

Department for Work and Pensions

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LinkAge Plus: Capacity building – enabling and empowering older people as independent and active citizens

Martin Willis and Robert Dalziel

A report of research carried out by INLOGOV, University of Birmingham on behalf of the LinkAge Plus National Evaluation Team, the Local Government Centre, Warwick Business School and the Department for Work and Pensions

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- Davis, H. and Ritters, K. (2007) LinkAge Plus National Evaluation Team Interim findings – September 2007. Warwick: Warwick Business School, www.dwp.gov.uk/asd/asd5/WP42interim.pdf
- Hilton, J. (2008) *Streamlining the assessment of Attendance Allowance applications with social care assessment: an evaluation of two London pilots*, Research Report No, 534. London: DWP, www.dwp.gov.uk/asd/asd5/rports2007-2008/rrep534.pdf
- Ritters, K. and Davis, H. (2008) *Access to information and services for older people – the joined-up approach*, Working Paper No. 53. London: DWP, www.dwp.gov.uk/asd/asd5/WP53.pdf
- Watt, P. and Blair, I. with Davis, H. and Ritters, K. (2007) *Towards a business case for LinkAge Plus*, Working Paper No. 42. London: DWP, www.dwp.gov.uk/asd/asd5/WP42.pdf
- Daly, G. (2009) *LinkAge Plus: Benefits for older people*, Research Report No. 554. London: DWP
- Watt, P. and Blair, I. (2009, forthcoming) *LinkAge Plus: The business case*, Research Report No. 573. London: DWP.

These papers can be viewed at: www.dwp.gov.uk/resourcecentre/research_analysis_stats.asp.

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Part one – Core principles of the LinkAge Plus approach

LinkAge Plus (LAP) provides a comprehensive approach for accessible joined-up services for older people; one which puts older people at the centre of policy making and service delivery.

Through LAP, central and local government are combining their efforts with voluntary and community sector organisations to design, develop and deliver services that meet the needs of older people today.

The LAP pilot programme has brought local authorities together with their partners in health and the voluntary and community sector to find innovative ways to break down traditional organisational and financial barriers and to join up services.

The result is that service providers now see the need to be accessible at the first point of contact, with an underlying principle that there should be 'no wrong door'.

The LAP pilot programme has inspired multiple access points to all services including personal callers, telephone, electronic and paper communications. This holistic approach to services also recognises the importance of outreach activities which aim to ensure that even the most difficult to reach older people are not excluded, but are actively encouraged to engage with services available to them.

Over the last two years eight partnership pilots, working across a range of urban and rural areas have been developing locally relevant services building on LAP core principles and testing out a proof of concept.

Core principles

The six core principles of LAP are to:

1. **engage and consult:** older people should be involved in the design and development of how services and relevant information are provided, and their opinions sought in the quality of delivery;
2. **reflect the needs and aspirations of current and future generations of older people:** the diversity of the local older people's population should directly inform services provided for them and anticipate their changing requirements over time;

3. **enable access by an increasing range of customers:** a 'no wrong door' approach should provide information on, and access to, services from an initial or single point of contact. Signposting or referral processes should ensure all relevant services are made available;
4. **ensure that isolated or 'difficult to reach' older people are enabled to access information and services:** positive steps should be taken, through outreach to identify and engage with isolated older people. Joined-up customer contact facilities should be flexible to meet different needs and include face-to-face, visiting, telephone and electronic media;
5. **ensure that services promote independence, wellbeing and active ageing:** services should focus on early intervention and a preventative approach which goes beyond traditional health and social care functions; encouraging respect and social inclusion for older people as citizens should be a primary consideration;
6. **maximise opportunities for efficiency and capacity building:** efficiencies should be sought through joint working with partner organisations and improving outputs through capacity building.

LinkAge Plus approach

The LAP approach envisages **effective links** between different parts of central government, local authorities and voluntary and community sector organisations. It provides a focus on:

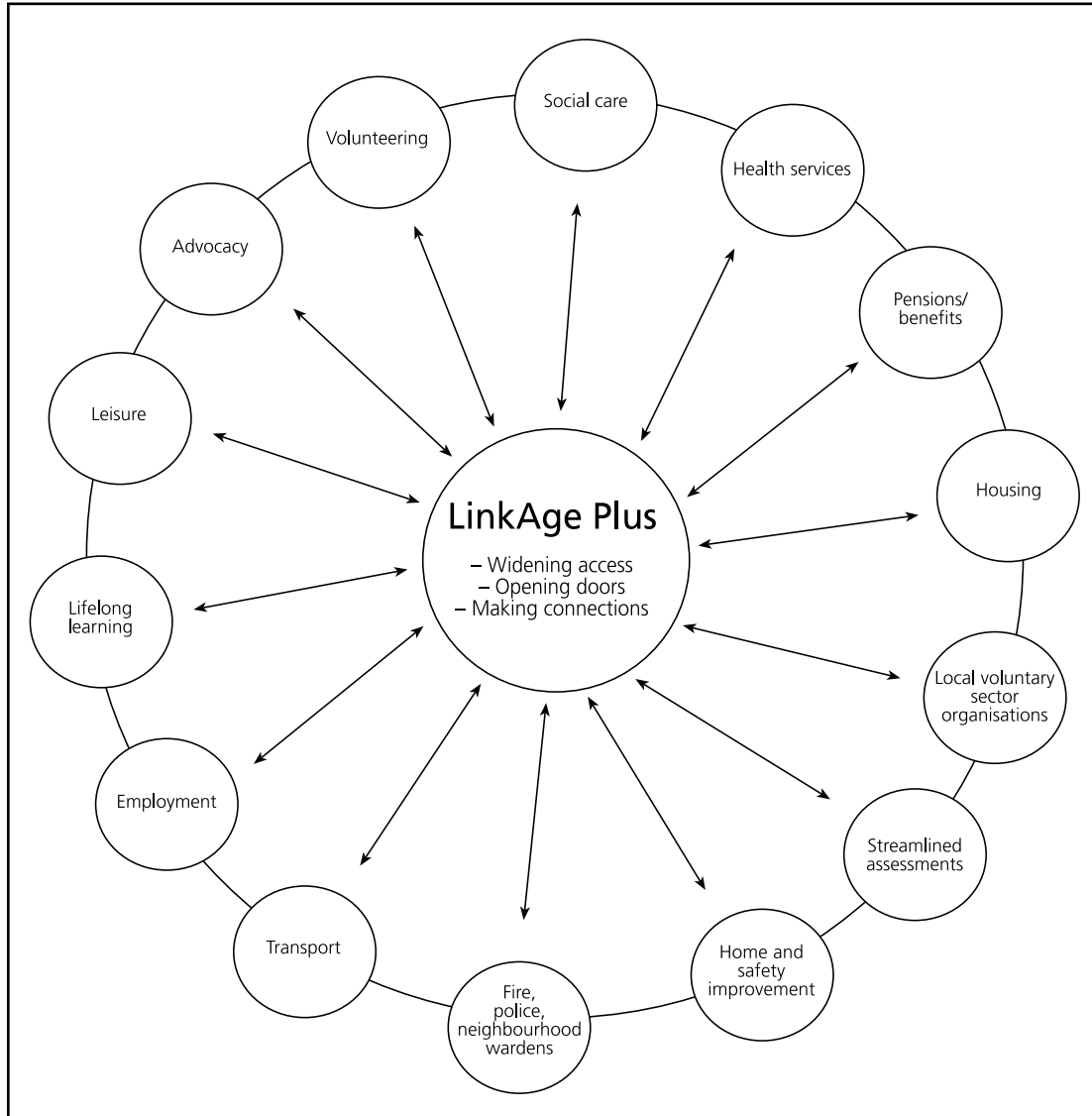
- consulting and engaging with older people to understand their needs and expectations;
- delivering a better quality of life through easy access to all relevant information and services (particularly for excluded older people);
- accessibility (anticipating changes in the range of customers who use services as well as the existing customer base);
- a better customer experience;
- more customer choice;
- independence and wellbeing;
- efficiencies through joint working;
- capacity building;
- holistic working.

LinkAge Plus outcomes

Outcomes depend on local arrangements between partner organisations. But local older people should reasonably expect:

- **good quality information and advice** – with support available to help people ‘navigate’ their way round the system, including advocacy;
- **healthy living** – including access to National Health Service (NHS) entitlements and facilities to support healthy lifestyles and improve wellbeing. (**Health service and social care**);
- **income** – advice support and advocacy, including financial information and tax advice. (**Pensions and benefits**);
- **mobility** – by car, bus or other forms (e.g. community transport, mobility scooters, etc, where they are available). (**Transport**);
- **social activities, social networks and opportunities to keep active** – including social clubs and opportunities for learning, leisure, fun, volunteering and befriending services (**Leisure services, adult education**);
- **housing and the home** – having a safe home, access to adaptations and repairs and help keeping the house and garden in good order. Also help with shopping, and approved traders’ schemes. (**Housing, fire, trading standards and local voluntary sector organisations**);
- **safe neighbourhood** – with access to amenities and facilities. (**Police, transport and neighbourhood wardens**);
- **employment and volunteering opportunities** – access to information on new roles or options for extending working lives.

Figure 1 The LinkAge Plus approach



Summary

This report examines the extent to which LinkAge Plus (LAP) has been a tool for capacity building. The research examined two key questions:

- how the eight LAP pilots have built capacity by developing and improving services which realise positive people-centred outcomes for older people; and
- whether the projects have built capacity by laying the foundations for the planning, shaping and delivery of people-centred services in the future.

The evidence demonstrates the wide range of initiatives which have been created across the eight pilot sites and analyses how they can contribute to an overall framework for effective capacity building. The evidence thus provides exemplars of approaches that could be adopted and adapted elsewhere by local authority, third sector and private organisations that seek to unlock and empower the potential of working with and for older people as independent and active citizens.

The report analyses this evidence in relation to ten distinct dimensions of capacity building:

Enhanced skill and knowledge resulting in better ways of working within existing services: Direct and indirect training of key staff from statutory and third sector organisations was an integral feature of most of the eight LAP pilots. One example of work specifically targeted at skill and knowledge development is the **Leeds** capacity building grants which have benefited 41 organisations including nine black and minority ethnic (BME) groups. They have been used to invest in equipment, training, planning, leadership and volunteer recruitment and skills development; to establish the role of older people as 'peer mentors'; and to establish a website and purchase screen-reading software for blind Asian people.

More effective processes generated by local organisations to enable access to, and targeting of referrals for, information, advice and services: All of the LAP pilot projects included an element of developing the capacity of the system to ensure older people can access understandable, reliable and locally available information and advice and be referred for service where appropriate. For example, **Salford** LAP created a specialist housing signposting service that provides housing advice for older people to help them make informed and

sustainable housing choices. The **Lancaster** Care Navigator Service is a project delivered by the city council in partnership with a voluntary sector provider and run mostly by volunteers. As well as making referrals to partner organisations, the service also provides support and coordinates the arrangement of relevant services for older people. Working with older people in isolated rural communities, **Gloucestershire** established a network of 30 Village Agents supported by a web-based gateway process through which they can work with older people to access information and make appropriate service referrals. The **Devon** pilot has introduced a 360° wellbeing assessment tool called 'Getting the Most Out of Life'. It aims to assist with maintaining a coherent framework regardless of referral source or presenting problem and has been devised to help older people access information and services, maintain an active and involved lifestyle and reduce the incidence of social isolation and exclusion.

Better understanding of the type and range of services offered by statutory, voluntary, community and private organisations and the ability to focus on appropriate strengths and specialisms: In addition to the straightforward provision of reliable and understandable information and advice, most of the LAP pilots sought to improve staff and older people's understanding about who offers what. As part of **Gateshead's** Link-up projects, organisations are working together to find better ways to deal with older people's concerns. Underpinning Link-up is a desire to co-locate useful information for professionals and older people. The result is the creation of more effective ways to understand what information and services are available and putting older people in touch with appropriate organisations that can help them.

Joined-up or integrated services resulting in efficiency gains through reduced duplication: All of the LAP pilots have promoted partnership working to improve older people's access to services. The LAP pilot in **Tower Hamlets** has resulted in the setting up of a single point of access to services for people aged 50 and over through five Community Network Centres. A simplified process for obtaining services has been created by a number of partner organisations working out of the centres or in close contact with them. The Primary Care Trust has demonstrated its support for the approach by agreeing to match local authority funding so that the work that the centres are doing can be sustained when the LAP pilot funding ends

Holistic understanding of older people's quality of life outcomes resulting in people-centred, rather than organisational or service-centred, approaches to strategic commissioning and operational procurement: The research presents emerging evidence of a shift from a focus on developing access, integration or partnership working towards improving outcomes for older people. For example, in **Nottinghamshire**, a wide range of partner organisations are working together to provide extra services that include a registered traders' list, shopping help, and care, gardening and repair services.

Older people having new opportunities to socialise through involvement in social, training, leisure and networking activity: Some of the LAP pilots have adopted innovative network development approaches to enable older people to create and experience new opportunities to socialise through involvement in social, training and leisure activities. Examples include services designed to address broader community and social wellbeing outcomes by creating and maintaining social capital. The **Tower Hamlets** Community Network Centres use an outreach approach to address social isolation and promote community cohesion. The centres provide community resources such as a café, educational facilities and an art class to address mental wellbeing issues and a cross-cultural model of day care for Bangladeshi older people.

Creation of employment, self help and volunteering opportunities which develop new skills and social capital through the engagement and empowerment of older people: The research found a small number of examples of the development of employment, self help and volunteering opportunities for older people. This included evidence of engagement with the private sector, a feature that was noticeable by its absence from most of the secondary data analysed for this report. The most significant employment and volunteering initiative was the **Lancaster** 50 Forward Employment Agency and Volunteering Bureau. This project is a partnership arrangement that provides employment and volunteering opportunities specifically tailored to meet the needs of older people and empower them through engagement in paid or unpaid work activities.

Market development resulting in new organisations being created to work with and for older people by partnerships of statutory, third sector and private organisations: LAP pilots have stimulated the market to create new organisations which have facilitated access to information and advice. However, the research found fewer examples of new organisations being created to provide services which are aimed at achieving a range of different outcomes for older people. One such project is **Gloucestershire's** Village Agents which has adopted a community development approach. The evidence of the success of this work in being able to respond flexibly and creatively to unexpected events, such as the 2007 floods, is a significant example of the success of the LAP approach to local capacity building.

Market development resulting in new preventative services being created by statutory, third sector and private organisations, either individually or in partnership, to work with, and for, older people: The imagination and innovation stimulated by LAP is further evidenced by the development of new preventative services with, and for, older people. These include the Community Network Centres in **Tower Hamlets** and the Broad and Deep Outreach projects in **Devon**. An important feature of these projects is how both in initial concept and subsequent adaptive implementation, they reflect the different and diverse contexts of individual older people and the communities in which they live.

