Ageing Well in Devon

2012 update

A statement of ongoing engagement with older people

Devon Senior Voice
Senior Council for Devon

NHS Devon

The Voice of the Over-50s

Devon County Council
Stop Press

Draft Care and Support Bill, 11 July 2012
The draft Care and Support Bill was published on 11 July 2012. It creates a single law for adult care and support, replacing more than a dozen different pieces of legislation. It provides the legal framework for putting into action some of the main principles of the White Paper, ‘Caring for our future: reforming care and support’, and also includes some health measures. Devon Senior Voice was involved in Devon County Council’s consultation on the White Paper and submitted its own response to the paper as well as helping inform the County Council’s feedback to the Government.

The draft Bill further develops the general policy direction of increasing choice and control for people who use health and social care services, with a strong emphasis on the need for local authorities and care providers to give individuals as much say as possible in the way they receive support. Having been devised following extensive national and local consultation, the Bill also recognises the need for that engagement to be ongoing, and it will be part of Devon County Council and NHS Devon’s continued dialogue with Devon Senior Voice.

You can find out more about the changes to the care and support system, the White Paper and the draft Care and Support Bill on the Caring for our future website: www.caringforourfuture.dh.gov.uk

This document is a follow up document to Ageing Well in Devon which was first published in 2008, available at www.devon.gov.uk/ageing_well_in_devon-6.pdf
This is a follow-up document to Ageing Well in Devon which was first published in 2008. Devon County Council (DCC) and NHS Devon (NHS Devon Primary Care Trust) recognised that ageing in Devon is an important issue, and that a partnership with older people in the County to address issues together was required.

This document is not solely about health and care needs, and not only about issues of concern to people over state pension age. We naturally concentrate on the more challenging tasks ahead of us, such as those presented by ruraly isolated people in poor health, especially over the age of 85. However, we also refer to the needs and interests of people aged between 50 and retirement, because these years are very important for wellbeing in later life and because older people represent a considerable resource to the community.

Through consultative processes, including the dialogue with Devon Senior Voice, older people have set out their aims and priorities for action, and have commented on the original Ageing Well in Devon document.

This is a challenging time for all public authorities, and at the time of writing the structures and processes by which public services are delivered are changing. However, it is clear that Government will increasingly look to authorities to positively engage with their communities in developing strategies and services and this second edition of Ageing Well in Devon is therefore well placed for that engagement.

We look forward to a continuing and deepening partnership with older people in the county, for the benefit of the whole community.

Phil Norrey, Devon County Council and Ann James, NHS Devon

This Ageing Well in Devon update illustrates the advantages of working in true partnership to promote the health and wellbeing of the elderly and vulnerable citizens of Devon.

Devon clearly has both an existing and future challenge with an increasing population of seniors. It is, however, Devon Senior Voice’s belief that we form part of a largely untapped resource of expertise and experience which could and should be utilized. The national Ageing Well programme springs from co-operation with older people and we look forward to continuing to work with Devon County Council and NHS Devon in this way.

I would like to thank everyone who has given so much of their time to producing this document.

Gillie Newcombe, Chair, Devon Senior Voice (formally Senior Council for Devon)
Section 1: About this document

Who is the document for?
If you are over 50 and live in Devon, or care for someone who is, then this document is for you.

Please note that Plymouth City Council and Torbay Council are not part of the administrative County of Devon and therefore have their own arrangements for planning.

What difference will my views make?
Like all public authorities Devon County Council and NHS Devon have to base what they do on evidence about needs and about what works, directions from Central Government, resources available and the need to achieve best value for them.

It is within the above context that Devon citizens have already influenced the original Ageing Well in Devon document, and the development of this update.

We have asked Devon Senior Voice to encourage people to discuss this document, and then to draw together their views and feed them back to us.

