

Helping You Live the Life You Want



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Older People's Strategy 2010-2013

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Contents

Contents	3
Foreword	4
Introduction	5
Our Vision for older people in Barking and Dagenham	7
National Context	7
Local Context, including links to other strategies	8
Seeking the views of older people.....	9
Our Key Priorities	10
Transport	10
Communication	11
Community Cohesion	12
Health and Social Care.....	13
Crime and Personal Safety.....	15
Leisure	16
Housing.....	17
Finance and Benefits.....	19
Education and Skills	20
Planning and Climate Change.....	21
Working or Volunteering	22
Implementation and monitoring	24
APPENDIX 1: Action Plans	25
APPENDIX 2: Principle national policy drivers for health and social care	26
National Carers Strategy (England).....	26
National Dementia Strategy.....	27
Personalisation Agenda.....	30

Foreword



Barking and Dagenham faces many challenges. The rapid growth of the population to date, and the anticipated further growth, requires the Council, together with its partners, to work together to meet the needs of all residents. Our vision for older people living in Barking and Dagenham, is that we will work with partners to promote the health, independence, well-being, and mobility of older people in the borough.

We want to improve the quality of life for Barking and Dagenham's older population. This strategy is not just about meeting the needs of the oldest members of our community, but also about making sure that everybody aged over 50 remain healthy, active and involved in their communities. Engagement with older people is critical because their needs and expectations will change over the years. We want to ensure that older people live the lives they want to lead. We want them to have choice and control when they need support, and for them to benefit from better health, housing and social care services. We want them to feel safe, and for them to be treated with dignity and respect. We want to acknowledge the tremendous contribution made by older people to the economy, community, civic, and family life in the borough.

As the Councillor with portfolio responsibility for Health and Adult Services, I am committed to ensuring that the support and services older people require are provided in Barking and Dagenham.

The action plan which accompanies the strategy has been put together after consultation with older people in the borough. However, resources are limited, so we cannot provide everything older people have asked for. Nevertheless, we will make every effort to ensure that people living in Barking and Dagenham lead as independent and fulfilling a life as possible as they grow older.

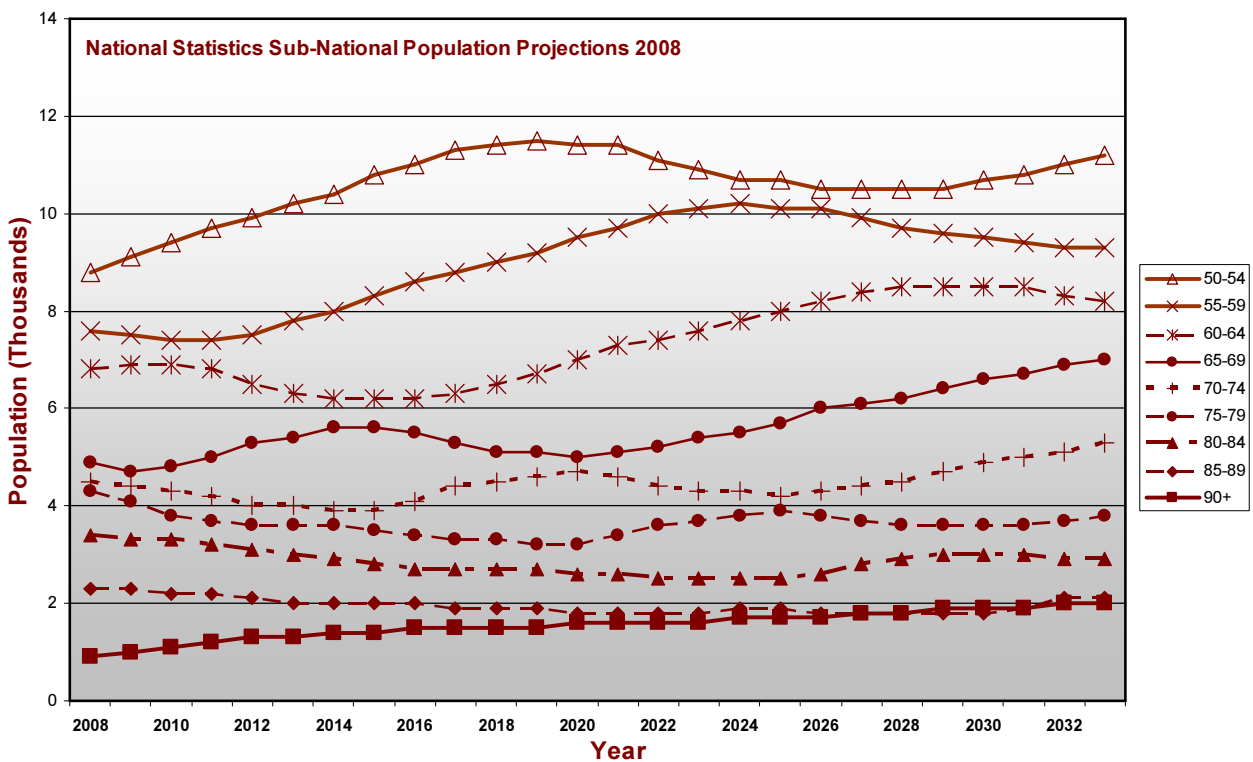
Councillor Linda Reason
Cabinet Member for Health & Adult Services

September 2010

Introduction

The population of Barking & Dagenham is an ageing one. While the Council has an Older People's strategy in place, we need to update it, in part to plan for this increase in the age of our local population. Good planning and preparation can have a huge impact on the quality of later life. This strategy sets out the ways in which we will work to ensure that older people can live independently and actively, with a good quality of life, for as long as possible.

The Office for National Statistics (ONS) produces borough level projections to help plan for the future. The graph below shows the Sub-National Population Projections 2008 (SNPP2008), which projects the population of Barking and Dagenham in five year age bands, using the revised 2008 Mid Year Estimate as the base year (the graph only shows the projected population for the over 50s).



