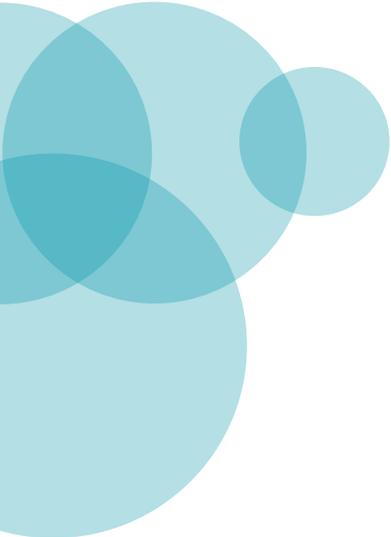




Promising Approaches Revisited:
Supplementary case studies

About us

The Campaign to End Loneliness believe that people of all ages need connections that matter. Having the friendship and support we need is a fundamental part of our wellbeing and when loneliness becomes entrenched in later life it can be hardest to overcome. We do that by evidence-based campaigning, facilitating learning on the front line and connecting different parts of the loneliness community such as academics, front-line practitioners, decision-makers and businesses.



This supplement is a companion piece to the report *Promising Approaches Revisited: Effective action on loneliness in later life*. That report sets out the different elements needed for effective action to reduce loneliness.

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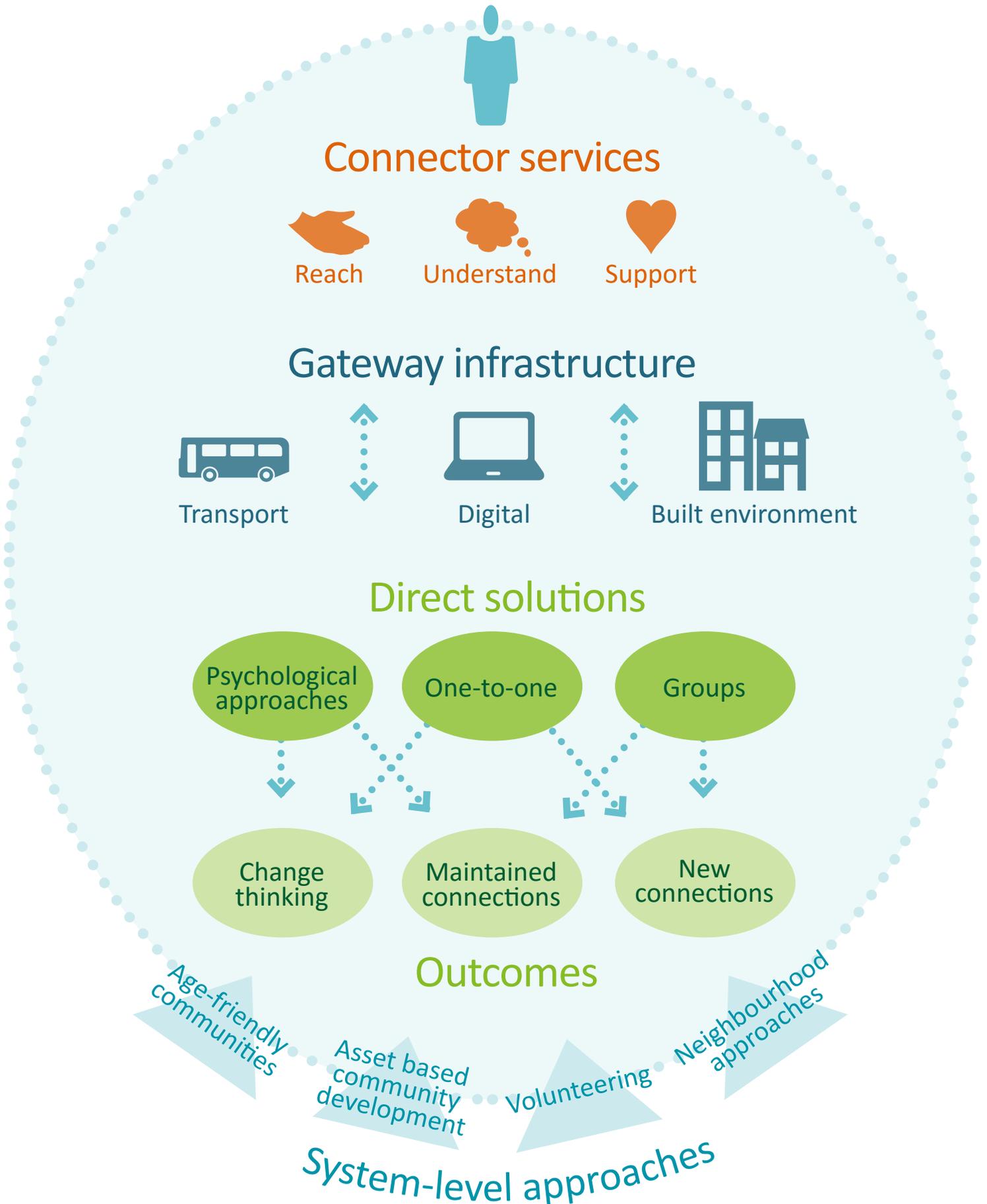
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Promising Approaches Framework



Connector services

Talking and understanding: a personalised response to an individual issue

Because loneliness is a subjective experience based on individual perceptions of the value of different social relationships, and often linked to a range of practical, social and emotional barriers to connection, it requires a personalised response.

Case study 34

East Renfrewshire Talking Points

Talking Points is part of East Renfrewshire's Community Led Support (CLS), introduced in 2017 to provide a new, person-led approach to health and social care. CLS recognises that, for many older people, loneliness and isolation affects – and is affected by – their health and wellbeing. So, connecting people to meaningful activities and support in their communities can improve their quality of life, and prevent or reduce the need for traditional social care.

Talking Points is hosted in local venues – from community cafés to health centres – where residents first have a 'good conversation' about 'what matters to them', whether this is about improving mobility to get out more, making new friends through social activities, or living independently in their own home. There are around 12 sessions every month which are advertised through social media, a community newsletter, and posters so people can choose when and where they want to go. Residents can either pop in for a conversation or can make an appointment via a dedicated telephone line and email address, and are also signposted to a Talking Point by a wide range of partner organisations.

The strength of CLS depends on close collaboration between the community, service providers and public services so Talking Points are staffed by a mixture of third sector and statutory staff (both from the Health and Social Care Partnership and East Renfrewshire Council services), as well as by volunteers.

Following the 'good conversation', people are encouraged to look at what they can do differently, and are connected to whatever community support will work for them – from social activities (such as walking groups) to referrals to organisations such as the Carers' Centre and Recovery Across Mental Health.

The National Development Team for Inclusion's evaluation shows that Talking Points is supporting people to connect socially, and reducing isolation and loneliness:

“ Found the conversation easy and gained a lot of information. Hope to do something new socially.

Service user

Talking Points are also a good way of finding out what connections people want. There are a lot of local groups and activities, but some people just want somewhere they can go to meet others for company. In response to this, Voluntary Action East Renfrewshire (VAER) set up weekly 'Happy to Chat' sessions for two hours with free tea and coffee at three local hotels. Aimed at lonely, isolated older people these have been very successful, attracting 10 to 20 people to each session.

Since the Covid-19 lockdown, Talking Points have been put on hold and replaced by a community hub, run by the community through VAER and supported by the Health and Social Care Partnership and council. Through the Hub, residents can be quickly signposted to the correct support from services if need be while creating new systems such as Prescription Delivery, Welfare Calls and Mask Making. The Hub has received positive feedback about how people shielding or self-isolating can volunteer to phone and befriend others in a similar situation, which helps them feel useful and more connected.

