



advice and support for older age
**Independent
Age**

Response to the Liberal Democrat commission on 'realising the potential of an ageing society'

April 2014



About Independent Age

Founded 150 years ago, Independent Age is a growing charity helping older people across the UK and Ireland through the 'ABC' of advice, befriending and campaigning. We offer a free national telephone and email advice service focusing on social care, welfare benefits and befriending services, which is supported by a wide range of printed guides and factsheets. This is integrated with on-the-ground, local support, provided by a network of over 1,500 volunteers offering one-to-one and group befriending.

For more information, visit our website www.independentage.org

Speak to one of our advisers for free and confidential advice and information. Lines are open Monday to Friday between 10am - 4pm. Call 0800 319 6789 or email advice@independentage.org

Independent Age is also a member of the Care and Support Alliance: a consortium of over 65 organisations that represent and support older and disabled people campaigning to keep adult care funding and reform on the political agenda.

Executive summary

- The Liberal Democrats should build on the reforms they have introduced in the current parliament by ensuring new policies work in the interests of future generations of older people.
- While progress has been made tackling poverty in recent years, further steps need to be taken to help increase savings and enable older people to participate in the labour market. It remains to be seen whether auto-enrolment and the single tier pension alone will increase people's pension private savings.
- Independent Age believes there is a strong case for retaining universal benefits for pensioners on the basis of an entitlement principle and in recognition of the financial value of these payments to the majority of older people.
- Independent Age would caution strongly against any move to bring Attendance Allowance (AA) under local authority administration. This would risk the pooling of budgets at a local level into an overall cash-limited social care budget. However, closer working between the two systems could improve value for money, with claims for AA acting as a 'gateway' into a reformed social care system.
- We have to orientate our health system away from the current emphasis on acute and episodic care towards prevention, self-managed care and care that is truly joined up.
- Independent Age wants to see local authorities and other public bodies addressing issues of social isolation and loneliness as a priority.

Introduction

Independent Age is pleased that the Liberal Democrat Party has established a working group and Policy Consultation on Realising the Potential of an Ageing Society. We are particularly pleased the recommendations drawn up by this working group are designed to have a direct influence on party policy at this year's Party Conference.

We would encourage the party to be radical: now is not the time for muddling through. As Lord Filkin and the House of Lords Committee on Public Service and Demographic Change warned in their 2013 Ready for Ageing? report, the UK is "woefully underprepared" for its ageing population.

It is therefore pleasing the party is adopting a life-course approach – looking at the many measures that could be taken across the life-course journey – to help adults prepare for later life.

The working group is looking at these issues from the perspective that all policies to be adopted must promote intergenerational fairness. The debate around intergenerational fairness hasn't always been based on sound evidence, so it is a relief to see the Liberal Democrat party calling for a more considered approach. We caution the party against adopting 'quick fix' policies, like means-testing of universal non means-tested benefits, which might at first sound fair, but in practice are likely to disadvantage the lowest income groups. Any means-testing that involves individuals having to claim a benefit, like the Winter Fuel Payment, would in our view not make sense. Independent Age recommends a fairer and simpler approach to targeting pensioner benefits would involve administration through the taxation system, for example, the use of an automatic withdrawal of benefits applied for pensioners on the highest tax rate.

The Liberal Democrat party can look back at the reforms they helped to introduced in this parliament, specifically around pensions and social care, and proudly reflect on the progress they have made to help older people live more independent lives. The challenge now is to identify measures, like a triple-lock on pensions or a cap on lifetime care costs that will benefit many future generations of older people.

1. Understanding society

Q1. What steps, if any, should be taken to strengthen the government's approach to setting and delivering a strategic approach to demographic change?

