

Local Government's Role in Responding to an Ageing Population

The Local Government Association Call for Evidence

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Introduction

Age UK warmly welcomes the establishment of the LGA Task & Finish group, and this Call for Evidence, to consider how local authorities and communities can positively adapt to meet the opportunities and challenge of our ageing population.

Local Government has a crucial and fundamental role in shaping places in which people can age well, thriving and maintaining their health and wellbeing for as long as possible. These are challenging times for local authorities. Addressing and unlocking the potential of our ageing population can be part of the solution.

Age UK's guiding vision is a world where everyone is able to love later life – a society where living longer is a cause for celebration, as is our increasingly diverse older population. Our ageing population can present local communities with many opportunities, knowledge, skills and solutions, so long as their requirements are met and their contribution is valued.

To make the most of their older populations, local authorities – officers and members - need to use their good offices to ensure that older people's interests, aspirations and needs are met by the local community. This means explicitly considering older people in all strategic planning, ensuring that community structures recognise and draw upon their abilities and aspirations. The Equality Act (2010) provides a legal imperative but also a statutory incentive to remove barriers, prevent discrimination and advance equality of opportunity to unlock the potential of older people and foster good relations across the generations, promoting cohesive communities which support everyone to age well.

Age UK believes there are five essential areas to address in order to realise our vision for a society in which older people can flourish and love later life. These are:

- Enough money: through fairer pensions and take up of entitlement to support
- Wellbeing: everyone is able to feel well and enjoy later life
- Health and Care: access to high quality, empowering, health and care services as we age
- Home: able to feel comfortable, safe and secure at home, living independently for longer
- Community and Society: where everyone in later life can participate and feel part of wider society, with opportunities to learn, join in, volunteer or work

Living active and engaged lives is crucial in helping maintain health and wellbeing, and to manage health conditions as we age and to extend healthy years in later life. Better health and wellbeing throughout the life-course will reduce and delay the intensity of demand for health and social care services in later life. This benefits individuals, families, carers and communities and reduces the cost to the state. Evidence suggests it is never too late to intervene



The role of Local Authorities

Age UK considers there to be two key elements of local authority's role in relation to older people:

- Community leadership: promoting positive attitudes, working strategically and collaboratively with cross sector partners to enable local people to help shape better places for us all to age well and live independently, as active and connected citizens, for longer into later life;
- Service provision: directly and also increasingly provided through strategic commissioning, with a role to ensure equality of access to all age friendly services.

Strategy

From economic development to Joint Strategic Needs Assessments, local authorities should take a strategic approach to building a society for all ages and enable everybody to participate and have a say in political decisions that affect them. To harness the potential of an ageing population, they must ensure that older people's fundamental rights to autonomy, dignity, respect, fairness and equality are achieved. Chronological age should not act as an arbitrary barrier to older people's contribution as citizens and consumers, working or retired.

In all their forward planning and the procedures that guide their activities – from the recruitment of their staff to their procurement guidance - Councils should build in risk assessments on the impact that the initiative will have on the well-being of older people and their social inclusion. Through consultation with older people – for example through local Age UKs, older people's forums – Councils should develop and maintain their knowledge of what older people want in their communities. They should ensure that the views, aspirations and needs of diverse older people – by age, ethnicity, disability and other protected characteristics – is considered.

The way the Council provides information and advice is a particularly important cross cutting issue. Increasingly local authorities are using the web to provide information and first point of contact advice and are required to provide this to all local residents, including older people, under the Care Act. Older people should be supported and encouraged to get on line, but those who cannot, or do not want to do so, should be able to access services and support in ways that suit them. While financial decisions may tempt local authorities to go 'digital by default', it is essential that an offline 'assisted digital' strategy remains in place, to ensure older people do not face discrimination, exclusion and adverse impact on health and wellbeing due to digital exclusion.

In their commissioning role, local authorities should be aware of the strengths of the voluntary and community sector and ensure commissioning processes are accessible and fit for purpose in relation to the budget size. By building social value into their



commissioning processes they can extend their ability to impact upon social issues in the locality.