Multiplier effects, where older people, either individually or collectively, have been at the centre of policy development and service design or empowered to identify outcomes and create innovative solutions: Engagement with older people is a central feature of the philosophy and practice of LAP. A number of the pilots developed this notion into initiatives that went beyond service delivery to enabling older people to be at the centre of policy development and service design and empowered to identify outcomes and create innovative solutions. Some built upon existing involvement processes whilst others used the opportunity presented by LAP to create new consultative and participative innovations.

There is emerging evidence that the work of the LAP pilots is fostering a radical change away from traditional needs or service centred approaches towards strategic commissioning founded on an holistic people-centred approach. The focus of such work is on improving outcomes for, and with, older people and not simply ensuring improved access, integration or partnership working. This is clearly in line with the analysis and recommendations of Opportunity Age and demonstrates an approach to capacity building that recognises older people as independent and active citizens, participating in and shaping their local communities.¹

¹ HM Government (2005) *Opportunity Age: Meeting the challenges of ageing in the 21st century*.

Part two – Capacity building
– enabling and empowering
older people as independent
and active citizens

1 Introduction

LinkAge Plus (LAP) is a Department for Work and Pensions (DWP)-funded initiative, working over a two-year period in eight local authority areas to pilot new ways of joining up services and making them more accessible to older people. The pilots began in the summer of 2006 and were scheduled to end in the summer of 2008. Each pilot has had a local evaluation which was generally scheduled to report in the autumn of 2008. The national evaluation report is due to be published by March 2009. At this stage in the evaluation, therefore, the full impacts of the LAP programme have yet to be fully reported.

This report is one of a series of reports that form part of the national evaluation of the LAP programme. The other reports are:

- Davis, H. and Ritters, K. (2007) LinkAge Plus National Evaluation Team Interim findings – September 2007. Warwick: Warwick Business School, www.dwp.gov.uk/asd/asd5/WP42interim.pdf
- Hilton, J. (2008) *Streamlining the assessment of Attendance Allowance applications with social care assessment: an evaluation of two London pilots*, Research Report No, 534. London: DWP, www.dwp.gov.uk/asd/asd5/rports2007-2008/rrep534.pdf
- Ritters, K. and Davis, H. (2008) *Access to information and services for older people – the joined-up approach*, Working Paper No. 53. London: DWP, www.dwp.gov.uk/asd/asd5/WP53.pdf
- Watt, P. and Blair, I. with Davis, H. and Ritters, K. (2007) *Towards a business case for LinkAge Plus*, Working Paper No. 42. London: DWP, www.dwp.gov.uk/asd/asd5/WP42.pdf
- Watt, P. and Blair, I. (2009, forthcoming) *LinkAge Plus: The business case*, Research Report No. 573. London: DWP.

1.1 Aim of the report

The aim of this report is to examine the extent to which LAP has been a tool for capacity building in enabling and empowering older people to live as independent and active citizens. The report describes and analyses examples of the ways in which the eight LAP pilots have developed service provision and the extent to which this has laid the foundations for increased capacity to deliver sustainable person-centred services for older people in the future.

For the purposes of this research, capacity building is defined as the creation of additional capability to achieve improved outcomes for older people either through the better use of existing resources or through the development of new resources. There is no starting assumption that these approaches require additional resources, although many have been developed or trialled with LAP project funding.

1.2 Structure of the report

The thematic review is structured as follows:

- capacity building;
- research questions and methodology;
- better use of existing services which increases number and range of older people benefiting from improved outcomes;
- development of new services creating different outcomes for older people;
- conclusions.

2 Capacity building: theory, research and policy

This chapter provides an overview of current thinking, policy and practice in relation to capacity building and in particular work which has been designed to improve outcomes for people aged over 50. The overall definition and ten specific dimensions of capacity building employed in this research are set out in Chapter 3.

The concept of capacity building has been variously used to describe any initiative aimed at creating, developing or sustaining the ability of people and organisations to improve outcomes for individuals, communities or citizens. The term gained currency in the early 1990s as a key aim of international development when governments and aid organisations sought to fund long-term programmes that enabled communities to achieve sustainable self-generating development rather than to receive short-term relief which maintained or even encouraged dependency.

For example, the United Nations Development Programme (UNDP) defined capacity building as *'the creation of an enabling environment with appropriate policy and legal frameworks, institutional development, including community participation (of women in particular), human resources development and strengthening of managerial systems'*². In this context, capacity building concerns creating a context in which people are enabled to help themselves as self-determined communities and citizens.

In UK policy, this term has been used in a variety of different ways to describe initiatives by central and local governments. In 2006, the Department of Communities and Local Government (DCLG) published research by the Office for Public Management (OPM) into the capacity building needs of local government.³

² Wikipedia, the free encyclopedia.mht, accessed 15 October 2008.

³ DCLG (2006), *Research on capacity building needs: final report*, Communities and Local Government (CLG) website: www.communities.gov.uk

The report defined capacity as *'the right organisation, systems, partnerships, people and processes to deliver against a particular agenda or plan'*.⁴ On the basis of this, it suggested that an assessment of capacity could examine six key areas: finance; systems and processes; volume of people; skills; knowledge and behaviour.

2.1 Capacity building as enhancing inputs and processes

These two definitions from the UNDP and the OPM both specify capacity as being concerned with inputs and processes. Examples of the former are policy frameworks, human resources and finances and of the latter partnerships, participation and organisational learning. There have been several Government initiatives aimed at improving such inputs and processes to develop human resource skills and organisational capabilities. The theory is that by improving skills and capabilities, staff and organisations will produce better services. For example, the Capacity Building programme launched in 2003 by the Office of the Deputy Prime Minister (ODPM) and the Local Government Association (LGA) aimed to improve, on the one hand, the leadership skills of councillors and officers and generic skills in procurement, financial and project management and, on the other hand, corporate capacity to support performance and knowledge transfer and workforce capacity including recruitment, retention and people management.⁵

2.2 Capacity building as citizen and community empowerment

The OPM research examined capacity within local authorities whereas other initiatives have explored a wider canvas encompassing other statutory, private and third sector organisations. Thus, capacity building has also been central to the Government goals of enhancing citizen and community empowerment which in its turn is seen as *'essential for achieving excellent public services, strong and cohesive communities and a thriving democracy'*.⁶ A National Council for Voluntary Organisations (NCVO) paper⁷ suggested that the Government aimed to strengthen communities through building community capacity in order to promote effective community development and community action. The paper cited a range of policy

⁴ DCLG (2006) op cit p10.

⁵ CLG (2003) *What is the capacity building programme?* www.communities.gov.uk/localgovernment/efficiencybetter/capacitybuilding/whatis/

⁶ CLG and LGA (2007) *An action plan for community empowerment: building on success*, CLG, London www.communities.gov.uk p.11

⁷ Jochum, V. et al. (2005) *Civil Renewal and Active Citizenship: A Guide to the Debate*. National Council for Voluntary Organisations.

initiatives including the Active Communities Directorate's *ChangeUp*⁸ and the Civil Renewal Unit's *Firm Foundations*⁹.

Issues of capacity building in dispersed rural communities have also been examined in a Department for Environment, Food and Rural Affairs (Defra) report with the objective 'to enable everyone to play an active and full part in society by providing effective, affordable support for local volunteering, social capital, community action and voluntary sector provision of services in rural areas throughout England'.¹⁰ The Government has also provided resource to fund improved support for third sector organisations through the Office for the Third Sector established in the Cabinet Office with a budget of £88.5million over the period 2008-2011.¹¹ Building community capacity has, therefore, been a recurring theme in recent Government policy and funding initiatives. The recent White Paper, *Communities in control*, takes up this theme when it argues that 'Strong social networks, good community spirit and a local sense of belonging and place, are foundations for confident and healthy communities'.¹²

This notion of community capacity building draws on the academic study of social capital. The NCVO paper argued that 'community groups, networks and relationships that are part of strong and vibrant communities build social capital, an invaluable resource for tackling the challenges communities face'.¹³ The need to sustain, develop and create this social capital underpins much of the government's case for community capacity building. One of the main academic writers on the concept of social capital, Robert Putnam, says that it 'refers to connectedness among individuals – social networks and the norms of reciprocity and trustworthiness that arise from them'.¹⁴ He goes on to suggest that the concept is closely related to that of 'civic virtue' which 'is most powerful when embedded in a sense network of reciprocal social relations'. Echoes of this notion of social capital underpin the UK Government's strategy for older people which sets out a vision 'of a society where later life is as active and fulfilling as the earlier years,

⁸ Active Communities Directorate (2004), *Changeup: capacity building and infrastructure framework for the voluntary and community sector*, Home Office.

⁹ Civil Renewal Unit (2005) *Firm foundations: the Government's framework for community capacity building*, Home Office.

¹⁰ DEFRA (2003) *Community Capacity Building and Voluntary Sector Infrastructure in Rural England*, p.2, Rural Communities Division, DEFRA, London www.defra.gov.uk

¹¹ www.cabinetoffice.gov.uk/third_sector/funding_finance_support/changeup_and_capacitybuilders.aspx

¹² CLG (2008) *Communities in control: Real people, real power*. CLG, London www.communities.gov.uk, p.21.

¹³ Jochum, V. et al. (2005), p.17.

¹⁴ Putnam, R. D. (2000) *Bowling Alone: The collapse and revival of American community*. New York: Simon and Schuster, p.19.

with people participating in their families and communities.... We want to build a society that focuses on what individuals can do, instead of making assumptions about capacity based on age.¹⁵ This notion is fundamental to the Government's Opportunity Age policy aims which will be discussed in more detail below.

2.3 Capacity building as improving services

Capacity building can be used to refer not only to improving inputs and processes but also the outputs in terms of goods and services which are produced by these inputs and processes. In this context, capacity building is associated with work to improve efficiency through increasing productivity and innovation, avoiding waste and duplication and managing performance. This has found expression in a long line of Government policy initiatives over the past 30 years from the creation by the then Conservative Government led by Margaret Thatcher of the Efficiency Unit in 1979¹⁶, through the emphasis on competition and the market in the 1990s to Best Value (1999)¹⁷ and the Gershon efficiency review (2004)¹⁸ in the last ten years.

A specific element of these policies has been the emphasis on partnership working which, although in itself a process, has frequently been promoted as an essential means to ensure efficiency. Both the Audit Commission¹⁹ and the Labour Government have stressed the importance of partnership working in improving the capacity and quality of public services.²⁰ The authors of an evaluation of a health and social care partnership recommended that partners needed to create single points of access for people who use services, integrate key services and be prepared to explore new service options and not be overly tied to existing services or providers.²¹ Although evidence exists that partnership working brings real benefits by enabling flexible and innovative responses to complex and multi-faceted problems that face society, there are also questions as to whether partnership working always results in good value for public money.²² Research has

¹⁵ HM Government (2005) *Opportunity Age: Meeting the challenges of ageing in the 21st century*. Executive Summary p.xvi.

¹⁶ Efficiency Unit (1988) *Improving Management in Government: The Next Steps*. London: HMSO.

¹⁷ Local Government Act (1999) Chapter 27, Part 1, Best Value.

¹⁸ Gershon, P. (2004) *Releasing resources to the frontline: Independent review of public sector efficiency*. London: Her Majesty's Treasury.

¹⁹ Audit Commission (1998) *A fruitful partnership: Effective partnership working*. London: Audit Commission.

²⁰ Glendinning, C. *et al.* (ed) (2002) *Partnerships, New Labour and the governance of Welfare*. Bristol: The Policy Press.

²¹ Peck, E. *et al.* (2002) *Modernising Partnerships. An Evaluation of Somerset's Innovations in the Commissioning and Organisation of Mental Health Services*. IAHS p.33.

²² Audit Commission (2005) *Governing Partnerships: Bridging the Accountability Gap*. Public Sector National Report.

also identified key principles and processes including stakeholder understanding of each other's values and beliefs, the existence of interdependencies and a capacity to share power and resources. Evidence and analysis suggests that, whilst not in themselves guaranteeing a successful partnership, the absence of such elements can hinder or undermine partnership working.^{23, 24}

2.4 Capacity building as improving outcomes

The case for partnership working has also been made in terms of improving effectiveness or outcomes as well as efficiency gains. There is a growing literature on public service outcomes which has demonstrated the complexity and subjectivities of the concept of outcomes.^{25, 26, 27} An outcome is defined here as the consequence of a public service on the quality of life of an individual or a community. Depending on subjective values, outcomes can be seen either as beneficial, such as an improvement in physical wellbeing or as detrimental such as a decrease in economic prosperity. Policy initiatives that aim to improve people's quality of life are, thus, a form of capacity building by strengthening the capability of public services to deliver better outcomes for individuals and communities.

Government policy has increasingly emphasised the aim of improving outcomes. For example, New Deal for Communities (NDC) has been a key programme in the Government's strategy to tackle multiple deprivation in the most deprived neighbourhoods in the country. The aim has been to bridge the gap between these neighbourhoods and the rest of the country. NDC partnerships are focused on six key outcome areas: health, education, housing, worklessness, crime and liveability. In relation to crime, the floor target was to reduce crime by 15 per cent and further in high crime areas by 2007/08. The policy has had a strong focus on the effectiveness of partnership working between public service agencies and community organisations to realise joined-up thinking and solutions to problems.²⁸

²³ Hudson, B. and Hardy, B. (2002) *What is a 'successful' partnership and how can it be measured?* in Glendinning, C. et al. (ed) (2002) pp.51-65.

²⁴ Willis, M. (2006) *Partnership Action Learning* in Rigg, C. with Richards, S. (eds) (2006) *Action Learning, Leadership and Organisational Development in Public Services*. London, Routledge.

²⁵ Challis, D., et al. (2006) *Performance indicators in social care for older people*, Ashgate, Aldershot.

²⁶ Qureshi, H. and Nicholas, D. (2001) *A new conception of social care outcomes and its practical use in assessment with older people*, Research Policy and Practice, 19, 11-25.

²⁷ For a policy discussion see ODPM (2005), *Securing Better Outcomes: Developing a new performance framework*, ODPM, London.

²⁸ SEU (1998) *Bringing Britain together: A National strategy for neighbourhood renewal*, Social Exclusion Unit. London: The Stationery Office.

2.5 Policies for older people and capacity building

All of these four elements, improving inputs, processes, outputs and outcomes, are evident in current and recent public policy initiatives for older people. For example, the Association of Directors of Adult Social Services (ADASS) has highlighted input and process improvements in developing the capacity of the social care workforce to deliver policies for outcome-driven and person-centred services:

*'At locality and community levels, there are many ways for commissioners to address the workforce development agenda within needs assessment, tendering, contracting and capacity-building procedures. Examples include increasing input from people using services to defining outcomes and preferred processes for provision, consolidating knowledge about workforce strengths, gaps and learning needs from individual commissioners and providers, partnership working on workforce development with allied agencies including community groups, and negotiating qualification, training and staff development requirements in contracts.'*²⁹

Although these examples start with the notion that capacity building includes the process of engaging people who use services, the bulk of the suggestions concern ways to analyse and improve the inputs of workforce skill and knowledge. Age Concern in a policy paper on capacity building and community development, has argued that the active involvement of older people *'is essential if social and economic exclusion is to be tackled effectively.... The life-long knowledge, skills, and experiences acquired by older people over time should be recognised and utilised as a valued resource for achieving the objectives of community and neighbourhood renewal strategies'*.³⁰ Here is a suggestion that the outcome of an effectively functioning community which has the capacity to tackle issues of social wellbeing requires the input of the skill and knowledge which older people already possess. Older people are, thus, not the passive recipients of policy to build community capacity but actively engaged as a key resource for its realisation.