- 1.1 We believe a good place to start would be to act on the principal recommendations of the Select Committee on Public Service and Demographic Change, which in its 2013 *Ready for Ageing?* report called for cross-party consensus on planning for an ageing population. Specifically, we would like to see the Liberal Democrats exercising political leadership. Were the party to help form the next government, we would want to see a cross-party commission designed to consider the long-term policies required to prepare Britain for 2030, when the proportion of over-65s is set to reach almost a quarter of the population.
- 1.2 To ensure the commission works effectively and transcends party politics, we recommend it is chaired by a leading national figure with a record of public service.
- 1.3 Independent Age believes the work of the Early Action Taskforce should have an influence on the party's thinking. In its report, *The Deciding Time*, the Taskforce identified six blocks to long-term policymaking and early intervention; among its key recommendations are 10 year spending reviews to truly lock considerations about intergenerational fairness into the Treasury's fiscal framework.
- 1.4 A '10 Year Test' moving beyond a focus on near pressures would help identify future liabilities across government. Accounting for the likely consequences of decisions 10 years into the future could be built into an updated Charter for Budget Responsibility, placing a premium on long-term thinking. We recommend the focus of the cross-party commission could be to consider how we build consensus about the key areas of our economy and public services where early action is required and to help with developing new thinking on 10 year spending reviews and other measures designed to help all future governments - no matter what party is in power - age-proof policymaking.
- 1.5 Although the following measures are unlikely, in and of themselves, to deliver a strategic approach to demographic change, they would, in our view, strengthen accountability within government to plan for population ageing:

- the Office for Budget Responsibility should continue playing a role looking at the long-term implications of population ageing and the impact on the public finances
- a senior government minister should be given ministerial responsibility) to prepare the country for demographic change. The current focus on today's older people through the appointment of a Minister for Pensions and Older People (within the Department for Work and Pensions) is helpful but this role needs to be complemented by a Minister also taking on responsibility for age-proofing the UK.

Q3. What steps should government take to increase awareness and understanding that we are all living longer and what are the implications of this among business and civil society leaders, public services and the general public?

- 1.6 The government is already taking welcome steps to increase awareness and understanding that we are living longer lives and the implications of this. In its 2014 Budget the government made a commitment that £20 million will go into advice to help individuals make an informed decision about how to use or invest income from their defined contribution pension – a positive step in the right direction. We hope this advice will strengthen people's understanding that average life expectancies are growing and that far too often people underestimate how long they will live for.
- 1.7 Independent Age would like to see government using insights from behavioural economics to nudge people into thinking about planning for retirement and later life. Auto-enrolment is one example where the government has effectively 'nudged' working age adults during the current Parliament. We recommend the next government looks at other ways in which it could help increase public understanding and encourage people of working age to proactively plan for these extended lives.
- 1.8 Mid-career reviews, 'MOT'-style health checks and a Retirement Transition Initiative might all represent the way forward: they might help people to identify the risks and responsibilities we all need to 'factor in' as we prepare for our own old age. The work that the Shaftesbury Partnership has done to provide practical information and guidance for people soon to retire through the so-called Retirement Transition Initiative is a good example.

2. The economics of ageing

Q5. What measures should be considered to increase participation in the labour market by older people?

2.1 We have already seen a dramatic increase in older people's participation in the labour market. One in six people aged 65-74 was economically active in 2011, compared to one in 12 just 10 years earlier¹. This represents a positive move for people who are keen to continue working and earning, but is less positive for those who feel pressurised to work financially and who may have little choice or control over their working situation. A recent TUC report found that many older women are trapped in low-paid jobs, struggling to balance caring responsibilities and work².

2.2 This is an active area for research at the moment, with a joint programme of research funding from the Economic and Social Research Council and Medical Research Council currently underway. A key purpose of the programme is to understand more about the impact and cost effectiveness of a range of recent government and business interventions designed to support the health, wellbeing and productivity of older employees.

2.3 At Independent Age we are very aware of how important employment has been, and still is, to many of the older people we support. During focus groups in 2009, respondents described how when they stopped working they went from feeling like valued members of society, to feeling that they had little or nothing to contribute. The sense of worth that many had was strongly linked to playing an active role in society, and for a significant number this meant having a job.

2.4 It is vital to recognise that many of those in later life would like to work but face a number of barriers to staying in, or returning to employment. In our research, people felt they were no longer offered the same opportunities as people at an earlier stage in life, and that their age was a significant barrier not only to gaining employment, but to having their skills and experiences recognised in the first place. In fact, 65% of older people believe age discrimination still exists in the workplace³.

2.5 People age in different ways, and huge numbers of older employees can and do make valuable contributions at work, often with the benefit of knowledge and experience. By allowing employers and employees to have proper discussions about retirement, workplaces can benefit from the skills and experience of their older employees, and older employees can determine what kind of later life they

¹ www.ons.gov.uk/ons/rel/census/2011-census-analysis/what-does-the-2011-census-tell-us-about-older-people-/index.html

² *Age Immaterial. Women over 50 in the workplace*. TUC report, 2014.

