of people at particular risk from loneliness were identified:

- Widowed older homeowners living alone with long-term health conditions.
- Unmarried, middle-agers with long-term health conditions.
- Younger renters with little trust and sense of belonging to their area.

Loneliness - what characteristics and circumstances are associated with feeling lonely?

Although locally there is limited data around the scale of the loneliness problem, the intention is to build this intelligence through the voluntary and community sector offer and also to build on the foundation already established through the *Doncaster Talks* insight work which provided a baseline around health and lifestyle behaviours of our residents.

Progress to Date

In January 2015 loneliness was highlighted as an issue for consideration through the Doncaster Health and Adult and Social Care Overview and Scrutiny Committee. The purpose was to gather an understanding about loneliness in the borough, how it is being addressed and examples of good practice. The papers are available for information.

A year later, in February 2016, a Health and Wellbeing Board workshop was facilitated by 'the *Campaign to End Loneliness*' to help the Board to develop its strategy for addressing loneliness and social isolation, specifically in older people. A wealth of ideas was generated around foundation services, direct interventions, gateway services and structural enablers. The follow-up report recommended that Doncaster Health and Wellbeing Board develop a consistent strategy and action plan, recognising all the assets at its disposal and involving the third sector throughout the process. It was also recommended to use data-sharing protocols in order to gain a clearer understanding of where lonely people were likely to be. The event was supported by a workshop report (available on request) and a number of recommendations made for future action.

Following the Campaign to End Loneliness workshop, the Public Health team scoped an 'offer' which could help address and support the loneliness agenda including public awareness campaigns, building up an evidence base and raising the profile of the issue within the organisation. However, colleagues felt that the agenda needed to be addressed in a much broader sense across the organisation and external partners.

In September 2017 colleagues from Public Health, Wellbeing, Libraries and key third sector providers of befriending services – namely South Yorkshire Housing Association(SYHA) Social Prescribing, B:Friend, Age UK Community Circles and Methodist Homes Association (MHA) Live at Home Scheme – came together to begin mapping what provision exists in Doncaster to help address loneliness and social isolation.

Key issues highlighted by service providers in that meeting were: high demand for services; volunteer recruitment; public transport and funding. A concern was raised by attendees of the meeting that there didn't appear to be a specific team within DMBC leading on the loneliness agenda, despite positive pockets of work taking place.

In 2017 an elected members initiative to enlist loneliness champions was implemented through the communities team in a drive to get elected members on board to engage with their local communities on this issue. This appears to have been successful but needs further promotion if we are to achieve the vision (see **Appendix 2**).

In March 2018 a stakeholder meeting chaired by the Director of People was held at the civic office which included the Chair of the Health and Wellbeing Board, members of Communities, public health and the voluntary and community sector to re-ignite this agenda and review priorities going forward.

On 12th April 2018 a Health and Wellbeing Board workshop was held at the Doncaster High Speed Rail College with 36 participants from a wide range of agencies including the public sector and voluntary and community sector providers to focus on the priorities around the loneliness issue. Dr Rupert Suckling provided an update on the loneliness progress to date and the proposed next steps. A presentation from David Ayre demonstrating the outcomes from the Doncaster Talks report was used to facilitate group work around individual personas identified from the research and to promote conversations and opportunities for creative thinking around signposting and social connections. Councillor Rachael Blake provided the closing remarks to the event and gave her full commitment to this agenda as well a plea to all 'that loneliness should be eradicated in Doncaster by 2021' and that actions should be simple and immediate. The outcomes of this workshop are provided in a workshop report (se**e Appendix 1**).

The next steps identified from the workshop and the stakeholder group were to look at developing an alliance to take the issue going forward and an initial meeting took place in May 2018 with key representation from the voluntary, community and public sectors. The following summary outlines the outcomes from the meeting and the agreed objectives going forward:

- Consensus around concept of a Social Isolation Alliance (although no organisation formally agreed/committed at this stage).
- Consensus that we would need to take an all-age approach.
- Alliance would require interested organisations to sign an association agreement. A one-off grant arrangement could then be agreed upon the condition of meeting agreed outcomes and subject to Cabinet approval.
- Identification of a lead organisation or some kind of resource to co-ordinate partnership would be helpful.
- Need for a long-term and iterative approach to collaboration acknowledgement that this will take time. Community commissioning pot may ease pressure on existing activity, to allow gradual movement towards alliance.
- A Loneliness Charter is still seen as important for raising awareness of the agenda.
- Engagement with Health partners (especially GPs) and building capacity in the wider VCF sector (through subcontracting or accreditation/training, such as PQASSO quality mark for example) seen as critical to success of future alliance.