Interestingly, the graph shows fluctuations in the various age bands between 50 and 80, with numbers increasing and decreasing between the years 2008 and 2033. However, the 90+ age band continues to increase throughout the projection period. The 90 and over group peaks in 2032 when it represents 1% of the population. By 2033 there is projected to be some 2,000 over 90s; an increase of 122%. This age group has a higher need requirement.

In September and October 2009, and again in June 2010, we held consultation events with older people, including an Older People's Day. The main focus of these events was to listen to suggestions and concerns that would inform the local Older People's Strategy.

Apart from the views of older people in the borough, this strategy is informed by research by the University of London, in partnership with the Council and NHS Barking and Dagenham. Research was undertaken to identify patterns of service use by older people, linked to demography and deprivation.

While this strategy focuses on people aged 50 and over, we recognise that the needs of people aged 50 may vary greatly from those aged 80+, and this is reflected in the services we provide. Three main sub-divisions have been identified:

- Those aged 50-64. Many of these people are active and independent.
- Those aged 65-79. The activity and independence levels of the people in this group vary.
- Those aged 80+. People in this group may be vulnerable as a result of health problems, such as stroke and dementia, social care needs or a combination of both.

This strategy sets out how we will work with partners, to promote the independence and well-being of older people living and working in the borough. The action plan is at the back of this document, and will be renewed annually. The appendix contains a summary of the national drivers for the work done around health and social care.

Our Vision for older people in Barking and Dagenham

We will work with our partners to help older people live the life they want.

At the Council, we acknowledge that we need to further improve and monitor how we provide services to better meet the needs of older people. One way of achieving this is to engage with older people, so that they have a say in commissioning, designing, delivering, and monitoring both mainstream and targeted services. The 2008/09 Place Survey noted that:

Those who feel informed tend to be more satisfied with the area and feel a sense of belonging to their neighbourhood (Place Survey 2008/09. p.53)

This strategy recognises that older people are a diverse group who have different needs and expectations. We want to promote the health, independence, well-being, and mobility of all older people in the borough.

National Context

This strategy was informed by the Audit Commission's report: Don't Stop Me Now: Preparing for an ageing population (July 2008) . The key messages from the report are:

- The population is ageing and the older population is becoming more diverse;
- Few councils are well prepared for the additional diversity in their populations;
- Central government's Opportunity Age initiative has had limited impact;
- Councils have a local leadership role to create an environment in which people can maintain a good quality of life as they age;
- All Councils need to understand their older communities and shape both universal and targeted services accordingly; and
- Increased awareness, better engagement and innovation could help many older people without significant expenditure.

The government has also produced an update on their 2005 strategy 'Opportunity Age'. The updated strategy 'Building a Society for all Ages', published in 2009, outlines how we, as a society, can make the most of the enormous demographic change taking place, where pensioners now outnumber children for the first time.

Too often, people think of services for older people as being limited to health and social care. However, findings from the Partnerships for Older People Projects (POPP) pilots reveal that those services which promote the health, well-being and independence of older people, help prevent or delay their need for higher intensity or institutional care. Between 2006 and 2009, the Department of Health funded 29 local authorities, and their health and voluntary sector partners, to undertake the POPP pilots. Of the 146 projects run, two-thirds of them were aimed at reducing social isolation and exclusion, or promoting healthy living, with the remainder directed specifically at avoiding hospital admission or facilitating early discharge. Over a quarter of a million people (264,637) used one or more of the services.

The national evaluation of the pilots in January 2010 found that a wide range of projects resulted in improved quality of life for older people, and considerable savings for service providers as well as better local relationships. For example, the reduction in hospital emergency bed days resulted in considerable savings, so that for every extra £1 spent on the POPP services, there was approximately a £1.20 additional benefit in savings on emergency bed days. Overnight hospital stays were reduced by 47% and use of Accident and Emergency departments by 29%. Reductions were also seen in physiotherapy/occupational therapy and clinic or outpatient appointments with a total cost reduction of £2,166 per person.

The results of the POPP pilots supports our approach to service delivery for older people, which addresses not only specific care needs, but also focuses on preventive initiatives, and ways of improving older people's quality of life.

Local Context, including links to other strategies

In our Local Area Agreement (LAA) we have included a number of National Indicators (NIs) which affect older people. The indicators are:

Healthier Borough Board

NI 121 Mortality rate from all circulatory diseases at ages under 75.

The baseline for this indicator is 110.68 per 100,000 population (2004-06), with a target of 97 per 100,000 population in 2010-2011. We are currently on course to hit this target.

Public Service Board

NI 5 Overall/general satisfaction with local area.

The baseline for this indicator is 56.4%, with a target of 60.1% for 2010-11. We are not currently on course to hit this target.

Safer Borough Board

NI 21 Dealing with local concerns about anti-social behaviour and crime issues by the local council and police.

The baseline for this indicator is 29.7%, with a target of 35.7% for 2010-11. We are not currently on course to hit this target.

Stronger Borough Board

NI 1 Percentage of people who believe people from different backgrounds get on well together.

The baseline for this indicator is 49.1%, with a target of 53.5% for 2010-11. We are currently on course to hit this target.

NI 4 Percentage of people who feel they can influence decisions in their locality.

The baseline for this indicator is 37.4%, with a target of 41.4% for 2010-11. We are not currently on course to hit this target.

We have produced a number of strategies which contribute to the independence, well-being, health, and social care, of older people in the borough. These include:

- Valuing People Now – Our vision for services for people with a learning disability (in draft stage).
- Older People's Arts Strategy (in draft stage).
- The Safeguarding Adults Board has put together a business plan, and an action plan for 2008-11.
- Carers Strategy 2008-2011 (in draft stage).
- Domestic Violence Strategy 2008-2011.
- Community Safety Partnership Plan 2008-2011.
- Adult Drug Treatment Plan
- Volunteering Strategy
- Third Sector Strategy
- In-care/vulnerable adults strategy (?)

