

# Reshaping Care for Older People



## NG Homes “A Bite & a Blether” Engagement Sessions with Older People in Glasgow

### Introduction

In Glasgow, the NHS, social work services, the Third Sector and the independent sector have produced their Draft Joint Commissioning Plan for 2013-2016. The plan sets out a vision for the development of services over the next three years. A city-wide consultation was launched on 15<sup>th</sup> April 2013 to engage with older people, carers and others, with an interest in the proposals, to discover their views on the plan.

Due to their collective ‘reach’ with older people four organisations received funding from the Change Fund to carry out a series of ‘voice and engagement’ sessions with older people throughout the city. The organisations involved were: Age Scotland; Glasgow Council for the Voluntary Sector; Scottish Seniors Alliance; and Glasgow and West of Scotland Forum of Housing Associations. The aims of the sessions were to introduce older people to the plan and to ask for their opinions on the key issues.

The sessions were branded ‘A Bite & a Blether’ and took place over the period April – July 2013. This report documents key findings from the session held at Vulcan Street, premises of ng Homes where many activities take place for older people.

### Ng Homes – 20<sup>th</sup> May 2013

#### Background

The session was held at Vulcan Street in Springburn (premises of ng homes) and 13 older people attended, two of the group were carers. The group was made up of residents of the association who regularly use the facilities and programmes provided for older people by the Housing Association.

The session format included: a short presentation on the key aspects of the Joint Commissioning Strategy; and a short film showing representatives from the four partner organizations and older people talking about the relevant issues. The three facilitators present circulated around the group asking them for their opinions on the 5 questions.

#### Question 1

***The draft plan recommends we use hospital services less and do more to support people to live at home. Do you agree or disagree with this? If you agree, what do we need to do differently to make this happen?***

- We need local befriending services and peer support for older people
- Better system for getting GP appointments
- “It’s not just about the doctors – feeling that you’re still part of the community is a big part of it”.
- Support for carers, all the time. Not just respite care.
- Community transport services or older people are ‘trapped’ in their own area or scheme.

- Yes I do agree but more needs to be done to help people recover when they come out of hospital e.g. better rehabilitation services for older people that have had strokes. We can't just give up on people when they leave hospital.
- Most of us would prefer to be at home but if we need to go to hospital then we shouldn't be rushed out either as that's also dangerous
- More help to assist people in managing their medication and making sure they are on the right medication. "I was put on the wrong combination of medicine and it made me even worse – I was really confused for 6 months. It was only when they sorted it out that I started to get better".
- We need better support from GP's and local support agencies like Cordia and social work. Cordia has too many regulations and no flexibility. Sometime people just need to talk to someone on a daily basis about how they are feeling and what they would like to do.
- Making sure people have the right level of support in place when they get out of hospital. "My Mum's carer only comes in for 15 minutes; they are always in a rush and are only allowed to do certain things. There needs to be more flexibility in the support that is offered. For example, the carer for my mum said that she wasn't allowed to shop for her if I was there, I was only popping in to do a few things then I had to go – this made no sense to me."
- Having regular discussions with older people about the support they are receiving to make sure it is working for them.
- We need to be more caring and interested in people when they are in hospital to help build their confidence for when they are discharged.
- The support at home is very time constricted, older people want to have a chat sometime about how they are feeling etc. There is no time to do this.

The group strongly agreed with the vision but stressed that for it to work certain issues would have to be addressed. Participants were strongly in favour of extending befriending and peer support schemes. They also pointed out that these could be 'informal' and often happened naturally when older people met up at lunch clubs and activities provided by the housing association. The importance of community transport schemes for older people was another key point made by the group, as was sustained support for carers at a local level.

There was also a strong feeling in the group that support at home services had to be monitored more closely to make sure that older people were receiving a suitable service for their needs. Another concern that came up during the discussion was the importance of reassuring older people that they were not going to be rushed through the hospital system just to free up beds.

