**TAMESIDE AND GLOSSOP PARTNERSHIP ENGAGEMENT NETWORK**

Age Friendly Tameside – Bespoke Focus Group (PEN Forum)

Thursday 2 August 2018

9.30am-1pm

Lesser Hall 2, Dukinfield Town Hall

As part of the Tameside and Glossop Partnership Engagement Network (PEN) Conference in February 2018 Tameside and Glossop Metropolitan Borough Council (TMBC), Tameside and Glossop CCG (T&GCCG) and Tameside and Glossop Integrated Foundation Trust (T&GICFT) held an Age Friendly Tameside Workshop. Those who participated shared their views on the planning stage of an Age Friendly Tameside strategy.

In August 2018 a small number of representatives were invited to take part in a bespoke focus group. The purpose of the group was to look at the key facts in the draft document, what we are doing now, and where we would like to be in the future to make Tameside as Age Friendly as it can be.

The PEN Age Friendly Tameside Bespoke Focus Group (PEN Forum) met on Thursday 2 August @ 9.30am in Lesser Hall 2, Dukinfield Town Hall.

The **draft** strategy was presented to the Tameside Health and Wellbeing Board in September 2018,

The following representatives were in attendance at the focus group:

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| **Name** | **Organisation** |
| Karen Mercer | Being There |
| Pete Forrester | Stamford Medical Practice PPG Member and Ashton Patient Neighbourhood Group Member |
| Neil Openshaw | Brooke Surgery PPG Member and Hyde Patient Neighbourhood Group Member |
| Kirsty Galloway | Wellbeing Service Manager, Tameside Age UK |
| Michelle McCabe | Stroke Association Support Co-ordinator Tameside and Glossop |
| Val Dickens | Step 2 Manager, Healthy Minds, Pennine Care |
| Hanif Malik | Resident and Ashton Patient Neighbourhood Group Member |
| Champa Mistry | Dipak Dristi |
| Julie Wood | Community Development Worker, Jigsaw Homes |
| Tony Powell | Deputy Chief Executive, Jigsaw Homes |
| David Brown | Armed Forces Officer (Community Safety)/Armed Forces Welfare Officer |
| David Sharples | Action Together |

Outlined below are the key points from the discussion:

**Where We Live - Outdoor spaces, Housing and Transport**

Outdoor spaces

* Stockport Road (St Peter’s Square) – vandalised facility on pelican crossing for visually impaired people
* Street crime and vandalism is an issue for the older/ageing population
* Cars parking on pavements – Get on a mobility scooter and give it a go – try it!
* There are not enough dropped kerbs
* In general pavement access for people with mobility issues is poor
* Make town centres more accessible for people who are visually impaired – there is too much street furniture – again give it a go blindfolded….
* Pavements too high/Bins on the pavement/Cars parked on the pavement – this is not easy when you are in a wheelchair
* Bus drivers need to be educated re the ageing population – bus drivers often do not stop at bus stops to pick up older people
* Poor maintenance on pavements and roads causing falls, making it hard to use a scooter also.
* Public toilets in shops (subsidised via business rates) community lavatories scheme
* NCS – National Citizenship Scheme (16-17 year olds, charity working) – the Council should use these young people to get rid of graffiti

Housing

* Think ahead, adapt housing for the ageing population – be proactive, not reactive
* Education for older people about who and where to go for things e.g. reputable tradesman there should be directory of reputable services to stop older people being exploited
* Accessible forms of information – digital is not for everyone
* Tenants need to be educated to be responsible
* Older peoples housing separate from general population – should it be integrated within the local community
* Consider adaptations for private housing as well as social housing and also private tenancies
* There should be a plan and assessment before hospital discharge. Facilities in patient’s homes should be looked at, how they will cope managing in their own environment. Their homes should be made for them so they are easy to get around
* When you are building new houses please engage the community in your early planning stages
* Working with planning to look at affordable and accessible housing for older people is needed.
* HOOP – Support people on housing advice which is funded by the CCG. People can access the service via their telephone advisory team. Some of the advice and information is also around Private Sector housing support and help moving to more suitable accommodation.
* Assisted homes are needed to support people from diverse communities
* Sheltered Housing Schemes working in partnership to engage with the wider communities rather than just their tenants.
* Building upon the resources already available to offer more options.
* Multi-storey blocks need to be more accessible ensuring lifts are maintained.
* Engagement events – encouraging older people to have a voice on the issues they experience.

Transport

* Transport passes should be made available for access all over Greater Manchester for the over 65’s
* Hospital bus service for older people and a bus hopper available to get around the hospital
* It is vital that closely working with GM is essential as most of the transport is provided by GM Transport.
* The need for good accessible, affordable transport is very important to support older people in their communities.
* Locally older people have access to Ring & Ride, Miles of Smiles (medical only), Taxis, and in some area the local link.
* Ring & Ride have now changed their criteria and only offer their service to people over 70 years old – this needs to be readdressed
* Miles of Smiles now only provide the service for those who need assistance to medical appointments. Due to the reduction of volunteers the miles have reduced – this needs to be readdressed by commissioners
* There is no consistency with taxi fares in Tameside.
* Taxi drivers should have more understanding of other people’s needs. i.e. giving people more time to be seated, dementia friendly knowledge – provide training
* Provide a Being There service?
* Department of Transport has changed the eligibility of drivers - Age UK have concerns about these changes and the impact it may have on volunteers
* Possibility of pooling minibuses? Schools, Services who don’t use them at the weekend. Could this work and what would the implications be?

