

**REPORT TO:** Health Policy and Performance Board  
**DATE:** 6 November 2013  
**REPORTING OFFICER:** Strategic Director - Communities  
**PORTFOLIO:** Health and Wellbeing  
**SUBJECT:** Halton - A place without Loneliness  
**WARD(S):** Borough-wide

## 1.0 PURPOSE OF REPORT

1.1 To present the Halton-A place without Loneliness Scoping Document and highlight future work required to further develop our strategic approach to the prevention of loneliness in Halton.

## 2.0 RECOMMENDATION

**RECOMMENDED: That the Board**

**(1) Note the contents of the report; and**

**(2) Comment on the Scoping Document attached at Appendix 1.**

## 3.0 SUPPORTING INFORMATION

3.1 The Campaign to End Loneliness was formed last year and is a coalition of organisations and individuals working together through research, policy, campaigning and innovation to combat loneliness and inspire individuals to keep connected in older age in the UK. They have worked in partnership with the Local Government association and Age UK Oxford to produce toolkits and action packs for Health and Wellbeing Boards, Professionals and older people around the subject of loneliness. The association was developed as research began to demonstrate that loneliness harms health and effects people's quality of life.

3.2 Halton Borough Council has, for many years, been at the forefront of initiatives to prevent and alleviate social isolation especially with their Sure Start to Later Life and Community Bridge Builders services. However, it is becoming clearer that a focus on social isolation alone may not combat the pain of loneliness felt by so many of our older citizens. All partners and individuals involved in the development and provision of prevention services for Older People, through the work of the Health and Well-Being Steering Group and the Older People's Board now recognise that we need to further develop the services and activities associated with tackling social isolation, which already exist in the borough, to turn their attention to also combating loneliness.

3.3 We will be one of the first Local authorities to adopt a strategic approach to combating loneliness and therefore the outcomes of the project will be of national importance both to practice and research in this field, and has been endorsed by the National lead for

the campaign to end loneliness:

*“Your strategy is excellent.....I was particularly pleased that you’ve been consulting the older population in Halton....this is a solid plan. Would you be happy for us to use this as an example for other health and well-being boards...”*

3.4 This Document, forms an initial scoping of the strategic approach required to address this issue in Halton, and will be further developed through the steering group, with input from all key partners including public Health, CCG, HBC and community and voluntary sectors to:

- Further develop a needs assessment
- Build on the evidence base to identify innovative solutions.
- Consider widening the strategy to include other socially isolated groups
- Further develop preventative strategies

#### 4.0 **POLICY IMPLICATIONS**

4.1 *“A locally agreed approach, which informs the Sustainable Community Strategy, utilising all relevant community resources especially the voluntary sector so that prevention, early intervention and enablement become the norm. Supporting people to remain in their own homes for as long as possible. The alleviation of loneliness and isolation to be a major priority. Citizens live independently but are not independent; they are interdependent on family members, work colleagues, friends and social networks.” Putting People First (December 2007).*

*Putting People First* is a concordat signed by six central Government departments, the NHS, local government, professional bodies, regulators, adult social care and health providers across all sectors. It is the underpinning policy document in the transformation of social care; the “strategic shift to prevention and early intervention is a central objective. In this context, the alleviation of loneliness and isolation is a major priority.

4.2 Much of the most influential work on the impact of isolation and loneliness was conducted by the Social Exclusion Unit in the Office of the Deputy Prime Minister during the 2004-06.

In its final report, *A Sure Start to Later Life: ending inequalities for older people* (January 2006), it asserted that:

*“Ending poverty and improving the responsiveness of health services is not enough on its own to end exclusion. Isolation, loneliness and poor social relations are also major factors leading to the exclusion of older people. Social isolation affects about one million older people, and has a severe impact on people’s quality of life in older age. Tackling social isolation and loneliness is not currently a priority for service providers, but is vital if we are to end social exclusion.”*

This is a message which appears to have been taken on board in all subsequent policy documents produced by the Government.

#### 5.0 **FINANCIAL IMPLICATIONS**

5.1 The project aims to work within the existing financial budgets of the organisations

concerned. It is planned that the robust partnership working already in existence will be utilised in making the project a success. The Health Improvement Team has been reconfigured to now contain an older people's team who will be one of the main new contributors to the initiative.

## **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **6.1 Children & Young People in Halton**

The strategy takes an intergenerational approach to the prevention of loneliness. Local schools will be twinned with care homes and local projects will involve students and older people working on intergenerational projects.

### **6.2 Employment, Learning & Skills in Halton**

The strategy aims to spread intergenerational learning across the borough, hopefully adding to the work already taking place to try and reduce any intergenerational tension.

### **6.3 A Healthy Halton**

Research demonstrates that loneliness has an effect on health equivalent to smoking 15 cigarettes per day. People who are lonely have an increased risk of depressive symptoms, higher blood pressure and admission to hospital and care homes. The strategy aims to tackle some of these health inequalities

### **6.4 A Safer Halton**

The project should be a major factor in supporting very vulnerable people across the borough.

### **6.5 Halton's Urban Renewal**

Part of the strategy aims to develop links between Community Development, Transport and Environment departments in order to create a joined up approach to community and environmental issues. For example some people are lonely because they cannot access transport, because they fear crime or because they have reduced mobility. It is only by using a partnership approach that issues can be addressed.

## **7.0 RISK ANALYSIS**

7.1 Failure to fully implement this strategy could result in an increase in the numbers of Older People in the Borough who are lonely and isolated, increasing the risks of ill health and dependency on services.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 The project is an attempt to engage with the issue of loneliness which is a major factor in older people's quality of life.

## **9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

9.1 None under the meaning of the Act.