To send comment please contact:
Devon Senior Voice, PO Box 210, Harberton, Totnes TQ9 9DA

Telephone: 01803 732678
Email: info@scfd.org.uk
www.seniorcouncildevon.org.uk
Section 2:  
The Policy Framework in which we operate

Key Themes of Government Policy

Ageing population

“Life expectancy has been growing steadily for over half a century and the UK has now reached a point where there are more people over State Pension age than children. In 1950, a man aged 65 could expect on average to live to the age of 76. Today, he can expect to live to 87, and by 2050 to 91. Today there are 10,000 people aged 100 or over. By 2050 there will be 275,000. By 2030, people over 50 will comprise almost a third of the workforce and almost half the adult population. An ageing society is no longer on the horizon; it is here with us today.”  
(Department for Work and Pensions)

The Government’s lead programme to address the ageing of our society is titled “Ageing Well”. Its key aim is to provide a better quality of life for older people through local services that are designed to meet their needs and recognise the huge contribution that people in later life make to their local communities. An essential aspect of the programme is to help local authorities to improve efficiency while still delivering quality services.

The programme is driven by the Government’s view that older people in our society deserve every opportunity to age well, in communities that value their experience.

Ageing Well is part of the Government’s recognition of the need to shift power from Westminster to local people and their communities.

The Government recognises that local concerns need local solutions. It will encourage authorities to take the lead in working in partnership with other local organisations, and older people, to develop imaginative approaches to the issues faced by their particular communities.

The aims are:

• for local authorities to use their resources effectively
• to promote wellbeing in later life
• to ensure that older people can live independently for longer
• to engage older people in civic life
• to tackle social isolation by recognising older people’s potential.
The financial position and priorities
The outcome of the Comprehensive Spending Review in October 2010 has been well reported and public services are facing unprecedented financial challenges. It is in this financial context that the White Paper: “A Vision for Adult Social Care: capable communities and active citizens” sets out a new vision which embodies the following principles:

**Prevention**: empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.

**Personalisation**: individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available for all local people, regardless of whether or not they fund their own care.

**Partnership**: care and support is delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils - including wider support services, such as housing.

**Plurality**: the variety of people’s needs is matched by diverse service provision, with a broad market of high quality service providers.

**Protection**: there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people’s freedom.

**Productivity**: greater local accountability will drive improvements and innovation to deliver higher productivity and high quality care and support services.

**People**: we can draw on a workforce who can provide care and support with skill, compassion and imagination, and who are given the freedom and support to do so.

At the same time, the recommendations of the *Dilnot Report* aim to address the care costs faced by some people by capping the maximum amount individuals contribute to those costs over their lifetime.

All of these factors are addressed as part of the new Health and Social Care Reform Act which was passing through Parliament when this document was being finalised.
Local needs and strategies

Demographic information
The population structure of Devon is older than the national profile, with particular peaks in those aged 60 to 64, reflecting significant in-migration to this age group, and those aged 85 and over, reflecting an ageing population and longer life expectancy. While modest population growth is expected in those aged under 60, population growth is set to be greatest in the older age groups. This includes a 36% increase in those aged 60 to 74 over the period to 2033 (from 137,300 to 187,300) and a 91% increase in those aged 75+ (from 80,400 to 153,900).

In 2010 Devon contained:
- 25,579 households consisting of pensioners with a long-term limiting illness living alone
- 18,980 people aged over 65 providing unpaid care
- 5,491 people aged over 65 providing more than 50 hours of unpaid care per week
- 1,123 people aged over 85 providing more than 50 hours of unpaid care per week
- 2,884 carers aged over 65 who had poor health themselves.

Joint Strategic Needs Assessment findings
The joint DCC and NHS Devon analysis of health and social care needs is set out in the Joint Strategic Needs Assessment (JSNA) which can be found at: www.devon.gov.uk/jsna

More of the information which supports the JSNA can also be found on the new Devon Health and Wellbeing website: www.devonhealthandwellbeing.org.uk