Recent research has highlighted the importance of citizens' and service users' local knowledge and local representation in designing effective citizen-centred governance. Local knowledge is defined as *'the expertise that citizens and service users have to contribute to the formulation of policy and the design and delivery of services'* whilst local representation *'emphasises how participatory forms of governance can contribute to making public decisions more democratic'*.³¹

These examples illustrate two distinct strands in central government policy in respect of older people. One strand has focused on the relatively small proportion of older people who have significant health and social care needs which require

²⁹ ADASS (2007) *Commissioning and the social care workforce*, p.4.

³⁰ Age Concern (2002) *Capacity Building and Community Development*, Policy Unit, Age Concern England. London, p.8.

³¹ Barnes, M. et al. (2008) *Designing citizen centred governance: Findings*. Joseph Rowntree Foundation (JRF), York www.jrf.org.uk pp.2-3.

the provision of services by local authorities and the National Health Service (NHS). The other has viewed older people as active citizens with similar rights and responsibilities to people of all adult age groups.

Evidence of the effect of these two approaches in practice can be found in recent JRF and Audit Commission studies. The JRF *Older People's Inquiry* was directed by older people and sought to examine the issues about ageing that older people themselves defined as important. It concluded that *'social services and other partners had increasingly been focusing on more functional 'life and limb' issues and that as a result older people were now increasingly sceptical about policies which were meant to enable them to stay in their own homes'*.³² The inquiry identified eight broad themes or outcomes that mattered to older people such as *'comfortable and secure homes'*, *'learning and leisure'* and *'friendships'* and exemplar programmes from around the country of best practice projects which provided such services as small repairs, teaching school children to grow vegetables and befriending. These projects all aimed to enable people to retain independence and active citizenship and prevent the need for access to more intensive interventions and services.

However, it appears that older people's priorities are not currently reflected in the way that local authorities design and deliver their services. The research for the Audit Commission's national report on ageing included a mystery shopping exercise conducted by older people about how councils provide information on a range of mainstream services. Despite queries about employment, volunteering, leisure, learning and transport, the mystery shoppers found that *'they were commonly referred to adult social care, despite having no care needs'*.³³

There is some evidence that social care and health are beginning to shift from a 'needs-determined' to a 'people-centred' approach in developing policy for older people. In 2006, the Department of Health sponsored the Partnerships for Older People Projects with their emphasis on providing person-centred and integrated responses for older people. However, a key aim was still to *'Prevent or delay the need for higher intensity or institutionalised care'* rather than broader wellbeing agendas.³⁴ In contrast, the more recent Transforming Social Care agenda, whilst still emphasising social care needs, reflects this broader approach by not only recognising the importance of *'a strategic shift towards early intervention and prevention'* but also *'working across the boundaries of social care such as housing, benefits, leisure and transport and health'*.³⁵

³² JRF (2005) *The Older People's Inquiry: That little bit of help*, JRF, York www.jrf.org.uk p.3.

³³ Audit Commission (2008) *Don't stop me now: Preparing for an ageing population*. Local government national report. July 2008, p.24.

³⁴ University of Hertfordshire (2007) *National Evaluation of the Partnerships for Older People Projects: Interim Report of Progress*.

³⁵ Department of Health (2008a) *Transforming Social Care Local Authority Circular LAC (DH) (2008) 1*, p.2.

This latter Government initiative, supported by a wide range of partner organisations from the statutory, voluntary and private sectors, has signalled a radical rethink of the way in which adult social care services promote older people's and others' independence and wellbeing.³⁶ The Government has boldly stated that *'The emphasis should be on enablement and early intervention to promote independence rather than involvement at the point of crisis'*.³⁷ The policy is being resourced over three years through the social care reform grant with:

- a focus on outcomes rather than inputs and processes;
- a shift in culture and resources towards early intervention;
- the involvement of people in the design, commissioning and evaluation of services; and
- joined-up services with partner organisations.³⁸

The aim and four domains of the Government's reform model for social care, parallel the analysis of capacity building presented above:

- outcome: improving the quality of people's experience of social care;
- outputs: strengthening performance management to ensure that all services are of a high standard and are self-sustaining;
- processes: people at the centre in shaping services;
- inputs: shaping and building the social care market and increasing the capabilities and skills of the social care workforce.³⁹

This policy shift is also enshrined in the Public Service Agreements (PSAs) which set out the key priority outcomes the Government wants to achieve in the next Comprehensive Spending Review period 2008-2011. The Department for Work and Pensions (DWP) leads on the priority to *'Tackle poverty and promote greater independence and wellbeing in later life'* working closely with the Departments of Health and Communities and Local Government.⁴⁰

³⁶ HMG (2007) *Putting People First: a shared vision and commitment to the transformation of Adult Social Care*, HMG, www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081118

³⁷ DH (2008a) p.2.

³⁸ DH (2008b) *The Social Care Reform Grant 2008/09 LAC (DH) (2008) 1*, Annex B pp.23 -26.

³⁹ DH (2008a) p.15.

⁴⁰ DWP (2008c) Public Service Agreement 17. www.dwp.gov.uk/opportunity_age/service-agreement.asp

These initiatives represent a significant shift towards the principles and aspirations outlined in Opportunity Age.⁴¹ They therefore anticipated many of the conclusions of the recent Audit Commission national study report on the preparedness of local public services for the opportunities and challenges created by an ageing population.⁴² The report identified that the majority of people do not require local authority social care services as they grow older. It was, therefore, critical of councils which saw their role in preparing for an ageing population as primarily or exclusively concerned with social care provision and spending. The report concluded that:

'The statutory duty to deliver social care is only one dimension of a much broader role. In addition to fulfilling their statutory responsibilities, councils need to:

- understand, engage and mobilise the community to maximise the opportunities in the older population;*
- ensure that mainstream services are accessible to as many of the older population as possible, for as long as possible; and*
- shape and deliver targeted services aimed at promoting independence and wellbeing in later life.'⁴³*

Opportunity Age is the clearest statement by Government to date of this broader policy agenda. This strategy set out four aims to be achieved by central government, local authorities and the voluntary sector working together:

- '• identify and tackle issues which limit older people's ability to get the most out of life, including rooting out age discrimination and tackling the fear of crime and poor housing;*
- ensure that older people can be actively engaged locally in influencing decisions which affect their lives, such as planning local public transport;*
- ensure that older people have access to opportunities locally such as learning, leisure and volunteering; and*
- promote healthy living at all ages – older people are better able to enjoy good health in later life if they looked after themselves when they were younger.'⁴⁴*

⁴¹ HM Government (2005).

⁴² Audit Commission (2008) *Don't stop me now: Preparing for an ageing population*. Local Government National Report, July 2008.

⁴³ Audit Commission (2008) p.32.

⁴⁴ HM Government (2005) *Opportunity Age: Meeting the challenges of ageing in the 21st century*, p.xvi.

The Audit Commission's report explored the impact of the Opportunity Age initiative within a review of the extent to which local public services are meeting the needs of the increasing numbers of older people. It concluded that overall, Opportunity Age had had little impact on councils' performance because:

- “• *the strategy is clear, but it has a low profile. As a consequence the aims are not commonly known, nor has the strategy been successful in challenging stereotypes;*
- *the support promised by central government has not been delivered, other than through the pilot schemes run in ten councils;*⁴⁵
- *the outcomes that councils need to deliver are not defined; and*
- *there has been no assessment of progress, until now, and as a result good practice has not been shared.*”⁴⁶

Their assessment questions the degree to which capacity building has been achieved at each level: Firstly, effective capacity building requires investment in financial or human resource inputs. Progress to date is evidenced in the report, both in the limited support from central government and also the need to *'tackle stereotypes and myths that prevent older people being fully engaged in the community'*.⁴⁷ Secondly, in most of the councils studied, the process of implementation had a low profile and required *'a change of culture that ensures a shared cross-cutting approach, without sole responsibility resting with adult social care'*.⁴⁸ Thirdly, the report cited case study examples of how outputs can be improved by involving people in service design at the outset in order to age-proof mainstream services and save both time and money in the longer term.⁴⁹ Finally, the fourth element of capacity building, outcome improvement, could not be measured as *'the outcomes that councils need to deliver are not defined'*⁵⁰ without which progress assessment is impossible. If you do not know where you are heading, how can you measure whether you are travelling in the right direction or whether older people are beginning to experience any improvement in their quality of life?

⁴⁵ Note: There are eight not ten LAP pilot projects which were developed to bring together central government, local authorities and other organisations in partnerships to deliver services focusing on local needs.

⁴⁶ Audit Commission (2008) p.32.

⁴⁷ Audit Commission (2008) p.8.

⁴⁸ Audit Commission (2008) p.34.

⁴⁹ Audit Commission (2008) p.52.

⁵⁰ Audit Commission (2008) p.32.

3 Research questions and methodology

3.1 LinkAge Plus and capacity building

The aim of the LinkAge Plus (LAP) pilots is to provide *'a comprehensive approach for accessible joined-up services for older people; one which puts older people at the centre of policy making and service delivery'*.⁵¹ Thus, for LAP, capacity building to create effective services for older people starts from the assumption that older people are part of the solution rather than their needs being seen as the definition of the problem.

This assumption is enshrined in LAPs' six core principles which include the following statements which are especially relevant to the themes of capacity building as improving inputs, processes, outputs and outcomes. Firstly, the principle of 'engage and consult' is defined as *'Older people should be involved in the design and development of how services and relevant information are provided, and their opinions sought in the quality of delivery'*. Thus, older people are not being seen as passive recipients of services or subject to a one-way process of needs assessment but rather as active citizens designing, developing and evaluating services.

Secondly, the principle of 'ensure that services promote independence, wellbeing and active ageing' is defined as *'services should focus on early intervention and a preventative approach which goes beyond traditional health and social care functions; encouraging respect and social inclusion for older people as citizens should be a primary consideration'*. This principle mirrors the discussion above in recognising the broad agendas involved in working with older people as citizens rather than the narrower agenda of the more limited numbers of older people who require social care and health at specific periods.

Thirdly, the principle to 'maximise opportunities for efficiency and capacity building' is defined as *'efficiencies should be sought through joint working with partner organisations and improving outputs through capacity building'*. In this principle,

⁵¹ DWP (2008a) *Core principles of the LinkAge Plus approach*, DWP, London.

LAP is defining capacity building as developing or creating new and different resources and services which improve older people's quality of life and wellbeing by '*providing older people with access to a wide range of more integrated, joined-up services*'.⁵²

3.2 Research questions

The overall research question was to examine the extent to which LAP has been a tool for capacity building. The research, therefore, aimed to examine:

- how the eight LAP pilots have built capacity by developing and improving services which realise positive people-centred outcomes for older people; and
- whether the projects have built capacity by laying the foundations for the planning, shaping and delivery of people-centred services in the future.

For the purposes of this research, capacity building will not be defined solely as enhancement of inputs and processes or increased outputs as discussed above. Rather it will also focus on whether such capacity building has created sustainable capability to achieve improved outcomes for older people, either through the better use of existing services or through the development of new services. There is no starting assumption that these approaches require additional resources, although many have been developed or trialled with LAP funding.

For the purposes of this research, ten capacity building dimensions have been created, five for the better use of existing services and five for the development of new services as set out below. These ten dimensions complement the working assumptions regarding evidence of potential benefits to older people and organisations, developed for the national evaluation of LAP.⁵³

It is noticeable that the national evaluation framework assumes that partnership working, capacity building with the voluntary sector and involving older people in service design can contribute to an optimum service design and delivery framework. This suggests that the LAP approach is concerned with the possibilities of creating new resources and not just the better use of existing services. It will, therefore, be interesting to explore as part of this research into capacity building whether the eight LAP pilots have been able to create new sustainable services as well as ensuring that existing services are utilised more efficiently and effectively.

Table 3.1 maps the ten capacity building dimensions developed for this report against the national evaluation working assumptions which are set out in full in the Appendix.

⁵² DWP (2008b) LinkAge Plus, http://www.dwp.gov.uk/opportunity_age/linkage/

⁵³ LinkAge Plus (2007) National Evaluation Strategy. See the Appendix.

Table 3.1 Mapping the ten capacity building dimensions against the LAP national evaluation working assumptions

Better use of existing services which increases number and range of older people benefiting from improved outcomes

- Enhanced skill and knowledge resulting in better ways of working within existing services. (Working assumption 14: Increased customer satisfaction)
 - More effective processes generated by local organisations to enable access to, and targeting of, referrals for information, advice and services. (Working assumption 11: Easy access to relevant services)
 - Better understanding of the type and range of services offered by statutory, voluntary, community and private organisations and the ability to focus on appropriate strengths and specialisms. (Working assumption 16: Improved cost-effectiveness)
 - Joined-up or integrated services resulting in efficiency gains through reduced duplication. (Working assumption 15: Reduction in duplication and overlap)
 - Holistic understanding of older people's quality of life outcomes resulting in people-centred, rather than organisational or service-centred, approaches to strategic commissioning and operational procurement. (Working assumption 12: Services more joined up)
-

Development of new services creating different outcomes for older people

- Older people having new opportunities to socialise through involvement in social, training, leisure and networking activity. (Working assumption 3: Increased participation and involvement)
 - Creation of employment, self-help and volunteering opportunities which develop new skills and social capital through the engagement and empowerment of older people. (Working assumption 2: Older people engaged in workforce)
 - Market development resulting in new organisations being created to work with and for older people by partnerships of statutory, third sector and private organisations. (Working assumption 10: Relevant, tailored services)
 - Market development resulting in new preventative services being created by statutory, third sector and private organisations either individually or in partnership to work with, and for, older people. (Working assumption 13: Preventative services)
 - Multiplier effects, where older people, either individually or collectively, have been at the centre of policy development and service design and empowered to identify outcomes and create innovative solutions. (Working assumption 4: Increased contribution to society)
-

3.3 Research methodology

The research comprised three key elements:

- An overview of current thinking, policy and practice in relation to capacity building and, in particular, work which has been designed to improve outcomes for people aged over 50. This overview will aim to summarise key themes rather than provide a comprehensive analysis of the wide range of different initiatives at national and local levels aimed at such capacity building. It is likely to distinguish between initiatives which are primarily focused on older people as vulnerable or in poor health from those which start from an active citizen approach in which older people have the same rights and responsibilities as any other adult member of society.
- An examination of available evidence collected and collated by The Local Government Centre, Warwick Business School, from the eight LAP pilots. This involved an interrogation of secondary material such as the initial proposals, interim monitoring reports and local evaluation material submitted to the national evaluation team by the eight pilots. A list of the documents and reports which were analysed for this research is included at the end of the References.
- An analysis of the extent to which the evidence of effective capacity building by the LAP pilot projects is sustainable through mainstreamed services and embedded changes in awareness of what are the critical issues which impact on older people's quality of life and wellbeing.