**Who We Are - Affordable Good Quality and Appropriate Community Support and Health Services**

* Clarity of messages
* Nudges to get people to modify their behaviour
* Practical tips to staying fit and well
* Accessible information
* More awareness and prevention of mental health issues for the over 50’s
* More information in the workplace about the menopause and how it affects women who are working – build it into your policies – be a leader not a follower
* Education and good communication for older people to help them make the best decisions
* Promotion of advanced care planning – also build in mental health into advanced care plans for everyone
* Healthy Minds are currently developing a depression/anxiety/worry group for older adults – more promotion is needed around this
* Dying Matters – more Bereavement support and awareness of it in Tameside please – at the moment support is lacking in our local area
* Dementia Care – better education for families to support their loved ones
* Care Pathways – Better education and information about the care pathway for our particular health issue
* Care packages need to be more timely e.g. prior to person being discharged from hospital

**Who We Are - Respect and Social Inclusion**

* People with Long Term Conditions need more support for inclusion in society
* Promote social aspects to ageing not just health
* Good communication is key
* More therapies in the community for older people e.g. more physio please for people with long term conditions
* More support and knowledge of the ageing Asian population
* More streamlined pathways of social care and health
* More translation services and education around health and social care for our older ageing Asian/BME communities
* More support and promotion of volunteering for BME communities
* More choices for social inclusion for gay men e.g. don’t assume one size fits all
* Staff training – please include LGBT and BME communities
* Actively include older people in developing skills regarding technology so they feel confident in taking up volunteering opportunities – without these skills it can be very isolating
* Develop older people’s knowledge of mental health and help promote skills for managing anxiety and low mood – please take away the stigma
* There is a need to translate the existing and new policies in different languages
* Encourage volunteering
* Community services should provide activities e.g. yoga, social activities, health update chats, living healthier lifestyles and wellbeing
* Rehab services in the area are generally not good and staff are not trained to work with BME communities
* There needs to be a change in the way things are portrayed around the images of older people and the language (i.e. bed blockers, demand on services).
* Actively engaging more with older people so they can have a voice and raise some of the negative communications across GM not just Tameside.
* Carers feel there are a lot of gaps in the support they are offered. People don’t know where the Carers Centre is or who to contact.
* Older people say that they automatically care for loved ones and don’t see themselves as Carers.
* How can we do things for older people and what is needed (Listen to older people’s views).
* As the Strategy starts to develop the need to involve older people is essential to ensure we get it right.
* Ensure that everyone involved is happy with the basics of the Strategy.
* Look at ways of tackling the language barriers, social inclusion of all diverse communities.
* Support through training i.e. Dementia Friends.
* Engage with community groups to ensure everyone understands Age Friendly Strategy.
* Intergenerational work has started to embed in some communities. More work is needed to be developed
* Intergenerational interactions will enable older and younger people to exchange skills and support each other. i.e. older people help children with reading. Younger children’s presence can have a huge impact on older people’s health (distraction of medical issues, disabilities).

**Who We Are - Social Participation/Civic Partnership and Employment/Communication and Information**

* For the visually impaired everything needs to be looked at – digital communication is good so that it can be enlarged on screen
* Training for organisations to deal with visual impairment – Use people with visual impairments to help deliver the training, work alongside people to develop their skills – Train the trainer model
* Signposting – a directory of community services in many accessible formats – one size doesn’t fit all
* Should be more volunteering opportunities for older people in the NHS and in Social Care
* Recognise that volunteering has changed, organisations need to recognise that volunteers can enhance services e.g. befriending and caring opportunities
* Provide opportunities for university students to support older adults during summer holidays – this would also help enhance their CVs
* We need to use our assets locally to develop this area of work
* Volunteering should be included in retirement plans therefore should be linked in with workforce development plans and strategies
* Include volunteering at an early age it’s not just for older people
* Link this strategy in with the volunteer strategy (VCS Tameside) both in health and social care
* Opportunities for people who are working to utilise their skills in the community in a volunteer capacity – again this links into workforce development strategies

**Next Steps**

Those who participated were advised that feedback from the focus group would be incorporated into the final completed strategy. The strategy is still in its **draft s**tage and what we need to do next is to finalise the draft strategy and develop a workable action plan. Next steps are to present the draft strategy to the Age Friendly Tameside Strategy Group on the 30 November 2018.

Tracy Turley (Public/Patient Engagement Lead) – Strategic Commission (Tameside and Glossop CCG and Tameside Metropolitan Borough Council)