The JSNA findings are based on engagement with local communities and some key facts and themes from the JSNA which are particularly relevant to ageing well are:
- In Devon almost 23% of households are classed as rurally isolated, compared with the national picture of only 5%.
- Almost twice as many people in Devon as in England as a whole (33.3% to 17.2%) are not within a 60 minute drive of their nearest hospital.
- In Devon 13.4% of people are not within a 30 minute drive of their nearest GP. This is compared to the national average of 4.8%.
- Substantial areas of the county are without daily access by public or voluntary transport to a local market town.
- Devon experiences higher levels of rural deprivation than other parts of the country. This is especially evident in Mid Devon, West Devon and Torridge, where rural areas are frequently much more deprived than the urban centres.
- Average life expectancy varies from 82.8 years in Ottery St Mary to 79.2 in Ilfracombe.
- Devon’s demographics mean that there are significant numbers of older people with mental health problems, particularly depression (20,000 over 75s – as many as 1 in 4), and an estimated 11,955 people over 65 with dementia.
• The Department of Health states that 1 in 3 women and 1 in 12 men over 50 are affected by osteoporosis, which increases the risk of fractures from falls. In Devon this is likely to mean that over 97,000 people are affected. Devon has a fall-related death rate significantly above the national rate. Levels of satisfaction with health services are generally good and services are seen as improving, although there remain areas for further attention.
• 96.6% of the Devon population is White. This is well above the national average of 88.2%. The pattern of ethnicity in the Devon population is changing, but overall numbers remain low.

The basis of effective services for Devon as headlined by many stakeholders is partnership working, joined-up delivery, and local services.

A note on housing
An additional JSNA for older people’s housing and accommodation needs was prepared as part of a review of housing needs which is available at:
www.devon.gov.uk/community_based_support

In broad terms, the conclusions of this housing JSNA were that:
• There is a requirement to develop mixed tenure extra care housing (in developments of 50 units) in most of the market towns, and where there is need but insufficient demand to justify a 50 unit development.
• There is a need in some places for private sector retirement housing developments (such as the type built by McCarthy & Stone) although there are some issues around matching needs to development, and local people being able to afford service fees.
• There is a need for smaller units of affordable housing built around existing settlements, incorporating some that are suitable for wheelchair users - and all to ‘Lifetime Homes’ standards.
• There is a need for an advice service to assist older people who are in homes that are too large for their requirements and who need to move to smaller accommodation.

NHS Devon Rural Health and Wellbeing Strategy for Devon 2010
This strategy sets out Devon’s vision to improve the overall health, wellbeing and quality of life of all people living in rural areas, with a focus on reducing inequalities in health and social care provision.

It recognises that a higher proportion of people aged over 65 live in Devon’s rural rather than urban areas and that growth is particularly among those aged over 85 years.
The actions identified in the Rural Health and Wellbeing Strategy are:
• implementing the recommendations of the first Ageing Well in Devon Strategy
• targeting fuel poverty interventions at the most vulnerable older people
• promoting the integration of appropriate services, such as health, social care, housing, benefits advice and information
• providing a range of opportunities to be physically active
• exploring opportunities to improve support networks and knowledge of and access to services
• promoting travel schemes with public and community transport providers.

View the strategy at: www.devonpct.nhs.uk/Topics/Draft_Rural_Health_and_Wellbeing_Strategy.aspx

The Way Ahead
High level action plans for the improvement of health and social care in Devon are also set out in The Way Ahead – five years of improvement – health and social care in Devon 2008-2013

Consultation on earlier versions of The Way Ahead revealed that Devon people wanted:
• even greater focus on partnerships
• more attention to the impact of the rural nature of Devon
• more focus on the voluntary sector
• increased emphasis on social care and support to carers of all ages.

The document states that these have been taken on board. The ambitions outlined in The Way Ahead are to:
• put a great deal more emphasis on helping our population stay healthy
• target extra support to deprived communities and people who need our help most
• do everything we can to help children and young people have a good early start in life
• shift much more care into people’s homes and communities, making local care a reality
• make a difference to care for people with long-term illnesses or disabilities and their carers
• identify mental health problems early on and keep the focus on therapy and recovery
• make sure services in Devon match the very best.

The six main aims of the “shared vision for health and social care” are:
• Health as good as it can be prevention and early intervention
• Care as local as possible and as specialised as necessary
• The best possible treatment that is continuously improving
• The right support for people with complex needs
• The most effective use of all our resources for maximum impact
• A say and an influence promoting partnerships in care.