3.4 Research findings

This research examined selected documentary evidence on the development of the eight LAP pilots including the initial proposals, interim monitoring data, web-based material and local evaluation reports⁵⁴. The following sections outline the nature of this evidence and an analysis of the extent to which it demonstrates effective capacity building in relation to the five dimensions of better use of existing services and the five dimensions of the development of new services. New services are defined here as those which create different outcomes for older people in contrast to the better use of existing services in increasing the number and range of older people benefiting from improved outcomes.

Several of the cited examples of specific projects provide evidence of more than one of these dimensions, demonstrating the importance of interconnectedness between complementary aims. For example, work to develop more effective processes generated by local organisations to target referrals for information, advice and services often result in a better understanding of the type and range of services offered by statutory, voluntary, community and private organisations and the ability to focus on appropriate strengths and specialisms.

⁵⁴ A list of documents analysed for this report is included at the end of the references.

The evidence presented here does not purport to be a comprehensive analysis of every aspect of the ways in which the eight LinkAge pilots have enabled capacity building in relation to working with, and for, older people. Rather it seeks to demonstrate the wide range of initiatives which have been created across the eight pilot sites and analyse how they can contribute to an overall framework for effective capacity building. The evidence thus provides exemplars of approaches that could be adopted and adapted elsewhere by local authority, third sector and private organisations that seek to unlock and empower the potential of working with and for older people as independent and active citizens.

4 Better use of existing services which increases number and range of older people benefiting from improved outcomes

4.1 Enhanced skill and knowledge resulting in better ways of working within existing services

The LinkAge Plus (LAP) initiative has inevitably resulted in key staff from statutory and third sector organisations improving their skill and knowledge in the use of existing resources to achieve better outcomes for older people. Learning on the job, through day-to-day interaction with older people and colleagues in other organisations, has been an integral feature of the eight LAP approaches. However, the research has found limited evidence of specific skill and knowledge training, particularly for staff in voluntary and community organisations, or of work directly involving the private sector.

One example of work specifically targeted at skill and knowledge development in the voluntary and community sector is the **Leeds** capacity building grants. The capacity building work stream of Leeds LAP has been looking at ways in which voluntary organisations working with older people across the city can be strengthened and supported to develop the services they provide, including specific targeted work with particular organisations to enhance their capacity and our knowledge of the issues affecting them.

*'Most of the capacity building resource was spent in the voluntary sector: approximately 27 per cent of the capacity building money was spent directly in the grass roots voluntary sector organisations and 66 per cent in voluntary sector infrastructure organisations.'*⁵⁵

Capacity building grants have benefited 58 organisations including nine black and minority ethnic (BME) groups and have helped to:

- enhance inputs through investment in equipment, training, planning, leadership, and volunteer recruitment and skills development;
- enhance processes through the 'Gateway sites' (see below) and consultation with Neighbourhood Network projects (an example of community engagement) to improve understanding of older people's needs, access to services, and barriers to service uptake;
- develop the role of older people as 'peer mentors' to promote and ensure access to information and services: *'An interesting innovation is the use of 'peer mentors' to help other older people to access services and work with local shops and resources to raise awareness of older people's concerns, needs and expectations'*;⁵⁶
- improve service provision that has included an association of visually impaired Asian people developing a website and purchasing screen-reading software to improve access to the internet;
- *'[The grant] has led to informed understanding between staff, volunteers and groups' service users and a deeper understanding of the needs and requirements of the Chinese elders in terms of gaining access to services and general awareness of their availability'*.⁵⁷

4.2 More effective processes generated by local organisations to enable access to, and targeting of, referrals for information, advice and services

All of the LAP pilots included an element of developing the capacity of the system to ensure older people can access understandable, reliable and locally available information and advice and be referred for service where appropriate. This aspect of LAP has been more extensively reviewed in another of the national evaluation thematic reports.⁵⁸

⁵⁵ Leeds LinkAge Plus (2008) Background Research Report 3 – Capacity Building p.3.

⁵⁶ Leeds City Council (2007), Update Plus, LinkAge Plus, Newsletter, Issue 1, September 2007.

⁵⁷ Leeds Older People's Forum (2008) Capacity Building. www.opforum.webeden.co.uk/

⁵⁸ Ritters, K. and Davis, H. (2008) *Access to information and services for older people – the joined up approach*, Working Paper No. 53, London: DWP.

The LAP pilot in **Salford** examined for this research was the city's Housing Choice specialist signposting service. This provides housing advice for older people to help them to stay in the accommodation that they are currently living in or move to other more suitable accommodation. Housing Choice was designed to help older people living in Salford make informed and sustainable housing choices. The intention was to develop a service that improved older people's access to information about the different housing options available to them. The initiative is a partnership between Salford City Council and the Salford Primary Care Trust Community Health and Social Care Directorate. The city council's Commissioning and Projects Team, part of the Housing and Planning Directorate, manage the service, which is provided free of charge for older tenants and homeowners.

Housing Choice has two full-time staff coordinating the management of a service that helps older people make and implement decisions about housing that are appropriate to meet their needs. The focus is on understanding older people's circumstances and ensuring housing decisions do not adversely affect their quality of life. Older people are more able to take control of their housing situations and are empowered through improved access to a range of housing options with the intention that they are more likely to find something that is appropriate for them. The service has links with professionals in the city council's adult services, learning disability, physical disability and mental health teams as well as sheltered housing wardens and Age Concern staff and volunteers. This means it is possible to guide older people with housing queries more effectively towards the sorts of organisations that can best help them, based on an assessment of their needs.

Housing Choice is a comprehensive example of a process designed to be joined-up and people-centred in providing information and advice and making referrals to other agencies. Since its inception, more than 340 older people have received assistance to make sustainable housing choices, with about 70 moving to other accommodation and the rest deciding to stay in their current homes with some referrals to organisations that helped to ensure they were able to maintain a good quality of life.

LAP has also fostered the development of Telly Talk, a video conferencing facility available in public libraries that links to the city council's Customer Contact Centre, or through a Mobile Information Centre (MIC) that is located in areas frequented by a large number of people. These are examples of new technologies being used to develop more effective processes for dealing with older people's housing queries and problems through the improved coordination of access and referrals to services provided by a range of partner organisations.

The local evaluation of the Salford LAP pilot reflected on the experiences of two initiatives focused on providing access to information and services: Housing Choice and the One Stop Shop referral network. The researchers' conclusions raise important questions about the potential limitations of joined-up referral and information systems in providing accurate information in complex situations.

*'It is clearly not always necessary nor indeed the right way to go to choose the fullest integration possible. Indeed the referral system suggests that it may not always be possible with highly complex interventions. This confirms other work done around business service provision where the personal advisor role was shown to be unworkable for the very same reasons and similarly in the One Pilot in jobcentres. It seems that the larger the degree of specialization the less likely it is that one person with or without the IT script system can make appropriate referrals leading either to too many or too few. It remains the case that a lot can be done through cooperation and fairly modest attempts at providing holistic services. What is important for holistic services is targeting them on the most vulnerable. Housing choice and the referral network have provided examples of how this can be done.'*⁵⁹

Gateshead Link-up is designed to connect people aged 50 and over with services they need and is based around existing partnership arrangements working locally. The Link-up initiative operates in conjunction with the Older People's Assembly to enable partner organisations and individuals to better help and signpost older people. It was designed to improve organisations' capacity to target advice and information more efficiently and effectively.

To this end, a council website has been expanded to incorporate the Link-up initiative and a self-assessment tool developed that provides a direct connection to a number of voluntary and community sector organisations involved in providing services for older people. Link-up has brought together information from a group of organisations into a self-referral checklist that appears on the council's website. In total 33 organisations were invited to provide information to help with the development of an on-line interactive assessment tool forming part of the city council's website. It is an effective way to identify organisations that can help older people and has also revealed gaps in signposting and other opportunities. For example, the service has prompted new links to be made with transport providers and organisations providing shopping services for older people. In addition, the website has given rise to a paper-based system that is used to train social care workers to help them make appropriate referrals.

Whilst Gateshead Link-up is an example of more effective processes being generated by local organisations to target referrals for information advice and services, it also has features of other capacity building dimensions. Thus, the training aspects have sought to enhance social care workers' skills and knowledge; the work with 33 local organisations has resulted in a better understanding of the type and range of services offered by partner agencies and the ability to focus on appropriate strengths and specialisms; and the simplified referral process has aimed to achieve efficiency gains through reduced duplication. This project demonstrates how a comprehensive approach can be developed to ensure the better use of existing services.

⁵⁹ Johnson, C. *et al.* (2008) LinkAge Plus Pilot Salford: Evaluation Report, p.6.

The **Leeds** LAP pilot has sponsored the 'Gateways' approach which aims to ensure that older people can effectively access and use comprehensive and relevant information and advice about existing services collected by the neighbourhood-based Network Centres. The Gateways initiative is presently based around six organisations and established centres that are 'Gateway sites' and have volunteer staff trained to support older people. The intention is to provide a more effective way to coordinate access to information on services for older people and help to ensure they receive relevant advice about the availability of services that will help to meet their particular needs.

The Gateway sites are a single point of contact for older people seeking information on services and have also helped to create new opportunities for older people to get involved in different activities and develop new skills and competencies. Each centre is equipped with computer facilities and has support staff to help ensure there is a comprehensive web-based information store that older people, carers and professionals can access and use. Further detail on this website initiative is provided in the section on the Leeds Infostore pilot.

To begin with, the rate of referrals to the system was low but it has improved over time and a large number of referrals have been made to other services. Training in Disability Living Allowance (DLA), Attendance Allowance (AA), and other relevant benefits for older people has been made available to voluntary sector organisations and is included in the 'Older Better' strategic plan (for Health and Social Care in Leeds) for 2008/09. The referral pathways tool has been shared with other organisations. But, it is recognised that much time and effort is required to forge connections between a wide range of organisations before referrals will start to rise.

The **Lancaster** Care Navigator Service is a project delivered by the city council in partnership with a voluntary sector provider called Signposts. The service is designed to help older people understand more about the range of care services available. The Care Navigator Service is run mostly by volunteers and is designed to be flexible to reach older people that are isolated and at risk of social exclusion. The service provides support and coordinates the arrangement of relevant services for older people. It helps to ensure organisations work effectively together on behalf of vulnerable older people and prevent a situation where they fall through the net and remain out of sight.

The service takes referrals from a number of organisations (as well as self-referrals) and identifies one-to-one services and activities individuals are interested in whilst removing barriers that prevent older people using services and getting involved in activities. These barriers include transport problems and caring responsibilities. Referrals can be made onward to appropriate participating service providers providing a one-off intervention and advice, generic support, or tailored individual support. However, in some instances it has proved difficult to recruit and retain volunteers with the levels of commitment needed for this sort of work. It has been suggested that some type of remuneration for the time that people give to running the initiative and providing services may have to be considered.

In **Devon**, the 360° wellbeing assessment tool called 'Getting the Most Out of Life' is based around Sure Start to Later Life and was introduced for frontline staff to help with the assessment of older people's needs. More importantly the tool also helped older people with self-assessment and to direct them to a simple source of information and advice available by telephone or an efficient and sustainable online resource. Resources and training were provided for the Devon Customer Service Centre to develop the use of this 360° tool. It aims to assist with maintaining a coherent framework regardless of referral source or presenting problem and has been devised to help older people access information and services, maintain an active and involved lifestyle and reduce the incidence of social isolation and exclusion. It is also a tool to aid older people's thinking about their own needs and they have been involved in designing the approach and associated website, logo and leaflets.

The pilot's documentation suggests that the introduction of the checklist has stimulated new learning about older people's needs and new thinking about the way that organisations handle information on older people and deal with their inquiries and problems. It is also argued that this work has helped to make more visible a wide range of information on services and focused attention on the prevention of problems caused by insufficient knowledge of the different statutory, voluntary and community-based organisations that can provide services for older people.

There is a clear partnership effort to make the checklist work for older people through a linked website and publicity materials. The Devon Customer Service Centre frontline staff and volunteers use the checklist to raise older people's awareness of available services. The checklist is a tool that provides information used to improve Customer Service Centre staff, community mentor, and professional worker knowledge and skills. Customer Service Centre staff are now more frequently referring older people to sources of help outside the county council.

Constructing a comprehensive web-based information resource will assist some voluntary sector services but is not in itself sufficient. To support frontline staff and volunteers local organisations need to be part of a network that supports their needs for access to, and ability to use, information. This will also help to ensure statutory agencies direct information to local communities effectively. A local 'hub' (a particular voluntary organisation assisted to undertake a role supporting other voluntary organisations) is likely to be useful. Sometimes an area will have an existing network with a natural 'hub' and at other times a network of local organisations will need to be developed and then a 'hub'.

The **Gloucestershire** Village Agents project has developed a single Gateway process through which the Village Agents and staff from other organisations can access information and make appropriate service referrals. This is supported by web-based processes and the county council's existing Customer Care Centre and Adult HelpDesk, a well established telephone advice and referral service for the whole county. Gloucestershire had been a Care Direct pilot and through this

had established the Customer Contact Centre and information base and had developed strong relations with a number of partner organisations. It, therefore, had a head start in understanding the marketplace of service providers working with older people and older people's needs.

Funds have been allocated to provide the equipment that Village Agents need to do their job, including laptop computers with internet access and mobile phones. A straightforward electronic referral system has helped statutory and voluntary sector organisations to work with Village Agents and adopt a more holistic approach to information and service provision. These organisations are in a better position to co-produce new ways of working that help to maximise the efficient use of limited resources and deliver the outcomes desired by older people.

On average Village Agents are in contact each month with 1,660 people and between them make around 230 direct referrals for services. In 2007, Village Agents made over 20,000 contacts with customers and dealt with 2,684 enquiries including 192 referrals to the DWP, 136 referrals to fire and safety contacts and 151 referrals to home improvement agencies.⁶⁰

Village Agents are able to carry out home visits when necessary and can undertake home safety, benefit entitlement, and energy efficiency checks. There are very real opportunities to take action to avoid problems and emergencies arising in the future. Older people in rural areas are likely to feel more secure and have a better quality of life through improved access to information and joined-up service provision.

This level of work indicates the effectiveness of the processes devised to help older people access services. A side effect of this work is that county and district council, health, and voluntary services are viewed more positively as public awareness of the services that they provide is increased and organisations obtain a better knowledge of each others' services and how they can complement each other.