Seeking the views of older people

Three Knowledge Cafés were held in September and October 2009, with between 30 and 70 people attending each event. Attendees were sat around tables in groups of no more than 9 people, with a facilitator at each table who encouraged discussion about issues that affected older people. Notes were then fed back to the whole group and discussed generally.

A further consultation event was held in June 2010, which involved a range of residents, voluntary and statutory sector partners. This event was attended by Councillor Reason, and representatives from the Department of Work and Pensions, and Government Office London.

The issues raised by participants at all of the consultation events, have helped to inform the writing of this strategy and the contents of the action plan.

Our Key Priorities

Consultation within the Council, with partners, and with older residents in the borough, identified a number of issues that were considered to be important to older people. These included transport; communication; social cohesion; health and social care; crime and personal safety; leisure; and housing. The issues are discussed below, and are addressed according to what is already being done; and what residents in the borough had to say about those issues. An action plan, setting out what the Council and its partners will be doing in the future is included at the back of this strategy. The action plan will be monitored and updated annually.

Transport

What has already been done?

- The Local Implementation Plan is our 5 year plan for transport in Barking & Dagenham. The plan sets out the local transport policies and proposals that will implement, at a borough level, the Mayor of London's Transport Strategy.
- £2.9m funding achieved from Transport for London through the Local Implementation Plan.
- Transport for London is now considering its timetable for extending the Docklands Light Railway from Galleon's Reach in Newham to Dagenham Dock, with new stations in Barking Riverside, sometime between 2012 and 2016.
- The East London Transit now links Ilford and Barking Town Centres to the new development at Barking Riverside and to Dagenham Dock. Although planned initially as a dedicated bus service, using state of the art vehicles and technology, an option for upgrade to a tram service will be retained.
- Crossrail is the new high frequency, convenient and accessible railway for London and the South East. It will give residents another travel option, with a stop at Chadwell Heath, providing a direct route across London to Heathrow Airport.
- We ran a successful pilot using small passenger vehicles to provide a more flexible Passenger Transport Service, utilising staff down-time, thereby reducing the cost.

What Barking & Dagenham residents said about transport

This was one of the biggest issues for older people across the borough. Residents wanted regular, reliable, and accessible transport. Many people felt that the Freedom Passes were necessary to maintain independence, mobility, and social contact. Many older people felt that if they didn't have free travel, then they would be more socially isolated.

There was a call for more disabled parking in Barking town centre, and also for safe, accessible transport at night, so that people could take part in evening activities. Accessibility to transport was a major concern, with many people having a long walk to get to bus stops, for example. For those with restricted mobility, using public transport was not an option.

Many of the older people consulted, needed to attend Queen's Hospital in Romford on a regular basis. They were dissatisfied that there is no direct bus route from Barking to the hospital. The Patient Liaison and Advice (PALS) lead for Barking, Havering and Redbridge University Hospitals NHS Trust on public transport has lobbied Transport for London on a regular basis about improving bus services to the two main hospitals, and there is cross-party support from local politicians for this initiative.

Some of the older people consulted, were apprehensive about sharing public transport, particularly buses, with schoolchildren, who they sometimes felt were noisy or boisterous.

Communication

What has already been done?

- The News is our free fortnightly newspaper, and is distributed to over 70,000 homes across the borough, and 12,000 local businesses, and circulated to more than 160,000 readers.
- In March 2008, the annual Society of Information Technology Management 'Better Connected' survey of public sector websites rated the Barking & Dagenham website as one of the top 20 local authority websites in the UK.
- We launched London's first talking CCTV cameras. Sixteen of the borough's CCTV cameras are fitted with loudspeakers which will deliver messages about things like fines for littering and anti-social behaviour.
- We have been running a Cleaner, Greener, Safer campaign for the last 2 years, encouraging people to do more for the environment, and report problems to us.

What Barking & Dagenham residents said about communication

There was a lot of positive feedback about The News; information about local events and services was much appreciated, as were articles about local people. Many people felt that The News was an opportunity to provide positive role models for older people. There were suggestions about ways in which the newspaper could develop, for example, the inclusion of a list of scams and con artists working in the area, also a list of reputable tradesmen.

A number of the people consulted said that they would like a spokesperson, who could put forward their points of view to the Council and its partners. There was a suggestion that each of the large groups representing older people (such as Forum for the Elderly; Elderberries; etc.), should provide a champion. The 'champions' could meet regularly, and feed back to us their concerns and needs.

There were complaints that many of the leaflets advertising events by the public sector were often poorly produced, with no specified date, time, or venue. There was also a request that all information should be in plain English, with no acronyms. On invitations to events, people asked that maps be provided with entrance points clearly marked, together with distance from bus stops, etc.

Community Cohesion

What has already been done?

- The borough adopted its first community cohesion strategy 'One Community' in 2004. An updated strategy, adopted in July 2007, has been built on the foundations of partnership working and shared values that One Community established. The vision of the Community Cohesion Strategy is to build communities and transform lives. The strategy is committed to ensuring that local residents will:
 - Be more involved in the development of provision and services.
 - Feel that services are accessed fairly.
 - Feel safer living and travelling around the borough.
 - Increasingly get on well with and respect people from other communities.
 - Have empathy for those who are disadvantaged or vulnerable, regardless of background.
- The Council has developed a number of multi-agency approaches to working at a very local level, helping to demonstrate to local people that their needs are being addressed, and to make the community a better place to live.
- A range of highly innovative communication and engagement techniques have been developed by the Council to build trust in local communities.
- A number of small-scale intergenerational activities have been very well received by the people who participated in them.

