

LBHF 3rd Sector Investment Fund putting residents first Service Specification Health and Wellbeing: Services for Older People

1. Introduction: Setting the Framework for a Healthy Borough

The Community Strategy sets out the Council's priorities in terms of setting the framework for a healthy borough. Residents want to live longer, healthier lives, and to enjoy a good quality of life throughout adulthood. We intend to promote healthy lifestyles across all sections of the community, and to:

- enable and support good health, independence and well-being;
- give people more control over the care and support that they receive;
- offer timely and convenient access to quality, cost effective support;
- proactively tackle health inequalities.

2. Context: The Health and Wellbeing of Hammersmith & Fulham's Older Residents

Being listened to and respected as an individual contributes to our sense of value and self-worth. Sadly, in our society the sense of 'having a voice' declines with age. In Hammersmith & Fulham we want to ensure that older people continue to be heard and that their personal wishes and preferences are central to the lifestyles they lead. Wellbeing is synonymous with person-centred support.

An important aspect of a 'good life' in old age is being part of a community where people care about and look out for each other, with an emphasis on mutual help and reciprocal relationships. We want our preventative services for older people to help create and harness such relationships.

The essence of ageing well is the ability to sustain inter-dependent lives and relationships that meet needs for intimacy, comfort, support, companionship and fun. Threats to life quality include not only bereavement and ill health, but 'daily hassles' and their cumulative impact.

Where older people live is of enormous importance. As people get frailer, their lives are increasingly affected by, and bounded within, their immediate physical and social environments. We want to commission a cluster of complementary community services that help build bridges between different environments.

Outreach and locality-based service models offer the potential to connect older people within their local area, to support ageing well and provide a significant bridge between communities and statutory services.

The council utilises a number of data sources to identify the needs of older residents and their carers across the borough. These include (but are not limited to) prevalence rates, health inequalities, census and deprivation statistics, Housing Needs Survey, Place Survey, service reviews and the Joint Strategic Needs Assessment (JSNA).

Research indicates that the borough has a disproportionate number of people living alone and over 85. This group of older people are considered to be at high risk of loss of independence, decline in health and wellbeing, and often not in contact with social

networks that could offer support. The prevalence of limiting long term conditions (often used as a proxy for physical disabilities, is highest amongst BME communities.

Census data informs us that Hammersmith & Fulham has the third lowest percentage of its population that provides any level of informal care. This means that a lot of the informal support mechanisms that may exist in other London boroughs and other parts of the country are missing in the borough. This correlates closely with the percentage of households that consist of just one person.

3. Preventative Services

The term "preventative services" covers a broad spectrum of services, as the aim is to prevent the health and social care needs of borough residents escalating or deteriorating. Prevention includes a broad spectrum of services, including those services that prevent the initial need for adult social care services, to services that prevent hospital admission, an increase in packages of care, or delay the need for residential, extra care housing or nursing home services.

Locally, Community Services Department has further clarified the definition of Prevention and Early Intervention into three categories:

| Primary Prevention/ Promoting Wellbeing Aimed at people who have low or no particular social care needs or symptoms of illness. The focus is on maintaining independence, good health and promoting wellbeing. | Interventions might include: Combating ageism and promoting independence Social networking opportunities Providing universal access to good quality information Supporting safer neighbourhoods Promoting health and active lifestyles Delivering practical advice and support | Provided through 3 rd sector organisations |
|---|---|--|
| Secondary Prevention/ Early Intervention Aim to identify people at risk and to halt or slow down any deterioration, and actively seek to improve their situation | Interventions might include: Screening and case finding to identify individuals at risk of specific health conditions or events (such as strokes, or falls) or those with low level social care needs | Competitively tendered or inhouse adult social care/health service provision. |
| Tertiary Prevention Aim to minimise disability or deterioration from established health conditions or complex social needs. The focus is on maximising people's functioning and independence | Interventions might include: Rehabilitation/enablement services Joint management of people with complex needs | Competitively tendered or in- house adult social care/health service provision |

4. What are we seeking to prevent?

For the purpose of this service specification: Health & Wellbeing: Services for Older People, the Council is seeking funding applications that will address primary prevention/promoting wellbeing objectives. A broader Health & Wellbeing Strategy will identify how statutory health and adult social care services can be reshaped to meet Secondary and Tertiary Prevention outcomes. This will include reviewing statutory provision in light of the introduction of Self Directed Support.