Looking to the future, Talking Points will build on the increased role of the community and volunteers during Covid-19. It's likely some of the digital technology that's come to the fore will also continue but alongside the face-to-face contact that many lonely or isolated people appreciate.

www.ndti.org.uk/resources/publications/paper-5-community-led-support-in-scotland

Case study 35



CETMA LGBTQ+ Project

CETMA Carmarthenshire LGBTQ+ project was set up in August 2019 with the aim of establishing support services and groups for the LGBTQ+ community throughout the county.

The Carmarthenshire LGBTQ+ project is delivered by CETMA (Community Engagement, Technology, Media & Arts), a social enterprise that provides social engagement, training, health and wellbeing support through the development of unique sustainable projects for individuals, organisations and social enterprises based in Llanelli.

Grant funded by the National Lottery Community Fund, the project's main aim is to increase the support services and groups for the LGBTQ+ community, making Carmarthenshire a more inclusive and safe county for all. The project began by setting up a monthly drop-in session for members of the LGBTQ+ community in Llanelli, offering a safe space in which individuals feel welcome, and can seek support, advice and guidance around a wide range of issues including hate crimes.

Since establishing its first drop-in hub in Llanelli, the project has set up a further four hubs across the county: Hywel Dda LGBTQ+ Hub, Teifi LGBTQ+ Hub, Brechfa LGBTQ+ Hub and Sugar Loaf LGBTQ+ Hub. The hubs are currently operating online and are open Monday to Friday, managed by the Project Coordinator. They offer the LGBTQ+ community advice and links to support services that people may need, as well as running workshops on mental health techniques, art therapy and exercise. The hub's activities and services are free and open to any member or ally of the LGBTQ+ community and are kept informal, with no assessment processes for those wishing to get involved.

As Covid-19 restrictions ease, Carmarthenshire LGBTQ+ project aims to establish hubs within the communities, providing coffee mornings, community consultations and face-to-face support. Ultimately the project aims to relinquish control of hubs to local members of the community, for them to operate themselves. In August 2020, Carmarthenshire LGBTQ+ launched a digital library which is a way of supporting the LGBTQ+ community and allies to better access online support and social spaces. The digital library has equipment such as laptops, tablets and portable WiFi hotspots that individuals can borrow.

Carmarthenshire LGBTQ+ Project has developed relationships with a range of key organisations in the area, including Dyfed Powys Police, Carmarthenshire 50+ forums and local authorities. This has helped to raise awareness of the LGBTQ+ community and build positive relationships for local LGBTQ+ residents.

Prior to the Covid-19 crisis, the Project Coordinator regularly attended groups and activities run by community groups and services to share information and raise the profile of the project and the services on offer, among people living in communities across Carmarthenshire. This outreach work also enables the Project Coordinator to meet individuals and build relationships with them, giving them the confidence to participate in activities with the hubs. The project is very active online using social media channels to promote activities and reach a wider audience.

carmslgbtqplus.org.uk/

Case study 36



mPower – Western Isles

Twenty-seven thousand people live on the Western Isles, with a third based in Stornoway and the rest spread across the sparsely populated chain of islands. Older people (65+) make up a quarter of the population and are particularly at risk of isolation and loneliness. mPower is addressing this by enabling adults with long-term conditions to connect to activities and support in their community. This includes introducing people to simple digital health and wellbeing tools and supporting them to learn how to use them.

The project is hosted by NHS Western Isles and staffed by an Implementation Lead and three Community Navigators spread across the islands (one full time, two part time). mPower is funded by the EU (with six other sites in Scotland, Northern Ireland, and the Republic of Ireland) until late 2021, when it is hoped that services introduced by mPower will become business as usual.

A key feature of mPower's approach is to 'focus on each person and what matters to them'. Community navigators find out about groups and networks across the islands so they know about relevant activities to connect people with. They encourage people to participate e.g. join a lunch group, use online shopping, and have introduced people to Facetime calls with friends and relatives as well as using technology to access statutory services and support groups. The specific support actions are agreed with each person through their wellbeing plan.

This service is becoming better known and has 150 to 170 users. This includes a high proportion of older people including people with Parkinson's and in the early stages of dementia. Some users have mild to moderate mental health issues or learning disabilities. Referrals were from GPs and specialist nurses initially, but to widen access mPower now encourages self-referral, including from friends and family.

Users say that the main difference mPower makes is helping them get connected and reducing isolation. Stories tell how people have engaged in community life, such as a woman who can go to a lunch group after being linked with another person to give her a lift, and others finding out about and enjoying 'health walks'.

This support has continued – and developed – during Covid-19. Phones are used for agreeing wellbeing plans and helping people get online, including by setting up a device with the internet already customised to a person's interests e.g. news, church services, so they can just switch it on.

As well as providing individuals with devices, mPower has also been able to offer iPads to the 10 care homes across the Western Isles so that residents can better communicate with their families and GPs – with the Community Navigators helping staff and residents to use the iPads.

Examples of the impact of mPower's support include:

- mPower lent one man a tablet with a WiFi box as he didn't have an internet connection. This meant he could order a new pair of shoes as he was not able to get out to buy them himself. It also enabled him to download books and keep up with the news. He says he feels 'much better' and less isolated.
- One man had lost two very close relatives in quick succession – mPower provided a tablet which gives him access to church services and the news.

western-isles.mpowerhealth.eu/

Case study 37

CLARE-CIC, Northern Ireland

CLARE (Creative Local Action, Responses and Engagement) is a not-for-profit Community Interest Company established in 2013 with part funding from the Public Health Agency and a community social investment loan from Delivering Economic Renewal in Communities (DERIC). CLARE provides a community-based response for isolated older people living within North Belfast.

CLARE works in co-production with isolated older people to design and build personalised support that will fit the unique needs of individuals to help improve wellbeing. The CLARE model encompasses community development worker roles supporting and growing community assets, including a vibrant volunteer base and the skills of a community social worker. The staff team consists of a Project Manager, a Community Volunteer Facilitator, Community Social Workers, a Well-Being Support Worker and an active team of Community Champion Volunteers.

Referrals to CLARE are accepted from any source, although the majority come from the local Integrated Care Teams of the Health and Social Care Trust including specialist mental health and respiratory teams. Nevertheless, self-referrals of people over 65 years, who have little or no support networks and where wellbeing is affected, are also encouraged. The experience of CLARE staff is that this group is the hardest to reach.

Each person referred to CLARE meets with the Community Social Worker – usually over several visits – to talk about their unique life story, focusing on strengths and taking a co-production approach to what they are able to do and what barriers they face to living a more connected life. This creative conversation explores physical and mental wellbeing, mobility, finances, poverty and housing issues as well as levels of social care, support networks and aspirations for community involvement. Key issues emerging from one to one discussions with older people include loneliness, lack of family support or contact, complex physical and mental health issues, and the need for practical help to manage health care appointments and navigate support systems. A living plan is then agreed between the social worker and older person which identifies the services, resources and practical supports to enable individuals to maintain maximum independence to promote choice and control and to improve health and wellbeing. The Living Plan is flexible and can change according to the older person's circumstances and priorities. Importantly, CLARE does not have a set period or format of engagement; instead, it aims to be an easily accessible community resource, journeying with the older person to provide early intervention practice.