What Barking & Dagenham residents said about Community Cohesion

The concept of community was frequently raised as a concern. Many residents felt that there was a lack of social activities for older people in the borough, and that many of the social centres they used were being closed down. There were references to a desire for community cohesion, and increased community spirit, with Dagenham Town Show cited as an example of an effort to encourage community cohesion.

There was some interest in intergenerational projects, but a large number of people suggested that there needed to be more opportunities for older people to socialise, before we spent money on organising intergenerational events. In addition, many of the older people, including representatives from the white, Muslim, and Hindu communities, complained about the behaviour of young people. There was a perception that spending money on a few intergenerational projects would not make a difference. Many people felt

that work needed to be done with the parents, and that teenage pregnancy, together with the inability to enforce discipline, was a big problem.

There were a number of Community Centres that were cited as providing opportunities for older people to meet up, but some of the activities and events were expensive, which stopped some people from joining. There was a suggestion that since older people had paid tax all their lives, they were entitled to free social events, and leisure activities.

A number of the older people consulted had complaints which were based on myths about the borough, particularly connected to housing allocation and migrants. Interestingly, one group of people argued for greater integration in terms of age, gender and ethnicity when it came to events organised by the Council. They felt that by holding specific events targeted at groups according to either ethnicity, age, gender, etc., we were actually preventing greater integration.

Older residents expressed disappointment about the lack of 'good' shops in the borough, with a number of people complaining that they had to travel to either Ilford or Romford to shop. There were also complaints about the Heathway, because so many shops had shut, and there were no toilets.

Health and Social Care

What has already been done?

- The Council and the PCT have jointly undertaken a Joint Strategic Needs Assessment (JSNA) which finds out about the health and wider needs of the local community. Indicators show that the number of older people who are successfully supported to live at home in Barking and Dagenham, is greater than the national average.
- Information about health and social care services is widely available in the borough. We fund a care directory and information, support and respite care/short breaks to support carers. Barking, Havering and Redbridge University Hospitals NHS Trust have produced an 'Older Person Care Guide', which contains general advice and useful telephone numbers.
- When a person is assessed as having ongoing care and support needs, a personal budget is provided to access a range of services, including home care; meals at home; day activities for older people with disabilities; equipment and adaptations; community alarms and Telecare.
- We are a national leader in developing 'personalisation'. Under this system people receive advice, information and support in accessing services and in some cases they receive a personal budget to achieve the outcomes they require.
- Following concerns expressed by older people and their families, we have been implementing a new system of electronic monitoring (called EZI-tracker). This identifies individual care workers, and monitors their time of arrival and departure, and breaks down the charges to 15, 30 and 45 minute slots.

- In 2008 the Unique Care project brought social care together with health to form a team approach to promote early intervention for people over 65 years: to prevent inappropriate unplanned admission to hospital, reduce the length of stay and enable people to manage their own care in the community outside a hospital setting.
- We offer an emergency respite/short-break service for people with dementia to give families respite from their caring responsibilities. We have also commissioned Carers of Barking and Dagenham to develop the Memory Lane Resource Centre, which provides 24 places a day for people with dementia as well as support for their family carers.
- An initiative involving pharmacists, district nurses, social workers and inpatient staff, piloted an improved way of pharmacists issuing medication outside hospital, called the MAR (Medication Administration Record) Chart Project (March 2010).
- We have developed a joint quality monitoring framework, with other local authorities in East and North London, aimed at improving the quality of care in local residential and nursing homes
- A 2005 report highlighted the fact that although South Asian older people are the largest BME group in Barking and Dagenham, their take up of community care services was very low. We now fund regular drop-in advice and information sessions for black and minority ethnic (BME) community.
- In October 2009 we produced, together with NHS Barking and Dagenham, a "Living well, ageing well" booklet. We have agreed a "Health and Wellbeing Strategy 2010" with ten key priorities, six of which are directly relevant to older people: reducing smoking; increasing physical activity; promoting healthy eating; depression and emotional wellbeing; alcohol misuse; improving end of life.
- The 'I Care' campaign, launched in October 2009, aims to encourage all residents to look out for vulnerable adults, including older people, in their neighbourhoods.
- There has been significant emphasis on informing people how to complain about poor service delivery. There is a new joint agreement for processing health and social care complaints (April 2010) which should streamline the investigation of complaints.
- In October 2007, the government introduced a new statutory framework for patient and public involvement in health and adult social care. At the heart of the new system are Local Involvement Networks (LINKs). LINKs are made up of individuals and community groups who work together to improve local services. The job of a LINK is to find out what people like and dislike about local health and social care services, and help them work with the people who plan and run them, to make them better. For example, Barking and Dagenham LINK has now completed consultation and engagement with service users and LINK members, on the proposals to change hospital services across North East London.

What Barking and Dagenham residents said about health and social care

The main concern expressed by older people was whether they would receive support to stay in their own homes, and to stay independent for as long as possible, if that is what they choose to do.

Some people were not clear about how to get services and where to go for information about health and social care issues.

A few people, who received home care, were concerned that while they were charged at an hourly rate for a carer, their carers only stayed for 10-15 minutes at a time and were inconsistent about the time they arrived.

Language barriers made accessing information and services difficult.

Older people living in extra care units were generally satisfied with their environment and care services, and said that they felt safe. However, there was concern about the quality of meals, and lack of activities on site, which some people felt led to a poor quality of life.

Crime and Personal Safety

What has already been done?