We anticipate that services for older people, funded through the 3rd Sector Investment Fund will target services to older people (65+) or their carers who:

- Live alone
- Have particular social, physical or emotional needs
- Live in isolated conditions or in deprived neighbourhoods
- Have no or few social networks to provide them with support
- May not eligible for adult social care services (though not exclusively)

5. What we will commission: Wellbeing Services

For the purpose of this service specification: Health & Wellbeing: Services for Older People, the council is seeking funding applications that will address wellbeing objectives. Wellbeing services can be defined as those services that, maintain independence and improve people's general emotional and physical wellbeing. These services incorporate a broad spectrum of interventions, ensuring that discrimination is tackled and that the barriers to older people having equal access to goods and services are addressed. They range across:

- Neighbourhoods and communities that have a clear identity and vibrancy, which are safe to live in and where there is good 'cohesion' across the generations. Examples include fire safety awareness, support to address anti-social behaviour, victim support and crime prevention etc.
- Information about ways for people to maintain their independence or access support in order to do so. In addition to the simple provision of information, older people can benefit hugely from having help to 'navigate' around 'the system'. Joining up access routes and information systems is key to achieving a situation where "no door is the wrong door" for older people. Evidence suggests, that whilst there is clearly a need for good quality and well publicised websites, telephone contact centres, leaflets etc, there is a huge amount to be gained from actively seeking out people who could benefit from information and advice and delivering this face to face.
- Focus on promoting healthy lifestyles (including mental well-being, physical and emotional health). Examples include exercise classes, diet advice and awareness of risky lifestyles etc.
- Provision of practical support which provide a range of low cost practical, and sometimes emotional help. Examples include help with things like shopping, gardening, minor repairs and adaptations in the home etc.

6. Additional Defined Services

In addition to the wellbeing services above, the council is also seeking to commission two specific types of service to complement the network of *home support services*

available to older people in the borough. Home support services are being remodelled so that older people in need can access 'floating' housing-related support as well as homecare support (further details are available to download as part of the application pack). The types of service are:

- a) Community Connecting Support: Having a natural support network can have a positive impact on people's coping abilities and emotional wellbeing, and may also prevent people needing statutory services.
 - The Council is seeking to commission community connecting support for older people, including those living in sheltered and extra care housing, who:
 - o do not have natural support networks, and/or
 - want support to organise activities themselves that will bring older people together locally to generate friendship and combat isolation
 - 'Community connecting support' is defined here as support to connect older people with others in their local community, so that the relationships formed can be easily built on and sustained.
 - A key feature of the remodelled home support services is the locality focus. We
 want people to receive support from staff (or volunteers) who operate within a
 defined geographical area that is as small as possible so that:
 - o Workers will know the local area and the resources in the local community
 - o Workers will focus on building connections between local people
 - Workers spend as much time as possible in face to face contact with older people rather than travelling
 - We are suggesting a minimum of three areas north, central and south of the borough – but providers can be approved to operate to smaller local neighbourhood areas (this is an aspect for providers to negotiate). The Council will wish to ensure that support is available to people across the borough. We are defining 'north, central and south' as comprising the following wards:
 - North: College Park and New Oak, Wormholt and White City, Shepherd's Bush Green, Askew, Addison
 - <u>Central:</u> Ravenscourt Park, Hammersmith Broadway, Avonmore and Brook Green, Fulham Reach, North End
 - South: Fulham Broadway, Munster, Parson's Green and Walham, Town, Sands End, Palace Riverside
- b) Watching Brief: This is a service for older people in the borough who would be eligible for, but do not wish to receive assistance from statutory home support services, but who are nevertheless extremely vulnerable. We are keen to ensure that their health and wellbeing is safeguarded by having regular daily contact with other people, coordinated through a third sector non-statutory service. To this end we wish to commission a service that fulfils a low key 'watching brief' and helps to keep people safe.
 - The service will receive referrals and will not be expected to case-find people.
 Older people may live in any form of housing, including sheltered accommodation.
 - It is anticipated that 'regular contact' will be achieved through a variety of
 means, depending on the wishes and needs of the person, for example through
 daily phone calls, daily visits, making full use of communication technology
 available, etc. It is also expected that the provider will utilise the resources of
 the local community in providing some of the support, possibly developing a
 circle of support around some individuals. Supporters will need to:

- Encourage access to other services
- Undertake some practical tasks for the person
- Make judgements about when to refer on the service will need to consider the provisions of the Mental Capacity Act and Hammersmith & Fulham's safeguarding adults procedures in delivery of support.

7. Primary outcomes sought

Outcomes refer to the impacts or end results of services on a person's life. Services should be person-centred and aim to achieve the goals and aspirations identified by service users under the outcome headings below.