View The Way Ahead at: www.devon.gov.uk/the_way_ahead_for_board.pdf
**Putting People First Public Information Strategy**

Devon County Council developed this strategy with the involvement of Devon Senior Voice (and others) in 2010/11. To read the full strategy visit: [www.devon.gov.uk/acs_public_information_strategy.pdf](http://www.devon.gov.uk/acs_public_information_strategy.pdf)

The strategy covers:

- Improvements in social care information itself, such as simplifying online factsheets, improving printed and web based public information.
- Improving the availability of social care public information within Devon.
- Longer term, improvements in the Council’s capacity to give advice, and the visibility of social care information and advice in communities.

The Strategy focuses mainly on implementing the first type of change, and working across the Council to develop the remainder.

Recommendations include:

- Developing and marketing Care Direct to make information and simple services more accessible to people.
- Action to enable:
  - people to do more for themselves if they wish, for example through access to a fully developed on-line Community Directory
  - voluntary and community groups to be effective providers of social care information and advice
  - other Council services, especially libraries, to be useful sources of public information.

This strategy is now being updated to take into account the Devon County Council reorganisation into a People grouping, combining adult’s and children’s social care and welfare benefits changes.

**Devon Prevention Strategy**

At the time of writing, NHS Devon and DCC were consulting on the Devon Prevention Strategy: *Promoting Independence and Wellbeing 2011-13*. It’s main recommendations focus on:

- Promoting volunteering
- Reducing falls and preventing fractures
- Promoting assistive technologies
- Developing reablement services
- Implementing self-care
- Delivering intermediate care
- Investing in extra-care housing

A draft version of this strategy is available at: [www.devon.gov.uk/have-your-say](http://www.devon.gov.uk/have-your-say)
Section 3: Devon Senior Voice consultation aims and strategic statements

DCC and NHS Devon engaged Devon Senior Voice (DSV) on the seven issues covered by the Vision for Adult Social Care and the other documents previously listed. Devon Senior Voice then engaged with local older people and has produced four overall aims for Ageing Well in Devon, each with associated priorities.

These aims are:
1. Physical, mental and emotional wellbeing
2. Improved quality of life
3. Making a positive contribution

Under each aim, Devon Senior Voice has agreed priority areas with DCC and NHS Devon.

This section describes the joint work by DCC, NHS Devon and Devon Senior Voice in response to these aims and priorities.

Aim 1: Physical mental and emotional wellbeing

Priority 1a: Older people, family and carers have easy access to information, advice and advocacy to support decision making.

Information and Advice
During 2010-11 DCC conducted a review of adult social care information provision which included a focus group of members recruited by Devon Senior Council. This resulted in implementation of the Devon Putting People First Public Information Strategy: www.devon.gov.uk/universal_services

The strategy’s action plan included the following recommendations, which were then implemented and form the basis for ongoing refinement of DCC’s information provision:
- Enable Care Direct to act as a single point of contact for all social care calls, and improve marketing so more people are aware of it.
- Revise printed public information to reflect focus group findings
  - Social Care for Adults Explained (main leaflet on social care) to be revised to: reflect Putting People First, simplify the content and reapply plain English to it; list more factsheets and sign-post other information sources.
  - Much wider distribution of post cards, posters and main leaflet.
• Plain English audit of factsheets.
• Maintain the range of alternative formats.
• Revise website information in line with focus group findings
  • Increase the social care presence on the DCC website home page.
  • Simplify DCC web pages.
  • Review the design of the leaflet and factsheet web page to make the titles and content
easier to understand and break down the factsheet list into more user-friendly categories.
• Ensure the public have the same access to online information as Care Direct advisors.
• Provide an online self-assessment process when personal budgets have been implemented.
• Improve way in which people can search for social care information on the DCC website.
• Ensure effective links and signposting to and from NHS partner websites.