The role of front line services and a community development approach would also support this agenda. Links to the Community Led Support model and the Well Doncaster are good examples where links could be made. Key messages from the What Works Centre for Wellbeing briefing '*Places, Spaces, People and Wellbeing*' in May 2018 support the communities approach:

- Community hubs can promote social cohesion, by bringing together different social or generational groups; increase social capital and build trust; increase wider social networks and interaction between community members; and increase individual's knowledge or skills.
- Neighbourhood design Changes to neighbourhood design can positively affect sense of belonging and pride in a community.
- Green and blue space Green and blue space interventions that provide the opportunity to participate in activities or meetings can improve social interactions; increase social networks social interactions and bonding and bridging social capital; increase physical activity and healthy eating; improve community members' skills and knowledge.
- Reducing barriers Interventions that provide a focal point, or targeted group activity, may help to: promote social cohesion between different groups; and overcome barriers that may prevent some people (in marginalised groups) from taking part.

www.whatworkswellbeing.org

The links with Well Doncaster need to be explored and there is potential to link with a Heritage bid which has been approved and will be developed through Leisure and culture.

It is also envisaged that models of good practice from elsewhere will be explored to see what works best – the models suggested to date include Age friendly Leeds who have developed an Age friendly charter (*see Appendix 3).* Ealing and Somerset also have examples which will be considered. The Alliance will look at these examples and decide on the next steps going forward.

Next actions/steps for the Social Isolation Alliance are:

- Develop a wider understanding and sharing of what each of the organisations do through an interactive 'show and tell' workshop planned for June
- Agree governance for the Alliance planned for September 2018.
- Develop a resourcing model including a community innovation fund.
- Develop work with the Strategy & Performance Unit to look at local need and to look at how progress can be measured locally
- Develop a local loneliness charter using Leeds/Ealing as best practice examples to promote community engagement

OPTIONS CONSIDERED

6. The Board are asked to consider the following options in response to this paper:

a. To note the progress to date and to endorse the work plan going forward around the loneliness agenda in Doncaster
b. To do nothing.

Option **a** is the recommended option.

REASONS FOR RECOMMENDED OPTION

7. Loneliness is a national and a local priority. Anyone can be lonely through the life course and it is everyone's business to eradicate this issue.

IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

| Outcomes | Implications |
|--|---|
| Doncaster Working: Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future; Better access to good fulfilling work Doncaster businesses are supported to flourish Inward Investment | Through employment opportunities residents can feel socially connected and feel a sense of purpose at work. |
| Doncaster Living: Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time; The town centres are the beating heart of Doncaster More people can live in a good quality, affordable home Healthy and Vibrant Communities through Physical Activity and Sport Everyone takes responsibility for keeping Doncaster Clean Building on our cultural, artistic and sporting heritage | Residents are socially connected and active in their communities reducing the impact of loneliness. |
| Doncaster Learning: Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling; | Education is a life skill but also promotes social interaction and connectedness which can then continue throughout life. It provides life skills and |

| Every child has life-changing learning experiences within and beyond school Many more great teachers work in Doncaster Schools that are good or better Learning in Doncaster prepares young people for the world of work | experiences which can be transferred to future generations and promote community cohesion. |
|---|---|
| Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents; Children have the best start in life Vulnerable families and individuals have support from someone they trust Older people can live well and independently in their own homes | The health and wellbeing of families is fundamental to community cohesion. The role of carers is also a key priority. |
| Connected Council: A modern, efficient and flexible workforce Modern, accessible customer interactions Operating within our resources and delivering value for money A co-ordinated, whole person, whole life focus on the needs and aspirations of residents Building community resilience and self-reliance by connecting community assets and strengths Working with our partners and residents to provide effective leadership and governance | Residents can build community resilience by supporting others through social connections. Local befriending services are part of this infrastructure. |

RISKS AND ASSUMPTIONS

9. There are no immediate risks within this report.

LEGAL IMPLICATIONS

10. No legal implications were sought for this update report.

FINANCIAL IMPLICATIONS

11. No financial implications were sought for this update report.

HUMAN RESOURCES IMPLICATIONS

12. No HR implications were sought for this update report.

TECHNOLOGY IMPLICATIONS

13. No technology implications were sought for this update report.

HEALTH IMPLICATIONS

14. Loneliness is becoming a big health issue for all partners likened to the obesity epidemic and it can be hugely detrimental; to the health and wellbeing of our residents. Social connections are the key. The impact of loneliness on our health and social care system cannot be underestimated particularly with an increasing ageing population with complex needs.

EQUALITY IMPLICATIONS

15. Everyone has the right to good health care and services and also the right to live in a safe and healthy community. No one should need to feel isolated and lonely if the environment is right. To eradicate loneliness everyone should make it their business to ensure that friends and family have support and have access to good information. It does not have to be complicated – we simply need to ask people if they are ok and just checking in on our neighbours, friends and families can make all the difference.