The Council recognises that not all outcomes can be easily captured and evidenced, and for contract monitoring purposes, a combination of outcomes for residents (qualitative information) and service outputs (quantitative information) can be negotiated. The main outcomes that the Council is seeking the 3rd sector to deliver under the Health & Wellbeing: Services for Older People service specification include:

| Theme | Outcome | Achieved through, for example: | | |
|-----------------------------------|---|---|--|--|
| 5 1 | Remaining alert and active | Participating in training and education Participating in leisure activities Participating in informal learning Participating in volunteering | | |
| Enjoying and Achieving | Prevention of social isolation | Establishing/maintaining contact with services or groups Establishing/maintaining social contact with groups, friends or family (friendship networks or circles of support) Accessing places of faith and worship Accessing various transport and other forms of getting out and about | | |
| | Making a positive contribution | Participating in volunteering or work-like activities Supporting peers to participate in community activities Involvement in service development and decision making Being able to continue in caring role | | |
| | Increased choice and control | Being listened to, respected and heard Getting support in the way you want it Being offered a choice of services/activities Accessing information and advice to make informed choices Managing risk in personal life | | |
| Maintain/ improve physical health | | Participating in physical activity Accessing appropriate support and treatment Staying mobile and active Achieving healthy eating Getting information about how to stay healthy | | |
| Being Healthy | Maintain/ improve emotional health | Increased motivation and confidence Being respected and responded to as an individual with a unique history, wishes and preferences Reducing anxiety by providing assistance with aspects of everyday life that can't be easily managed Accessing appropriate support and treatment Getting information | | |

8. Additional outcomes

Applicant organisations are asked to also consider the additional outcomes their service users might enjoy from the themes below. These additional outcomes will be primarily commissioned through other 3rd Sector Fund service specifications - but may be part of the "added value" benefits your organisation will deliver through effective referrals, collaboration or partnerships with other service providers.

| Theme | Outcome | Achieved through, for example | |
|------------------------------------|---|---|--|
| Staying Safe | Feeling safe at home Feeling safer in the community | Maintaining independence through technology or equipment Accessing information and advice on falls/accidents Personal safety measures in place Accessing appropriate practical support to maintain accommodation in a good state of repair, order and cleanliness Support around domestic abuse | |
| Rights and freedoms | Freedom from discrimination and harassment | Feeling safe from abuse and harassment Equality of access to services (reduced discrimination) Advice and information on rights and entitlements | |
| Achieving Economic Wellbeing | Better manage finances – managed or reduced debt. | Maintaining income Managing debt Increased financial capability | |
| Achi Ecor Well | maximised income and free from low income status | Improved quality of life through accessing non-means tested benefits | |

9. Organisational outcomes

The council expects all funded groups to ensure that broader organisational outcomes are also achieved in order for the sector to increase its sustainability, independency and contribute to a flourishing 3rd sector community. The outcomes we expect organisations to deliver are:

| Sustainability | Organisations will have demonstrably improved long-term sustainability | | |
|----------------|---|--|--|
| | having adopted realistic and comprehensive business plans and fundraising | | |
| | strategies and maximised income from existing resources. | | |
| Leverage | Demonstrated increased ability to use 3 rd Sector Investment Fund investment | | |
| | to lever in further funding to the borough to further support local residents. | | |
| Strategic | Evidenced ability to influence, engage and work in partnership with other 3 rd | | |
| working | Sector organisations, the council and its partners, on a wide range of activities | | |
| | which support the delivery of H&F priorities | | |
| Good practice | Organisations will implement, highlight and evidence good practice models on | | |
| models | a range of issues including quality assurance and service models which could | | |
| | be promoted and shared across the sector. | | |
| Environmental | Organisations will evidence adoption of environmental policies which ensure | | |
| practice | that their organisations and the community facilities/premises they use have | | |
| | improved financial viability, use less energy, pollute less, create less waste | | |
| | and have a reduced contribution to climate change. | | |

10. Service model and principles

The Council does not wish to prescribe the type of services that could be delivered under this service specification, but instead seek services that will deliver the outcomes as set out above. However, a number of guiding principles must be followed:

| Principle | Meaning | Example |
|-----------------------------|--|--|
| Community Cohesion | Bringing communities together and enhancing integration, | sharing expectations, understanding and knowledge |
| Empowerment and involvement | Services are informed and shaped by users and residents. | older people in leadership roles, supported to participate in service development and decision-making processes. |
| Benefits to carers | Carers provided with the support needed to enable them to continue in their caring role. | Practical and emotional support services, including identifying carers who have not previously sought help or support. |
| Whole life approach | Service approaches that support users through different stages of their life, and support them through life events | Consideration given to the life events that impact older people – retirement, bereavement, changes in physical health, loss of confidence etc., but also to the positive impact of older age: opportunities for new activities and challenges and sharing of experiences and skills with others. |
| Safeguarding | CRB checks, Quality Assurance processes, clear supervision and training of staff and volunteers, accreditation, qualifications, monitoring etc | All services will need to have appropriate CRB checks for staff and volunteers, training and demonstrate a good understanding and implementation of safeguarding procedures. |

The idea of outcomes and preventative services are still relatively new concepts for many organisations, but some useful guides and case studies are available across the UK.

One example that outlines some preventative services ideas has been produced by Age Concern UK: http://www.ageconcern.org.uk/AgeConcern/bigq-preventioninpractice-report.asp