
Report To: Inverclyde Integration Joint Board **Date:** 19 March 2019

Report By: Louise Long
Corporate Director (Chief Officer)
Inverclyde Health & Social Care Partnership **Report No:** IJB/13/2019/AS

Contact Officer: Allen Stevenson
Head of Health and Community Care
Inverclyde Health and Social Care Partnership (HSCP) **Contact No:** 01475 715283

Subject: Social Isolation and Older Adults

1.0 PURPOSE

- 1.1 The purpose of the report is to provide an overview of the work between HSCP and partners to address the impact of social isolation on older adults.
- 1.2 The report has been completed with input from Your Voice, Inverclyde Council for Voluntary Services, Inverclyde Carers Centre and Alzheimer's Scotland.

2.0 SUMMARY

- 2.1 There is increasing recognition of social isolation and loneliness as major social and health issue that can have a significant detrimental impact on a person's physical and mental wellbeing.
- 2.2 In January 2018 the Scottish Government launched a consultation on an ambitious plan to address the issues presented by loneliness and social isolation in Scotland.
- 2.3 The HSCP has just launched its strategic plan for 2019-2024 and is committed to "Improving Lives", and the vision is underpinned by 6 "Big Actions" One action is to build on the existing strengths of people and communities in Inverclyde to create opportunities for people in communities to recognise social isolation and be able to act to reduce its impacts
- 2.4 Alongside partners there are a range of initiatives both longstanding and being developed that offer to support older adults to address issues of loneliness and isolation. These includes advice and support about accessing social activities to provision of Day Service which provides direct personal care and support to people who would otherwise not be able to engage is such activities.
- 2.5 This paper is not able to list all services that are available in Inverclyde but identifies key features of the work in this area.

3.0 RECOMMENDATIONS

- 3.1 The Integration Joint Board is asked to note the positive work undertaken in relation to social isolation by the HSCP and partner Agencies.
- 3.2 The Integration Joint Board is asked to note the commitment to addressing social isolation and loneliness within the HSCP Strategic Plan.

Louise Long
Corporate Director (Chief Officer)
Inverclyde HSCP

4.0 BACKGROUND

- 4.1 In January 2018 the Scottish Government launched a campaign to address issues around social isolation and loneliness in Scotland. A Connected Scotland looks to tackle social isolation and loneliness and build stronger communities, the strategy sets out a vision for Scotland where everyone has the opportunity to develop meaningful relationships, regardless of age, status, circumstance, or identity.

It is acknowledged that social isolation and loneliness can affect anyone at all ages and stages of life. There is increasing recognition of social isolation and loneliness as major public health issues that can have a significant impact on a person's physical and mental health.

- 4.2 A Connected Scotland also sets out clear definitions of the terms social isolation and loneliness:-

- Social isolation refers to the quality and quantity of the social relationships a person has at individual, group, community and societal levels.
- Loneliness is a subjective feeling experienced when there is a difference between an individual's felt and ideal levels of social relationships.

- 4.3 There is no hierarchy in these definitions although each may require a different response to address any detrimental effects. There are strong links between social isolation and loneliness and they can be experienced independently from one another; it is possible for people who are well connected socially to feel lonely and for people with relatively small social networks to rarely experience loneliness.

However, because we are inherently social beings, we can all experience periods of loneliness from time to time. This temporary state is referred to as transient loneliness and often arises when someone who has strong social connections is unable to interact with their networks for a period of time. Typically, this is relieved once social interactions return to normal.

- 4.4 Prolonged periods of loneliness can lead to a permanent state of chronic loneliness which is much more difficult to address. People can lose their social connections for a variety of reasons, including major life transitions such as taking on a Carer role, bereavement, ill health and disability. In order to alleviate feelings of chronic loneliness, cultural change is required to develop opportunities that are accessible and encourage people to build new social connections.

For many people this response will be adequate to address the issues presented by social isolation however there is a further group who require greater assistance with personal and practical care in order to successfully enhance their sense of inclusion.

- 4.5 A Connected Scotland presents the argument that to effectively reduce social isolation and loneliness there is a requirement to foster the right environment and create the conditions for people and communities to design and deliver the solutions that best meet their needs. Initiatives work across a range of areas including improving health, building the capacity of the Third Sector, and improving digital participation which evidence suggests make a real difference here.