Participants are mostly white, drawn from both Protestant/Unionist/Loyalist community and Catholic/Nationalist/Republican community, with sizeable number of Jewish participants (largest Jewish population in Northern Ireland lives in North Belfast). A majority tend to be women. Many of the participants have complex health circumstances, including physical and mental health issues and dementia.

Outcomes of engaging with CLARE are measured in partnership with older people through seeking feedback, gathering stories and use of the Older Person's Outcome Star.

Baseline information is gathered at the beginning of the person's journey with follow up reviews at three and six months. In 2017, 139 isolated older people were supported, of which:

- 60% reported improvements in feeling as well as they could;
- 83% felt better able to keep in touch;
- 67% reported increased feelings of positivity.

CLARE also offered 1,040 hours of community volunteering in 2017.

One CLARE participant, was referred to the scheme after he had put his name down for a local nursing home, feeling lonely and isolated and without hope as a result of reduced mobility and family living away. CLARE matched him with a volunteer who supported him to join a group at the local synagogue, met up with him for coffee in local cafe and supported him to join other groups. As his confidence built his perspective on life turned around. He has now gone on to co-found a Coffee Afternoon in his local community.

clare-cic.org/

Social prescribing

Since publication of the first Promising Approaches guide, there has been a significant upsurge in interest in social prescribing. Ensuring that social prescribing schemes are part of a broader community response is vital to their success.

Case study 38

Rotherham Social Prescribing Service

Rotherham's Social Prescribing Service has been operating for eight years. Initially funded by the Clinical Commissioning Group (CCG) and now by the Better Care Fund, the scheme provides case management for the 5% of people with long-term conditions who are at the highest risk of unplanned hospital admission. The scheme is managed by Voluntary Action Rotherham (VAR) – a local infrastructure organisation which employs staff and distributes funding among the scheme's wide range of voluntary and community sector partners – and works with individuals to address their practical, social and emotional needs, identifying support in the community which can help them stay connected and well.

Initially, 10 GP practices in the community were involved in a pilot and now all 31 practices are part of the services. The scheme is managed and coordinated by VAR, and GP practices are funded by the CCG for their role in the scheme – in particular their participation in monthly meetings bringing together primary care professionals with voluntary and community sector advisers.

People are referred into the scheme based on a risk stratification tool. The scheme also now works with people who use secondary mental health services. There are seven voluntary and community sector (VCS) advisers, employed as part of VAR's Social Prescribing team, working across the long-term conditions cohort. Two advisers also focus on patients with mental health issues referred via Community Mental Health teams.

In addition to funding for VAR's management and social prescribing team (which consists of a service manager, seven VCS sector advisers and an administration & support officer), the scheme also holds a £420,000 annual pot to commission and support voluntary and community sector activities for clients of the service. Commissioned services include welfare benefits support, befriending services, advocacy and a range of enabling services. There are also Pathway Groups (nature, craft and complementary therapies) which offer people a 12-week programme of support introducing them to a range of activities in the community. VAR also provides funds for community hubs – typically community groups and organisations closer to the people living in their communities. Community hubs are better placed to understand the needs of local people and, with funding, are able to develop new services and activities and support community development. The Social Prescribing Service is an integral part of VAR's wider work supporting the voluntary and community sector in Rotherham. VAR has a wide range of wider support services including a Volunteer Centre, a Neighbourhood Development Worker, a Children and Young People's Consortium Manager, an Arts Development Strategic Lead and a Be Cancer Safe team.

Most of the funding from the Social Prescribing Service is used to commission services provided by voluntary, community and social enterprise (VCSE) sector providers, although there is a small pot

available for spot purchasing. Annual commissioning and the funding involved through social prescribing contracts have enabled the local VCSE sector to develop and grow.

The scheme covers targeted patients in primary care, registered with a GP in the Rotherham Borough. Most of the service users who are referred by GPs in the long-term conditions scheme tend to be older people, with the most typical age group being 80 to 85. Ethnicity data shows that BAME people are underrepresented among service users. However, the scheme is working to address this by building stronger links with GPs in communities serving BAME populations which tend to make fewer referrals. Two thirds of referrals are female with one third being male.

The total cost of both schemes (long-term conditions and mental health) is £750,000 per annum. Ongoing independent evaluations have demonstrated that both schemes make a significant impact on health system usage.

Service user outcomes across both schemes are measured using a specially developed wellbeing outcomes tool. Loneliness is often a key issue for service users being referred to the service. Spending a bit of time with people can reap rewards in terms of helping people to unpack many of the non-medical barriers they face.

Evaluation from 2016 by Sheffield Hallam University showed that across all service users:

- non-elective inpatient episodes were reduced by 7%
- non-elective inpatient spells were reduced by 11%
- Accident and Emergency attendances were reduced by 17%

It found that the reductions in health system usage were greater among younger participants in the scheme. The evaluation also found that ‘social prescribing is particularly effective at improving wellbeing, and reducing social isolation and loneliness for people with long-term conditions, enabling them to become more independent and engaged in their community’.

“You have done a vital job in supporting me and I want to make you aware of my gratitude. Life hasn’t always been this hard for me and although it’s “just a phone call”, the effects of the contact are immeasurable when dealing with acute loneliness. I have gone from being a “social butterfly” to a virtual recluse. I am becoming adjusted to my new reality and your input and support gives me the impetus to carry myself forward towards the light at the end of the tunnel. I hope you realise that the role which you play in people’s life gives reason and value. You are doing a GRAND JOB!

Written feedback from a service user referred to a commissioned enabling service by VAR’s social prescriber (VCS adviser).

Alongside its Social Prescribing Service, VAR also provides a new Link Worker service for their local Primary Care Networks. The link workers are based in GP practices and serve a broader cohort of people than the Social Prescribing Service. Because the Link Worker service does not have access to a service commissioning arm, the Link workers take on a more direct support worker role themselves, whereas VCS advisers employed in the Social Prescribing Service normally refer assessed patients to specialised providers funded by VAR for time-limited support within the Social Prescribing Service.

www.varotherham.org.uk/social-prescribing-service/

Direct solutions

Supporting new social connections: Group-based approaches

Different group types will suit different individuals, not just because people have diverse interests and motivations for getting involved, but also because they want to connect in a range of ways. Cases 39 – 46 feature in a table in the main *Promising Approaches Revisited* report. The table, on p33, is a snapshot of some of the different types of group-based activity available.

Case study 39



North East Young Lads and Dads project

The 'Lads, Dads and Loneliness' project was funded through the Space to Connect Fund, to engage young men involved in the North East Young Dads and Lads group in peer research around the experience of loneliness. The group is made up of young dads, aged between 16 and 25. It is based in Gateshead but works with young men across the north-east. Young men are referred through linked projects with young women, family nurse partnerships, sexual health clinics, children and young people's organisations and also come via self-referral.

The Loneliness Project involved young men in exploring their own and others' experiences of loneliness through questionnaires and discussions. As part of this work the men made contact with Men's Sheds in Blaydon and Chopwell, spending time with older men who were involved with the Sheds. The younger and older men engaged in conversations over tea and biscuits around their experiences as men, and as fathers, of loneliness. Participants of all ages found these conversations engaging and found they had a lot of shared experiences.

Unfortunately changes to the operating model of the Men's Sheds meant that the groups have not been able to keep up links. A key finding from the research was the key role played by digital tools in supporting young men to connect – online gaming was found to be a key source of connection for the men involved. The project also helped the young men to open up about their experiences and how being part of a group helped them.

“We feel downgraded if it's just like a dad and a baby out because we feel as if we're judged upon. So that's why we come to these groups and that so we can see other dads that feel like that. We open up a lot so we get a lot more friendship out of it.