³ *One Voice: Shaping Our Ageing Society*. Age Concern and Help the Aged, 2009.

wish to lead. Forcing someone out of work too soon can dramatically change their experience, from feeling like a valued member of society to questioning their sense of worth, suddenly cutting them off from a part of their social network and daily routine.

2.6 We support the idea of a gradual transition towards retirement, as proposed recently by The New Economics Foundation. They suggest that people might be able to work to an older age if retirement were more gradual, with working hours reduced by one hour per week each year from the age of 55 onwards. That way, retirement would be neither the light at the end of the tunnel, nor a cliff-face, but rather a gradual transition, allowing workers to adjust their lives⁴.

Q6. What changes to training and education should be made to support increased labour market participation by older people?

2.7 Independent Age welcomes the Liberal Democrat's interest in lifelong learning accounts, and we would encourage this policy to be developed in the party's manifesto. This will help older workers to access new skills and training in preparation for any career changes later in life.

2.8 Current employer plans suggest we need to fill 13.5 million job vacancies in the next 10 years, but there will be only seven million young people leaving school or college. This means we need to enable people to work for longer, where they are in good health and where this represents a positive choice for them personally. The pilot work being carried out by NIACE to evaluate and test demand for a range of different models of mid-life career review looks like it has been successful so we encourage the Liberal Democrats to draw on this evidence and consider the implications for skills policy.

Q19. Should the Winter Fuel Payment and free TV licence be better targeted to support pensioners at the bottom end of the income distribution? For example, should entitlement to these benefits be withdrawn from those paying the upper income tax rate?

2.9 The Winter Fuel Payment (WFP) and free TV licence provide important financial support to pensioners. They are targeted at helping alleviate two key areas of need for older people: fuel poverty and social isolation. As with all universal benefits, they represent a principle of entitlement on the basis of age-related needs.

2.10 As the distribution of pensioner income is relatively flat, a high proportion of older people will find these benefits financially helpful, particularly in light of rising fuel costs. 37% of households with one or more pensioners have a net

⁴ *Time on Our Side*. Coote and Franklin. New Economics Foundation, 2013

weekly income of under £300⁵. We believe that restricting these pensioner benefits to the lowest income groups would therefore have a significant negative impact on many pensioners whose income raises them above the poverty threshold but who still struggle financially.

2.11 Independent Age believes that there is a strong case for retaining universal benefits for pensioners on the basis of an entitlement principle and in recognition of the financial value of these payments to the majority of older people. There is evidence that Winter Fuel Payments (WFP) are effective because they are actually being spent on fuel, due to 'labelling effects'. Analysis from the Institute of Fiscal Studies (IFS) shows that receipt of the WFP raises average spending on household fuel from 3% to 41% of the value of the WFP⁶.

2.12 However, we recognise that among the highest income groups (for example, those with an income over £100,000 or those paying the highest tax rate) these universal benefits do not carry the same financial value. There may therefore be a case for withdrawing these benefits from this group. However, it would be important to look at whether the savings to be made from withdrawing benefits from the highest income groups are sufficient to justify the introduction and administration of a more complex system. If not, there may be more cost-effective ways to look at a more fair distribution of public spending within the older age group.

2.13 We strongly believe that applying a means-test which requires pensioners to apply for benefits would be counter-productive, as large numbers of eligible pensioners would lose out. In our view, a fairer and simpler approach to targeting pensioner benefits would involve administration through the taxation system, for example, the use of an automatic withdrawal of benefits applied for pensioners on the highest tax rate. This way, administration costs are kept to a minimum and the state can be sure that the intended result is achieved rather than relying on individuals to act in the intended way. It may be the case that this is easier to administer in relation to the Winter Fuel Payment than the TV licence.

2.14 Independent Age also believes that any targeting of benefits in this way will be perceived as a much fairer benefit cut if it comes with a guarantee that any savings to the state made from changes to these benefits are used to fund the reforms to adult social care, as recommended by Paul Burstow MP and Centre Forum in January 2013.

⁵ *Family Resources Survey 2011/12*. DWP, 2013.

⁶ *Cash By Any Other Name? Evidence on Labelling from the UK Winter Fuel Payment*. Beatty et al. IFS working paper 10/11, 2011.