CONSULTATION

16. The Board workshops in 2016 and 2018 and the meetings with key stakeholders including the voluntary and community sector in recent months have provided meaningful consultation around the loneliness agenda. The Doncaster Talks insights work has also provided invaluable insight into the local behaviours and personas of local residents and further examples may be sought through the Well Doncaster project and other community based initiatives. This work needs to be further enhanced through further mapping and consultation with the wider community and voluntary sector and the local population through further community engagement work. The Social Isolation Alliance will continue to build on the foundations of this work.

BACKGROUND PAPERS

17. Health and Adult Social Care Overview and Scrutiny panel report (January 2015)
Loneliness into Connections -Doncaster Campaign to End Loneliness workshop Report (February 2016)
Health and Wellbeing Loneliness Workshop report (April 2018)
Doncaster Talks report 2018
Campaign to End Loneliness website
Leeds Age Friendly charter
ONS Loneliness report/Age UK Heat map
Places, Spaces, People and Wellbeing (www.whatworkswellbeing.org)

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HEALTH AND WELLBEING WORKSHOP

Loneliness and Social Isolation

EVALUATION REPORT

1. Introduction/Background

1.1 Workshop Aim

The purpose of the workshop was to give partners an update and strategic overview of progress to date around the loneliness agenda in Doncaster. It was also about starting a collective conversation around the issue across key partners and looking at possible ways to move it forward working in collaboration across all sectors.

1.2 Attendees

35 people attended the workshop. Attendees included representatives from Elected members, General Practice, NHS Doncaster CCG, Doncaster Council, South Yorkshire Fire and Rescue, Rotherham Doncaster and South Humber Trust, Lets Be Friends, CAST, and Age UK.

2. Setting the scene/Content of workshop

• Key aims

The workshop's aim was to re-ignite the commitment to the loneliness agenda across all Doncaster partners by highlighting the scale of the issue both nationally and locally and looking at recent examples of work including the Doncaster Talks research as a vehicle to look at possible strength based approaches.

• What the workshop involved

The workshop was opened by Councillor Blake and Rupert Suckling, Director of Public Health, explaining that at the Health and Wellbeing Board Councillor Blake had set a target to be the least Lonely Town by 2021.

Dr Suckling gave an opening presentation to set the scene around progress to date.

An overview of data and work so far was given to the group.

The group reviewed the Doncaster Talks initiative and reviewed persona's and then mapped out patient journeys.



Councillor Blake closed the event and re-iterated the importance of the issue and how we need to keep it simple and take immediate steps to eradicate loneliness.

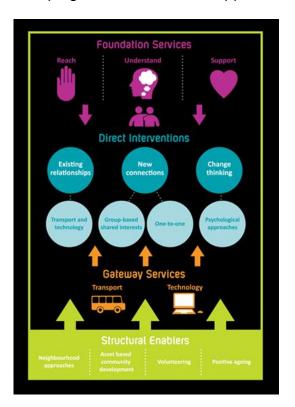
Key Findings

Key Challenges Identified:

- Knowing what's already going on in Doncaster
- Being person centred not service centred
- Starting with where people already go e.g. town centres
- The role of transport

Key Areas of Focus

Campaign to end loneliness approach



Next Steps

- The report will be considered at the next HWB Steering Group and then circulated to all workshop attendees, before being presented to the HWBB
- A Board paper would be taken to the HWBB in June highlighting the outcomes from the workshop and next steps
- An alliance will be formed in May 2018 to look at next steps and explore examples of good practice across the country including Age Friendly Leeds, Somerset and Ealing where Age friendly charters have been developed.

What was missing from workshop?

- A pre list of attenders and their roles organisation- a chance to network
- Moving to different groups and tables
- Mapping services we have to identify gaps
- More info sent out about the group work
- Real stories, actual participation from services users
- Some group activities were a bit unclear, eg the journey map. More varied personas
- "Sound" To hear everyone better
- Possibly some collective conclusion / thought?
- The Doncaster Talks could have been sent out, as there was too much to read. Workshop groups should have been allowed a person to focus on
- An overview on the table for the activities

Venue High Speed Rail College

Appendix

Evaluation report

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Author of Report

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Appendix 2

Elected Members V Loneliness – Communities Wellbeing Initiative

Are you concerned about loneliness in your Communities? Are you aware of some residents in your Communities who are isolated? Do you want to work closely with your Communities Area Team to help reduce this loneliness and isolation?

Would you be able to step us an Elected Member to be able to support your communities around social isolation and loneliness?

As the growing epidemic across Britain in regards to an ageing population and loneliness builds, Doncaster are looking at new ways to support our people with elected members at the heart of what we do in the Community. The top request for Wellbeing support made to the Council is around "social isolation and loneliness".