Participant

www.neydl.uk/

Case study 40



Men in Sheds / Tools Company – Age UK Exeter

Age UK Exeter's Men in Sheds scheme was set up to offer a facility for men aged over 50 to meet for a few hours a week in the familiar environment of a shed or workshop. The men come together to socialise over refurbishing and renovating tools and garden equipment.

Now in its ninth year, the Men in Sheds project provides camaraderie, mutual support and a sense of purpose for around 60 older men each week, many of whom live alone and have underlying health conditions.

The project relies on the generosity of the public to donate old tools and garden equipment, which the men collect in their own branded van purchased with a donation from the charitable foundation of the local rugby club, the Exeter Chiefs. The tools are cleaned and refurbished and sold to the public from a shop managed by the men in the centre of Exeter. The men also make wooden items like bird and bug boxes, garden trugs, and garden benches using woodwork equipment also donated by Exeter Chiefs Foundation.

The project is funded by a grant from the local Phoebe Wortley-Talbot Charitable Trust and sales from the Men in Sheds shop which grossed over £60,000 in the last financial year.

The project offers a clear win-win:

- Men enjoy meaningful activity that helps others, at the same time as making new friends and enjoying company. The sense of giving rather than taking is good for their self-esteem and wellbeing
- The public can donate tools knowing they will be refurbished, and sold on to be used again. The scheme often receives donations from bereaved people who are happy to know that their loved one's cherished equipment will continue to do good
- Items are recycled rather than going to landfill
- Age UK Exeter benefits from connecting with isolated older men whom it had struggled to reach, and the project's income covers its own costs, and helps fund additional charitable projects provided by the charity across the city

The Shed operates four days a week. For two days, the project is open to men who can manage the work and environment independently and on the other two days it offers a more managed environment so that men with physical disabilities and/or mental health needs can safely enjoy the shed – this is Tools Company. Through this programme, two members of staff and a number of volunteers provide support for older men who would not otherwise be able to access the Shed.

The scheme is widely advertised on posters and in local media etc. Older men are referred to the scheme by mental health teams, social services, Age UK Exeter and the Royal Devon and Exeter Hospital. The scheme also accepts self-referrals. It has

attracted men who have not attended and do not want to attend day centres, clubs and other activities where the primary focus is on chat and more passive socialising.

An initial pilot of the scheme, funded by Nesta, was evaluated, and demonstrated that participation in Tools Company resulted in:

- An increase in the amount of time in which older men were engaged in meaningful activities each week
- Reduced feelings of loneliness and isolation among all participants
- Increased social contact and lasting friendships between older men

“I lost my wife a couple of years ago and it’s helped me feel a lot better. I still get very lonely and feel the loss but working here has helped me 100%.

Participant

www.ageuk.org.uk/exeter/our-services/men-in-sheds/

Case study 41



Jazz Up Your Life

Jazz Up Your Life is a community dance event which takes place on a Monday afternoon every month in Leighton Linlade. It brings together people who live in care homes with members of the community, and the local time bank, to build connections, and have fun through dance and over a cup of tea.

Jazz Up Your Life is run by Community Action Bedfordshire (CAB), a charity which works closely with communities across central Bedfordshire. The project started in 2019 when CAB received funding from Timebanking UK as part of the National Lottery-funded Time to Connect programme which aimed to connect people from residential care settings with their local communities through time banks. Time banks are groups of people who exchange skills for time rather than money and CAB already had an established time bank in Leighton Linlade.

Members of CAB started to explore what they could do to bring people within residential care settings together with the wider community. They did this in collaboration with care home activity coordinators and their residents, time bank members and the local social prescribing team.

Building on CAB's existing networks and connections, they decided on a community dance event. The activity is led by a community orientated dance company that provides opportunities to include everyone, from people who just want to watch and people in wheelchairs as well as people who want to join in. Anyone who wants to take part, can. In addition to the dancing, the event provides a social environment by setting up tables, and providing tea, coffee and cakes and space for people to mix. The event is managed by the CAB staff, and time bank members help out by welcoming people, getting tea and coffee, and chatting to people attending.

Getting residents to the venue was a challenge for care homes, so CAB worked with the Leighton Linlade community transport provider and, at a reduced rate, has paid for the travel for care home residents. The event is also supported by local businesses who donate refreshments and raffle prizes at the monthly gathering. The community centre venue has also supported the project by providing a free room.

The event was called Jazz Up Your Life after a couple of pilot events with the intention of making it feel inclusive to everyone. CAB also found that using lots of images of the event would help people to see what was involved and this captured people's interest, especially from within other care homes in the community. Between October 2019 and March 2020, Jazz Up Your Life had between 44 and 60 people attending each month, including community members, residents and staff from five care homes and time bank members. It has become so popular that they are considering a booking system to manage capacity.

The event is open to anyone (but is not suitable for young children). The majority of people attending are older but people of all ages from the community, the time bank and the dance group come along. They use the Nextdoor App, social media, and the town council's monthly newsletter to promote the event. Referrals for the event are received from the time bank at the social prescribing team in the GP surgery which looks for social activities for lonely and isolated people.

Community members and care home residents pay £2 to join in and it is free for paid and unpaid carers. This money is reinvested in future events. The costs, including CAB staff and transport, were initially funded for 18 months through the Time to Connect project. At the end of this period, CAB received funding from Leighton Linlade Town Council and the Morrisons Foundation to continue to cover these costs and run events for another 18 months.

Staff described their residents as 'coming alive' and said it was like 'a switch had been turned on' when they arrived at the dance. People have built friendships from attending the events, and have met up outside the monthly activity (in the community and in the care home). The activity allowed care home staff to see what residents were capable of, which led them to explore other community activities and interests their residents might want to pursue.

“It's such an exciting positive event that brings out the best in people.

Care home member of staff

www.cabeds.org.uk

Case study 42



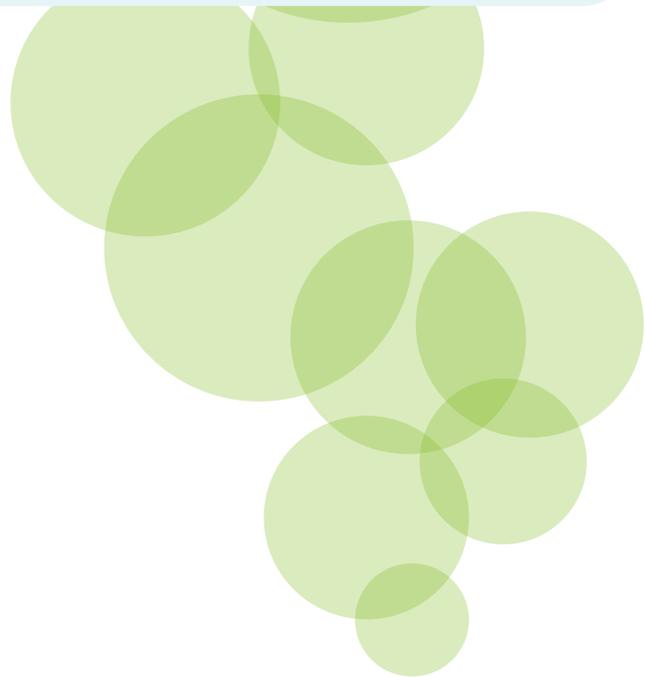
PALS Group

The PALS Group is a social group for local residents of Milford Haven, Pembrokeshire that meets every Wednesday morning. Supported by two volunteers, the group offers people a chance to play board games, knit or simply chat over a hot drink in the local community centre.