- The Community Safety Team was set up as a direct result of the 1998 Crime & Disorder Act. The team works with the police and other partnership agencies to reduce crime and disorder through specific working groups and projects. The team also works very closely with other groups and agencies on a variety of anti-crime initiatives. The team have been very successful in achieving funding for more CCTV equipment; anti-drugs funding; a street wardens scheme; community work; and additional security measures for residents.
- The Bogus callers scheme identifies and supports residents who have been repeat victims of bogus callers. The scheme uses specially installed dispersed Social Alarm units, and is a partnership between the communications centre and the Metropolitan Police.
- Street Base is a new initiative providing a range of activities and spaces available to young people aged 11 to 19. The aim is that young people will choose to spend their time at Street Base, and that they will enjoy, achieve, and make positive contributions to their communities.
- A no cold calling zone has been set up in Abbey and Gascoigne wards. The aim of the zone is to encourage residents not to answer the door to any unannounced visitors – unless they show genuine photo-id. The scheme is being run jointly by our trading standards team and Barking and Dagenham Police.
- We fund and contract the Metropolitan Police Service to employ an additional 6 police officers in the Borough, including 1 sergeant. These officers form a new, police managed and operated, Parks Safer Neighbourhood Team. They will work side by side with the local Safer

Neighbourhoods Teams and with park users and Friends to problem solve long term crime and ASB problems in the parks. They patrol the parks, providing reassurance through their presence.

What Barking & Dagenham residents said about crime and personal safety

There was a lot of praise for the Safer Neighbourhoods teams, but also a request for more PCSOs on the street. The new police 'shop' in the Heathway was welcomed. However, personal safety was frequently mentioned, with the majority of older people consulted saying that they were reluctant to go out at night, because of a perceived fear that they were more at risk from crime.

In general, the people consulted felt that crime levels in the borough had risen, particularly with regards to crimes such as theft and mugging. Many people said that they didn't feel safe on Thames View at night because there were overgrown bushes at the bus stop. It was generally felt that overgrown shrubbery and trees provided hiding areas for muggers, and were also a hazard for people with mobility difficulties.

Many people felt that there was a general trend across the borough to make the pavements too wide, and that this encouraged cyclists to use the pavements rather than the roads. There were also complaints that mobility scooter users were inconsiderate when it came to pedestrians.

Many older people complained about young people hanging around street corners, and said that they felt intimidated when walking past them. There were also complaints about the groups of young people hanging around the increasing number of fast food outlets in the borough.

Leisure

What has already been done?

- Building of the new Becontree Leisure Centre is under way.
- Free swimming, learn to swim and aqua aerobic programme for the over 60s.
- From April 2010, the borough's over-60s have also had free use of Barking & Dagenham's four leisure centres. They are able to use the gym and take up a variety of fitness classes from Monday to Friday until 5 p.m., and at any time on weekends.
- The exercise recommendation scheme enables GPs to refer older people to the leisure centres. They can participate in a programme of free exercise that will help them to adopt a healthy and active lifestyle.
- The Elderberries group caters specifically for the over 50s. Available at all Leisure Centres in the borough, this programme provides many different activities such as circuit training, badminton, table tennis, and gym, as well as the opportunity to socialise.

- A healthy walks programme is being provided in the borough. The specially guided walks allow older people to enjoy gentle exercise in the greener areas of the borough, whilst socialising with like-minded people.
- Our leisure centres host a wide range of clubs and societies which provide activities for older people, like the Barking and Dagenham Short Mat Bowls club and Tai Chi at Wood Lane Sports Centre.
- Apart from free membership, free internet access, access to books, magazines, newspapers, CDs and DVDs, the Library service provides many activities across the borough for the over 50s. These include internet instruction; reading groups; coffee mornings; and an after school activity club where grandparents can take their grandchildren for crafts and fun.

What Barking & Dagenham residents said about leisure

Free swimming for the over 60s was much appreciated. However, there were some complaints about the hours when free swimming was available, and from women who asked for women only sessions. Some people also had difficulties with getting to an appropriate leisure centre. There were suggestions that all leisure activities should be free for older people.

A number of people commented favourably on the Elderberries, but for many people it was difficult to access Goresbrook Leisure Centre (where the largest group of Elderberries meet) using public transport. A number of people commented on the importance of activities for older people, because it kept them physically and mentally active.

The libraries were praised as being excellent and much improved. It was felt that it was easier to get the books they wanted, and that the librarians were really helpful. However, there were requests that DVDs from the library should be free (or cost 50p).

A large number of people said that they enjoyed the parks, but would like more seating and park-keepers patrolling. One suggestion was that there should be more partnership work between park-keepers and friends of the park. They felt that the walks in the park were a good idea, but were often unsuitable for older people, particularly those who walked at a slower pace. Even when it was suitable, older people wanted the distance advertised, together with information about the evenness of the surfaces.

There were requests for one-off events, such as singing or craft days (where crafts were sold off and money given to charity). While older people were reluctant to go out at night, they did want more daytime events, where they could try new things and participate in various activities.

Housing

What has already been done?

- Scrutiny was undertaken throughout 2009/10 on Supported Housing for Older People. Subsequently, some good progress has been made: we are commissioning a detailed Housing Needs Survey which will establish the

housing needs of older people in the Borough across the next 10-20 years. We are also undertaking a review of a number of sheltered housing schemes with a view to potential redevelopment and re-provision (including mixed models and tenures) thereby increasing the quantity and quality of housing for people aged 50+.

