

Title of Report	Community Voice - Considering the Enablers associated with the Ageing Well Strategy
For Consideration By	Health and Wellbeing Board
Meeting Date	8 March 2023
Classification	Open
Ward(s) Affected	All
Report Author	Sally Beaven

Is this report for:

<input type="checkbox"/>	information
<input checked="" type="checkbox"/>	discussion
<input type="checkbox"/>	decision

Why is the report being brought to the Board?

To support ongoing system work around the Ageing Well Strategy

Has the report been considered at any other committee meeting of the Council or other stakeholders?

No

1. **Background**

Healthwatch Hackney were asked to contribute a Community Voice item at the Hackney Health and Wellbeing Board around the Ageing Well Strategy. We convened a focus group with 8 older people that are residents in Hackney:

Ethnicity	Black African	Black Caribbean	White British
	1	2	4
Age	55 - 65	65 - 75	75 - 85

	2	6	0
Gender	Female	Male	
	4	4	

Two of the focus group attendees were involved in the creation of the Ageing Well Strategy and members of the associated working groups. 3 of the attendees were members of the Older People's Reference Group.

Healthwatch Hackney used the focus group to explore the “enablers” listed in the strategy, particularly considering how the enablers relate to older residents’ experience of involvement and participation. It was felt that if the enablers were not in place or working well, achieving the aims and goals of the Strategy over the coming 3 years would not be possible. Below is an extract from Strategy describing the key enablers:

Older people’s continued involvement	<p>Older people need to be involved proactively as part of this agenda, not reactively.</p> <p>Involvement should not only be in terms of monitoring and oversight on progress of actions identified in this strategy but also in co-design and co-creation of programme activity that is targeted at this audience.</p>
Joined-up working	<p>Council services should not be working in silos and opportunities for better joined up working and referral pathways should always be actively explored.</p>
Communication and information flows	<p>We must acknowledge that not everyone is able to, can or wants to access information online.</p> <p>Although there may be instances where it is not possible, the council and partners must ensure that alternative offline communication and outreach is a core part of any digital inclusion and communication strategy.</p>
Hackney - a place for everyone	<p>Hackney should be a borough that everyone feels catered for and welcomed no matter their circumstances.</p> <p>With ambitions to become a dementia friendly borough as well as autism friendly and learning disability friendly, we want to pool resources and make sure that there is one approach that makes the borough a place for everyone.</p>
Shared approaches	<p>Through approaches such as My Life, My Neighbourhood, My Hackney (previously known as three conversations) and making every contact count (MECC), frontline professionals have a key role to play in supporting residents to feel empowered about their own health and wellbeing.</p>

1.2 Older people's continued involvement

We heard about what has felt positive about the way older people are given the opportunity to get involved with services in recent months. Some of the involvement they told us about was collaborative work with VCS organisations like Age UK. Being listened to, kept informed and being given a choice to get involved were important to residents, as was a feeling of momentum and knowing that the work was achieving something.

"Healthwatch has my details and they endeavour to send me information about activities that I can get involved in. Whilst I don't always want to get too involved it's helpful to have the information to make a decision about what I would like to be involved in."

"Having someone quite energetic to bring us together both online and when talking to us in person really helps to feel involved. When meetings are happening often, and things are coming out of them like booklets being produced, it feel like your involvement is really achieving something. This was the case when the Strategy was originally being produced."

"Working with Age UK has felt positive and like my contribution matters."

"I spent time with Dementia Awareness sessions. It did feel like they listened."

"When the groups I was involved with met with Councillors that felt positive, we felt listened to and fully involved."

Attendees that were involved in the work to create the Ageing Well Strategy acknowledged a loss of momentum, leading to a feeling of disconnect. They were keen to see this work re-invigorated.

"There was a drive around the Strategy which seems to have wound down. There's been a disconnect and a lack of energy for the last 18 months. It feels to some of us that perhaps the Council and services are cash-strapped, so we are no longer a priority."

"There has been an attempt to keep in touch with the group, but it really needs a dedicated person whose role it is to drive it forwards."

Some residents told us that they would like to attend sessions and remain involved, as would other people in their age bracket that they know, but more careful planning of sessions to accommodate their needs was important. Hearing loss in particular has an impact on residents choosing to join in person sessions.