The **Nottinghamshire** First Contact project helps people aged over 60 to get access to services through the use of a checklist to enable multi-agency referrals from a single contact. An older person can obtain information on a range of services without having to contact a number of different organisations separately. Enquiries directed to Nottinghamshire First Contact can be turned into referral for services. The overall aims are to enable older people to remain in their own homes and prevent any deterioration in their quality of life.

If someone from any of the organisations signed up to the First Contact service (e.g. a firefighter, police officer or volunteer worker) visits an older person at home they can use the checklist to determine their circumstances. This checklist

⁶⁰ Wilson, L., Crow, A. and Willis, M. (2008) Overall Evaluation Report, LinkAge Plus Project Village Agents: Gloucestershire County Council in partnership with Gloucestershire Rural Community Council. INLOGOV, The University of Birmingham, p.5.

includes the need for fire safety or home security checks; home repairs or mobility adaptations; energy saving improvements to keep warm and lower bills; advice on benefit entitlements; signposting to local voluntary and community groups; and help to find more suitable accommodation. This demonstrates the range and breadth of benefits which can potentially be realised for older people by more effective processes for accessing and targeting referrals for information, advice and services.

Further consideration of Nottinghamshire's First Contact project is included in the next section and analysis of the advice and information services provided by **Tower Hamlets'** Community Network Centres is discussed later in this report.

4.3 Better understanding of the type and range of services offered by statutory, voluntary, community and private organisations and the ability to focus on appropriate strengths and specialisms

Most of the LAP processes generated by local organisations to enable access to, and targeting of referrals for, information, advice and services also included elements of this dimension. The distinguishing feature is that in addition to the straightforward provision of reliable and understandable information and advice, this dimension includes both staff and older people themselves understanding who offers what and thereby enabling the development of an improved focus on appropriate strengths and specialisms.

The **Nottinghamshire** First Contact service helps to ensure older people are put in contact with the statutory, voluntary, and community organisations that can help to meet their needs. It is an innovative venture designed to provide a structured and coordinated response to issues affecting older people. If there is no response to a request for help from an organisation within 21 to 28 days (depending on the district covered), a reminder is issued asking for a response within 24 hours. If there is still no response the organisation receives another reminder and then personal contact is made with the organisation. The focus has been on joining up services using the checklist system and targeted referrals to other agencies that help to prevent a situation where older people have to search out help and avoid unnecessary effort on the part of organisations that cannot help them and then have to refer them on to another organisation.

Access to services has been broadened by improving the way that referrals are made across a range of organisations. The partners have devised a checklist that has simplified the referral process and enhanced their understanding of the different types of help that can be provided for older people. Each organisation should be more able to concentrate on delivering its services well rather than spending time on dealing with enquiries from older people that they cannot help. At the same time, the checklist can help to maintain an emphasis on understanding the

particular needs of individuals. For example, an enquiry about adaptations can make all of the county's social care services available as part of a process that aims to generate the best possible response to questions to meet older people's needs. Completed checklists are returned to a central point of contact in each district where staff deal with the responses of partner organisations. A person from one of the partner organisation will then visit an older person referred to them to talk about how they might be able to provide help.

The evidence from Nottinghamshire's LAP First Contact project suggests that it has:

- increased the number of referrals for preventing falls by older people;
- helped to ensure contact is made with older people to prevent more serious interventions in the future;
- focused on reducing preventable injuries to older people in the home caused by accidental fires and assisted with the fitting of smoke detectors that has reduced the number of domestic fires attended;
- enabled more effective working with other agencies to increase the take up of relevant benefit entitlements.

The **Leeds** Infostore pilot similarly aims to build capacity by enhancing the work done by a number of Network Centres to improve information collection at the community or neighbourhood level and its use as a resource for older people. Infostore is a new type of arrangement forged between voluntary sector organisations to ensure older people are able to gain access to a well-managed on-line advice and service information resource. However, the Infostore pilot has not only focused on older people's access to information about services but also the development of capacity within the voluntary sector to provide enhanced service provision for older people.

Infostore was established over a 12-month period with two full-time staff and an information technology budget of £30,000. The initiative has resulted in more independence and choice for older people through the provision of improved service advice and information at the local level. It consists of an electronic portal accessible through partner voluntary and community centres and public access points such as libraries. Some older people have been trained as information volunteers helping to provide an on-line service that is well placed to effectively deal with inquiries and steer older people in appropriate directions to obtain the extra help and assistance that they might need to access relevant services.

The Infostore initiative used information derived from the '*Older Better Leeds*' strategy⁶¹ that was built around ten themes that older people in the city identified as key to their wellbeing to construct an older people-friendly website. The aim

⁶¹ Leeds (2006) *Leeds Older Better Strategy: to promote a healthy and active life for Older People 2006-2011*.

was to ensure that the website design and construction methods adopted were genuinely older people-centred and based on a clear understanding of their service provision needs and expectations. The ten key themes identified as important for older people's wellbeing were arranged into a set of categories under which important information for older people is catalogued. The information is obtained from various documents, papers, reports and links to various websites. The Infostore website initiative is a partnership between the city council and voluntary sector organisations that draws heavily on older people's views and experiences to provide a service that meets their needs.

In addition, the **Leeds** LAP pilot established a Peer Support Network for frontline staff who work with older people who were socially isolated. During the pilot, this network grew to over 200 multi-disciplinary professionals, who were able to share best practice information, network and fully understand services provided by other organisations in Leeds.

The wide range of organisations involved in helping to provide **Salford's** Housing Choice service has also helped to improve older people's knowledge about the help available to keep them in their own homes or find other accommodation depending on what they decide is best for them. At the same time, the organisations that help older people with housing problems are better able to recognise their limits and concentrate on developing their strengths. These organisations include Salford Home Improvement Agency, the Affordable Warmth Team, Burglary and Crime Reduction Teams, the Occupational Therapy Team, Housing Market Renewal Teams, New Prospect housing staff, Community Health and Social Care, Manchester Care and Repair, Bury Staying Put and the Citywide Handypersons Service. There is, therefore, a wide range of possible solutions to older people's housing problems because there are so many organisations that can be called upon to provide advice and assistance.

This initiative has created the potential for efficiency gains through reduced time and effort spent resolving problems. For example, partner organisations were invited to draw up a set of criteria to help identify the type and range of issues on which they could provide advice or support for older people. The aim was to identify organisations that can provide help for older people before their problems become serious, thus preventing situations where intervention that is more intensive is required.

Expensive advertising was deemed not to have worked well and it was felt with hindsight that an administrator should have been employed by Salford's Housing Choice to free up team time to focus on older people and their problems. It was also recognised that the popularity of, and consequent demands on, the service were underestimated causing lengthy waiting lists for help and assistance. Because of time constraints it is not always possible to provide as full a personal service as was hoped for, and it has not been possible to visit older people after they have been giving assistance to monitor effectiveness.

This example provides evidence of the significant potential demand for housing advice and information focused services, a demand which in this instance outstretched supply. As such, it both built capacity and revealed the need for additional capacity to ensure sustainable services and beneficial outcomes for older people in Salford.

As part of **Gateshead** Link-up, organisations are working together to find better ways to deal with older people's concerns and are enhancing their skills and knowledge about older people's circumstances and problems. Underpinning Link-up is a desire to co-locate useful information for professionals and older people. The result is the creation of a more effective means of understanding what information and services are available and putting older people in touch with appropriate organisations that can help them. The referral process is more joined up and helps to avoid the unnecessary redirection of people to different services and possible duplication of effort to find a solution to their problems.

4.4 Joined up or integrated services resulting in efficiency gains through reduced duplication

Whilst all of the LAP pilots have promoted partnership working to improve older people's access to services and many have sought to strengthen understanding between partners about the nature and range of services that they provide, there were fewer examples of organisations either joining up or integrating direct service provision.

The **Salford** Housing Choice team work in a range of ways with partner organisations to ensure joined-up and integrated services. Partner organisations include housing offices across the city, Salford Home Search, the choice based lettings team, registered social landlords, local day centres, health professionals, and care agencies. The project obtained some extra funding from Salford City Council's Housing Market Renewal Team to assist them with vulnerable clients living in compulsory purchase areas needing to be rehoused. In addition, the council's Corporate Customer Contact Centre, called Citizen, uses a database of all Salford residents that can identify callers as being eligible for specific services and supports a referral network. In this way organisations are more interconnected in terms of being able to communicate with each other and avoid duplication of effort in dealing with older people's housing problems.

Alongside Housing Choice, Salford LAP has also created a referral network as part of the City Council's Contact Centre with the aim of joining up delivery and improving services for older people. Evidence from this parallel project suggests that care needs to be taken in estimating the potential demand for such initiatives and consequent resource implications. Generating referrals for services can be counterproductive if the system does not have the capacity to meet increased demand for services. In Salford, demand has been managed by changes in the referral criteria as demand for smoke alarms and crime reduction visits was higher than predicted.

Despite such *'teething problems'*, the network was seen as a positive resource by the local Age Concern in Salford in expanding *'the means through which people might engage with service providers rather than replacement of the existing third sector one'* and not duplicating the activity of the Council.⁶²

4.5 Holistic understanding of older people's quality of life outcomes resulting in people-centred, rather than organisational or service-centred, approaches to strategic commissioning and operational procurement

There is emerging evidence that the work of the LAP pilots is fostering a move away from needs or service-centred approaches to strategic commissioning towards an holistic people-centred approach. The focus of such work is on improving outcomes for older people and not simply to ensure improved access, integration or partnership working. This is clearly in line with the analysis and recommendations of Opportunity Age.⁶³

The LAP pilot in **Tower Hamlets** has resulted in the setting up of a single point of access to services for people aged 50 and over through five Community Network Centres. A simplified process for obtaining services has been created by a number of partner organisations working out of the centres or in close contact with them.

The centres are an example of how opportunities to develop services for older people have been used to connect organisations through networking activities that are helping to promote fulfilling lifestyles and build social capital in communities. Indeed, the Primary Care Trust has demonstrated its support for the approach by agreeing to match local authority funding so that the work that the centres are doing can be sustained when the LAP pilot funding ends. They perceive the LAP projects as similar to integrated children's services working in the community rather than just at Primary Care Trust premises. This is a clear indication of how the LAP pilots have contributed to changes in organisational thinking about the way that services are delivered.

One of the aims of **Nottinghamshire's** First Contact project is to reduce preventable injuries in the home. This is an example of organisations working together in a joined up way that ensures older people gain access to services that will prevent bigger problems from occurring in the future. At the same time, it seems to represent a step change in understanding older people's needs and adopting a people centred rather than an organisation-centred approach to service provision. Organisations working together to increase the take-up of benefits offers much

⁶² Johnson, C. *et al.* (2008) p.24.

⁶³ HM Government (2005) *Opportunity Age: Meeting the challenges of ageing in the 21st century.*

scope for preventing the inefficient use of resources in the future, helping older people affected by a lack of sufficient money to maintain a good quality of life. Again the focus seems to be on improving outcomes for older people and not simply enabling organisations to make more effective contact with them.

A multi-agency checklist acts as a referral gateway to a range of low-level preventative services for older people and is linked through Nottinghamshire Contact Centre's customer relations management (CRM) system so that a single question can make available the services provided by a particular organisation. The partners involved include Nottinghamshire Fire and Rescue Service, the County Council's Adult Social Care and Health Department, the Police, The Pension Service, Welfare Rights, Councils for Voluntary Service, registered social landlords, home improvement and energy efficiency agencies, the 50 Plus Forum, the Rural Community Council, BME groups, carers groups, and borough and district councils.

Partner organisations are also able to provide extra services that include a registered traders' list, shopping help, and gardening and care and repair services. First Contact shows how new, more co-operative working arrangements between statutory, voluntary, and community organisations can result in the better coordinated delivery of a range of information and preventative services. First Contact costs £28.57 per referral and the cost of dealing with a hip fracture is estimated at £25,425. If First Contact is able to prevent a hip fracture in 0.112 per cent or more of the older people it helps, then it will be cost effective. First Contact is in a strong position to maximise the benefit that older people are able to obtain from contact with service providers. The benefit arrears paid out for one six-month period totalled £9,390.56 and extra benefit awards made totalled £47,050.64.

Evidence of the early impact of the First Contact initiative was reviewed by IDeA in 2007.⁶⁴ It described the start-up work in the district of Rushcliffe as providing an holistic approach to the identification of older people's needs. A police representative said the initiative was *'fantastic because it helped them reach older people at risk before a crime had been committed'*. The research found examples of how the LAP pilot had been used as a stimulus to the implementation of a single assessment process with the aim of creating an holistic understanding of what will provide effective support for older people living independently in the community.

⁶⁴ IDeA (2007) *Front office shared services – Rushcliffe shared services*, May 2007, Improvement and Development Agency www.idea.gov.uk/idk/aio/6424468

In **Leeds**, the Streamlined Assessment Pilot (StAP)⁶⁵ is a partnership between the Local Authority Benefits Service and The Pension Service that focuses on finding ways to simplify both the application process for benefits and pensions advice or support and also the systems for referring older people on to other relevant service providers. It has resulted in the setting up of an inter-agency team of workers from the Local Authority Benefits Service and The Pension Service, the creation of a referral pathways tool, joint training for staff in benefits advice, and a single assessment process for health and social care. All referrals received through established channels in the pilot were subjected to a StAP review and NHS services and voluntary organisations were approached to seek cross referral.

Across **Devon** there is widespread use of a Single Assessment Process (SAP) with an agreed set of documentation for all partner health and social care organisations that use a nationally recognised toolset with local additions to take account of a 360° wellbeing checklist. The 360° assessment tool is an imaginative example of how more effective processes generated by local organisations can target referrals for information, advice and services. The checklist and new partnership working arrangements have helped to improve the referral process used to direct older people to the services that they need.

Crucially, people working in the health and social care field using the checklist have recognised their views on what holistic means are not comprehensive when compared with older people's information and service needs. Local organisations that provide services for older people are building stronger co-operative relations, sharing information, and learning from each other. Devon Primary Care Trust, Royal Devon and Exeter Foundation Trust, and North Devon District Hospitals are using the checklist as part of an holistic approach to service provision and Age Concern Devon's ABC Line befriending and caring staff also used the checklist.

⁶⁵ For a more detailed discussion of two London pilots, see Hilton, J. (2008) *Streamlining the assessment of Attendance Allowance applications with social care assessment: an evaluation of two London pilots*, Research Report No. 534. London: DWP. www.dwp.gov.uk/asd/asd5/rports2007-2008/rrep534.pdf

5 Development of new services creating different outcomes for older people

5.1 Older people having new opportunities to socialise through involvement in social, training, leisure and networking activity

LinkAge Plus (LAP) pilots have adopted innovative network development approaches to enable older people to create and experience new opportunities to socialise through involvement in social, training and leisure activities. Examples include services designed to address broader community and social wellbeing outcomes by creating and maintaining social capital.