- In 2008/09, 91% of all the new houses approved in Barking and Dagenham were designed to 'Lifetime homes standard'. This is the highest percentage of any London Council.
- Strategic shift in provision away from accommodation-based supported housing to floating support and 'preventative housing' (using telecare etc.).
- We have begun the implementation of a choice based letting system for sheltered accommodation. This implementation follows a detailed consultation with older people and represents a greatly improved process for the allocation of sheltered housing having received positive feedback from residents and users.
- A Learning Disabilities Housing Strategy has been produced covering accommodation and housing issues for older residents. The strategy has a particular emphasis upon an ageing population and for the first time, attempts to deal with issues such as tenancy succession, home ownership and continued independent living. The strategy is making good progress (for example, easy read information is being developed, home ownership plans are being discussed) and is monitored via a monthly Learning Disabilities Housing Group.
- Good progress has been made with the implementation and roll out of telecare.
- The Housing Strategy 2007-10, included the aim to move away from traditional sheltered housing towards high intensity residential services, called extra care housing.
- We have secured a £3 million NPower grant to assist with energy conservation measures in Council housing stock. Affordable warmth/fuel poverty grants and programmes targeted at older residents. Reducing the carbon emissions from existing homes not only helps address climate change, but also results in lower heating bills. This is a major benefit to older people, who are more likely to be on lower incomes, and suffer fuel poverty. We work in partnership with two organisations: 'London Warm Zone', and 'Warm Front', which assist households in improving the insulation and heating of their homes. Our intention is to continue to prioritise affordable warmth grants for older people.
- We currently manage 22 sheltered housing schemes around the borough, for people in housing need over 55 years of age. For those people with higher need who want to continue to live independently there is extra care housing which has onsite care.
- Development of intensive home-care support service and home-care commissioning, including the development of multi-disciplinary packages of care to support people with intensive needs to live in their own homes.

- Taking action to prevent falls in the home including multi-disciplinary falls risk assessments and outreach services to identify potential fallers.
- The Eyesore Campaign was recently launched; it cracks down on untidy and unsightly gardens.

What Barking & Dagenham residents said about housing

Many attendees felt that as older people, their views were not considered important. They didn't feel that they were consulted on issues such as housing.

The majority of older people consulted would consider moving to smaller accommodation once their children left home. However, they didn't want to move to a high-rise block, or to accommodation where there wasn't room to store their much-loved possessions. In addition, many people found it difficult to leave neighbours and friends.

The preferred option when moving to a smaller property, was to move into sheltered accommodation with a warden. The majority of older people consulted liked the idea of community living, where they had separate accommodation, but shared communal areas where they could socialise. Some of the people consulted already lived in sheltered accommodation, and said that they felt safe there, and enjoyed joining in the group activities whilst still able to retain their independence.

Many people commented on the appearance of housing in the area, in particular the state of front gardens. Many thought that private landlords in particular, didn't take care of their property. It was unclear whether it was the responsibility of street wardens to report overgrown gardens that were a safety hazard to people using the pavements.

Finance and Benefits

What has already been done?

- We have a Benefits Outreach Team, who make weekly visits to the Sheltered Centres, to ensure all residents benefits are kept fully up-to-date. The team also carry out numerous home visit requests, which are generated through Revenue Benefits and through partners like Social Services, Age Concern, Vulnerable Adults team, DABD, PCT, and the Mental Health Team. This aspect of our work brings the team into direct contact with 2,000 pensioners each year.
- In September 2006, the Benefits Outreach Team went into partnership with the Pension Service to provide a Joint Visiting Team. This team consists of staff from both organisations, and works to ensure that every pensioner is visited at either their 60th, or 65th birthday, when their complete benefit package is reviewed. Visits are also carried out when changes in circumstance, such as a bereavement or a deterioration in their health or mobility occurs. The award of extra, or new, benefits, is made as seamless as possible.

- The Joint Visiting Team alone, has generated additional benefit awards to local pensioners that may otherwise have remained unclaimed. This amounts to:
 - Sept. '06 to March '07 = £1m
 - April '07 to March '08 = £3m
 - April '08 to March '09 = £4m
 - April '09 to Sept '09 = £3.1m (projected to reach £5, by March '10).
- A vigorous home visiting service means that we gain invaluable feedback. This enables the various pensioner support teams to assess what assistance someone may need to continue to live independently.
- We are working with Liberty Credit Union to bring a credit union to the borough, which will bring an affordable savings and loan facility to local people who might otherwise be vulnerable to loan sharks.

What Barking & Dagenham residents said about finance and benefits

The majority of residents were happy with the information they received regarding benefit entitlement. However, there were requests for information on financial management.

Education and Skills

What has already been done?

The Adult college programme is not age specific, and is marketed to all ages as an inclusive set of learning opportunities.

Until recently, the college did run a number of ICT courses for the over 60s, in partnership with Westbury Age Concern. However, the centre used to host the course has now been closed by Age Concern, but there is still some provision made at the college, and at Valence and Goresbrook Learning Villages.

Unfortunately, due to age related legislation, we are not allowed to offer a fees subsidy based upon age, other than for those in receipt of benefits. Regarding the acquisition of new skills, and the cost involved: very few courses are free, although the Adult College has amongst the lowest fees structure in North East London.

What Barking & Dagenham residents said about education and skills

A number of people noted that local colleges used to subsidise courses for older people (for example, flower arranging, painting in watercolours), but this was no longer the case.

A number of people were keen on acquiring new skills, such as computing, but often found that there was a cost involved, or that transport was an issue.

Planning and Climate Change

What has already been done?

- Good progress has been made in preparing the Local Development Framework (LDF). This is our planning strategy for the borough up to 2025. Comprehensive consultation has been undertaken in preparing the LDF and it includes a number of policies which will improve conditions for older people. The main part of our LDF was adopted in March 2010.
- The Local Development Framework contains a number of policies which will improve conditions for the elderly, and create an environment that addresses their needs. Therefore the key action is to ensure the policies in the LDF are implemented. These include:
 - All new homes to be built to Lifetime Home standards.
 - 10% of all new homes to be built to wheelchair accessible standards.
 - Protecting existing district centres and neighbourhood parades which older people tend to rely on more than other age groups.
 - Insisting that new homes are built to high standards of sustainable design and construction, thereby reducing heating and lighting costs.
 - Ensuring that new development is built to 'Secure by Design' standards; thereby resulting in a safer environment.
 - Protecting and enhancing those features in the borough that older people cherish, including:
 - The borough's heritage through the designation of Conservation Areas, and statutorily and locally listed buildings.
 - Public open spaces.
 - Sites of importance for Nature Conservation.
 - Ensuring major trip generating development is located in places with good public transport links.
 - Seek to improve public transport in those areas which are currently poorly provided, for example the Thames View Estate, and Marks Gate.
 - Ensuring new development meets the needs of and is inclusive to all members of society.
- In 2008/09, 91% of all the new houses approved in Barking and Dagenham were designed to 'Lifetime homes standard'. This is the highest percentage of any London Council.
- All of the completed housing schemes in 2008/09 were assessed against the Building for Life standard. We are committed to ensuring that in the future all schemes score highly against this assessment and our newly qualified Building for Life Assessors will be instrumental in ensuring this.
- Our Climate Change Strategy was approved in January 2010. This Strategy is very important in delivering the Older People's Strategy. Climate change