2.15 As well as providing benefits to help pay for fuel, there needs to be a clear focus on preventative measures to reduce fuel consumption, through a comprehensive programme of home adaptations to improve energy loss. The present Green Deal is not sufficiently attractive to vulnerable older people and the scheme needs to be reformed.

Q20. How can auto-enrolment and changes to the basic state pension be used to increase private pension saving for retirement?

2.16 At Independent Age, we feel optimistic about the potential for auto-enrolment and the introduction of the single tier state pension to increase people's private pension saving. Both policies have the potential to improve awareness about likely future retirement incomes and therefore help in thinking about planning and saving for retirement. Current awareness levels of how much pension income to expect are generally very poor: four in five pensioners who are relying only on the state pension have no idea what their income will be⁷.

2.17 The most recent indications are that most people are choosing to stay in their pension scheme once automatically enrolled and will therefore benefit in the future from increased pension income. Opt-out rates appear to be lower than expected, running on average at around 9%⁸.

2.18 However, we would also caution against seeing auto-enrolment as the final word in encouraging pension savings. Although currently relatively low, we may see higher opt-out rates over the next few years as smaller employers begin to auto-enrol their workers and don't have the same existing widespread pension scheme membership or the capacity to run active campaigns to discourage opt-out.

2.19 We also don't yet know what will happen once employee contribution rates rise to a minimum of 4% of earnings in 2018. Workers who feel happy about losing 1% from their pay may feel less comfortable losing 4% or more and we may see a rise in the number of opt-outs. However, it is at these higher contribution rates that the impact of increased savings will really be seen when it comes to achieving adequate retirement incomes.

2.20 Ensuring that people have trust and confidence in pension schemes to deliver their expected retirement income will be a key factor in shaping the success of auto-enrolment.

⁷ *Attitudes to Pensions: the 2012 Survey*. MacLeod et al, DWP Research report 813, 2012.

⁸ *Automatic Enrolment Evaluation Report*. DWP, 2013.

2.21 For both policies to work, we believe strongly in the widespread provision of basic level financial information. To help people with planning for the future, this would need to include:

- simple calculator tools showing how much needs to be saved to generate a certain level of income (such as the one used by the Money Advice Service)
- information on current average retirement incomes
- why pension saving makes financial sense in terms of tax treatment
- a 'typical' retirement needs profile including average years life expectancy, disability-free years expected, average social care costs.

Q23. What should be included in a 'second half' MOT offered at 50, for example, a skills check, financial health, and housing?

2.22 Information and advice regarding planning for later life needs to reach people at key points in their lives when they will be most receptive to it. We are sceptical that delivering generic information at a point determined by a fixed chronological age will be successful in changing behaviour and improving outcomes for older people. It is also essential that trigger points work to help longer-term planning and don't just operate in response to crisis points. In our response to question 49, we set out more detail on how we think information and advice can best be provided and when.

Q26. Should local authorities administer a reformed Attendance Allowance to help align it with the preventative goal of the social care system?

2.23 We welcome the suggestion to integrate Attendance Allowance (AA) more closely with the local authority administered social care system, following the recommendations from our research report on Attendance Allowance last year⁹. Attendance Allowance plays a vital role in providing additional income to support many older people with a disability at risk of living in poverty. It also supports the effectiveness of public spending by helping individuals 'personalise' or improve on the services provided by other areas of the state. However, there is strong evidence to suggest that take up of AA is low. We therefore believe it is critical that any reform of the AA system should not undermine the principle of entitlement to this benefit.

⁹ *Independence Allowance: Developing a New Vision for Attendance Allowance in England*. Lloyd. Strategic Society Centre/Independent Age, 2013.

2.24 Independent Age would caution strongly against any move to bring AA under local authority administration. This would risk the pooling of budgets at a local level into an overall cash-limited social care budget, resulting in the potential loss of entitlement for many pensioners of a non means-tested benefit which provides vital financial support. It would also result in unacceptable levels of variation in terms of claims and who receives AA. The advantage of the DWP administering AA is that entitlement to the benefit is clearly based on objective criteria, which have to be consistently applied wherever someone makes a claim.

2.25 Closer working between the two systems could, however, improve value-for-money spending on AA, delivered through a number of potential new mechanisms, including: increasing the volume of signposting across the two systems; local authorities to incorporate AA assessments into community care needs assessments; AA acting as a 'gateway' into a reformed social care system¹⁰.