The group was initially set up by a project coordinator through a National Lottery funded project called Rural Wisdom. Rural Wisdom aims to make rural communities work well for people as they get older, and for other people who live in the area. Since March 2015, the group has been running with the support of two people who were initially members but offered to take over from the project coordinator. The group welcomes everyone. They have had a flyer in GP surgeries and libraries advertising the activity, but also rely on word of mouth.

Most people attending are older, and have a range of health conditions and disabilities. People can come with a carer or family member, or on their own but they need to make their own way there. There are usually 12 regular attendees, and each pays £1 to cover refreshments costs. The community centre does not charge for the hire of the room. There is no formal monitoring or evaluation but the volunteers hear anecdotally from those attending about the difference it makes, how they enjoy attending, and how they feel looked after.

ruralwisdom.org/



Case study 43



HereNI

HereNI works with lesbian and bisexual women aged 18 and over, and their families, to improve the lives of lesbian and bisexual women across Northern Ireland. HereNI provides direct services and supports lesbian and bisexual women to build their confidence to access services within their own communities.

Most people who come to HereNI start with a one-to-one meeting, during which a health and wellbeing assessment of need form is completed. The assessment process helps women to identify appropriate services and activities for them, and staff then support them to get involved – including by accompanying them on their first visit to groups where this is appropriate and needed.

HereNI provides a range of services including: The WOW Group: an informal, friendly space for older lesbian and bisexual women to meet, socialise and chat about things that are important to them. The group meets monthly and has over 60 members, with an average of 10 women attending each meeting.

- Weekly coffee hour, with women from their 20s to 70+
- A carers group for women providing care to parents, a partner, etc
- One to one support – which has been provided via phone or video call since the Covid-19 pandemic
- Gendered violence project in partnership with Carafriend (a Northern Ireland LGBTQ+ youth group) to support those who are experiencing or have experienced abuse

Promotion and visibility of the organisation and services is very important in terms of reaching women who may be feeling lonely or isolated. The organisation has strong links across the NGO sector; and regularly delivers presentations and training to professionals on sexual orientation awareness, domestic violence etc., and sets up promotion stalls at local events, including hospitals, and NI Prides.

HereNI receives referrals/signposting from NGOs, including mental health charities, LGBT and women's sector organisations, and wider third sector organisations. It also accepts self-referrals.

The organisation receives no government funding, but is supported by funders including the Esmee Fairbain Foundation; Tudor Trust; National Lottery Community Fund; Heritage Lottery Fund; and Joseph Rowntree Trust.

Impact is measured by staff, who carry out evaluation in most sessions, including asking users whether they feel less isolated. Feedback suggests that participants feel comfortable and safe in the group, and feel less isolated.

“I was a bag of nerves. I was shaking like a leaf and so frightened within myself. This has given me so much confidence and made a big difference to me.

Service user

here875008472.wordpress.com/

Case study 44



Sporting Memories

Sporting Memories provides opportunities for people to connect and build friendships through a passion for sport. Their 125 community clubs across Scotland, Wales and England are hosted in a variety of settings across the community from sport clubs to community centres to local libraries and church halls. They have 265 volunteers trained in Sports Reminiscence and there were 56,700 individual attendances at clubs in 2019.

The Sporting Memories Foundation is a charitable organisation which has its own community clubs led by volunteers and paid staff. The model they employ in every club is based on some essential elements: Clubs meet at least once a week. This is essential to help establish a routine for people; it is also important for cognitive and physical resilience. In addition to face-to-face meetings, they are exploring how to increase engagement through home-based activities between the weekly club meetings.

- Clubs are inclusive and are promoted accordingly. They use sport as the hook – ‘if you love sport come for a chat.’ They have an open call which invites people in a way which is inclusive and friendly. This is important to the group’s aims around boosting confidence, and building peer support and friendship. People with long-term conditions can be very low in confidence so drawing them out to a group can be a massive achievement
- Taking a person-centred approach, and providing a mix of activities that gives every person a time to shine in the session so that they can build their confidence. This is achieved through skilled facilitation, and using a framework and toolbox of resources to deliver sessions that involve everyone. The routine and familiar cues are also key in helping people feel comfortable

Sporting Memories seeks to achieve four outcomes across their work: improving mental wellbeing, improving physical wellbeing, reducing loneliness and isolation, and connecting people with wider social and health networks. The groups are for men and women, and can be as small as four or five people or up to 16, including volunteers, carers and a member of staff. While the groups are targeted at people aged over 50 years, most of the members are over 60. Every group is different depending on where it is and who joins. The settings are chosen based on the target demographic in the area, and accessibility. Spaces are light and airy, and big enough to allow physical activity without interruptions. Venues include church halls, sports clubs, leisure centres, sheltered accommodation, day centres, social clubs and libraries. Many provide space at no cost, as part of their broader commitment to community engagement. The sessions include a combination of cognitive, social and physical activities.

Sporting Memories started out with a focus on reminiscence for people with dementia, but offers opportunities for older people with or without health conditions to come together. People are referred from a wide range of organisations and also via self-referral.

Clubs are funded in various ways, and continue when funding comes to an end. The oldest clubs are eight years old and have been running since the charity began. Sporting Memories is planning on capturing data using the ONS 4 questions on personal wellbeing as a key part of their own evaluation activity.

www.sportingmemoriesnetwork.com

Case study 45



Sage

Sage is a social group which aims to help reduce social isolation and loneliness among the older (50+) LGBT+ community in Leeds. It is hosted by MESMAC (a sexual health organisation) with input from Age UK Leeds and is funded through the National Lottery Community Fund as part of the 'Time to Shine' project.

The group has a part-time community development worker who supports the group and facilitates the twice monthly social meet-ups at MESMAC's premises in Leeds city centre. Around 16 to 20 people come to each session for coffee/tea and a chat. They also enjoy day trips out and pub lunches and recently held a 'Valentine's Day cooking session'. The coordinator notices that 'people change in a different setting – some are more confident in pubs or restaurants.'

Sage aims to be inclusive – members are warm and friendly and they encourage all LGBT+ community members to join their project. The majority of members are currently white gay men aged between 50 and 90 years. However, there is an aspiration to attract a wider demographic including BAME people. Many members have faced mental health challenges but fewer have physical health conditions.

Sage's main aim is to provide a safe space to socialise and meet new people. Some of Sage's members socialise with each other outside Sage. One man said:

“I've never been able to be open about myself but I feel comfortable here [in Sage]

The Covid-19 lockdown has increased the 'internal loneliness' of many group members as most live alone, some have been shielding or self-isolating and others don't feel confident talking to their neighbours if they are not out with their sexuality.

Although not everyone has been able to use Zoom during Covid-19, moving online has benefited some members who are less mobile or lack confidence in a physical group. So, Sage hopes to continue some online activity as well as wanting to restart the face-to-face sessions and trips out.

www.mesmac.co.uk/our-services/leeds/sage

Case study 46

Project 360°

Project 360° is a national partnership project led by Age Cymru, alongside veterans' charity Woody's Lodge, and members of Age Alliance Wales. In Wales there are 210,000 veterans with over half of these aged 75 or over. The project was set up to improve services provided to older veterans in Wales. It was funded for three years from April 2017 by the Aged Veterans Fund.

As part of the project, Project 360° manages a grant programme for members of Age Alliance Wales – an alliance of 21 national voluntary organisations – to maintain, expand or provide new services, activities, events and resources for military veterans aged 65 or over in Wales, in line with needs identified through research with over 1,000 veterans aged 65 or over and their carers across Wales.