is likely to lead to more severe weather events, for example, hotter summers, when older people are more vulnerable. The Climate Change Strategy focuses on initiatives which 'green' the borough. For example, the implementation of the Green Grid, tree planting, and improvements to the borough's parks, and on building design.

- In November 2009, our Resident Design Forum met for the first time. This Forum comprises residents of all ages from the borough and provides feedback on new planning proposals.
- In July 2009, we approved the Local List which comprises 134 buildings, buildings of special architectural or historic interest, which will be preserved where possible through the planning process.
- In September 2009, we approved a planning advice note on crime prevention through environmental design.
- One of the most significant contributors to climate change is the carbon emissions from existing homes. Reducing these not only helps address climate change, but also results in lower heating bills. This is a major benefit to older people, who are more likely to be on lower incomes, and suffer fuel poverty. In this regard, the strategy focuses on the work we do in partnership with two organisations: 'London Warm Zone', and 'Warm Front', which assist households in improving the insulation and heating of their homes.

What Barking & Dagenham residents said about planning

Many attendees felt that as older people, their views were not considered important. They didn't feel that they were consulted on issues such as housing and planning. One of the attendees suggested that trips should be organised to various development sites across the borough, so that people could get a clearer idea of the issues being raised.

One of the common complaints about planning was that the documents were difficult to understand, and that too many acronyms were used.

We held seven focus groups, and over 100 older people attended. Their comments were taken into account when preparing the LDF. It is important to note that older people did not only focus on issues which affected their age group, but were genuinely concerned with issues affecting the future of the borough.

Working or Volunteering

What has already been done?

- Volunteering at Eastbury Manor House is administered through the National Trust membership scheme.
- Valence House provides a wide variety of volunteering opportunities for older people, including becoming a Museum Welcome Host, local history researcher, gardening, children and family learning, oral history archive, and involvement in the Heritage events.

- Our Olympic Ambition Team are well on the way to reaching their target of 500 volunteers for their 'Gateway to the Games – Volunteer Programme'.
- There are opportunities in the borough's parks, for volunteers to help with conservation work, or provide a positive contribution towards ongoing management and development.

What Barking & Dagenham residents said about working and volunteering

A number of the people consulted had been involved in either volunteering or part-time work recently. Many liked the idea of a small job, but felt that they would be unlikely to get the opportunity because of their age. In addition, given the recession, many felt that they shouldn't take jobs from young people.

Implementation and monitoring

An action plan, showing how each of the eleven priorities identified in this strategy will be addressed, is at the end of this document. A Council Head of Service will be identified to lead on the development and implementation of the action plan, which will be updated annually. The recently created Older People and Long Term Conditions Partnership Board will oversee and monitor the actions in the Health and Social Care Section.

The Safe, Healthy, Fair, and Respectful Board will provide the necessary overall governance for the strategy, to ensure that it is implemented effectively. The Board will approve each action plan, and receive a quarterly monitoring report on its delivery, to help ensure that the intended outcomes are achieved.

APPENDIX 1: Action Plans

To be added.

APPENDIX 2: Principle national policy drivers for health and social care

National Carers Strategy (England)

This strategy applies to all carers, regardless of age. The national strategy makes the commitment of £255m for 2008-11, in addition to the £22 million already committed. The strategy states:

- Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role.
- Carers will be able to have a life of their own alongside their caring role.
- Carers will be supported so that they are not forced into financial hardship by their caring role.
- Carers will be supported to stay mentally and physically well and treated with dignity.
- Every carer will be provided with the opportunity to access comprehensive information when they need to. The information will be easily accessible for all groups of carers, and specific to their locality.
- £150 million provided in a flexible way, which meets the personal needs of carers and the people they support.
- Pilots to look at how the NHS can better support carers in their caring role through developing models of best practice and enabling more joined-up service provision between the NHS, local authorities, and the third sector.
- Pilots to improve the support offered by GPs for carers.
- Piloting annual health checks for carers.
- Up to £38 million to enable carers to combine paid employment and caring role or re-enter the job market, through encouraging flexible working opportunities and increased training provision.
- Improving the emotional support offered by central, local government and the third sector to carers.
- Training carers to strengthen them in their caring role and empower them in dealings with care professionals.
- Training professionals across the board, from health to housing, to provide better services and support.
- Ensure that their sector support for carers is available throughout the country to a larger proportion of carers.

- Provide vital data about carers to aid local and national commissioners and policy makers.
- Establishing a standard definition of carers across government.

National Dementia Strategy

The National Dementia Strategy 2009 is the Government's 5-year plan for improving health and social care services in England for everyone with dementia, and their carers. The government estimate that the number of people suffering from dementia will increase from 700,000 in 2008 to 1.4 million in 2038. The estimated cost of this will rise from the current figure of £17 billion to over £50 billion. The government believe that if money is spent now to improve the quality of life for people with dementia and their carers, money will be saved in the future, as well as improving things for everybody concerned.

The strategy has 3 key steps to improve the quality of life for people with dementia and their carers:

- 1) Ensure better knowledge about dementia and remove the stigma. This includes the need for better education and training for professionals.
- 2) Ensure early diagnosis, support and treatment for people with dementia and their family and carers. This improves the chances of improving their quality of life.
- 3) Develop a range of services that better meet the changing needs of people with dementia and their carers in the future.