• Community information outlets
  • Use libraries as outlets for social care information.
  • Ensure voluntary organisations can act as effective providers of social care information.
  • Complete development of the public-facing Community
    Directory of local services and opportunities.
  • Develop and publish a clear DCC policy on support available to self-funders.
  • Publish clear eligibility criteria and access arrangements for advocacy support.

This strategy is being reviewed by DCC during 2012-13.

As stated earlier, this strategy is being updated to reflect DCC organisational changes.

**Advocacy**
Devon Advocacy Consortium was formed and funded for three years under a new contract from
1 April 2010 with a single point of contact for advocacy services: [www.devonadvocacy.org.uk](http://www.devonadvocacy.org.uk)

**Memory Cafés**
Memory Cafés, continue to be developed across Devon, and are a useful information resource
for dementia sufferers and their families. A Dementia Carers’ Pathway has been published
which can be found alongside a list of Memory Cafés at: [www.devon.gov.uk/dementia](http://www.devon.gov.uk/dementia)

**Devon Carers Centre**
This new development provides information and support to carers across the whole county,
such as advice, sitting services, flexible breaks grants and health and wellbeing checks.
[www.devoncarerscentre.org.uk](http://www.devoncarerscentre.org.uk)
Westbank Community Health and Care Ltd
The Healthy Living Centre, Farm House Rise,
Exminster, Devon EX6 8AT  Tel: 08456 431341
Devon Senior Voice case study to illustrate skill-sharing
Memories are made of this...

In June 2008 the Government announced a consultation on improving the services for people with dementia and their carers. It was not until August that rural Devon found out about an event to discuss this in Plymouth, where although labelled as “the Devon” event, Devon was poorly represented. A Devon Senior Voice representative present realised the lack of involvement in Devon, and quickly arranged for a similar event in Barnstaple to put Devon’s point of view. Some 100 people travelled through rain and floods and a 24 page response sent. When the National Strategy was published all the recommendations were included.

At the Barnstaple event the DSV found out that two carers had produced a Devon Dementia Carers Pathway in an effort to avoid others facing the same problems that they had had. With help from Rotary they were producing these in their dining room. Seeing the potential the DSV funded a printing run and a re-run, 6,000 copies in all.

The DSV was invited onto the Devon Dementia Partnership Group, tasked with implementing the National Strategy. One of the tenets was to improve the lives of carers and the establishment of the Memory Cafés. The progress on developing these had been slow. Taking on the challenge the DSV, under the guidance of David Light (a co-author of the Dementia Carers Pathway), the local Senior Councils organised meetings in all the Market Towns without a café, and the die was cast. Within three months the first new café was up and running, swiftly followed by others. They had captured the imagination of all the Market Towns and volunteers rolled in. Voluntary organisations – Alzheimers, Rotary, Leagues of Friends and DSV were running them. By April 2011 there will be 27 new cafés, making 43 in all. This simply could not have been done without the DSV acting as a catalyst. The DSV’s effort alone has been worth over £50,000 to the NHS. This is acknowledged nationally as a tremendous achievement.

The carers and their partners now have access to peer support, and with Devon NHS Partnership Trust putting in start up funding and guaranteeing that the Community Psychiatric Teams would be involved, there is a measurable improvement in their lives.

Contributed by the Devon Senior Voice
Priority 1b: Health and care services must be of good quality, available to all according to need and personal to each

Quality
The Way Ahead commits NHS Devon and DCC to the best possible treatment, that is continuously improving.

Eligibility for support according to need
Eligibility criteria are used to target social care services at those people in greatest need. Devon’s criteria are based on the national guidance Fair Access to Care Services. These criteria are based on needs and risks, and all people requiring social care are treated equitably so there is no difference in application for those aged under or over 65 years of age.

The needs covered are:
- Needs relating to your physical and mental health
- Needs relating to your personal care, domestic routines and home environment
- Needs relating to your family and social responsibilities
- Carers


Ensuring equality of support
Age is one of the factors taken into account when undertaking ‘impact assessments’ of the effect of any changes made to services by DCC and NHS Devon.