Elected Member are being sought to take part in the unique project in Doncaster to determine how we can better equip and support you to proactively deal with loneliness in your community. To better identify, understand and support: signposting and access to advise, information and actively supporting individuals to get involved in their community.

Background on Communities Wellbeing

Originally the Council's Wellbeing officers were centrally based within the Adults Social Care team. Their role was to support adults who did not meet the criteria for community care assessment and care service provision. They were disconnected from their communities and services working direct with communities, unable to clearly make effective links to other opportunities available within the community and tended to refer to more formal service provision.

Following extensive consultation, Communities and individuals were also articulating what they wanted and that what they were getting was no longer fit for purpose.....

"I don't feel safe in my own community, I don't know anyone. The neighbouring children all stand on the street, it's frightening"

"I don't want to go to a centre and play bingo – I want to be active with in my own area, help my own community and make new friends. I need someone to help me know where to start"

"Why can't I do what the younger ones do, I've still got independence!"

"I want the area to look nicer, look at the litter and there's no flower to be seen"

So the Council changed its service, placing Wellbeing officers at the front line of engagement and as part of the Communities service.

There are currently 9 Wellbeing Officers who have a detailed knowledge of social care, and who are importantly intrinsically linked within the area teams. They are able to work with individuals, look at their vulnerabilities but also their strengths and assets and then work alongside the communities" staff and the individuals to work out creative solutions. Identifying and connecting isolated and vulnerable people to each other through

THE AGE FRIENDLY CHARTER

Leeds actively celebrates and promotes positive ageing for all its citizens.

WE BELIEVE THAT:

Older people should feel valued in their community and live healthy, fulfilling lives with adequate access to, and choice and control over, any support that they may need. Older people offer a wealth of knowledge, skills and experience to the city, and should never be made to feel invisible or disenfranchised from civic participation.

Older people should be taken seriously in their concerns whether about safety, health, social inclusion, their environment or political processes. Older people should be able to live, work and play where and how they want—free from fear—no matter their ethnicity, religion, sexuality, gender, gender identity or disability.

Older people should have equal access to information that is accurate and easy to understand. Older people should have an active role in shaping the policies which affect them.

AS A LOCAL AUTHORITY

Leeds City Council pledge to keep Leeds safe, accessible, and fun for older people. This includes (but is not limited to):

- Dedicating adequate resources to the wellbeing, housing and social care needs of older adults.
- 2. Making timely repairs to streets and pavements.
- Producing concise and easy-to-read written information, in plain English and other relevant languages.
- Using positive and inclusive images of older people in our materials.

AS A BUS OPERATOR

We pledge that our drivers will wait for older passengers to sit down before setting off, and will offer patience and assistance to anyone who might need it.

We pledge to take the needs of older people into account when planning routes.

AS A BUSINESS OWNER

I pledge to make my business a place where older people feel comfortable and valued, offering a seat to take a rest, a toilet to use, and extra time if necessary.

AS A COMMUNITY ORGANISATION

We pledge to:

- 1. Give older people power and input into the running of the organisation.
- Engage older people in choosing and organising activities that are appropriate and inclusive, which could include physical activity, arts and crafts, trips out, digital learning, and intergenerational opportunities.
- Consider the needs of all ages, not just children, when badging an activity "family friendly."
- 4. Use positive and inclusive images of older people in our materials.

AS A HEALTH PROVIDER

We pledge to take older people's concerns about their physical health, mental health and memory seriously, and not dismiss them simply as "a part of old age."

We pledge to make the process of getting appointments as easy as possible, taking into account the varying digital capabilities of older people.

AS A POLICE AUTHORITY

West Yorkshire Police pledge to make the safety and security of older people a priority. We will do this by:

- 1. Patrolling areas where older people are likely to be victims of crime.
- 2. Supporting and strengthening the work of Neighbourhood Watch Groups.
- 3. Responding promptly and clearly to concerns reported by older people.

ASA HOUSING PROVIDER

We pledge to give older people access to housing designed to meet their needs, which is:

- 1. Safe and secure, both physically and financially.
- 2. Located to appropriate transport facilities and local amenities.
- 3. Adapted to be accessible or built to the Lifetime Standard.
- 4. Consulted on with older people.

ASA CITIZEN

I pledge to consider the needs of older people by:

- 1. Not parking on pavements, in bus stops, or disabled parking bays.
- 2. Doing my part to keep streets clean.
- Showing patience, compassion and respect to those who may have mobility problems or memory loss.
- Being a friendly face and good neighbour to older people in my community.



Leeds joined the Wold Health Organisation's Global Network of Age Friendly Cities in August 2014. Following the framework set out by the WHO and guided by input from older people all over Leeds, Time to Shine and the Ageing Well Board ask key stakeholders to work toward these pledges.

To find out more, please visit www.timetoshineleeds.org or ring 0113 244 1697.