



## LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Glen Garrod, Executive Director Adult Care and Community Wellbeing

Report to	<b>Lincolnshire Health and Wellbeing Board</b>
Date:	<b>29 September 2020</b>
Subject:	<b>Centre for Ageing Better – Rural Strategic Partnership</b>

### **Summary:**

The Centre for Ageing Better conducted a national recruitment process to identify an appropriate rural strategic partner. The selection process concluded in March 2020 and Ageing Better confirmed Lincolnshire as its preferred rural strategic partner. This is Ageing Better's first and only rural partnership and offers the opportunity to influence national policy on rural ageing issues which reflects the realities faced by those approaching later life in Lincolnshire.

Lincolnshire's submission articulated the key areas that could be accelerated through a strategic partnership. Struck by the quality and depth of system leadership, collaboration, innovation and good practice across Lincolnshire, alongside clear emphasis and commitment to ensure people are enabled to live and age well across the county, Ageing Better's feedback was that the priorities and opportunities in Lincolnshire were well aligned with their national priority goals and that there was opportunity for impact and progress in Lincolnshire.

This report provides an update on progress, identifies proposed work programmes and asks partners to commit to working together to achieve the aims of the partnership.

### **Actions Required:**

1. To note confirmation of the relationship between the Centre for Ageing Better and Lincolnshire, including the proposed governance arrangements.
2. To note the vision and goals for the Partnership set out in this report.
3. To note and comment on the developing work priorities set out in this report.
4. For each constituent member organisation of the Board to seek a formal commitment from their organisation to work together to achieve the aims of the partnership.

## 1. Background

The Centre for Ageing Better is funded by an endowment from The National Lottery Community Fund and works in localities to test innovative approaches and promote uptake of these by growing the UK Network of Age-friendly Communities. Part of the 'What Works Network' co-ordinated by the Cabinet Office and HM Treasury, launched in 2013, it seeks to improve outcomes and productivity across the public sector through the better use of evidence. The Network also includes NICE (National Institute for Health and Care Excellence).

Ageing Better advises Central Government on national policy using the findings of its work. It does not bring funds to its strategic partners but offers an opportunity to accelerate progress locally, to evaluate impact and to inform national policy, funding a local Partnership Manager, and opening up access to other funding pots.

### Ageing Better's Vision: "a society where everybody enjoys a good later life"

- By 2040, we want more people in later life to be in good health, financially secure, to have social connections and feel their lives are meaningful and purposeful
- To achieve real and significant impact, we will focus on where we can make the biggest difference – those approaching later life, a life stage between mid-life and later life

Through four areas of focus: fulfilling work, safe and accessible homes, healthy ageing, and connected communities, Ageing Better's Priority Goals are to support those approaching later life to:

- Live healthier, more active lives, reducing the risk of poor health, delaying onset, progression and impact of disease and disability
- Be in good quality work for longer, boosting savings and delaying drawing pensions
- Live in safe, accessible and adaptable homes, remaining independent and active for longer
- Live in communities where social relationships flourish, making it easier to build and maintain close connections as well as wider everyday contact.

### What does Lincolnshire gain from involvement?

- Funding for a dedicated Programme Manager – employed by Ageing Better and hosted by LCC, within the Public Health Division
- Opportunity to add value to and accelerate existing plans and ambitions
- Opportunity to learn about, try out and evaluate what works elsewhere with support to shape these for our specific rural / coastal settings
- Opportunity with support to develop and test new things, understand what works and crucially, what doesn't and why
- Opportunity to engage with and influence national policy and funding streams, being seen as a national leader.

### How does this align to Lincolnshire's ambition and plans?

Our vision is to work with and secure the best outcomes and opportunities for people approaching later life, ensuring that Lincolnshire is a place where people are able to age well in an environment that's inclusive, supportive and empowering.

We want to:

- understand in order to positively influence how those currently in their 50s and 60s are planning for their retirement, including keeping physically and mentally active and socially engaged, before they reach retirement age;
- actively encourage people to plan early to make a transformational difference to their lives;
- ensure that all agencies in Lincolnshire play their part in using the experience of these people to transform their services so that collectively we can help make retirement better for people living in Lincolnshire;
- support a society where people contribute to their communities and are willing to look after themselves and others; a county where communities are safe and protected, health and wellbeing is improved, businesses are supported to grow and resources are effectively targeted;
- to encourage communities to be resilient and to improve the health and wellbeing of people in Lincolnshire.