Personalised support
Putting People First is the change agenda for social care personalization – “personal to each”. It sets out how Direct Payments, Personal Budgets and other measures will enable people to tailor the support they need to their individual circumstances and preferences.

DCC is increasing the number of people who have a Personal Budget. This shows them how much their care costs, and the number of people who then opt to have a Direct Payment with which to arrange their own support.
NHS Devon is also working on initiatives which are improving choice and developing personalized services, these include:
- Patient choice of place of treatment
- Self-care programmes for people with long-term conditions.
Priority 1c: Health and care services must be within everyone’s means and must take into account availability and cost of transport

Distance to services

The Way Ahead commits NHS Devon to health care which is closer to home. Most hospital care in Devon takes place in the larger acute hospitals, often many miles from people’s homes but NHS Devon is shifting significant proportions of urgent and planned care into more local settings.

The personalisation of social care will enable people to make arrangements (or be supported to make arrangements) for services closer to home, avoiding unnecessary journeys and transport costs.

Cost

DCC, through its commissioning of services strives to achieve best value for money. Some social care services are charged-for and the amount that DCC charges is subject to the authority’s Fairer Charging policy. DCC acknowledges that the cost of services is an important issue for vulnerable people and their carers.

However, a number of joint health and care services are not charged-for. These include social care reablement, rapid response and community equipment services.

Devon County Council’s charging policy for non-residential services can be found in the factsheet available at [www.devon.gov.uk/devon_acs_non-residential_charging_policy_may_2011.pdf](http://www.devon.gov.uk/devon_acs_non-residential_charging_policy_may_2011.pdf)
**Priority 1d: Older people and carers can access a range of practical and preventative services that promote independence, as well as physical, mental and emotional wellbeing.**

**Prevention**

*The Way Ahead* sets out the NHS-led approach to **prevention and self care**. To make a real difference we will need to shift from a health and social care system that uses most of its time and money dealing with acute and episodic illness to one that actively promotes prevention.

- Lifestyle factors and health behaviours will require sustained attention to bring about real change.
- One in five people registered with a GP in Devon smokes.
- More than 52,000 adults on GP registers are clinically obese.
- More than 18,000 people in Devon have an alcohol dependency.
- In Devon, 16% of hospital admissions last year were related to alcohol consumption.

In breast and cervical screening programmes we have achieved the required coverage rates but we now need to target people from deprived neighbourhoods and people with disabilities, where uptake remains lower.

We will:

- Establish accessible health hubs by 2013 to support people to lead healthy lives. Most of these will be at children’s centres and community hospitals but we will also reach out through doctors’ and dentists’ surgeries, pharmacies, rural locations such as village halls, plus healthy living networks and social networking websites.
- Make it easier to get health checks, immunisation, screening and early assessment and diagnostics for specific conditions where early intervention can mean a better health outcome.
- Develop new opportunities and approaches for improved self-care, such as links to expert wellbeing champions who are managing their own health challenge effectively, and more help with self management, including the Expert Patient Programme.
- As a priority, develop public health services that will have an impact on tackling key problems such as alcohol and substance misuse support.
- Achieve a planned shift of 5% of our resources into improving health over five years, directing the money and workforce attention where there is greatest need.
- Work in partnership with all the agencies and groups that play a key part in improving health and wellbeing and targeting health inequalities.
Self care
The DCC *Putting People First* public information strategy included further development of the online Devon Community Directory which will enable people to look up all forms of social care and other community support for themselves. Try out the Community Directory at [www.devonline.gov.uk/community](http://www.devonline.gov.uk/community)

Promoting Independence
The JSNA Care Pathways document contains the following commitments on falls prevention:

- Develop a stronger commissioning focus on the outcomes and associated quality of care indicators for hip and other fracture care across the four acute trusts serving Devon.
- Develop a falls and bone health commissioning strategy for Devon.
- Work to develop systematic arrangement for specialist medical support for community-based falls clinics.
- Develop stronger links with local authority leisure services as part of addressing equity of access to exercise classes for fallers and others at high risk across the county.
- Develop a common home safety assessment service in conjunction with the police and fire services.
- Provide handyperson time to promote home safety.