- 4.6 The HSCP has just launched consultation around its strategic plan for 2019-2024. The commitment remains to "Improving Lives", and the vision is underpinned by 6 "Big Actions". One such action is to build on the existing strengths of people and communities in Inverclyde to create opportunities for people in communities to recognise social isolation and be able to act to reduce its impacts.

5.0 ADDRESSING SOCIAL ISOLATION AND LONELINESS FOR OLDER ADULTS IN INVERCLYDE

5.1 Council for Voluntary Service Inverclyde

Local community groups and voluntary organisations run an array of activities that combat social isolation; using art & culture, the environment, social activities, physical fitness, peer support, transport, befriending and more. To help people access these (as well as hundreds of other services and activities provided by the public and third sectors) CVS Inverclyde runs a website Inverclyde Life – www.inverclydelife.com.

The site is about to be re-launched with a search filter to make it easier to find something suitable. People who can't use the online site can phone 01475 866150.

Volunteer Inverclyde – www.volunteerinverclyde.com – is the local portal for people looking to get involved in volunteering. People can find and apply for volunteering opportunities directly on the website. Volunteering can reduce social isolation for both the volunteer and the people they help. People who need additional support to volunteer can also contact CVS Inverclyde directly.

CVS Inverclyde also has a team of Community Link Workers (CLWs) based in GP Surgeries. Currently six surgeries have CLWs but this is about to be rolled out to a further six in the coming months. The work of CLWs is not exclusively targeted at social isolation but also looks more widely at all of the social issues that a person may be experiencing. This could include housing, finances, work, mental health and family. Social isolation is however often a significant part of why people are accessing the CLW service. The CLWs work collaboratively with the Community Connectors project.

5.2 Community Connectors Your Voice

Partners across Inverclyde refer older people, who are isolated or experiencing loneliness to a 'Community Connector'. The Community Connector will work with the individual to build their confidence, motivation and connect them to a range of local resources, activities and services. Each person receives one to one support for an average of 8 weeks, although this can vary depending on the individual's situation.

This one to one support includes introductions to community groups/activities and developing friendships and social networks of support, enabling them to become reconnected to their communities. This approach empowers people and communities, supports greater independence and builds resilient communities.

5.3 Carers Inverclyde Carers Centre

For many years Inverclyde Carers Centre has been supported by Inverclyde HSCP, and other funders to provide Emotional Support to Unpaid Carers. This support takes the form of Relaxation Therapies and Counselling, both of which are delivered on an individual basis through 6 hour long sessions.

Relaxation Therapies are delivered by Holistic Therapists using massage, relaxation techniques and coaching. Counselling is delivered by professionally qualified staff from Mind Mosaics. Group stress management, laughter yoga and mindfulness sessions are also provided depending on interest.

Inverclyde Carers Centre also provides a range of Carer Group Activities which often provide emotional support. Weekly groups, which are particularly attractive to older carers, include the Purly Queens Knitting Group, Mental Health Carers Group and the Male Carers Group. Social activities such as quiz nights and parties bring light relief from caring routine and can be enjoyed along with the person being cared for.

Alternatively Carers may wish to come along to information sessions or groups to learn more about their loved ones conditions or they may want to learn something new for them. The centre are delighted to have secured 3 years funding from BIG Lottery which will bring the introduction of Befriending for isolated carers and an expansion of social and informative activities for Carers to join in with.

5.4 Alzheimer Scotland – Inverclyde Dementia Resource

Participation in regularly occurring local social events can reduce incidences of isolation for persons with dementia and carers. It is with this intention that Alzheimer's Scotland offer the following programmes:

- Friday Friendship Café at Westburn Church;
- Football Memories, a weekly reminiscence programme that takes place at Cappielow Park;
- Musical Memories, a dementia-inclusive choir that meets monthly and is done in collaboration with the Clydeside Singers;
- Sensory Garden at Caddlehill Allotments, a purpose-built, dementia-inclusive space that hosts events for carers and persons with dementia.