We believe this is best achieved when people and communities have the information they need to come together, solve the problems they face and build the county they want, when people are supported to be independent, make healthier choices and live healthier lives.

This aligns with other local strategic plans including:

- Health and Wellbeing Board (HWB): clear priorities and themes: joined up evidence and intelligence, focus on prevention and early intervention, transformation, integration, personalisation, tackling inequalities and equity of provision, harnessing digital technology, supporting and developing the workforce, and embedding safeguarding throughout;
- Greater Lincolnshire Local Enterprise Partnership (GLLEP): links with many aspects of the Local Industrial Strategy; links with the emerging Health and Care Enterprise Board with opportunities for shaping in both directions;
- LCC Corporate Plan: be the leader of place, shout louder about Lincolnshire outside Lincolnshire.

### Governance Arrangements

Ageing Better's strategic partnerships operate through a five year Memorandum of Understanding (MoU) with a lead organisation and require commitment from a wide range of organisations to test and learn new approaches to ageing. Lincolnshire's MoU (**Appendix 1**) sets out arrangements for:

- the partnership to sit within the governance of the Health and Wellbeing Board (HWB) with strong links with the Greater GLLEP. The HWB is an Executive Committee of LCC with representation from the Clinical Commissioning Group (CCG), District Councils and the Police and Crime Commissioner;
- a small Steering Group, reporting to the HWB, to support the Partnership Manager employed by the Centre, to include a representative of the GLLEP Board to ensure close links with its work;
- all agencies in Lincolnshire to sign a Partner Commitment (**Appendix 5**) to support the relationship and work programme as these develop, to include e.g. housing providers, businesses, voluntary sector organisations, etc.

Covid-19 Impact and Recovery

Covid-19 has had and will continue to have a significant impact on society, creating opportunities to do things differently but also creating concern about the future. Ageing Better commissioned Ipsos MORI to complete a rapid review of short and medium term implications for the 50-70 age group. A national sample of 1000 people was supplemented by deeper insight in Greater Manchester and Lincolnshire, involving telephone interviews with 320 Lincolnshire residents in postcode areas with a High Index of Multiple Deprivation:

- To quickly understand the impact of the Coronavirus outbreak under Ageing Better priorities (Homes, Communities, Work, Health)
- To raise the visibility of this age group
- A focus on health in relation to age drew attention from the many economic and community contributions made by people in and approaching later life.

The national findings indicate that older people have been disproportionately affected by Covid19 but there are also positive findings, some of which are particularly pertinent to Lincolnshire. These include:

Homes	<ul style="list-style-type: none"> <li>• High levels of satisfaction with where they live amongst non-vulnerable groups but less satisfaction with access to internet and shops</li> <li>• Over one third had a specific problem with their home</li> <li>• Rather than moving, one fifth were considering changes to their home</li> <li>• Vulnerable groups and renters were more likely to state a number of inadequacies with their home</li> </ul>
Work	<ul style="list-style-type: none"> <li>• Over half were in employment, with <b>half being key workers</b> (notably higher than the national and Greater Manchester sample)</li> <li>• Of those in work, 19% would consider delaying their retirement, increasing to 32% among those aged 61-70</li> <li>• Majority believed their finances would remain unchanged               <ul style="list-style-type: none"> <li>○ 27% believed they would get worse</li> <li>○ Increasing to 41% among those who reported a mental health deterioration during lockdown</li> </ul> </li> <li>• People have felt well treated by their employer</li> </ul>
Community	<ul style="list-style-type: none"> <li>• Increase in video conversations, phone calls and texts for those aged 50-70</li> <li>• Only a small proportion, 7% reported not having face to face contact (a notably lower number compared to national and Greater Manchester data)</li> <li>• 31% have been volunteering, either formally or informally. 51% say they will continue to do in the future</li> <li>• 39% believe that the media portrayal of older people has been unfair</li> </ul>
Health	<ul style="list-style-type: none"> <li>• One fifth said their physical health has been impacted</li> <li>• One third said their mental health has been impacted</li> <li>• 26% were smoking or drinking more and a quarter were exercising less often</li> <li>• 49% had a medical appointment delayed or cancelled during the pandemic</li> <li>• The greatest impact was for those already in poor health or who felt their physical and mental health deteriorated during lockdown</li> </ul>

## **Opportunities for Working Together**

The table at **Appendix 2** maps the Ageing Better goals, Lincolnshire's potential opportunities and examples of work undertaken in Greater Manchester and Leeds. Along with the findings set out above, these provide an overview of some of the issues and opportunities to be considered by the Partnership. During August and September, task groups have met to develop initial work programmes ahead of September's Steering Group meeting.