Project 360° has also brought the combined services of Age Cymru and Age Alliance Wales to veterans attending Woody's Lodge, a charity which provides a welcoming space for individuals to socialise and gain access to relevant services.

Woody's Lodge has two main hubs, one based at Amelia Trust Farm near Barry in south Wales, and one in Eirias Park, in Colwyn Bay. They also run weekly drop-in sessions across Wales, where veterans can access advice and support or just pop in for a chat. In its first year the drop-in centres were used 2,500 times by older veterans who have enjoyed a sense of camaraderie and community.

Project 360° has funded further Woody's Lodge hubs and additional drop-in centres in locations across north Wales and south Wales, including Rhyl, Llangefni, Shotton, Pwllheli and Caernarfon. Woody's Lodge drop-in centres have provided a valuable way for Age Cymru and Project 360° to reach out to the veteran community in Wales.

“I see Woody's as my second family and has been a lifeline during the difficult years of looking after my Diane, I love talking to my RAF colleagues and listening to other veterans' experiences both young and senior.

Service user

After Project 360° ends, Woody's Lodge will use ongoing funding to continue their support for armed service veterans, recent leavers, reservists and those serving in the emergency services across Wales.

www.woodyslodge.org/

One-to-one approaches

For those who are unable to connect socially with groups outside, long-term one-to-one friendship support at home has long been the only available solution.

Case study 47

Check in and Chat – Age NI

Age NI's Check in and Chat (CHIC) regional telephone service for the over 60s, is a weekly telephone support service provided through a network of Access NI-checked volunteers. The service, established with support from the Commissioner for Older People for Northern Ireland (COPNI) in response to the Covid-19 crisis, aims to: reduce isolation and loneliness; increase social contact; be something to look forward to; help people feel more safe and secure; and improve older people's ability to live independently.

Check in and Chat was developed by Age NI's Business Development Manager with support from the CHIC Coordinator to oversee day-to-day activities, and the Age NI Volunteer Coordinator.

The process begins when an older person/family member/social worker contacts Age NI to request help. The CHIC Coordinator conducts an initial health and wellbeing assessment and matches the older person with a volunteer with similar interests. The volunteer then arranges with the older person a time to call every week. If the person has more complex needs, they are referred to Age NI's First Connect service which provides more intensive support, for example daily calls and access to additional services if required.

The Check in and Chat service has supported over 150 older people; with 166 volunteers involved in delivering the service, 120 of whom were new recruits who came forward during Covid-19.

All new volunteers are guided through Age NI's volunteer induction process, amended in light of Covid-19. They complete an application form; are interviewed; Access NI-checked to comply with safeguarding procedures; complete GDPR requirements; and receive training and supervision from Age NI's CHIC Coordinator. The volunteers are provided with prompts to guide them through their conversations, for example checking that the older person has food and medication, as well as how to make general chat and listen. They are also trained about when to seek help from Age NI staff. The volunteers also have access to Age NI's directory of local services which is updated regularly – including local community groups and clubs providing services, local shops, churches, food banks, Advice NI etc. All interactions are captured in Age NI's internal IT recording system.

The CHIC service was running within one week of the start of lockdown and this was possible in large part because Age NI had a cohort of existing volunteers who were trained, security checked, and confident to undertake weekly telephone chats with members of the public who were calling into the office in crisis and did not know where to turn. In the initial stages of lockdown, all members of staff took part in fielding calls.

The CHIC service was widely promoted through regional television, radio and print media; the Age NI website; the COPNI website; and statutory services.

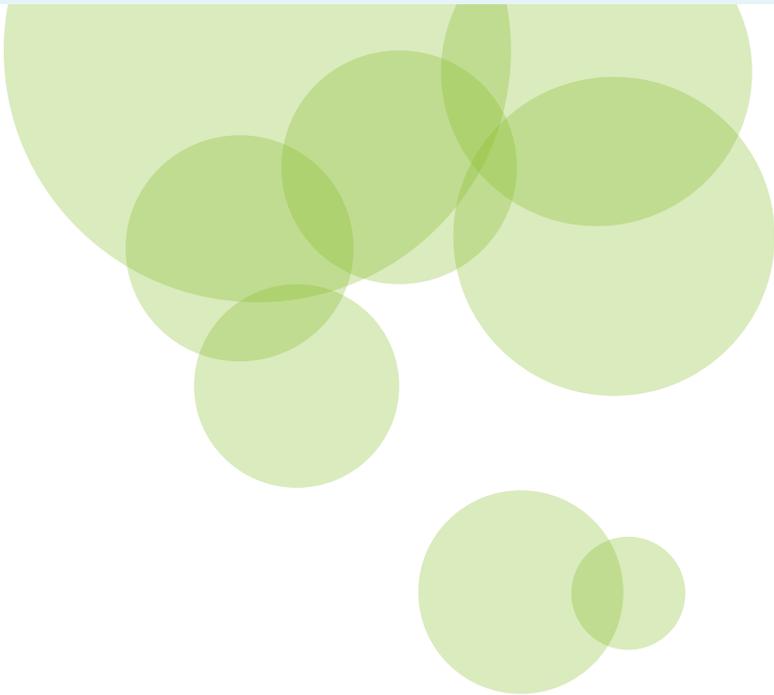
Impact is currently measured through completion of client questionnaires, and reveal that during the month of May 2020, 89% of service users experienced less loneliness and isolation; 100% felt listened to and supported; 94% were very satisfied with the service; 50% got information that they could use; and 78% said it had increased their social contact.

Conscious that volunteer retention may become an issue as people return to work, Age NI are supporting volunteers to flex their roles for example, talking to older people about changing call times to fit around work.

Age NI hopes to embed the CHIC service into Age NI's Wellbeing Services in the future.

Annie is 90 years old; she is widowed and lives alone in Belfast. While she normally has a good social life her friends didn't have much to talk about during lockdown as they were all indoors. Annie was referred to CHIC by her daughter, her main carer, in April 2020, and was matched with a CHIC volunteer called John. Annie says John's calls mean a lot to her as he brings something fresh and different each week, and she loves that they have similar interests.

www.ageuk.org.uk/northern-ireland/information-advice/coronavirus-covid-19/check-in-and-chat/



Gateway infrastructure

Digital access

The impact of technology on loneliness has long divided opinion. Digital technology can enable people to maintain and deepen connections but it cannot be seen as a substitute for face-to-face contact.

Case study 48



Essex County Council, Kent County Council and Suffolk County Council: Keeping people connected during Covid-19

As the UK entered into lockdown, Essex County Council, Kent County Council and Suffolk County Council committed to providing care technology to providers, and to vulnerable local people, to support them during Covid-19.

They commissioned technology company Alcove, and transformation consultancy RETHINK Partners to deliver 5,000 Video Carephone devices across the three counties to ensure vulnerable people stayed connected during the outbreak.

Through the Video Carephone, health and care workers, family members and other approved services can contact a recipient and vice versa through a video call. The device is locked down and simple to use for people with little or no technical knowledge. Only approved responders can use the device and it also has a SIM card pre-installed so that the recipient does not require WiFi. The user can make video calls by simply touching one of the tiles on the screen. Approved health and care workers and family members are given access to an app and portal to be able to make reciprocal video calls using their own devices.