2.26 We believe that one of the key benefits of closer integration between the two systems is the opportunity to 'make every contact count' - with advantages to the individual of enhanced and personalised information and advice about services and support. Local authorities would benefit from the sharing of data collected by the AA system to help fulfil their information and advice duties under the Care Bill. This would require the AA data records to be converted into digital form.

Q29. How do we ensure that any increases in public spending over the next two decades as a result of the ageing population are funded in a way that is inter-generationally fair?

2.27 The debate around intergenerational fairness has been heightened by the context of austerity and the severe restrictions on public spending, with some reports identifying that on certain measures pensioners have fared better financially than younger households in recent years.

2.28 However, there is little evidence that younger people see older people as a burden - 95% of the UK population disagree with this statement¹¹. A recent report from Demos found evidence of "cross-generational solidarity and broadly similar values underpinning people's attitudes and opinions" concluding that "the

¹⁰ *Cash Convergence: Enabling Choice and Independence Through Disability Benefits and Social Care*. Lloyd. Strategic Society Centre, 2011.

¹¹ Lecture for British Academy Debate: *Benefit or Burden: Coming to Terms With Ageing Britain*. Alan Walker, 26 Feb 2014.

importance of generational self-interest should not be overstated"¹². The population as a whole is still much more likely to support extra public spending on retirement pensions than on benefits for other groups¹³.

2.29 We are concerned that the terms of the public debate are often driven by an idea of the wealthy baby boomer generation. However, this masks the evidence that one in five pensioners still live below the poverty threshold and/or in material deprivation¹⁴. Inequality of wealth is still greater within the generations than it is between the generations.

2.30 In terms of paying for the costs of an ageing population, it's important to bear in mind that older people are still paying into the tax system through income tax. While there is clearly more potential to use the unprecedented wealth created from property ownership to help fund retirement, appropriate mechanisms and methods for doing this are currently underdeveloped. There has been much discussion over a number of years about the need to improve take-up of equity release schemes, but the current choice of products is not seen as attractive due to high interest rates and lack of flexibility. We also need to take care not to develop policies which are over-reliant on funding via property wealth and assume a continuation of property boom.

¹² *Generation Strains: a Demos and Ipsos MORI Report on Changing Attitudes to Welfare*. Duffy et al. Demos, 2013.

http://demos.co.uk/files/Demos_Ipsos_Generation_Strains_web.pdf?1378677272

¹³ *British Social Attitudes: the 30th report*. Park et al. NatCen Social Research, 2013.

¹⁴ *Understanding the Relationship Between Pensioner Poverty and Material Deprivation*. Kotecha et al. DWP Research report 827, 2013.

3. Housing

Q33. Who should lead on developing and providing an information and advice service to support planning for later life, and how should it be financed?

3.1 A large number of organisations deliver information and advice to support planning for later life. There is no shortage of information and advice out there. In our 2013 report on Information and Advice Provision, we talked about families facing a confusing “maze” of information and advice, especially in the area of adult social care.

3.2 In England, responsibility for arranging or providing information and advice will sit with local authorities under their new duties in the Care Bill. Local authorities will clearly need to lead on developing and providing an information and advice service but the provision of information and advice is not simply a matter for local authorities. Independent Age strongly believes that to meaningfully deliver on the legal duties under the Care Bill local authorities will need to signpost residents (including those with non-eligible needs) to independent sources of information and advice. The Boyle Review, published by the Cabinet Office in 2013, was clear that local authorities are not always good at meeting the information and advice needs of their local population. This is particularly true when it comes to meeting the information and advice needs of people who pay for their own care. The National Audit Office has found that 60% of local authorities have no idea how many self-funders are in their area¹⁵

3.3 In our view, local authorities need to play an active role, but this won't always mean delivering their own information and advice. They need to identify gaps in information and advice provision and audit what information already exists; ensuring residents can effectively be linked with intermediaries to access the information that meets their specific needs. This will require local authorities to produce a plan so they can deliver a universal information and advice service and assess the needs of their local population. Once they have produced this plan, local authorities will be in a better place to commission specialist organisations to provide information and advice. In many cases, local authorities will need to signpost residents to these specialist agencies so they can get the information and advice that meets their individual needs.