### **1. Healthier Ageing**

In Lincolnshire there is a significant gap between life expectancy and disability-free life expectancy, indicating that for the majority of people, their later years are spent in poor health. There are significant inequalities in disability-free life expectancy which demonstrates that disability is not inevitable in old age and that a preventative approach can be taken to improve outcomes in a population. The key causes of morbidity & mortality in older age are cardiovascular disease, dementia, musculoskeletal issues, cancers, social isolation linked to poor mental health & emotional wellbeing. Many of these have underlying linked determinants which can be addressed preventatively. Key underlying causes of poor health in older age are hypertension, overweight, physical inactivity and social isolation. This suggests a split between a primary and secondary / tertiary preventative approach, where we seek to work with two key age groups: those aged 50 to 65 who have yet to experience significant disability; and those in the older age ranges who identify as having significant health issues.

**Primary Preventative Approach: Targeting hypertension, inactivity, obesity, social isolation.**

**Target group: apparently healthy older adults (50 to 65) with a degree of underlying risk**

If the health of this cohort can be protected and outcomes improved, we can expect to see significant population level improvements in health outcomes. Although often framed as 'lifestyle' issues, at a population level these are socio-economically and culturally determined and as such any approach to address these issues needs to be relevant and appropriately framed for the specific population being targeted, and to have barriers to uptake of any offer removed.

Key factors:

- Health Promoting Approach
- Positive framing (opportunity not threat)
- Culturally appropriate
- Low barrier to uptake
- Universal targeted approach (offer open to all, promoted / pushed amongst those with highest capacity to benefit)

**Secondary / Tertiary Prevention Approach: Existing work to support those with identified health concerns.**

**Target group: older adults with identified health concerns.**

### **2. Safe & Accessible Homes**

The Housing Health and Care Delivery Group (HHCDG) chaired by Cllr Wendy Bowkett and including elected members from all seven District Councils, has expressed a commitment to drive forward two work programmes:

- a) Post-covid recovery investment from central government seeks to speed up housing development. It is critical that new builds are designed to be accessible and meet people's needs as they age, enabling them to remain in their own homes and communities.
- b) Work has already been undertaken locally to improve Disabled Facilities Grant (DFG) and Occupational Therapy (OT) services. This programme (**Appendix 3**) will specifically re-think approaches to encouraging people approaching later life to plan ahead, and re-design and integrate relevant support services. This seeks to deliver currently separate services (e.g. DFG, OT, equipment, digital technologies) within a wider, more integrated approach to improving the system of support around housing adaptations, repairs, heating and insulation improvements and equipment.

### 3. Fulfilling Work

Taking an evidence based approach, there is scope to work with the GLLEP to develop a work programme for the over 50's age group to support people to remain in, re-skill or return to work. The Ipsos MORI study of covid impacts identifies the over 50 age group as potentially vulnerable to a post-pandemic economic shock which could impact negatively on their current and future economic wellbeing. At the same time, a significant number of key workers in Lincolnshire fall within that age group, with the risk that their loss could leave significant vacancies in key roles. Encouraging the adoption of age-friendly employment practices across a wide range of sectors, enabling people to change roles as their circumstances and aspirations change, and encouraging people who are planning to retire to engage in community activities beyond employment brings personal, community and economic benefits. This work programme is still in development. An early opportunity is for Lincolnshire to be involved in a new programme being developed in Greater Manchester, testing and evaluating whether initiatives developed there can be tailored and transferred to Lincolnshire as a rural setting.

### 4. Connected Communities

A significant change during covid has been the move by people of all ages to access services and social connection online. That said, this could create a wider gap between those who have the skills and funds to be online and those who do not. This work programme is still in development.