The Council's scrutiny mechanisms and Health and Well Being Boards have a core role to play in safeguarding a mainstreamed culture of 'age proofing' across all the Council's initiatives and decision making. It is especially important that the Council's strategy on housing and housing services should be included as well as those on health and care services

Having Enough Money

Age UK wants a world where everyone in later life has enough money. There are 1.6 million older people living in poverty in the UK, 900,000 of them in severe poverty. Poverty in later life can mean a miserable existence which can lead to poor health and isolation.

Whilst local authorities do not set pension and benefit levels they can help alleviate poverty by making sure that older people can get accurate advice about the benefits they are eligible for, and run or fund campaigns to encourage older people to take up their rights to benefits. Many older people, often the most at risk, do not claim what they are entitled to, which can lead to fuel poverty, malnutrition and poor health and wellbeing outcomes. Councils can help ensure help reaches those who need it.

Councils can also help provide and commission local services that help older people manage their money and provide, information, advice, advocacy and support where this is wanted and needed.

Feeling well, enjoying life

Age UK wants a world where everyone in later life is able to enjoy life and feel well. Healthy life expectancy is not keeping pace with life expectancy, meaning we are living longer at the end of our lives with poor health and long-term conditions. Loneliness also has a profound impact on quality of life, with serious implications for physical and mental health. A million older people say they are often or always lonely and much more must be done at a neighbourhood and community level to reverse this trend.

The possibility of losing thinking skills is the most feared element of later old age. In 2013 there were 816,000 people with dementia in the UK and on current trends the number is forecast to increase to more than a million by 2025 and more than two million by 2051. When local authorities consider becoming dementia friendly, we would also encourage them to combine this with an ambition to become age friendly cities, like Manchester, using the World Health Organisation model. The benefits will often be felt by the wider community, not just those in later life.

As community leaders and place shapers, local authorities have a crucial role to play in facilitating activities, events and facilities that encourage inclusion of all sectors of the community, including older people, and making sure that older people know about them



and can choose to participate. Manchester's Age-Friendly Bulletin is a particularly good example of this.

Local authorities can also support services that provide opportunities for people to make social connections and build friendships where older people have become isolated and need support to re-engage with their communities. Many local Age UKs make contact with local older people and introduce them to volunteers with similar interests. Age UK wants to see a wellbeing network in every community, developing and training volunteers of all ages to provide older people who need it with friendship and support as well as encouraging good physical and mental healthⁱ.

In their role in promoting public health, local authorities should ensure that health in later life is just as important as health at earlier stages of the life-course, particularly as we live longer. Preventing poor health and health crises should be an essential objective for older people. In working with their local health services local authorities should be collaborating to promote 'social prescribing' to treat the whole person and respond to their social, emotional and practical support needs. Age UK Rotherham and six local Age UKs in Yorkshire and Humberside have successfully piloted social prescribing services which have demonstrated encouraging outcomes."

Important local public and private services should be made accessible to older people, including those with dementia, and people should be supported to make as many decisions for themselves as possible. Where they are unable to do so, advocacy must be provided so that decisions can be made in their best interests. Age UK is working with 15 local partners on innovative projects supporting people with dementia.ⁱⁱⁱ

Carers must not be expected to sacrifice their health and quality of life to their caring role and local authorities should ensure that there are support and respite services. The Care Act 2014 introduces a new right to well-being for carers.

Finally, older people must not be placed at risk of abuse or neglect, and local authorities must ensure that agencies work together to safeguard individuals, minimise vulnerability and support those who have experienced abuse or neglect

High quality health and care

We should all receive high quality health and care services as we age. Health and care should be integrated and joined up around the older person, especially those living with frailty and/or with multiple health conditions and care needs. We need services which look after the whole person rather than just treating a set of individual symptoms in silos. Only 40% of the public are confident that older people are treated with dignity when receiving social and care, and while the number of us needing care is growing, funding is currently shrinking.

Local Government has identified a £4.3 billion funding gap for social care by 2020, and we appreciate that it has limited means for increasing available funding locally without



changes in approach from National Government. Age UK is campaigning for the funding gaps in health and social care to be filled as part of a new funding settlement.