3.4 Independent Age believes information and advice should be joined-up. It should consider older adults' housing needs, alongside their needs for health care, social care and help with social security benefits. People struggle to access and navigate information and advice and often find it difficult to distinguish between health, housing and care services. One potential cause of confusion is

¹⁵ *Oversight of User Choice and Provider Competition in Care*. National Audit Office, 2012.

an over-reliance by local authorities on care management teams and websites for the delivery of advice and information about options strictly related to care, but who do not have enough knowledge to deliver advice and information in a joined-up way. This is clearly regrettable when information and advice about housing adaptations and handyman services, plus other home improvements, can help people to age well and 'age in place', maintaining an independent life in their own home. Social services teams should be adequately trained to talk through or signpost residents to relevant information and advice, including information and advice on housing-related support.

Q35. How could planning policy contribute to increasing the provision of housing for older people? For example, the building of single storey accommodation?

3.5 Groups like the Campaign for Housing in Later Life argue that build rates for specialist housing for older people are lower than in the 1980s. Others, including Shelter and Demos, highlight the discrepancy between the number of adults who would like to downsize and move into specialist retirement housing and the adequate supply of housing to meet their preferences and needs. We certainly think more needs to be done to boost supply overall, and not just for first-time buyers but for older people who would like to make a move to specialist retirement housing, or what the consultation refers to as "last time buyers".

3.6 Whilst a debate takes place on changes to the planning framework and whether the Community Infrastructure Levy (CIL), together with Section 106 Obligations, is relaxed to help facilitate new builds, Independent Age is concerned in the main with suggestions that local authority planners are blocking proposals because they are wary of older people moving into their area and placing more strain on social care budgets. This problem has been reported on a number of occasions¹⁶ but the evidence base is still lacking: the Liberal Democrats should investigate and if the problem is considered to be widespread, bring forward a policy that tackles the default decision-making that works against specialist retirement housing for older people.

¹⁶ See Councils Resist Retirement Housing, accessed 4 April 2014
<http://www.insidehousing.co.uk/councils-resist-retirement-housing/7002025.article>

4. Active ageing

Q41. How can we make a sustainable shift from cure to prevention? What changes in law, funding and practice are needed to embed such a shift?

4.1 As the King's Fund argued in their April 2013 paper, *Transforming Our Health Care System*, we have to orientate our health system away from the current emphasis on acute and episodic care towards prevention, self-managed care, more consistent standards of primary care, and care that is well co-ordinated. To achieve this, we don't necessarily need new legislation but commissioning practices do need to change. We also need to see a fundamental culture shift in the way we talk about prevention, in the day-to-day management of the NHS, but in politics too. For too long we have prized the hospital over many other forms of care because it is the most familiar symbol of the NHS, but politicians need to talk more frankly about why we need to re-orientate our system away from hospital care to emphasise prevention instead.

4.2 To finally engineer a shift away from crisis care to focus on prevention, we need to see outcome-based commissioning become the norm across health and social care. This means moving away from a system that pays for individual episodes of secondary care and pays for sustained outcomes, such as older people feeling supported to live independently in their own home. Health and Wellbeing Boards could be given even greater responsibility, commissioning a range of services to deliver shared outcomes.

4.3 More controversially, it also means embarking on a programme of disinvestment, freeing resources from hospitals where there are clear clinical grounds for remodelling care and redirecting resources to community settings.

4.4 While we recognise this process will need to be managed carefully and with tact, Independent Age believes politicians (and not just commissioners) have to take responsibility and make a robust case for disinvestment, where it is clinically justified.

4.5 However, this will involve strong political and communication skills to defuse potential resistance to much-needed change. The Nuffield Trust in its 2013 *Reclaiming a Population Health Perspective* research illustrated that successful engagement with patients and the public can often yield a different idea of 'value' in health care: a recent example from Canada found that Canadians valued a health system that was oriented more towards prevention and

wellbeing than towards more traditional values such as hospital access and safety¹⁷.

4.6 Finally, proactive population health management clearly has a role to play in this shift away from cure, to a focus on prevention. Public health monies should continue to be ring-fenced.

Q44. How can Health and Wellbeing Boards and Clinical Commissioning Groups reflect the contribution of relationships and social connectedness into their decisions?

4.7 At Independent Age, we are founder members of the Campaign to End Loneliness based on the understanding that social isolation and loneliness is a key determinant of the current and future health of the older population.