## Question 2

***The draft plan also recommends we work closely with communities and community based groups and organisations to better support people in need. Do you think this will make a difference? If so what should we be doing to bring this about?***

- It's important to work closely with community based groups to make sure that they have enough support to survive.
- A lot of the clubs that I used to go to are now closed and Springburn has nothing it needs more local clubs.
- I don't know how you support community based groups better but it is essential that there is local activity and support for older people if you want us to keep well and be independent

- I go to 2 clubs every week one at the church and a dance class - that's what helps me keep healthy
- The free swimming is good
- People need somewhere to meet up and have a chat - the North doesn't have a lot for older people
- The local clubs run by the housing were what got me back to normal when I came out of hospital. It took a lot of convincing to get me there but now I go every week.
- We need better community transport in the North to help older people get to places like the hospital and super markets like Tesco. The way it is just now, you can't get a bus to the new Royal from the North. Also the bus stop is too far away from Tesco for some older people to carry their shopping back on their own.
- I still want to do my own shopping but it would be helpful if places like Tesco would deliver the food as it's hard to travel back with lots of bags
- The bus operators have changed all the number on the buses and even although they are not changing the routes! It's confusing – it's taken me ages to try and work it all out.
- We use the community transport service to go to ASDA, SilverBurn and Tesco that's a good support because they wait for you and bring you back but it costs.
- We need more activities in local venues and more local places to go and get advice and information.
- More should be done to support older people to be involved in organising activities not only for older people but also to get involved in organising activities for the young people. We used to help out all the time with the local youth clubs but that's all gone now.
- More work is required to help local church groups to do more. They have some great activities but they are not that well promoted.
- We need to work with communities to manage open spaces more – bowling greens, parks and areas to congregate and sit at.
- A lot of older people need more help and information to manage their money.

Whilst there weren't many suggestions as to how to better support local community based groups and projects, the older people consulted felt that it was essential to have a range of local services, more information and advice and good transport infrastructure to help them stay active and connected.

The majority of the participants had personal stories to relate about the local clubs or activities which had made a positive difference in their own lives. A few participants reminisced about the close links that older people's groups had previously had with younger people in the community. These participants suggested that it would be a good thing for both groups if this close relationship could be revived.

### Question 3

***There are a wide range of services currently supporting older people in Glasgow. Not everyone always knows what services are available. What should we do to improve people's understanding and knowledge about current services and to improve access?***

- Use the housing association to promote things.
- Put up notices and give out leaflets in the doctors, community centres, chemists.
- Get people to come out and talk to us like you are doing today – it makes you feel that you're getting a say and at the same time finding out about things.
- Have local services for things like physio and well-woman drop in clinics – you find out more if it's easy to just drop in somewhere and don't need to go through a big process.
- Older people are not stupid and don't need to be talked down to but we just want to find out the information.

The group felt that 'local was best' when it came to accessing information. For them this meant promoting events and providing information about services through the existing local channels that older people came into contact with on a day-to-day basis. This meant through their local doctor's surgeries and community centres and also through the housing association.

The group also stressed the importance of local health services which did not involve arduous appointment systems as being another valuable resource for accessing information.

**(N.B. Participants' answers to Q4 and Q5 shared a great deal of over-lap and replication and therefore the feed-back has been combined into the overview below)**

#### **Question 4**

***What new services should we be developing to meet the future needs of older people in Glasgow?***

#### **Question 5**

***What in your view should be our top priority over the next three years for improving services for older people?***

- Local services for doctors, chemists, social work
- Help with knowing where to get information (e.g. on aids and adaptations)
- The housing association being more involved with other partners (health services)
- Community transport especially for the North – we are isolated and it's a real worry for older people if they ever get sick

The group participants felt that having local health services on hand at a local level would greatly improve the future scenario for older people in their area. They felt that the housing association played a key role at present in providing them with information and they felt that closer working between the HA and the NHS would be beneficial for older people.

Finally, the group reiterated the need for better community transport for older people. They felt that older people in the north of the city were at a particular disadvantage here and were keen to see the situation improve.

**Colleen Rowan  
13<sup>th</sup> August 2013**