All three councils acted at pace to plan and implement the programme while working remotely. Initially, and as part of the change management programme, the internal teams engaged with a wide variety of stakeholders and partners to identify the types of people who would get the most benefit from the device. These included those who were shielding, were in receipt of care services, and those at most risk of social isolation and loneliness. The councils reached out to a wide range of service users: older people, adults with learning disabilities, people living with a mental health condition, carers. They particularly targeted people who did not have access to mainstream consumer technology and whose loneliness and isolation during Covid-19 was increased because they were also digitally excluded.

They then mapped out how to reach those groups to provide a device and get them activated in a timely fashion. By engaging with care providers, social workers, commissioners, NHS organisations and the voluntary sector, they quickly set up a network of people who could refer the most vulnerable to receive devices.

In four months, 3,000 devices had been sent out and have been, or are being, set up to be used in the community. In the same period, over 5,000 individual carers, family members and friends have been contacted and added to their respective Carephones. Positive user experiences are emerging and will be used to track the benefits over the longer term.

The greatest emerging benefit is how the technology is helping to reduce loneliness and isolation and the positive impact this is having on people's mental health and wellbeing, especially for those who have been particularly hard hit by Covid-19 restrictions.

Other opportunities are now being explored with residential care homes and sheltered accommodation units adopting devices to be used by residents, and to help interaction with their family members and support workers as face-to-face visits continue to be limited. The use of the devices to support therapies, health appointments and voluntary services are also being identified. All councils have been surprised at where the pattern of loneliness and isolation that has emerged; for example people living in collective housing – care homes and sheltered housing – are just as likely to be isolated from loved ones and friends as people living independently at home.

As the Covid-19 landscape shifts, the councils are continually adjusting their approach to act proactively. This includes looking at how the technology can support system-wide resilience during the ongoing coronavirus crisis and how this fits into winter pressures across health and social care.

The councils are also capturing some vital lessons which will enhance any future care technology programmes and ensure their sustainability for the future.

“It is great to be able to chat with my daughter and carers. If I want to speak to them, I just press the button and I can tell them all about the things I have done in the past and the people I have met in my life. It's great to have the device so I don't get lonely or bored.

Victor, 90, from Essex

www.rethinkpartners.co.uk/

Case study 49

Digital Communities Wales – Digital Confidence, Health and Wellbeing

Digital Communities Wales – Digital Confidence, Health and Wellbeing is a Welsh Government funded programme delivered by the Wales Co-operative Centre in partnership with the Good Things Foundation and Swansea University. The programme aims to reduce digital exclusion in Wales.

A three-year programme, Digital Communities Wales, focuses on getting people online confidently and developing their digital skills to allow them to adapt and work confidently as the world becomes more digitally reliant.

Organisations can access Digital Communities Wales free of charge and clients tend to be those who support older people, social housing tenants, people with disabilities, and people who have recently become unemployed or are economically inactive. During the Covid-19 pandemic care homes were identified as a priority – due to the need for residents to stay in touch with loved ones and to access health and wellbeing services. The project distributed 1,000 new tablets to care homes across Wales as part of the Welsh Government’s pandemic response.

Digital Communities Wales coordinate a range of volunteering initiatives around digital skills including **Digital Heroes**, which trains young people in schools and colleges to work with older people, **Digital Champions**, in which volunteers are placed with host organisations to deliver digital support or pass on their digital skills, and **Digital Companions**, in which a trusted friend or family member works with their older relatives and friends to help them overcome fears and build digital confidence.

Staff based at the Wales Co-operative Centre deliver bespoke support to organisations across Wales to help them embed digital inclusion into their strategies and practices and engage with digitally excluded individuals. They also work with third and public sector bodies, including health and social care providers, and large private sector organisations to support them with improving digital inclusion. The team also engage with partners and communities, working from hubs in Caerphilly, Swansea, Carmarthen and Bangor.

Digital Inclusion Training is delivered by Digital Communities Wales to staff and volunteers including clinical staff and health professionals, carers, advisers and librarians to give them the confidence, skills and knowledge to use technology themselves and help others do the same. Programmes have been delivered remotely since the start of the Covid-19 pandemic.

“I have a laptop and I just live by myself ever since my wife passed away. I thought having a laptop would keep me busy, and I was right. I could spend hours reading about history and the internet lets me do that very easily. The time just flies! I think I will buy a tablet since trying one, because I want to use Ebay and think having a tablet with a camera will make it easier to sell things.”

Computer Confidence Club member, aged 86

Digital Communities Wales understands that tech is not always the solution and that a creative approach is often needed for individuals. The staff and volunteers they work with are trained to take a user-centred approach, ensuring that the core problem has been identified before prescribing technology. This approach has enabled staff to discover a variety of ways that users can feel empowered when going digital, with innovations such as VR headsets in one case helping to increase relaxation and improve mental wellbeing, consequently reducing an individual's need for sedative medications.

www.digitalcommunities.gov.wales/

Case study 50



Parkinson's UK Forum

Parkinson's UK online forum community provides information and peer support to people affected by Parkinson's – those with a diagnosis and their family as well as friends and carers. The forum has been running since 2012 and now has a thriving community of 12,000 members. Anyone can visit the forum online to find information about Parkinson's, including how to contact local advisers, and read the threads on various topics (although you have to be a member to contribute).

Members do not use their real names or give any personal details but it is possible to message someone privately to make friends. Posts show that the forum is giving support to people who are lonely or isolated. This extract (with all names anonymised) illustrates the support coming from Parkinson's UK and other members:

“The feeling of isolation is hard. My GP feels that I do not need a Parkinson's group yet. This is all very well, but it's hard enough coming to terms without feeling on your own. At the moment, I am still keeping it all to myself, only my husband and one good friend know. I've not told my kids.....

[Person A]

Hi [Person A],
I'm sorry to hear that you are feeling isolated. Please do have a look on our website for some ways to find support and share experiences with others:
<https://www.parkinsons.org.uk/content/support-you>
Best wishes,

[Person B]

Hello [Person A]
Your description of your case of PD reminds me of my own. I was diagnosed one month before my son's wedding After the honeymoon, I confided in my son and his wife. But it took me five or six months more before I felt I had adjusted to life with PD enough to share information with friends and acquaintances. That was 14 years ago! ... Believe me, the feeling of isolation will eventually go away. And if joining a group and sharing ideas and experiences would be beneficial to you, by all means JOIN. I do hope this forum helps, too. It's a support group that allows anonymity and can provide you with a lot of laughter as well. Best of luck

[Person C]

Two sections of the online forum are 'private' and just for members to enable closer connection. One is a poetry section and, since Covid-19 and lockdown, a second has been started for family, friends and carers. Isolation is a key issue discussed in this forum:

It's my partner [with Parkinson's]. But one family never approved of the relationship and the other's not interested in this. Close friends from before have gone by the wayside since we moved, buried ourselves in careers (before she left her job and this disaster struck), so the friends we have now are pretty superficial and not close enough to confide in about personal stuff. That's why the feeling of loneliness really gets amplified at times. But I know even though you can't keep it in all the time and have to get it all out as well, I can't grumble too much all the time.

(Forum user D)

Since Covid-19, the volume of posts on all sections of the forum has increased although the themes and queries have not been dissimilar to before lockdown. Covid-19 has had a huge practical and emotional impact on people affected by Parkinson's and there is a lack of clarity particularly around who is shielding or self-isolating.

I am quite different – diagnosed earlier this year, now 83, but have found the Forum to be a lifeline – lots of people with similar, and different problems, but all willing to help.

(Forum user E)

forum.parkinsons.org.uk/

The built environment

People need places and spaces in which to connect in their communities, and the quality of the design and the accessibility of the built environment could either enable or disable people in connecting with one another.