4.8 The campaign seeks to encourage and assist Health and Wellbeing Boards to build social isolation and loneliness considerations into their JSNAs and identify the measurable benefits to longer-term health and quality of life. They suggest a four-step approach to embed these issues into their planning and delivery, drawing on local and national evidence: i) gather information about local needs and assets; ii) feed into strategy and design of services (involving older people); iii) strengthen partnerships across sectors and local authority functions; iv) monitor and evaluate the implementation of local strategies. However, in the most recent figures from the campaign, only 10 joint Health and Wellbeing Strategies have measurable actions or targets on loneliness.

4.9 Health and Wellbeing Boards (HWBs) and Clinical Commissioning Groups (CCGs) can also choose to focus on the measure relating to social isolation in the Adult Social Care Outcomes Framework. In 2014/15, this is the measure that draws on survey data regarding self-reported levels of social contact. It is also contained as a 'placeholder' within the Public Health Outcomes Framework, so it is for HWBs and CCGs to choose whether or not they include this measure as a priority for local action in their joint Health and Wellbeing Strategy. We strongly recommend they do. Longer term, the Department of Health needs to develop new measures that public bodies can prioritise, based on the experiences of adults not in receipt of state-funded care.

¹⁷ *Measuring What Matters: The cost vs. values of health care.* Snowdon A, Schnarr K, Hussein A and Alessi C. Ivey International Centre for Health Innovation, 2012.

Q45. What obligations should be placed on local authorities, health bodies and other public bodies to build social connectedness into the design and delivery of services?

4.10 We believe there is a strong case for local authorities and other public bodies to address issues of social isolation and loneliness as a priority. The work of the Campaign to End Loneliness has been critical in identifying the reasons why this matters as an urgent public health issue, in terms of the very negative impact on mental and physical health of the population. Loneliness has been founded to be as damaging as smoking and obesity. It reduces our life expectancy, increases blood pressure and lessens our chances of recovering from illness¹⁸. Working in partnership across sectors to improve social connectedness among the local population has the potential to alleviate these impacts as well as the resultant demand on a range of public services.

4.11 We agree with the campaign that local authorities should have a clear leadership role in setting this agenda and that “addressing loneliness” should be added as an outcome measure to local authority strategies for ageing. There is a growing body of examples of practical, and often low-cost, interventions to tackle loneliness at a local level which local authorities can draw on in designing and delivering their own services¹⁹.

Q46. How can the NHS better recognise the links between social connectedness and poor physical and mental health among older people and do more to address this issue?

4.12 In a recent survey, GPs reported that between one and five patients they see every day are doing so primarily for reasons of loneliness. We believe that there is a strong case for GPs to refer these individuals to their local social services team, which would also lead to more effective use of GP services. GPs should also signpost individuals to local and national services aimed at improving social connectedness through befriending and/or peer support. This use of social prescribing offers an effective model of preventing ill health or at least reducing its effects and connects people up with non-medical sources of help.

4.13 There will be many other opportunities and trigger points within the NHS system which can be used to refer individuals to appropriate services and ensure that issues of social isolation are taken into account, for example, when making discharge arrangements from hospital.

¹⁸ *Fair Society Health Lives*. Marmot. Institute of Health Equity, 2010.

¹⁹ www.campaigntoendloneliness.org/wp-content/uploads/downloads/2012/03/A-guide-for-local-authorities-combating-loneliness.pdf

Q49. How can we better help individuals (and their families) to be more aware of the health, social care, and financial services they may need at different stages as they age, so that they are well equipped for the future life they expect?

4.14 There are a number of known trigger points over the life course which could provide opportunities to effectively improve people's decision-making and their awareness of their entitlements. These include:

- changing job or moving home after 50
- making a benefit claim (for PIP, Attendance Allowance or Carers Allowance)
- the development of a long-term health condition or discharge from hospital after an acute admission
- divorce
- bereavement
- joining a pension scheme or taking a pension
- redundancy after 50, partial or full retirement
- taking on the care of a parent or family member.

4.15 Key pieces of information which people need to help them plan for later life includes entitlements in relation to benefits and statutory care, support and advice around making an effective and managed transition into retirement and basic financial advice on saving for retirement, as well as access to independent financial advice on financial products.

4.16 In thinking about how to reach people most in need of advice, it will be important to consider the persons and/or places most likely to come into contact them at these and other critical points. This may be a statutory party, such as a local authority, a GP or other NHS professional, other professionals such as a solicitor or funeral director, an employer or a local group or charitable organisation.

Response completed by:

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advice and support for older age

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