The aim of **Gloucestershire's** Village Agent project is not only to improve access to services but also to reduce social isolation. It is an innovative approach that has established new networks between older people, community-based workers, local councils and other service providers working with, and for, older people. Village Agents have developed a positive relationship with people living and working within the areas that they serve and there is the potential to improve social capital through the range of different networks that they establish with organisations and people.

Village Agents have enabled older people to take control of queries and problems and work together in their communities and with partner organisations to find solutions to them. For example, one Village Agent empowered a group of older people by helping them to persuade the local bus company to change the location of bus stops to ensure a safer service for people living in isolated villages. Other Village Agents have set up an over-60s club with 62 members, brought in a library

to a village, established a Tai Chi class and encouraged adult education classes which are held in a local pub.

Tower Hamlets has a series of Community Network Centres and uses an outreach approach linked with these centres to introduce people to the services that the centres provide and try to deal with the problem of social isolation and unmet need. In Tower Hamlets the aim is to have a universal service that starts from what older people want as well as need, addresses social isolation and promotes community cohesion.

Examples of the centres and the services that they provide include:

- Sundial House which is a community resource with a café and outreach workers;
- Sonali Gardens which is a centre providing day care and extra-care in an area with a significant Bangladeshi population and developing a cross-cultural model of care;
- Appian Court which is run by Age Concern;
- Neighbours in Poplar which is a small group involved in community support activities;
- Toynbee Hall which is a long established educational facility.

The above examples show how new services have been developing through the Community Network Centres. Sonali Gardens is undertaking work to better understand the issues involved in providing care services to the Bangladeshi community and progressing the development of a cross-cultural model of care. On the other hand, Toynbee Hall is providing opportunities for older people to decide what their interests are and obtain access to learning resources and experiences. The centres and the work that they do appear to be resource intensive but they provide safe and inviting spaces where older people can come together and take part in a range of activities.

For example, the Sundial Centre offers a drop-in facility focused on meeting the needs of the local community and especially people aged 50 and over. The centre runs an art class for beginners and an advanced group works with an artist in residence. The Sundial Centre art class is addressing mental wellbeing issues by building self-esteem through new friendships and learning about drawing and painting. An art tutor is employed for ten hours at £25 per hour to run sessions over an eight-week period whilst art materials cost around £400 in total. The centre's art group was nominated to work with a local artist and the National Gallery to think about designs for the Fourth Plinth Project. The group made models that were displayed at the National Gallery. Members of the art group went to the National Gallery to look at work from the five artists whose work had been put forward for the Fourth Plinth in Trafalgar Square. All ten users took part in the Sundial Centre exhibition and three sold their work of art.

Network Centres appear to be well supported and are helping older people to socialise through involvement in cultural, learning and recreational activities. This will help to establish or maintain social networks and participation in healthy living activities that improve the confidence and wellbeing of older people. They are empowered when new or stronger bonds are created between themselves and the community in which they live. Meanwhile, statutory organisations have become more confident about backing services provided in the centres because there is evidence that older people trust and use them to access a range of other more integrated services.

Outreach work linked to local network centres helps to ensure the centres are responsive to the needs of all older people and are working with them to meet unmet need. More specifically, the emphasis has been on reaching out and raising awareness amongst older people of the centres and the services that they provide. This outreach work has helped to make various activities in the centres sustainable.

As discussed elsewhere in this report, **Devon's** community mentors are also working with older people to encourage the development of activity groups that they can run themselves once they have been set up.

5.2 Creation of employment, self-help and volunteering opportunities which develop new skills and social capital through the engagement and empowerment of older people

The research elicited a small number of examples of the development of employment, self-help and volunteering opportunities for older people. This included evidence of engagement with the private sector, a feature that was noticeable by its absence from most of the secondary data analysed for this report.

The most significant employment and volunteering initiative was the **Lancaster 50 Forward** Employment Agency and Volunteering Bureau. This project is a partnership arrangement that includes the Forum for Older People, Lancaster District Older People's Partnership Board, Age Concern and Signpost. The initiative that this partnership has supported is an example of innovative working between organisations to provide employment and volunteering opportunities specifically tailored to meet the needs of older people and empower them through engagement in paid or unpaid work activities.

Lancaster 50 Forward used LAP funds to establish an employment agency and a volunteer bureau that provide information and assistance on employment and volunteering matters to older people keen to return to work or develop their skills. The aim is to focus on the employment and volunteering needs of older people and value the knowledge and experience that they bring to the workplace. The

employment agency and volunteering bureau is an original idea and attempts to deal with the specific employment problems that older people face and empower them through engagement in paid or unpaid work activities.

The new employment agency that was created for older people is managed by Age Concern Lancashire. The Lancaster 50 Forward employment signposting service provides:

- help and advice finding a new job;
- access to training and re-skilling;
- volunteering opportunities;
- opportunities to liaise with employers to improve prospects for older people;
- access to Jobcentre Plus and Pension Service advice;
- access to Time Bank services through a volunteer bureau.

The volunteering bureau maintains a database of volunteer organisations and services and can signpost or direct older people to suitable volunteering options when it is appropriate to do so.

The Employment Agency and Volunteering Bureau for older people are co-located in shared accommodation and can liaise with each other so that volunteering can lead to employment. This is an important development since there do not appear to be many examples of this type of cooperation between employment and volunteering organisations. The initiative has promoted the independence and wellbeing of older people through helping them to overcome some of the constraints that prevent them from finding suitable work.

From January 2007 to January 2008, the employment agency helped 66 people into paid employment and successful partnerships were established with 67 local employers. From April 2007 to January 2008, the volunteering bureau placed 126 of the 164 people registered with various voluntary organisations. The successful provision of opportunities for personal development through volunteering and employment activities can contribute to the building of bonding social capital when people from the same community work together and bridging social capital when people from different communities work together.

In **Leeds**, a partnership comprising of Leeds Metropolitan University and Voluntary Action Leeds has created a local Wiki (a forum blog for information and best practice exchanges), whilst outreach work is promoting local volunteering opportunities and taking volunteer management expertise out to a range of communities and organisations. The Volunteer Grant Fund for Older-People-Focused voluntary organisations is aimed at supporting volunteer recruitment, training and management. As a result, local evaluation reports claim that many new volunteering and employment opportunities for older people have been identified and publicised.

A feature of **Devon's** community mentoring service was the proportion of mentoring graduates going on to become volunteers, formally or informally, within the service or elsewhere. This development only emerged towards the end of the LAP pilot and demonstrates how a service can mature over time. Volunteering also seemed to provide a powerful further motivator in sustaining people's involvement.

Gateshead Time Bank is a community involvement project run by Age Concern Gateshead that focuses on stimulating older people's mutual community support. Participants use their skills and time to benefit others for which they receive a one-hour Time Bank credit for every hour of time they give that can be exchanged for help and support for themselves. Time Bank has promoted older people's independence by encouraging service provision for, and by, older people. There is support for lifelong learning and access to volunteering opportunities alongside the delivery of services that promote the creation and maintenance of sustainable communities. It is, therefore, an example of a new service designed to create self help and volunteering opportunities which develop new skills and social capital through the engagement and empowerment of older people.

Time Bank costs £60,607 to run over a 12-month period, including the salary of a full-time coordinator and the purchase of equipment for work such as gardening and decorating. It is an efficient way for local statutory, voluntary and community-based organisations to provide targeted help that prevents deterioration in older people's quality of life. The scheme coordinator and volunteers have been able to reach older people living alone or in sheltered housing, care and nursing homes. The result is joined-up working to tackle issues early on and avoid more major interventions later.

Time Bank activities have been decided by the demands and offers of people participating in the initiative and include basic housework, befriending, gardening, and helping out in the Gateshead charity shop and day centres. Individually and collectively older people are influencing service provision and benefiting from services tailored to meet their needs and delivered in partnership with a range of organisations. However, some types of support that are offered including gardening and decorating may be difficult for older people to provide to one another and a range of volunteers with different abilities contributing to the initiative is essential. It has proved difficult to achieve this sort of volunteer mix but Time Bank volunteering has helped build older people's skills and confidence. Moreover, the community development work done for Time Bank has indicated gaps in service provision.

The Time Bank coordinator has provided information and support for groups that wanted to organise their own social activities resulting in enhanced skills and better ways of working together to ensure existing services are well advertised and managed. Time Bank recruited more than 50 members from 20 to 88 years of age and in addition to these formal members more than 70 people have benefited from the initiative by giving or receiving services or being involved in various social

activities. Opportunities for interaction and learning have contributed to improved processes and procedures for delivering a range of services at the community level.

These three LAP pilots have all developed parallel initiatives aimed at involving older people as volunteer evaluators of services and projects for older people. Lancaster recruited a group of older people to evaluate the work of the 50 Forward Employment Agency and Volunteering Bureau. Leeds built a successful research partnership with academics at Leeds University who trained and supported older volunteers to take part in the research and evaluation work. In Gateshead, older people helped in the interviewing process to research the partnership between several independent organisations were funded by the pilot.

The report of a meeting of delegates from the three projects identified the importance of the two way processes of engagement with older people.⁶⁶ On the one hand, volunteer evaluators require training in research skills and confidence building and on the other they should be treated as equal partners whose life experiences, knowledge and wisdom which enhances the research. The impact of this work in developing new skills and social capital through the engagement and empowerment of older people was summarised by a project organiser and one of the volunteer evaluators in the following quotations:

'Putting effort into capacity building and supporting individuals...has the potential for leaving legacy of skills, motivation, and the habit of asking questions.'

'Giving something back instead of just taking out.'

5.3 Market development resulting in new organisations being created to work with, and for, older people by partnerships of statutory, third sector and private organisations

Whilst there are several examples of new organisations being created to facilitate access to information and advice, there were fewer examples of new organisations providing services with the aim of achieving a range of different outcomes for older people. Both Gloucestershire's Village Agents project and Devon's Deep Outreach mentoring service have adopted a community development approach. Other examples of community development approaches are considered later in this report.

Gloucestershire's Village Agents were managed by a partnership of Gloucestershire County Council and Gloucestershire Rural Community Council.

⁶⁶ Nicolson, H. (2008) Involving older people as volunteer evaluators of services and projects for older people, Lancaster: Department of Continuing Education, Lancaster University.

The project provides sound evidence of the development of capacity through the creation of a new service which has the ability to respond flexibly to unanticipated issues affecting older people in rural communities. Whilst on its own it can be considered to be an isolated incident, the service provided with and for older people by a number of Village Agents in Gloucestershire during the July 2007 floods is a significant example of the success of the LAP approach to local capacity building.

During the flooding, Village Agents were a critical resource in helping individuals and being at the hub of two-way communication with key staff from the emergency services and the county council. One Village Agent kept a daily diary of their work and the following extracts provide a graphic picture of their community development role in working with, and for, older people.

“Monday: Checked around my parishes by phone to see where I could be of most practical help, and how everyone was coping. Tirley lost their supply, and were pretty well cut off from civilisation. I spoke to some of my contacts in Tirley, and promised practical help to get water to the elderly as soon as the first delivery arrived.

Tuesday: Ascertained likely time of first water delivery, so drove to Tirley, calling in at one of my clients on the way to drop off some basic necessities. Arrived at the Village Hall where a group of villagers were awaiting the arrival of the water delivery. As soon as it arrived, we all formed a human chain, and soon got it stacked up in the Village Hall. Once the water was safely stored, I made a list of the elderly and others who would have difficulty getting their own supplies, loaded up my car and set off on my ‘water round’. I know the circumstances were far from ideal, but I made a lot of new contacts and gained useful knowledge of where people were particularly in need, for future reference.

Wednesday: I received a call that a local hotel landlady, who still had a water supply, was keeping rooms open for people to go and shower. I relayed this information to some of my contacts in Tirley, produced some posters to display the information, and also some flyers with this information and the offer of help with shopping for necessities during the crisis.”⁶⁷

The **Devon** Deep Outreach mentoring service is another example of statutory and voluntary sector organisations working together to develop their knowledge and understanding of older people’s concerns and needs and to provide a new service. Mentors are trained to engage with older people and encourage the development of activity groups that they can run themselves once they have been set up. In this way older people’s skills and learning are enhanced and they are better equipped to be involved in a dialogue with service providers. As a consequence, providers’

⁶⁷ Wilson, L. et al. (2008) *Overall Evaluation Report, LinkAge Plus Project Village Agents: Gloucestershire County Council in partnership with Gloucestershire Rural Community Council*. INLOGOV, The University of Birmingham pp.33-34.

knowledge and understanding of older people's circumstances and changing aspirations for the future are improved.

The Devon project cites examples of where people's lives have been transformed using the mentoring approach. Profound personal and family problems have been addressed with some of the people helped to become volunteers and working to deliver the service. This is a clear indication of the capacity of the initiative to create new skills and employment opportunities for older people as well as helping them with their problems.

5.4 Market development resulting in new preventative services being created by statutory, third sector and private organisations either individually or in partnership to work with, and for, older people

The imagination and innovation stimulated by LAP is further evidenced by the development of new preventative services with and for older people. These include the Community Network Centres in Tower Hamlets and the Broad and Deep Outreach projects in Devon. An important feature of these projects is how both in initial concept and subsequent adaptive implementation, they reflect the different and diverse contexts of individual older people and the communities in which they live.

The **Devon** Broad Outreach project has developed the LAP principle of 'No Door is the Wrong Door' and promoted a one-door approach and face-to face contact with older people to help them to access information and services. The Outreach initiative builds on Care Direct with an internet portal and single Devon Gateway plus an existing telephone service that are integrated in a My Devon Customer Service Centre to broaden access to information and advice on services. What has been established is a better way of using existing resources to provide information and help for older people. It cost £22,000 to develop the Broad Outreach framework and website, £1,300 for communications and publishing, and £21,000 for advertising and eight information fairs (staff costs are not included).

The Devon mentoring service known as Deep Outreach had a budget of £200,000 over two years and some extra monies for research. Its remit was to find different ways to provide information and services effectively through partnership working and engagement with a diverse population of older people. The Deep Outreach service was referred to as mentoring and operates out of two locations in the city of Exeter (managed by Age Concern) and the rural area around Crediton (managed by Upstream Healthy Living Centre).

The mentoring service is currently provided in two areas to 650 older people and the cases taken up by mentor services vary with the professional background and skills of workers. It has succeeded in raising awareness of the range of services

that statutory, voluntary and community sector organisations might offer to older people depending on their circumstances and needs. Devon Deep Outreach mentors have been working with the 360° wellbeing checklist (see below).

Mentoring works with individuals and the local community usually in small groups to improve inclusion and promote healthy and enjoyable activities. In Exeter where staff have occupational therapy training and recognised mental health competencies, statutory services are referring a significant number of people with mental health problems. Whilst the service offered by Upstream is the same as that offered in Exeter, the user group served is different. The nature of the case mix handled by the Exeter group along with the complexity of many of those cases means the inputs required from mentors has increased. This will tend to reduce the number of cases that can be dealt with. At the same time, there is a risk the service is undervalued by statutory services and some people may be excluded who could benefit from mentoring.