"For many of us, English is our second language, and at our age a lot of us are hard of hearing. This puts a lot of people my age from my ethnic group off attending forums or meetings. They can't properly hear or understand so why bother coming along?"

"Look into using induction loops at any event where people my age are invited."

"Ask in advance if anyone is hard of hearing and try to arrange the seating so they are closer to the speaker."

One resident explained that whether people join an involvement session can depend on who invites them. They told us that people they know are more likely to feel confident to attend if it is suggested to them by someone they know rather than an impersonal invitation or flyer.

“Having an introduction from a trusted source helps people want to get involved. So instead of just a flyer or an email from someone you don’t know, if someone you know (like the Chair of OPRG in my case) tells you about a chance to get involved you are more likely to feel confident doing it.”

Residents told us it was important to allow people to be involved in a way that works for them. There was a hesitancy amongst some older people to get involved, as they felt this could lead to an expectation of regular attendance, an overload of paperwork they would be expected to read, or an expectation that they would be able to commit to working with the system in a way they may not feel comfortable with.

“Not everyone wants to be “a member” of a group. Some people want to know they can come in and share an experience or concern that feels important without being committed to endless meetings about it.”

“Don’t overload people with paperwork or responsibility. Invite them to things and make it clear they can give as much or as little time as they have to spare, their voice is still valuable.”

“Older people have a lot to offer. But ask them what it is they would like to offer and contribute, don’t create the roles then expect them to fit into them.”

1.3 Joined-up working/ Shared approaches

Focus group attendees considered joined up working and shared approaches as one topic. The theme that emerged was around residents’ opportunities to get involved and influence services and decision making. We heard that there is a lack of clarity around the functions of organisations, and the sphere of influence.

“There’s so many different departments and groups. It’s not always clear whether you are engaging with the council, the NHS, Healthwatch or someone else. It would be nice to be much clearer whether it’s the council asking for your input, another group but on behalf of the council, NHS or what it is.”

“How does it all fit together? We don’t quite know where to engage because it’s not really clear to us. Who is responsible for health? When is it local authority, when is it the NHS, when should it be Healthwatch we work with. Where do we go to have the most influence and who can change what? We might now there is a chance to influence something, but not be sure if it’s actually the thing we want to influence.”

“Make sure it’s clear what each forum is for.”

To be meaningfully involved, residents first need to understand the function and remit of each organisation, group or forum. It was also clear that residents felt they did not have the full picture in terms of opportunities to engage. There is a need for organisations to work together to provide a joint offer to residents, who can then make an informed choice about activities they would like to take part in.

“We would like bite-sized sessions describing properly each organisation and function. Or several sessions even for each organisation. What does Healthwatch do and how can they help us? What does Age UK do? What does the Council cover? That would help people understand the different services and where they most want to be involved.”

“There is a lack of connect. For instance, there are people here today that worked in the Ageing Well Strategy that hadn’t heard of OPRG, and vice versa. Some of us here today are really familiar with Healthwatch, some of us know nothing about it. Surely all these things should be linked.”

“Why not join up the mailing lists?”

1.4 Communication and information flows

The way in which we as professionals communicate with older people emerged as a key theme, and residents returned to this topic throughout the focus group.

“Get the basic communication right and much more people will get involved.”

We heard about method of communication as a barrier to involvement. All of the focus group attendees described receiving emails inviting them to take part in involvement work at some point over the past year. They were clear that these emails often put them off engaging with the system.

“Communication about meetings – to invite us to meetings or forums – needs to be interesting, exciting and eye catching. Don’t just send an email, send something catchy.”

“An email can be too dense. You shouldn’t have to read something three times to understand what you are being invited to. Just a flyer with the key points in bold, and some colour, would be better.”

“It’s often almost like a teenager has sent an email out to older people. It makes us feel like they don’t care enough to make sure the language is accessible for us, or framed in the right way.”

When letting older people know there is an opportunity for them to be involved, they asked that alternative methods of communication, such as flyers, texts or even phone calls be considered. There was a need to understand what the activity is without having to read dense text in an email.

“There needs to be a balance between enough information and way too much.”

“Leaflets should be distributed about all these things at Churches, libraries and community centres.”

“Notice boards at supermarkets should be used more to share this information. Everyone uses the supermarket!”

Most of the attendees felt hearing information verbally was one of the best ways the system can share information.

“OPRG sessions are a good source of information.”