There is also scope to investigate options regarding community transport. In the short term, Ageing Better will connect Lincolnshire colleagues with Leeds to learn about their experiences of developing a Community Transport programme.

### 5. Age Friendly Lincolnshire

Over the period of the partnership, partners will work to ensure that Lincolnshire becomes an age friendly community, as defined by the World Health Organisation's internationally recognised programme.

### Progress, Next Steps and Timeframes

Covid has impacted negatively on progress since the partnership's inception but has also provided a new perspective and sense of impetus for the partnership. Since March 2020, we have:

- Developed, agreed and signed the Memorandum of Understanding
- Completed the Ipsos MORI work cited above
- Identified initial work priorities and opportunities through Work Planning Groups – meeting in August & September
- Developed and agreed a work programme for re-designing Housing Aids, Equipment and Adaptations services (Appendix 3), tasking a working group to progress this.
- Appointed a Partnership Manager (start date to be confirmed)
- Nominated a representative from GLLEP to attend a Learning Network for Employment hosted in Greater Manchester
- Held a first Steering Group Meeting (28 September 2020)

Next Steps: a timeline (**Appendix 4**) is reported to the Steering Group:

- Complete recruitment and induction of the Partnership Manager – October / November 2020
- Hold formal national Partnership Launch – 21 September 2020
- Hold formal local Partnership launch – TBC October 2020
- Contribute and respond to the outcomes of the Health and Wellbeing Board LGA Review to respond to findings – by December 2020
- Develop a work programme to include appropriate reporting, assurance and risk management processes – initial programme for healthier ageing and housing tasks by December 2020
- Encourage organisations to commit as partners to achieve the outcomes of the Partnership. A draft commitment is attached (**Appendix 5**).

## 1. Conclusion

Lincolnshire joins Greater Manchester and Leeds as one of only three strategic locality partnerships. Together they apply, test and generate evidence of ‘what works’ in different places and contexts to understand what is required for more people to enjoy later life. Acting as national exemplars, they also demonstrate joined up, multi-sector responses to the demographic shift taking place nationally and globally. Working together, we intend:

- To add to the evidence base and share learning about what works in order to positively influence how those currently in their 50s and 60s can enjoy a good later life.
- To actively encourage people to plan for their later life, including planning that ensures financial security, good physical and mental health, that could make a transformational difference to their lives
- To share learning and evidence of what works across all agencies in Lincolnshire, and engage with them to ensure they play their part in delivering services that enable people to effectively plan for later life
- For more people in Lincolnshire to enjoy later life in terms of better health, financial security, social connections and wellbeing
- For Lincolnshire to be recognised locally, regionally, nationally and internationally for its work in ageing and to become an age-friendly county
- For the partners and others in Lincolnshire to apply evidence-based practices, and to develop and test innovative approaches to address inequalities in later life.

## Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy

The Council and Clinical Commissioning Group must have regard to the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.

Lincolnshire's Rural Strategic Partnership with the Centre for Ageing Better will draw on and contribute to the evidence held within the JSNA across a range of themes. It will also provide opportunity to compare needs and outcomes with other parts of the county, and take a clear approach to evaluating what works and what doesn't work to understand impacts and outcomes for people approaching later life (in their 50s and 60s now).

While the Health and Wellbeing Board does not have a specific priority work programme regarding older people or those approaching later life, there are direct and indirect links to the Health and Wellbeing Strategy priorities, including:

- Housing Priority
- Physical Activity, Mental Health and Healthy Weight Priority support healthy ageing
- Carers Priority (although carers are not exclusively older) supports healthy ageing and links with fulfilling employment
- Mental Health and Wellbeing Priority – links with social connection, fulfilling employment and volunteering

## 2. Consultation

Partners have been actively involved throughout the development of the Partnership, from August 2019 when the first submission for consideration was made. This includes all Lincolnshire District Councils, GLLEP, University of Lincoln, LACE Housing, the National Centre for Rural Health Excellence. The Housing, Health and Care Delivery Group has been engaged throughout the development of the partnership.

## 3. Appendices

These are listed below and attached at the back of the report	
Appendix 1	Memorandum of Understanding
Appendix 2	Partnership Opportunities
Appendix 3	Housing Proposal: Aids, Equipment & Adaptations
Appendix 4	Timeline
Appendix 5	Draft Partner Commitment

## 4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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