However local government can improve the way social care, health and community services are brought together around the needs of older people, and by facilitating a network of community services help build the infrastructure that supports prevention though active living and social prescribing. Age UK's Integrated Care Programme has demonstrated 23% improvements in well-being for 100+ older people with complex conditions in Cornwall. The programme is currently being scaled up in Cornwall, and two others are starting in Portsmouth and Norwich. In Cornwall there are encouraging indications that the increase in well being from the pilot is being replicated amongst the 600 people in this second tranche^{iv}.

Within the care system, older people must be able to expect to be treated and cared for with dignity and respect. They must not be excluded from access to information, advice, advocacy or face discrimination because of their age.

It is especially important that older people living with multiple health conditions and/or frailty have access to support to connect them with adequately resourced and coordinated local networks and ensure high quality, fully joined up, personalised health and care services whether they are living in their own homes or in residential settings.

People working in health and social care services should be trained to work together and to understand and meet the diverse needs of older people in a way that recognises their goals and needs as a whole. Local Age UK's can be particularly effective in helping older people articulate their wants and needs and helping them find the right health, care and community services. This in its turn helps the other workers involved to develop a better understanding of the older people and their contribution in the context of the other services. Our Integrated Care Programme found that staff satisfaction increased by over 80%.

Comfortable, safe and secure at home

Older people should be able to live safely and with dignity in good quality, warm, comfortable housing that meets their individual needs. Every older person admitted to hospital should be offered a home safety assessment, with follow up support if needed

At home

At present only 3% of UK housing is accessible to people with restricted mobility. Strategic planning must ensure that local housing stock is considered as part of health, care and well-being, that it is energy efficient and that it is built to Lifetime Homes standard and easily adaptable for an ageing population. This will help promote both independence and self-determination.



Our recent publication 'Older not Colder' highlights the importance of local authorities in reducing the risk of death and ill health associated with living in a cold home. In 2012 there were 602,000 older households living in fuel poverty in England and 28,500 'excess winter deaths' in England and Wales amongst people aged 65 and older. We endorse the approach in the recent National Institute for Health and Care Excellence draft guidance which recommends:

- One-stop local health and housing referral services for people living in cold homes, to offer access to grants for housing insulation and heating;
- Identification of people at risk of ill-health from living in cold homes, particularly the most vulnerable to the cold due to age or medical conditions
- Ensuring vulnerable hospital patients are not discharged to cold homes
- Awareness training for heating engineers, meter installers and providers of housing insulation about how to help vulnerable people at home.

Help with home repairs and maintenance is one of local Age UKs most popular services. The Disability Facilities Grant was inadequately funded. Now that this has become part of the Better Care Fund it is crucial that local authorities and health services work together to provide much quicker and more consistent access to home adaptations, before rather than after a fall.

Retirement housing and care homes

As part of their strategic planning, local authorities should enable a much broader range of different, affordable housing options – retirement villages; extra care housing, sheltered housing and care homes – that provide choices for older people to meet their needs and aspirations.

Entering retirement housing or care homes should not cut older people off from the wider community.

Community and Society

We want a world in which everyone in later life can participate in their community and feel part of our wider society. Older people contribute a massive £61 billion to the economy each year through work, caring and volunteering, but they faces barriers including ageism, poor transport links and digital exclusion that can prevent many from have a fulfilling, independent later life. For example, long term unemployment is particularly severe amongst older workers.

Local authorities are one of the largest employers in most localities and they can ensure that their employment policies recognise the value of older workers and encourage recruitment and retention, for example through flexible working opportunities. They can also encourage the recruitment and retention of carers.



Authorities can also work with partners to ensure that there are good opportunities for learning and volunteering locally, and that partners co-operate to provide a good transport network.

ⁱ Contact Lea Renoux at <u>Lea.Renoux@ageuk.org.uk</u> for further information on Age UK's initiatives on health and well being and loneliness

ⁱⁱ Age UK Briefing on Social Prescribing and the Age UK Integrated Care Model, May 2014. Available on

request iii Contact Rebecca Stanley (Rebecca.Stanley@ageuk.org.uk) or Lea Renoux (Lea.Renoux@ageuk.org.uk) for further information

iv Integrated Care Services, Age UK 2014. For further information contact Integrated.Care@ageuk.org.uk

^v Older, not colder: Why older people need warm homes, Age UK 2014