The *Putting People First* theme of *Early Intervention and Prevention* states that the focus is on helping people early enough and in the right way, so that they stay healthy, recover quickly and maintain their independence.

Work areas include:

- Extension of the social care reablement service and the rapid response service to maximize people’s independence in their own home and provide support at times of crisis.
- Footcare services have been improved through the use of trained voluntary sector representatives, improving people’s involvement in the community and supporting the reductions in falls.
- Improving carers services through increased identification and support through GP practices and carers health and wellbeing checks.
- Community Mentoring, which builds networks of support for people who were isolated, lonely or depressed or otherwise at risk of social exclusion
- Extending the offer of assistive technology into people’s homes. A retail model of prescriptions for community equipment, improving choice by enabling people to choose their own supplier and equipment.
Aim 2: Improved Quality of Life

Priority 2a: Access to frequent and low cost transport for all

The Joint Strategic Needs Assessment states:
The ability for people living in Devon to have access to essential services needs to be seen as an essential part of service delivery. In a large rural county, such as Devon, access and transport are key and have been identified in surveys of residents as a major concern. Access is increasingly being regarded as an equality issue: equality to essential services regardless of where a person lives or whether they have access to a car or can drive.

The county council’s access strategy provides and supports a number of overlapping services which provide access, although we acknowledge this is a massive challenge. Some examples are supported bus routes to augment commercial bus services, Fare Cars (pre-booked taxi-bus services), Ring & Ride services for the frail elderly and disabled, Wheels-to-Work, and community car schemes. Devon has achieved its target to improve access by 15% in the second Local Transport Plan but further work, particularly through joint-working arrangements with agencies such as NHS Acute Trusts is required.

Jointly with Devon NHS Trusts, Devon County Council supports community group operated contact points for people to call if they have difficulty in accessing health service appointments, which co-ordinate and provide transport through voluntary sector community car schemes if needed if possible.

Priority 2b: Information about opportunities and services for older people should be easy to understand, and readily available in a variety of formats and accessible using new technology

Information about opportunities and services for older people is available by telephone from Care Direct, in a variety of formats such as large print and audio, in online factsheets and via the online Community Directory - see earlier section.
**Priority 2c: Leisure, arts, fitness and learning opportunities must be available in all areas at a reasonable cost**

Learning and arts opportunities are covered by the Adult and Community Learning Strategic Plan which can be found at: [www.devon.gov.uk/dacl_strategic_plan_2010-2013](http://www.devon.gov.uk/dacl_strategic_plan_2010-2013)

This specifically states: “We will prioritise government funding to support groups and individuals who have found it difficult to participate in the past. This will include: Older People”

The first investment goal is to: “Establish a fees structure that reflects service users’ ability to pay.”

Information on courses can be found at [www.devon.gov.uk/adultlearning](http://www.devon.gov.uk/adultlearning)

Other leisure and fitness opportunities are the responsibility of the City of Exeter and the District Councils of Devon and are outside the scope of this document.

**Priority 2d: Social networks and self-help opportunities should be available locally, and encouraged where necessary to combat social isolation**

The *Putting People First* theme *Social Capital* states: The aim of this theme is to ensure that everyone has the opportunity to be part of the community and experience the friendships and care that can come from families, friends and neighbours. We know that greater interaction between people generates a greater sense of community spirit. We will aim to ensure everyone has the opportunity to be part of the community and experience the friendships and care that can come from families, friends and neighbours. This can be achieved by using the potential of the community to reduce social isolation and provide a sense of belonging for people.

[www.devon.gov.uk/puttingpeoplefirst](http://www.devon.gov.uk/puttingpeoplefirst)

The DCC and NHS Devon Prevention strategy contains a theme of improving volunteering opportunities for vulnerable older people.

Community mentoring builds third sector capacity by establishing financially self-sustaining user-led groups and activities, alongside DCC’s support for the wider voluntary sector.
Priority 2e: Older people should feel safe in their homes and communities

The JSNA states: The health and wellbeing of individuals can be greatly affected by the actual and perceived levels of crime within a community.