“The community centre is a good place to go to find information.”

The attendees had mixed feelings about a preference for receiving information by post or by email. Some residents felt strongly that information received by post was more accessible.

“Use the post to get important messaging out. Not everyone looks online.”

Whatever residents' preferred method of communication is, all agreed that being asked and offered a choice was important.

“Ask people how they would like to be contacted and give them the option of post over email if they prefer.”

“Send a survey to all older residents. Ask them whether they feel listened to and how they would like to be communicated with. Make it very short, with very clear concise questions, and you will get the answers you need.”

When communicating, in meetings or forums, or in written communication, being conscious of use of language and avoiding jargon is key to avoid alienating residents.

“Jargon is still overused at every meeting I go to. Still, even though we've been saying this for years.”

“When they use jargon all the time people keep not understanding. After a while you start to feel stupid because you don't understand and first you stop asking questions, then you stop taking part at all.”

When sharing more general information with older residents it was agreed that printed publications and newsletters worked well.

“The Council means lots of things to all of us. We might get information from the Hackney Gazette, or through our Housing Associations. It's always good to feel we are being communicated with.”

“I think the Council does quite well disseminating information through Hackney Today.”

A regular newsletter or magazine keeping older residents informed would be welcomed. Several attendees referenced a magazine they used to rely on for information that is no longer published.

“A dedicated newspaper or newsletter or something for older residents would be so helpful, there used to be something we found so helpful but that stopped. I suppose the funding ran out.”

Residents also noted the importance of sharing information in a variety of community languages.

“Make sure the information is multi-lingual.”

1.5 Hackney - a place for everyone

The focus group attendees felt that when thinking about “a place for everyone”, continuing to tackle social isolation was the key theme. Ensuring that no resident, regardless of ethnicity, language or health, feels that they are “on their own”.

“We created a circle of friends for retired Jamaican nurses, with regular coffee mornings and speakers. It wasn’t just about connecting at the sessions, it was a chance for people to meet and grow and nurture friendships. That should be the basis of some of the group work, it would make it more valuable than just the outcome of the meeting.”

“Day trips – to the beach for instance – to make groups about the whole person not just about the council or NHS getting what they need from us.”

1.6 Key recommendations:

The following recommendations are taken from discussions that took place at the in-depth focus group conducted with 8 residents. Healthwatch recognises that this group may not be fully representative of the wider community, and as such the recommendations are high-level and may require further engagement before committing resource to taking them forward:

Organisations to work more closely together to create a co-ordinated offer around involvement and participation for older people. This should include:

- Designing a set of bite-sized information sessions about the function of each organisation or forum (sessions to be recorded and shared widely).
- A newsletter or magazine designed to keep older people informed about events or activities including involvement and participation
- Messaging to be co-ordinated so different organisations share information about each other with residents
- Careful planning of events, forums and communications to ensure they are accessible
- Organisations should refer to and utilise the City and Hackney Co-production Charter (available [HERE](#)) when organising involvement activities

Ensure older residents are offered a choice around preferred methods of communication (post/email/text)

Ensure communications are clear, jargon free and multi-lingual

Offer older residents the opportunity to get involved without dictating what that looks like.

2.0 Policy Context:

Please detail which, if any, of the Health & Wellbeing Strategy priorities this report relates to?

<input type="checkbox"/>	Improving mental health
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<input type="checkbox"/>	Increasing social connection
<input type="checkbox"/>	Supporting greater financial security
<input checked="" type="checkbox"/>	All of the above

Please detail which, if any, of the Health & Wellbeing Strategy Ways of Working this report relates to?

<input checked="" type="checkbox"/>	Strengthening our communities
<input checked="" type="checkbox"/>	Creating, supporting and working with volunteer and peer roles
<input checked="" type="checkbox"/>	Collaborations and partnerships: including at a neighbourhood level
<input type="checkbox"/>	Making the best of community resources
<input type="checkbox"/>	All of the above

1.1. Equality Impact Assessment

1.2. Consultation

Has public, service user, patient feedback/consultation informed the recommendations of this report?

<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	No

Have the relevant members/ organisations and officers been consulted on the recommendations in this report

<input type="checkbox"/>	Yes
<input checked="" type="checkbox"/>	No

1.3. Risk Assessment

N/A

1.4. Sustainability

N/A

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Appendices	