Gloucestershire's LAP pilot is known locally as Village Agents and involves a network of 30 older people providing advice, information, referrals, volunteering and community development to people living in isolated rural communities. As such, the Village Agents project is also an example of the creation of employment, self help and volunteering opportunities in rural areas which develop new skills and social capital through the engagement and empowerment of older people.

Village Agents each cover from two to eight rural parishes (depending on their size and population) that add up to 165 rural parishes in total with an average population of approximately 1,500 older people. The Village Agent project is managed by a partnership between the county council, Gloucestershire Rural Community Council and five district councils. A Village Agent manager and their assistant supervise the initiative and the Village Agents are trained and receive payment for ten hours' work per week. LAP monies totalling around £850,000 financed pilot project and evaluation work.

Village Agents signpost and help other older people living in the area that they represent to access different services. They constitute a new resource that can identify problems early on and help to prevent them from becoming too serious. In partnership with other organisations, they help to ensure older people get the help that they need.

In addition, Village Agents have a broader brief of engagement with, and empowerment of, older people. They are local older people employed part-time who become a trusted community member and resource. The starting point for their work is to build trust with older people and provide access to a range of services from home safety to benefit advice and energy efficiency. Their role has subsequently developed from one of providing information, advice and referrals to influencing policy on service provision for older people by public sector organisations. This has meant networking with county council staff, the fire and rescue service, parish councillors, community nurses, police community support

officers, social group organisers, transport providers, religious groups and other key stakeholders. Both as a group and as individuals, Village Agents are able to identify the important issues affecting older people living in rural areas.

The success of the project is attested to by the fact that Village Agents are now a part of the council's mainstream services with a budget of £320,000 per annum provided by the county council and the local Primary Care Trust to support their work. The Village Agent project has also been extended to create a network of six Community Agents working with specific black and minority ethnic (BME) communities dispersed throughout the county of Gloucestershire.

In **Tower Hamlets** partnership working between voluntary and community sector organisations and statutory services was already strong. The Community Network Centres invite partner organisations to use their premises for events and to provide services. The different organisations can work on their own to provide a single service to older people or with other organisations to deal with complex needs. Much effort is devoted to building on these partner relations and the Community Network Centres are playing an important part in creating and encouraging innovative service provision for older people. The different organisations that use the centres are partners delivering services for older people that will help them to remain independent and able to participate in community and networking activities. It seems there is a genuine effort to combine skills and resources to find ways to improve existing services and contribute to new and innovative undertakings.

Often voluntary and community sector organisations run Community Network Centres and have responsibility for managing staff including coordinators and outreach workers. These organisations play a key role in providing a wide range of services that are of benefit to older people and are working closely with other relevant organisations to deliver those services. In addition, statutory service providers have developed relations with the centres that enable them to support ventures that encourage active and happy lifestyles. For example, Primary Care Trusts are locating some of their services in the centres. The network centre and outreach approach is valued by the Primary Care Trust and local voluntary and community sector organisations.

Evidence from the Tower Hamlets LAP pilot suggests that it is still experiencing some problems getting statutory sector agencies to be as flexible and responsive as desired and there is still some statutory sector resistance to Network Centre work and initiatives. It is argued that centre workers are still not taken seriously by some statutory organisations. Meanwhile, there were misgivings amongst some voluntary and community sector organisations concerned about those organisations that were not in receipt of LAP funding although in Tower Hamlets a lot of work has been done to ensure that they are invited to use network centre facilities and that outreach staff refer to them.

5.5 Multiplier effects, where older people, either individually or collectively, have been at the centre of policy development and service design and empowered to identify outcomes and create innovative solutions

Engagement with older people is a central feature of the philosophy and practice of LAP. A number of the pilots developed this notion into initiatives that went beyond service delivery to helping older people to be at the centre of policy development and service design and empowered to identify outcomes and create innovative solutions. Some built upon existing involvement processes whilst other used the opportunity presented by LAP to create new consultative and participative innovations. The Leeds Older People's Forum and the Gateshead Older People's Assembly are both well established processes that will continue to provide a voice for older people into the future.

The **Leeds** Older Better Strategy was developed in 2006 by a multi-agency group with the aim of promoting a healthy and active life for older people.⁶⁸ The strategy has sub-groups based on age categories (50-65, 66-79 and 80 plus) and outcome criteria such as older people's healthy life expectancy and differences in attitudes and expectations. It identifies older people's needs and consequent priorities for action through the provision of appropriate services. A key resource for this work is the Older People's Forum established in 1994 with its 120 members representing older people's voluntary sector organisations in the city.

The Older Better Strategy for Leeds states that older people want to be actively involved in the development and delivery of services that affect their lives. The strategy is evidence of the work that is being done to better understand the different issues affecting older people and their quality of life in Leeds. The city has more than 40 organisations that are working in the community and with the Neighbourhood Network Schemes that receive funding from Adult Social Care and the Primary Care Trust. Much effort is going into innovative partnership working encompassing statutory and voluntary sector organisations providing services for older people and seeking to solve problems or prevent them from arising in the first place. This allowed Leeds to put focus on supporting the development of lifelong learning, social inclusion and intergenerational work in the LAP pilot, issues that had all been identified as important by local older people in the Older Better Strategy.

Meanwhile, the Older People's Forum has assisted capacity building through its support for older people's involvement in volunteering activities and by contributing to research undertaken to establish a baseline against which LAP activity is

⁶⁸ Leeds (2006) *Leeds Older Better Strategy: to promote a healthy and active life for Older People 2006-2011*. www.networks.nhs.uk/networks/page/342.

measured. Older people are also working collectively to influence decisions about policy and service provision and to develop their negotiating skills and competencies.

The **Gateshead** Older People's Assembly was established as *'the voice for older people in Gateshead'* to represent the views and opinions of older people on relevant strategic planning groups and enable them to influence service development and procurement policies. One of the tasks the Assembly undertakes is assessing the appropriateness, accessibility and effectiveness of service provision for older people delivered by a range of organisations. Gateshead Older People's Assembly had £52,000 over two years to support its activities and cover the costs of a development worker, accommodation and administration.

The Assembly has a membership of around 1,700 older people and the community development worker has helped to increase membership and build capacity among older people to co-produce research into social, economic, environment, and health issues. This is an example of older people getting together and proactively participating in activities to influence service procurement and delivery at the local level.

The assembly provides access to a network of activities and preventative services for older people who are able to collectively identify concerns and grievances and get involved in finding solutions that work. A partnership has been forged with statutory, voluntary and private sector organisations that has helped to improve older people's awareness of the services that they provide and facilitate a networking process that helps to ensure issues that are important to older people are addressed. The Assembly is also a repository for information on national, regional, and local services that assembly members and the public can access. A website has helped to improve levels of engagement with a wider group of older people and a newsletter is posted out to members and partners.

Such initiatives have involved older people in collective action to highlight their needs and influence decisions about what services need to be provided to meet those needs. The different Assembly partners that work together to find solutions to older people's problems are in a strong position to build on existing service provision for older people and develop new services. Branch Assemblies have helped to empower older people in local communities and enable them to have a stronger and more active say in how problems are dealt with by introducing a more cohesive and structured approach to finding out what the important issues are for them. There are regular local assembly meetings and multi-agency community engagement events with the wider community. Volunteers carry out consultations with older people and deal with the issues that are raised in consultations with the city council, area forums and other relevant organisations. This helps to ensure older people are involved in identifying what outcomes they want from services and are at the centre of policy development and service design.

The Senior Council for **Devon** (SCfD) is a federation of associations and individuals aged 50 and over in each of the 29 community planning areas of the county. The member organisations are both of, and for, older people in each planning area and at each federal level (district and county). Much effort has been made to ensure representation of minority groups on the Senior Council with particular success in working with BME elders in achieving a higher proportion than that in the general population.

The Senior Council budget is around £150,000 for each of the first three years it is running, with some extra monies allocated for work with 'hard to reach' groups. It is an initiative that shows how older people can be proactively involved in the development of new processes and procedures designed to improve service provision. Early on a Joint Commissioning Group comprised of Devon County Council and Action Group in Later Life (AGILE) oversaw preparatory work on the feasibility of the Senior Council carried out by an external consultancy. Some local voluntary organisations were unhappy with an outside consultancy winning the tender (a legal requirement) for services to assist with the setting up of the Senior Council. This situation seemed to have adversely impacted on the development of the Senior Council in some areas.

A number of LAP sponsored events also helped to publicise the Senior Council idea and get older people involved in priorities for action that received backing at a countywide conference. Older people were able to discuss the proposal to set up a Senior Council and think about how it might operate at a series of local meetings. Older people in various local groups (set up in 27 areas and involving more than 700 organisations and individuals) participated in discussions to agree the terms of a Senior Council constitution and the legal form of a company limited by guarantee. County-level federal arrangements have been established and local groups are able to elect representatives to an Assembly that elects the Board that is the legal entity of the Senior Council. The Senior Council is the county's Older People's Advisory Group (OPAG).

The Assembly, Senior Council, and OPAG arrangements seem to offer older people new opportunities to influence policymaking on relevant issues in structured and well-organized ways. Exeter City and the district councils, Local Strategic Partnerships, and town councils have attended Senior Council meetings and Devon Primary Care Trust with Devon County Council is jointly sponsoring the Senior Council. The Senior Council is an example of older people collaborating and developing a strong position that empowers and enables them to debate and influence the policies and services that impact on them. It is an initiative that builds on Sure Start to later life⁶⁹ and is a means of ensuring older people's views are articulated. As a result, older people are able to engage more effectively with statutory bodies and other service providers.

⁶⁹ Office of the Deputy Prime Minister (2006) *A Sure Start to Later Life: Ending Inequalities for Older People*, A Social Exclusion Unit Final Report, January 2006, www.communities.gov.uk/documents/corporate/pdf/913275.pdf

The intention is to give older people a much more central role in influencing discussions and decisions about the sorts of action that need to be taken to maintain or improve their quality of life and participation in community activities and events. Crucially, the Senior Council was set up to put older people in the driving seat when thinking about a strategy for later life. Older people have been able to work together and lobby for action to obtain the provision of services that will improve their own position and the position of other older people.

The co-ordination of project activities turned out to be complex and sometimes problematic. In particular, there were instances when older people felt the process was confusing and they lacked control over it. Specific local circumstances including uncertainty about local government reorganisation decisions, the reconfiguration of six Primary Care Trusts into one single trust, and discussions on the amalgamation of local strategic partnerships made it difficult to make progress on setting up district-level federal arrangements.

This demonstrates the difficulties that are likely to be encountered in setting up new collective or collaborative arrangements and getting them to fit with existing statutory arrangements for citizen participation in discussions and decision-making processes at the local level. At the same time, more older people can be involved in discussions and decision-making through organisations that they are members of but it can be difficult to reconcile group membership and people's different personal aspirations in the same organisation.

In **Tower Hamlets**, the LAP pilot fits well with the local authority's corporate theme of *'making it local making it personal'* as well as with commissioning strategies aimed at developing older people as active citizens. The intention is to enable older people to have more control over what happens to them and more influence in discussions about what needs to be done to help older people remain independent and leading fulfilling lives. This approach builds on the work of an Older People's Reference Group hosted by Age Concern in which older people are involved in shaping services. They are identifying needs and influencing service design processes.

Table 5.1 Summary of key evidence of examples of capacity building presented in this thematic report

	Enhanced skill and knowledge	More effective processes	Better understanding	Joined-up services	Holistic people-centre approaches	New opportunities to socialise	Employment and volunteering	New partnership organisations	New preventative services	Empowering older people
Leeds	✓	✓	✓		✓		✓			✓
Salford		✓	✓	✓						
Gateshead		✓	✓				✓			✓
Lancaster		✓					✓			
Devon		✓			✓	✓	✓	✓	✓	✓
Glos		✓				✓		✓	✓	
Notts		✓	✓		✓					
Tower Hamlets		✓		✓		✓			✓	✓

6 Conclusions

- The evidence presented here does not purport to be a comprehensive analysis of every aspect of the ways in which the eight LinkAge Plus (LAP) pilots have enabled capacity building in relation to working with and for older people. Rather it seeks to demonstrate the wide range of initiatives which have been created across the eight pilot sites and analyse how they can contribute to an overall framework for effective capacity building. The evidence thus provides exemplars of approaches that could be adopted and adapted elsewhere by local authority, third sector and private organisations that seek to unlock and empower the potential of working with and for older people as independent and active citizens.
- Several of the cited examples of specific projects provide evidence of more than one of these dimensions, demonstrating the importance of interconnectedness between complementary aims. For example, work to develop more effective processes generated by local organisations to target referrals for information, advice and services often result in a better understanding of the type and range of services offered by statutory, voluntary, community and private organisations and the ability to focus on appropriate strengths and specialisms. Thus, whilst Gateshead Link-up is presented in this report as an example of *'more effective processes being generated by local organisations to target referrals for information advice and services'*, it also has features of other capacity building dimensions. The training aspects have sought to enhance social care workers skills and knowledge; the work with 33 local organisations has resulted in a better understanding of the type and range of services offered by partner agencies and the ability to focus on appropriate strengths and specialisms; and the simplified referral process has aimed to achieve efficiency gains through reduced duplication. This and other LAP pilots demonstrate how a comprehensive approach can be developed to ensure the better use of existing services.

- The LAP initiative has inevitably resulted in key staff from statutory and third sector organisations improving their skill and knowledge in the use of existing resources to achieve better outcomes for older people. Learning on the job, through day-to-day interaction with older people and colleagues in other organisations, has been an integral feature of the eight LAP pilots' approach. However, the research has found limited evidence of specific skill and knowledge training particularly for staff in voluntary and community organisations and none which directly involves the private sector. One example of work specifically targeted at skill and knowledge development is the Leeds capacity building grants.
- All of the LAP pilot projects included an element of developing the capacity of the system to ensure older people can access understandable, reliable and locally available information and advice and be referred for service where appropriate. Typically these initiatives were designed to improve organisations' capacity to target advice and information more efficiently and effectively and brought together multiple statutory and third sector organisations working in partnership. The report presents evidence of a range of differing approaches designed to reflect the diversity of service and organisational arrangements in rural and urban settings, in unitary and two tier local authorities and within multi cultural communities. Many of these approaches included the creation of web-based information databases and assessment tools. These approaches of LAP pilots to improving access to services have been more extensively reviewed in another of the national evaluation thematic reports.⁷⁰
- Most of the examples of processes generated by local organisations to enable access to, and targeting of referrals for, information, advice and services also included work to improve understanding of the type and range of services offered by statutory, voluntary, community and private organisations. The distinguishing feature of this dimension is that in addition to the straightforward provision of reliable and understandable information and advice, this approach includes both staff and older people themselves understanding who offers what and thereby enabling the development of an improved focus on appropriate strengths and specialisms.
- Such initiatives also create the potential for efficiency gains through reduced time and effort spent resolving problems and effectiveness gains through timely referrals to services preventing the need for more intensive interventions. A well evidenced example is Nottinghamshire's First Contact service which uses a checklist to target referrals to appropriate partner agencies. Completed checklists are returned to a central point in each district where staff arrange for a person from a partner organisation to visit on older person at home.