In Devon 93.2% of people feel safe in their local areas during the day and 67.8% feel safe in the local area after dark. Devon is the 4th safest place in the country. Devon is experiencing a reduction in overall crime. However, nationally the perception of crime has increased.

The reduction in crime has been achieved through the hard work that the Devon & Cornwall Constabulary have undertaken, but it has also been due to joint working within Devon. The effect of this joint working was highlighted in a recent public survey undertaken by Devon & Cornwall Constabulary where 79.7% of participants agreed that the Police and the Council are dealing with the anti-social behaviour and crime that matter.
**Aim 3: Making a Positive Contribution**

**Priority 3a: Older citizens should be engaged in decision making as real partners**

Devon County Council, with NHS Devon, was proactive in encouraging the development of Devon Senior Voice precisely to facilitate such engagement.

Increasingly the Senior Council is having an influence on broader matters of concern to older people, acting as a conduit for the voice of older people and putting forward their views. In July 2011 the Senior Council became one of a number of partners delivering a single engagement contract for health and social care issues as well as being represented on a number of other forums.

**Priority 3b: Older people should be valued, respected and free from discrimination**

The revised arrangements for supporting involvement the local authority have embedded the voice of older people in DCC and NHS planning.

Age is one of the factors taken into account in all Equality Impact Needs Assessments undertaken by the County Council.

Equality is the first of the principles governing the NHS Constitution and the Government has made it clear that age equality in the NHS and Social Care will not be excepted from the implementation of the Equality Act 2010 which comes into force in 2012.

**Priority 3c: Understanding and communication should be promoted between older and younger people**

Good progress was made in 2010 when the Senior Council and the Devon County Council Youth Service held their first intergenerational conference. This event helped bridge the gap between the young and old, showing that the two generations share much common ground.

The launch of Don’t judge us ‘til you know us - a campaign being led by a group of young people supported by the Devon Children’s Trust Partnership - marked the start of a programme of activities and publicity to raise awareness of the positive activities young people are involved in, and the negative stereotypes they are often branded within the media.
**Priority 3d: Opportunities should be available to share skills, volunteer and contribute to community life**

There is a wide range of volunteering opportunities for people of all ages in Devon available through local volunteer centres in every part of the County as well as directly with associations such as those named above.

The volunteer centres come together to form a network, Volunteer Centres Devon, which is part of a national network of Volunteering Development Agencies. The Centres work with individuals, groups and organisations in the voluntary sector to promote, support and develop volunteering in the community. Details are available at: [www.volunteerdevon.net](http://www.volunteerdevon.net)

**Priority 3e: Opportunities should be available to play a positive environmental protection role**

The Devon Wildlife Trust offers many opportunities for conservation and environmental protection across Devon. Details can be found at: [www.devonwildlifetrust.org](http://www.devonwildlifetrust.org)
Aim 4: Attaining economic wellbeing

Priority 4a: Older people should have an adequate income and have access to advice on all benefits

Care Direct is able to offer assistance with all benefit enquiries and can signpost to other agencies - and a new partnership of advice agencies has been established, the Devon Advice Network.

Priority 4b: Older people should have the opportunity to work

Age discrimination has been unlawful in employment, training and education since October 2006. Workers, the self-employed and job applicants are all protected along with other groups. Information on age discrimination is available online in a number of places including www.ageuk.org.uk/work-and-learning/discrimination-and-rights/age-discrimination-law

Priority 4c: Appropriate and decent accommodation and tenure choices which are within the means of older people

As a result of the housing and support needs review an extra care commissioning strategy was developed which is available at: www.devon.gov.uk/community_based_support
Ageing Well in Devon

For further copies please contact:
Devon Senior Voice, PO Box 210, Harberton, Totnes TQ9 9DA
Telephone: 01803 732 678
Email: info@scfd.org.uk

If you need a different format phone 0845 155 1015
email customer@devon.gov.uk
SMS 80011 (start all messages with the word Devon)
or Textphone 0845 155 1020