The focus on community education & awareness includes the following initiatives: a Lunchtime Drop-In for Dementia Carers is held weekly at Inverclyde Carers Centre; a Carers' Support Group is held on the first Monday of each month at the Inverclyde Dementia Resource Centre.

Alzheimer Scotland regularly facilitates Dementia Friends sessions which are conducted, at no cost, for organisations and businesses across Inverclyde. Sessions are run by our Dementia Advisor for Inverclyde, and help participants understand what it's like to live with dementia and the actions they can take to help make Inverclyde a more "dementia friendly" community and help combat feelings of loneliness and isolation.

5.5 CAPA (Care About Physical Activity)

Inverclyde has been involved in the CAPA programme which has been successful in working within sheltered housing units, care at home, housing support and day services for older people to equip staff to promote physical activity and scope resources required to be developed.

There are many benefits from being involved in this innovative programme. The participating services gained a greater understanding and obtained skills to encourage increasing levels of physical activity with those they are working with. It has supported an improvement in overall care, quality of life and wellbeing for those using services and has potentially reduced hospital admissions.

Staff reported improved knowledge and skills in enabling those they care for to move more often; resources and tools, including improvement methodology have helped to embed CAPA techniques into their practice. Services have also been keen to build networks locally across health and social care to support the sustainability of the improved care.

5.6 Older Adults Day Service

The HSCP carried out a review of Day Services in 2015 which looked to modernise the existing services to meet the changing needs of Older Adults in Inverclyde. It is clear both from local consultation and that seen elsewhere, that people want to remain part of their communities and to enjoy the same kinds of activities they have always participated in.

As generations age the desire for building based day services is diminishing. Combined with improved access to Third Sector activities, and a focus on delivery of

statutory services to those with critical and substantial needs, we need to outline a model which can continue to both meet existing service users' needs whilst at the same time developing to meet future challenges.

Rather than focus solely on building based services the review looked to develop a range of services that promoted independence and sustainable and natural links to their community.

5.7 Active Living for All

This is a small group day service utilising local community based services and therefore allowing a greater flexibility and responsiveness to service users and their families. This service is accessed via an assessment and focuses on those with moderate to substantial needs in terms of care and support and there is a focus to integrate those who are able to back into universal led groups

For Older People with critical or substantial need we have a combination of HSCP and local independent providers of Day Service (Alzheimer's Scotland, Muirshiel and Crown Care); they provide more intense support including personal and practical care during the day to frail older people and those with dementia. Each group provides a wide range of activities and support across the week including weekends and evenings.

6.0 IMPLICATIONS

FINANCE

6.1 Financial Implications:

There are no financial implications at this point all expenditure is within existing budget allocation.

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

6.2 There are no legal issues within this report.

HUMAN RESOURCES

6.3 There are no specific human resources implications arising from this report.

EQUALITIES

6.4 Has an Equality Impact Assessment been carried out?

	YES
√	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

6.4.1 How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

6.5 There are no clinical or care governance implications arising from this report.

6.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Addressing social isolation on an individual and community level will have direct positive impact on improving health and wellbeing
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Social isolation can often be a key motivation for people to seek group or communal living. Addressing social isolation on an individual and community level will have direct positive

	impact on supporting people to remain in their home and local community
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Addressing social isolation on an individual and community level will improve individuals experience of social and health care services
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Addressing social isolation on an individual and community level will improve individuals quality of life
Health and social care services contribute to reducing health inequalities.	Addressing social isolation on an individual and community level will contribute to reducing Health Inequalities
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	Addressing social isolation on an individual and community level will support Carers in their caring role
People using health and social care services are safe from harm.	Addressing social isolation on an individual and community level will help safeguard individuals and vulnerable adults
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Addressing social isolation on an individual and community level will contribute improvement of support and care and improve colleagues satisfaction with the outcomes they achieve for service users
Resources are used effectively in the provision of health and social care services.	Addressing social isolation on an individual and community level will contribute to ensuring effective use of resources

7.0 DIRECTIONS

7.1

Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	X

8.0 CONSULTATION

8.1 The report has been completed with input from Your Voice, Council for Voluntary

Services, Inverclyde Carers Centre and Alzheimer's Scotland.

9.0 BACKGROUND PAPERS

9.1 None.