⁷⁰ Ritters, K. and Davis, H. (2008) *Access to information and services for older people – the joined-up approach*, Working Paper No. 53. London: DWP. www.dwp.gov.uk/asd/asd5/WP53.pdf

- Whilst all of the LAP pilots promoted partnership work to improve access and many sought better understanding between partners about the nature and range of services they provided, there were fewer examples of organisations either joining up or integrating direct service provision resulting in efficiency gains through reduced duplication. One example is Salford Housing Choice team which works with a range of partner organisations including the council's housing officers, registered social landlords, day centre and health staff and care agencies and another is provided by integrated working between the Primary Care Trust and Community Network Centres in Tower Hamlets.
- There is emerging evidence from some pilots that LAP is fostering a radical change away from traditional needs or service-centred approaches towards strategic commissioning founded on an holistic people-centred approach. The focus of such work is on improving outcomes for older people and not simply ensuring improved access, integration or partnership working. This is clearly in line with the analysis and recommendations of Opportunity Age.
- This research found examples of how LAP pilots had been used as a stimulus to the implementation of a single assessment process with the aim of creating an holistic understanding of what will provide effective support for older people living independently in the community.
- LAP pilots have adopted innovative network development approaches to enable older people to create and experience new opportunities to socialise through involvement in social, training and leisure activities. Examples include services designed to address broader community and social wellbeing outcomes by creating and maintaining social capital.
- This research elicited a small number of examples of the development of employment, self-help and volunteering opportunities for older people. This included evidence of engagement with the private sector, a feature which was noticeable by its absence from most of the other secondary material analysed for this report. The most significant employment and volunteering initiative was the Lancaster 50 Forward Employment Agency and Volunteering Bureau.
- LAP pilots have stimulated the market to create new third sector organisations which have facilitated access to information and advice. However, the research found fewer examples of new third sector organisations being created to provide services which are aimed at achieving a range of different outcomes for older people. One such project is Gloucestershire's Village Agents which has adopted a community development approach. The evidence of the success of this work in being able to respond flexibly and creatively to unexpected events such as the 2007 floods is one of the most outstanding examples of the success of the LAP approach to local capacity building.

- The imagination and innovation stimulated by LAP is further evidenced by the development of new preventative services with, and for, older people. These include the Community Network Centres in Tower Hamlets and the Broad and Deep Outreach projects in Devon. An important feature of these projects is how both in initial concept and subsequent adaptive implementation, they reflect the different and diverse contexts of individual older people and the communities in which they live.
- Engagement with older people is a central feature of the philosophy and practice of LAP. A number of the pilots developed this notion into initiatives that went beyond service delivery to helping older people to be at the centre of policy development and service design and empowered to identify outcomes and create innovative solutions. Some built upon existing involvement processes whilst others have used the opportunity presented by LAP to create new consultative and participative innovations.

Appendix

The LinkAge Plus pilot programme and its evaluation

Pilot areas

Eight LinkAge Plus (LAP) pilot areas have been selected by the Department for Work and Pensions (DWP) using a range of publicly available metrics. The chosen areas are a mixture of:

- urban and rural settings;
- differing populations (densities, deprivation, ethnicities, health, etc.);
- differing economics (unemployment, home ownership, industry, etc.);
- single and two-tier local government areas;
- existing initiatives;
- performance levels.

The eight pilot areas are:

- Devon;
- Gateshead;
- Gloucestershire;
- Lancaster;
- Leeds;
- Nottinghamshire;
- Salford;
- Tower Hamlets.

Evaluation

As part of their agreements with DWP each pilot has appointed a local evaluator to give an overall and ongoing view on how its pilot activity has contributed to effective service delivery. The appointed local evaluators are:

- Devon – Peninsula Medical School;
- Gateshead – Peter Fletcher Associates;
- Gloucestershire – Institute of Local Government Studies, University of Birmingham;
- Lancaster – Lancaster University;
- Leeds – Institute of Health Sciences and Public Health Research, University of Leeds;
- Nottinghamshire – In-house and Nottingham Trent University;
- Salford – Manchester Business School, University of Manchester;
- Tower Hamlets – Aston Business School, Aston University.

In compiling this report, reference has been made to the work of local evaluators, as well as the national evaluation team's own unpublished and published work, together with so far unpublished work commissioned by DWP. We are grateful to pilot leads, local evaluators and the DWP for sharing this work with us for the purposes of this report.

The national evaluation team has been working directly with pilot leads, local evaluators and the DWP through a series of Evaluation Workshops, as well as engaging with Programme Board, Steering Group and other DWP-led events. The national evaluation team has also undertaken a series of visits to pilot organisations, including a series of interviews with key stakeholders, in the summer of 2007 and again in 2008. This thematic report forms part of the output of that National Evaluation programme. Other papers include:

- Davis, H. and Ritters, K. (2007) LinkAge Plus National Evaluation Team Interim findings – September 2007. Warwick: Warwick Business School, www.dwp.gov.uk/asd/asd5/WP42interim.pdf
- Hilton, J. (2008) *Streamlining the assessment of Attendance Allowance applications with social care assessment: an evaluation of two London pilots*, Research Report No, 534. London: DWP, www.dwp.gov.uk/asd/asd5/rports2007-2008/rrep534.pdf
- Ritters, K. and Davis, H. (2008) *Access to information and services for older people – the joined-up approach*, Working Paper No. 53. London: DWP, www.dwp.gov.uk/asd/asd5/WP53.pdf

- Watt, P. and Blair, I. with Davis, H. and Ritters, K. (2007) *Towards a business case for LinkAge Plus*, Working Paper No. 42. London: DWP, www.dwp.gov.uk/asd/asd5/WP42.pdf
- Daly, G. (2009) *LinkAge Plus: Benefits for older people*, Research Report No. 554. London: DWP
- Watt, P. and Blair, I. (2009, forthcoming) *LinkAge Plus: The business case*, Research Report No. 573. London: DWP.

The national evaluation's end of project final report is due to be published in 2009. It will give an overview of programme activity and will identify and help share good practice as well build an evidence base for the LAP approach.

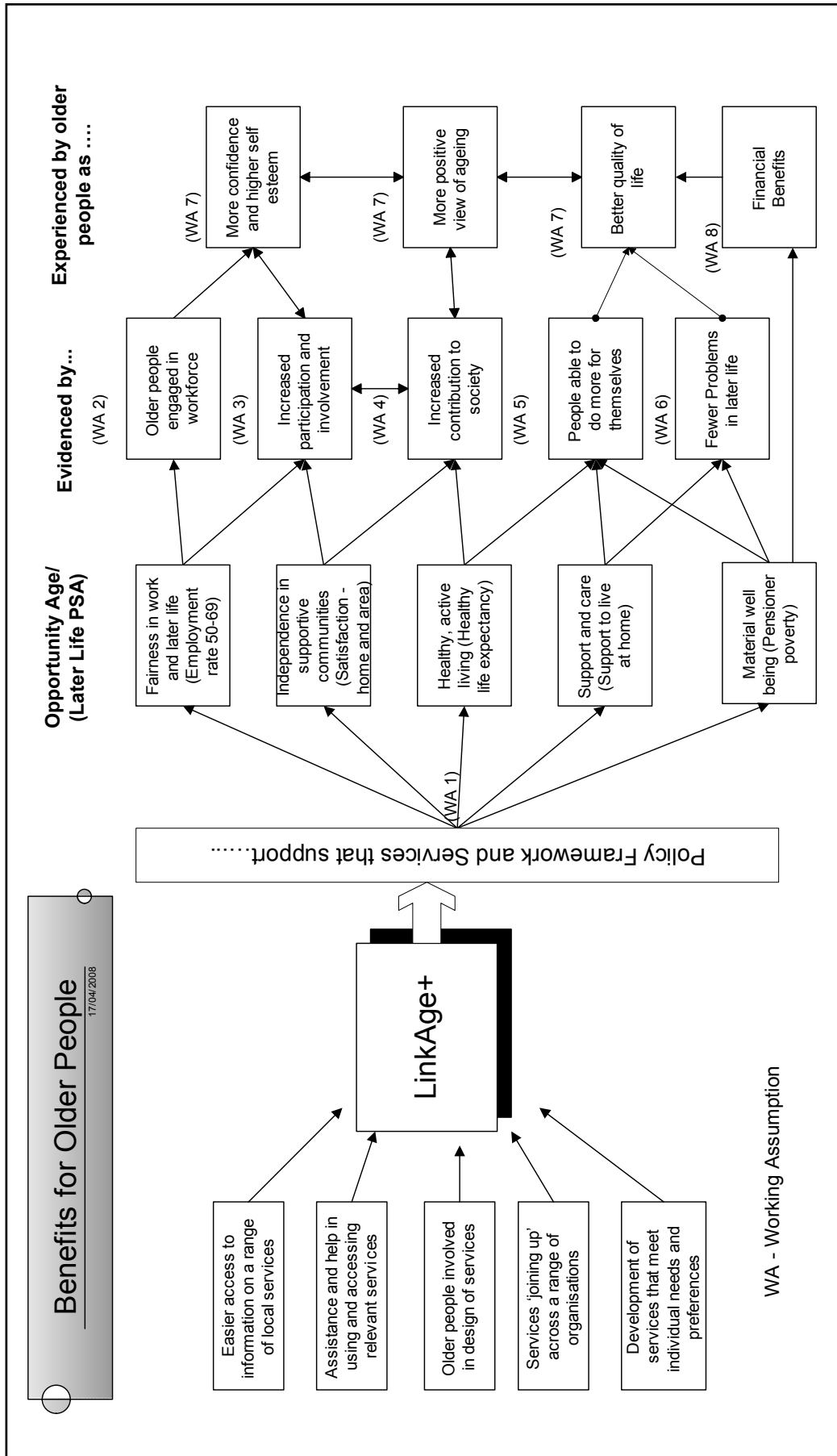
National evaluation working assumptions

As part of the national evaluation a number of working assumptions have been set out as to how LAP may benefit older people and organisations. Over the course of the pilot we have been carrying out stakeholder interviews and reviewing evidence from a variety of sources to determine how far the LAP approach is leading to these outcomes.

Benefits for older people

The working assumptions as to the benefits of LAP to older people are set out in Figure A.1.

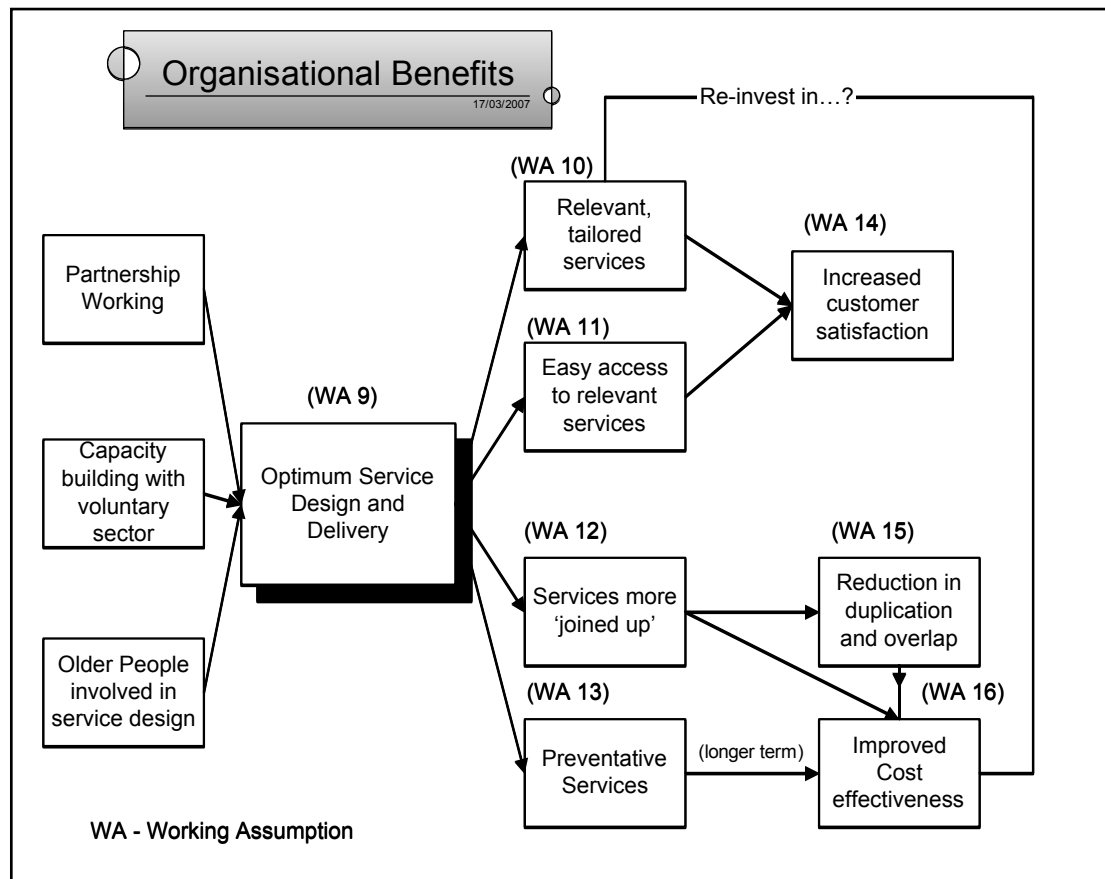
Figure A.1 Benefits for older people



Organisational Benefits

The working assumptions of the benefits to organisations and service users of the LAP approach are set out in Figure A.2:

Figure A.2 Organisation benefits



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LinkAge Plus – Deep Outreach (Mentoring Service)

LinkAge Plus – Broad Outreach 'No door is the wrong door' #

LinkAge Plus – 360 Degree Wellbeing Check

LinkAge Plus – Senior Council for Devon

Gateshead

LinkAge Plus – Timebank (Age Concern)

LinkAge Plus – Gateshead Older People's Assembly

Gloucestershire

LinkAge Plus – Village Agents

Lancaster

LinkAge Plus – Employment/Volunteering Bureau

LinkAge Plus – Care Navigator Service

Leeds City Council

LinkAge Plus – Infostore

LinkAge Plus – Streamlined Assessment Pilot

Nottinghamshire

LinkAge Plus – First Contact

Salford

LinkAge Plus – Housing Choice

LinkAge – One Stop Shop

Tower Hamlets

LinkAge Plus – Sundial Centre Art Class

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