TACKLING LONELINESS AND SOCIAL ISOLATION IN CAMBRIDGESHIRE

To:	**Adults Committee**
Meeting Date:	**1st December 2015**
From:	**Rebecca Hudson, Head of Strategy: Children, Families, Adults Services**
Electoral division(s):	**All**
Forward Plan ref:	**Not Applicable** *Key decision:* **No**

Purpose:	**To update the Committee on the actions taken since the Service User Experience survey was reported in January 2015. Loneliness and social isolation were highlighted as key issues and the Committee requested an update on progress, including how we might communicate with lonely and socially isolated people.**
Recommendation:	**The Committee is asked to:**

a) note the activity that has been undertaken since January 2015;

b) support the decision not to communicate directly with individual service users, and concentrate on more general communications; and

c) note the future activity proposed in this area.

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1.0   BACKGROUND

1.1   In January 2015, the Committee was provided with a summary of the key issues arising from the Department of Health mandated 'Service User Experience Survey' (undertaken in 2014). The User Survey highlighted that nearly a quarter of respondents, and over one third of older people, said that they do not leave their own home and four in ten said that they are unable to get to the places they want. In addition to the quantitative evidence of potential isolation and loneliness, the opportunity for respondents to include narrative to support their responses provided a picture of feelings of isolation and loneliness. This made a compelling argument to consider the issue in greater detail.

1.2   National research shows loneliness and social isolation to be a key issue for all service users, and older people in particular, and it can have a profound impact on health and wellbeing. The Age UK report ''Promising Approaches to reducing loneliness and isolation in later life" states that some of the notable impacts of loneliness and isolation on mortality exceed the impact of well-known risk factors such as obesity, and it has a "similar effect as smoking 15 cigarettes a day". Lonely individuals are at a higher risk of the onset of disability, cognitive decline and clinical dementia.

1.3   Research also supports the view that loneliness is not just an issue affecting older people. A recent Sense campaign highlighted that over half of disabled people feel lonely, rising to 77% for young people. The National Autistic Society found that 65% of adults with autism want more company, 59% find it difficult to make friends, and nearly a quarter have no friends at all.

1.4   Committee members requested an update in the Autumn on what was being done to address the issue of loneliness. The Committee also requested that we communicate with those respondents who had specifically highlighted that they were lonely, to signpost support such as Community Transport to try and help alleviate their feelings of loneliness and isolation.

2.0   MAIN ISSUES

2.1   It is important to emphasise that there is already a significant amount of activity underway with service users to promote social connection. This includes, but is not limited to: Community Navigators, Befriending Schemes, Library based initiatives, Community Transport, Timebanking and Time Credits and Day Services. The County Council is currently involved in providing, commissioning or supporting these services. In addition, there is a lot of activity underway within the community which we do not have direct involvement in, such as activities provided by charitable organisations and faith groups, who all play a significant role in reducing loneliness and increasing community cohesion.

2.2   In response to the Committee request, a small group of officers from across Adult Social Care and Older Peoples Services was set up to consider how we best communicate with service users, carers and those in the community who may be lonely or at risk of becoming socially isolated to direct them to the range of support available.

2.3 The group also considered the Committee request that we write directly to those service users who had said in the original survey that they were lonely. Unfortunately, the conditions of the Department for Health survey mean that we are not able to use personal information provided by respondents for any other purpose than to inform future policy, and direct communication with these individuals would contravene this. However, one in five respondents indicated in the survey that they were lonely or socially isolated, and we need to respond to this significant issue within Cambridgeshire. It is proposed that targeting communications to all service users may begin to address this. The Children, Families and Adults Information Team are working on specific resources, such as leaflets or guidance which can be handed out and discussed by social care staff to service users and their carers during interactions where they feel it would be of benefit.

2.4 In responses to the 2015 Service User Experience Survey, the number of specific comments reporting loneliness has reduced since last year. The numbers who confirmed that they do not leave their own homes have remained at the same level, but the percentage is below regional and national averages. Of most encouragement are the respondents stating that they feel care and support services help them have social contact, which has increased from 54% to 61.5%.

2.5 Despite the early indications that the activity outlined at paragraph 2.1 may be having an impact, loneliness is still a key issue for our services and links in to our work on prevention and personalised support (key principles underpinning both the implementation of Care Act legislation and the Transforming Lives strategy). As a result of these factors further activity is planned in the following areas:

- Building on work to get information in the right place on the Council website, we are also considering the need for producing hard copy materials including leaflets. The intention being that these can be used to signpost to activities or support networks which may help those who may be lonely or isolated to feel more connected to the community. These resources may be used by staff, volunteers as well as the general public and Members. Related work is already underway across the Council to look at how we best communicate with and provide information to Service Users and those who may need our services in the future.

- A Project is underway to look at the service specification of Community Navigators. Community Navigators already undertake a significant role helping to identify and support lonely and isolated older people. The project will consider how we can better integrate Community Navigators within the general Adult Social Care workforce. This will help both groups support each other in identifying individuals who may be lonely and helping to ensure that they are appropriately supported.

- The Council's Community Resilience strategy has been agreed at the General Purposes Committee and the delivery of this strategy will involve specific strands of work that will identify how members of the community can support each other, and help promote social connections and reduce isolation where possible.

- As part of Transforming Lives development, we undertook several 'Mini Patches' events, which highlighted how loneliness and isolation affects specific communities and what communities can do to help address this issue. This work has strengthened the links between Transforming Lives and Community Engagement activity and produced some clear proposals for activity within the patches identified, as well as wider learning for both Transforming Lives and Community Resilience projects. This will mean services across the Council (not just Adult Social Care) can work together to promote localised support for lonely or isolated individuals.

- Services will consider how we treat loneliness and social isolation as part of providing personalised information, advice and where necessary support, and encourage the maintenance of healthy, independent living for as long as possible. This also links strongly to the principles within the CFA Strategy and the Directorate's Business Planning proposals.

3.0 ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

3.1.1 There are no significant implications for this priority.

3.2 Helping people live healthy and independent lives

3.2.1 The proposals in this paper are relevant to this priority area and any intelligence from this work will be used to support this priority, in particular, linking to Transforming Lives transformational activity.

3.3 Supporting and protecting vulnerable people

3.3.1 The proposals in this paper are relevant to this priority area. Any subsequent activity to address the issues highlighted in terms of the experiences of the vulnerable adults and older people we support will contribute to this priority.

4.0 SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

4.1.1 There are no significant implications within this category.

4.2 Statutory, Risk and Legal Implications

4.2.1 There are no significant implications within this category.

4.3 Equality and Diversity Implications

4.3.1 There are no significant implications within this category.

4.4 Engagement and Consultation Implications

4.4.1 This work is in direct response to consultations with our service users and will inform subsequent engagement with those who access our services.

**4.5	Localism and Local Member Involvement**

4.5.1	Specific Community Resilience activity targeted at reducing loneliness and social isolation will involve local members, supported by Community Engagement colleagues.

**4.6	Public Health Implications**

4.6.1	Are work in response to the issues of loneliness have involved working with Public Health colleagues, and efforts to reduce loneliness and social isolation have wider public health benefits.