Case study 51



Chatty Cafés

The Chatty Café scheme was developed after its founder recognised that many people who visited coffee shops and cafés might benefit from chatting with others, but might feel too shy to start a conversation. The scheme sends cafés all the materials they need to set up a ‘chatter and natter’ table, at which customers are encouraged to sit if they are open to chatting to someone else.

Cafés can register with the scheme for an annual fee of £20, for which they receive a pack to support them with designating a table and advertising their participation. The scheme is run by the Chatty Café CIC, which received seed funding to produce the first packs from Oldham Borough Council, and won a prize of £7,500 from the International Longevity Centre/Just Retirement Innovating for Ageing competition.

There are now over 1,400 Chatty Café venues in the UK and the scheme has been rolled out to Australia, Poland, Gibraltar and Canada. In the UK, Chatty Cafés has been taken up by a number of large chains including Waitrose, Sainsbury’s, Waterstones and Costa Coffee, which has tables in 440 branches. The scheme has also partnered with local leaders, including the Mayor of the West Midlands, who has encouraged organisations across the region to get involved.

Customers hear about Chatty Café tables through word of mouth, the media and social media. People can search for venues on the Chatty Café website. Equally vital in making the scheme work are the staff and management of the cafés involved. Their commitment is a major factor in determining whether tables are used. Some cafés are very proactive – putting on activities for people to take part in while at the tables, and promoting the scheme widely.

Staff turnover can be an issue in ensuring tables are promoted, so Chatty Cafés is in the process of introducing an Ambassador scheme – a team of volunteers who will support the programme in encouraging new sign-ups and supporting cafés already involved.

Gathering data on the impact of Chatty Cafés has been a challenge but plans were being put in place to start light touch data gathering when Covid-19 forced cafés to

close. These plans will be revisited when lockdown ends. However, feedback from café managers suggests that the scheme led to a reduction in the numbers of customers sitting alone at tables, and that customers at ‘chatter and natter’ tables spend more time and money as they are enjoying themselves.

“

I love to sit at the table and meet new people.

Joan from Dorset

“

I often sit at the ‘chatter and natter’ table in my local café, sometimes the owner has to pull up another table to fit everyone round! I live alone so for me it really does help.

Richard from Lancaster

thechattycafescheme.com/uk/

Case study 52

Walking Friends Wales

Walking Friends Wales is a three-year project set up to help older adults start walking in their communities, make new connections and be a voice for what needs to change in their local walking environment. Small groups of people meet weekly, initially led by a volunteer, to explore their local communities on foot and get to know each other.

Walking Friends Wales is an initiative led by Living Streets – the charity for everyday walking that gives a voice to the pedestrian. This project started in 2019 and was awarded £220,000 for three years through the Welsh Government’s Healthy Active Fund and Sport Wales. The aim of the project is to reduce loneliness and isolation, and improve physical wellbeing for those joining the walks. It intends to recruit and train 60 volunteers to become walk leaders so they can support the group over 12 weeks with the aim of making it self sustaining.

Walks are free to join and are the same time every week as agreed by the group and usually last one hour depending on what the group decides. Every group is different but all groups are small with just three to five people to allow walks to be tailored to the

participants. One group is made up of people with an average age of 80 and over, who live in, or near, sheltered accommodation, and experience low mobility. They joined the walking group to gain physical benefits of improved mobility and because they want to be able to use the bus more. Another group of people mainly in their late 50s and early 60s developed differently in that, for them, creating friendships was the main reason for joining.

Living Streets have found that for people who are looking to make friendships, walking is an easy way to start. It feels less intimidating to strike up a conversation when walking side by side with another person; the surroundings can take people's mind away from the focus of the conversation; and if they want to, they can hang back.

The walking groups are for anyone over 50 who is struggling to access the local area. This could be due to low mobility, anxiety, or being new to the area. The project is working in six local authority areas in south-east Wales. It is led by a steering group which include representatives from the Older People's Commissioner for Wales team, Swansea University, Independent Age, and Public Health.

In addition to the individual social and wellbeing benefits of Walking Friends Wales, the project also commits to conducting community street audits with the walking groups. This involves members of the community walking around their community and identifying what's good and what needs improvement to make the area more accessible, safe and welcoming for local residents. This might range from the number of benches available to how clean and tidy a street is. This is then fed back to the council to help their planning around infrastructure. This has been of particular value in light of Covid-19 where widening streets and putting in benches will be important.

The project has multiple referral routes. People join via social prescribing services, and the project is promoted through GP surgeries. The project accepts self-referrals as well as referrals from other agencies, including the local tenancy support service. Outcomes are being monitored using the Warwick and Edinburgh Mental Wellbeing Scale (WEMWEBS) to look at the effects on mental wellbeing, and the project will be evaluated by Swansea University.

www.livingstreets.org.uk/products-and-services/projects/walking-friends-wales

System-level approaches

Neighbourhood approaches

While not everyone feels connected to people in their community, the neighbourhood remains an important locus for action on loneliness. Research demonstrates that older people spend more time in their immediate neighbourhood.

Case study 53



Sunshine Café

The Sunshine Café or Caffi Heulwen is a volunteer-run community café in Leeswood, north Wales. The café opens every Thursday morning for local residents of all ages to get together and have a chat over a tea or coffee.

The café has been a community effort but it started through a National Lottery funded project called Rural Wisdom. Rural Wisdom aims to make rural communities work well for people as they get older, and for other people who live there. As part of this project a survey was conducted among residents to understand what was missing in their community. People wanted the opportunity to come together for a tea or coffee beyond their usual fundraising coffee mornings. Working with members of the community, the project coordinator helped secure a room in the community centre. Following support from volunteers and local builders who gave up their time for free, the space was decorated and converted to a kitchen from which a café could operate. Funds from the Rural Wisdom project, Community Council, and the local chapel were donated to buy electrical goods and crockery. The cost of hiring the community centre was at a reduced rate and was paid for by one councillor for the first 12 weeks, to get the café started.

The café, named by local school children as The Sunshine Café or Caffi Heulwen, has been running for over two years. It is open for anyone in the community, and welcomes customers of all ages, from parents bringing in their newborn babies to people in their 90s. People meet up with friends or reconnect with people they used to know. If people come in on their own volunteers are ready to make introductions or tell them about what's going on, if they are interested. The popularity of the café has meant that more tables have been set up in another room in the centre. Most people learn about the café by word of mouth, but it was initially advertised in a local free publication, the community council website and via a leaflet drop.

The café is run by volunteers under the governance of the Leeswood and Pontblyddyn Age and Dementia Friendly Steering Group. Profits made through the sale of refreshments in the café are reinvested into the community. For example, it has paid for the for hire of the community centre to run a course on using tablets, covered the cost of free lunches for a trial of a lunch club for older residents with the local school, and paid for a drama practitioner to deliver a performance about dementia at the school.

The café has also become a community hub for other groups or organisations such as the Warm Wales scheme which focused on fuel poverty, and a project on falls prevention.

Volunteers have conducted a survey to find out what works about the café, and what improvements could be made. The feedback was positive:

“Bringing people together, not just groups with a common interest. As newcomers to the village, it has given us a chance to meet many people and get involved with the community.

www.ruralwisdom.org

The Campaign to End Loneliness is hosted by Independent Age who are responsible for the Campaign's governance, management, employ its staff, and guarantee its funding. Independent Age is the operating name of the Royal United Kingdom Beneficent Association, registered charity number 210729 (England and Wales) SC047184 (Scotland). The work was majority funded by The National Lottery Community Fund.

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