The national strategy lists 17 key objectives.

Objectives (and their outcomes)

- 1. Raise awareness of dementia and encourage people to seek help. The public and professionals will be more aware of dementia and will understand dementia better.**

This will:

- Help remove the stigma of dementia
- Help people understand the benefits of early diagnosis and care
- Encourage the prevention of dementia
- Reduce other people's fear and misunderstanding of people with dementia

- 2. Good quality, early diagnosis, support and treatment for people with dementia and their carers, explained in a sensitive way. All people with dementia will have access to care that gives them:**

- An early, high quality specialist assessment
- An accurate diagnosis which is explained in a sensitive way to the person with dementia and their carers
- Treatment, care and support as needed after the diagnosis

Local services must be able to see all new cases of people who may have dementia in their area promptly

- 3. Good quality information for people with dementia and their carers. People with dementia and their carers will be given good quality information about dementia and services:**
 - At diagnosis
 - During their care
- 4. Easy access to care, support and advice after diagnosis. People with dementia and their carers will be able to see a dementia adviser who will help them throughout their care to find the right:**
 - Information
 - Care
 - Support
 - Advice
- 5. Develop structured peer support and learning networks. People with dementia and their carers will be able to:**
 - Get support from local people with experience of dementia
 - Take an active role in developing local services
- 6. Improve community personal support services for people living at home. There will be a range of flexible services to support people with dementia living at home and their carers.**

Services will consider the needs and wishes of people with dementia and their carers
- 7. Implement the New Deal for Carers. Carers will:**
 - Have an assessment of their needs
 - Get better support
 - Be able to have good quality short breaks from caring
- 8. Improve the quality of care for people with dementia in general hospitals. This way people with dementia will get better care in hospital:**
 - It will be clear who is responsible for dementia in general hospitals and what their responsibilities are
 - They will work closely with specialist older people's mental health teams
- 9. Improve intermediate care with people with dementia. There will be more care for people with dementia who need help to stay at home**
- 10. Consider how housing support, housing-related services, technology and telecare can help support people with dementia and their carers. Services will:**

- Consider the needs of people with dementia and their carers when planning housing and housing services
 - Try to help people to live in their own homes for longer
- 11. Improve the quality of care for people with dementia in care homes. Services will work to ensure:**
- Better care for people with dementia in care homes
 - Clear responsibility for dementia in care homes
 - A clear description of how people will be cared for
 - Visits from specialist mental health teams
 - Better checking of care homes
- 12. Improve end of life care for people with dementia People with dementia and their carers will be involved in planning end of life care. Services will consider people with dementia when planning local end of life services**
- 13. An informed and effective workforce for people with dementia All health and social care staff who work with people with dementia will:**
- Have the right skills to give the best care
 - Get the right training
 - Get support to keep learning more about dementia
- 14. A joint commissioning strategy for dementia health and social care services will work together to develop systems to:**
- Identify the needs of people with dementia and their carers
 - Best meet these needs
- 15. Improve assessment and regulation of health and care services and of how systems are working. There will be better checks on care homes and other services to make sure people with dementia get the best possible care**
- 16. Provide a clear picture of research about the causes and possible future treatments of dementia. People will be able to get information from research about dementia. We will do lots of things to identify gaps in the research information and do more research to fill the gaps**
- 17. Effective national and regional support for local services to help them develop and carry out the strategy. The Government will give advice and support to local services to help them carry out the strategy.**

There will be more good quality information to help develop better services for people with dementia

Personalisation Agenda

The 'Our Health, Our Care, Our Say' White Paper and the Comprehensive Spending Review 2007 outlined the key elements of a reformed adult social care system for England. The reformed system is an attempt to ensure that the needs of each person are met in a way that suits their personal and individual circumstances. This new approach is called Personalisation.

The cross-Government Concordat 'Putting People First', published in December 2007, gave shape to the overall policy. The Concordat was developed by central government departments, the Local Government Association (LGA), the Association of Directors of Adult Social Services (ADASS), providers and the Commission for Social Care Inspection (CSCI). The Department of Health then issued a circular on 'Transforming Social Care' (LAC2008/01), which provided details of the grant that central government would make to support the cost of implementing the new system, as well as the expectations of local authorities in implementing the change. Councils are required to transform services for adults from 2008-11, to ensure they are more sensitive to the user's needs and wants.

Traditionally, councils have purchased care directly, which has proved cost-effective for councils and offered market security for providers. They have assessed potential clients and placed those users who met eligibility criteria into the existing services that best fitted. Under personalisation, this model is reversed. Potential social care clients are invited to assess their own needs. If they meet eligibility criteria and are awarded a personal budget, they can choose direct payments and purchase services themselves. They also have the option of letting the local authority manage their personal budget on their behalf. Nevertheless, in order for service users to take an active role in decisions about their own care, they will need good information, support and advice, which the Council will be expected to provide.

Personalisation consists of a number of key elements:

- A common assessment of the person's social care needs, based on a self-assessment wherever possible.
- The assessment identifies care and support needs, which relate to an allocation of funding known as the personal budget. The client takes control of the personal budget or may ask that this be administered by a relative, carer, an organisation, or the Council.
- Knowing the budget available, the person takes control of their own care through a support plan to be funded within the available personal budget.
- Personalisation allows more choice and control for people, identifying what is personally important to them, and how they would like their support delivered in a way which best suits their individual needs, priorities, and circumstances.
- The role of social workers will change in emphasis from assessment and managing resources, to advocacy, information, advice, and helping people to arrange their own services.

Personalisation cannot be delivered by social care alone. Achieving change will include involvement from other Council services, such as housing, benefits, leisure, libraries,

customer access (for example, One Stop Shops), transport, as well as with the NHS. It will also involve working with partners in independent, community, and voluntary organisations.

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