Appendix 1 Progress Update: Loneliness and Social Isolation Select Committee Recommendations

Recommendation	Progress to date	Status
1. The committee recognises that loneliness and social isolation are not issues that affect older people exclusively. The Committee recommends that the Adult Social Care and Health Directorate leads further investigations into the prevention or reduction of loneliness and social isolation amongst specific groups of people who are also likely to be impacted, such as young people, disabled people and carers.	A work plan had been developed in relation to this recommendation that included setting up and attending existing focus groups and forums to develop an approach, undertaking field work with representative groups, such as the People's Panel and looking for additional opportunities to engage with people, such as public libraries. Due to the Coronavirus pandemic much of this activity was not able to happen.	Completed
	Loneliness and Social Isolation e-survey The Adult Social Care Engagement Team undertook an online survey that ran for five weeks from 22 June 2020 to 24 July 2020 to understand people's experience of social isolation and loneliness both before and as a result of lockdown measures introduced during the pandemic.	
	The survey was sent electronically to approximately 2,000 individuals, voluntary organisations, Parish and District councils, religious organisations and other groups across Kent. Some of the organisations/groups then posted/shared the survey wider across their own websites or social media platforms, e.g. Teston Parish Council shared the survey on their Facebook page, Deal Town Council forwarded it onto all their staff and council members and the Kent Association of Local Councils included a news article to promote the survey in the KCC section of KALC News, their monthly newsletter.	

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	everyone responded to every question. Within the survey, people were asked how often they had felt lonely in the last six weeks. 97 people (37%) said they had felt lonely all of the time or often and 81 people (31%) said they had felt lonely some of the time.135 people (52%) said this wasn't usual for them and 153 people (59%) thought this was in response to lockdown.	
	The survey also asked about people's awareness of the support that was available to them in their communities and about gaps in community resources.	
	Other engagement activity Members of the Innovation Delivery Team have visited Kent's libraries over the past three months as part of the Your Voice roadshow to gather insight into people's awareness, understanding and experience of adult social care. This is part of an ongoing focus within the adult social care Making a Difference Everyday Programme, of ensuring that the person's voice is heard and listened to across all our services. Officers spoke to 126 people across the county, asking them a range of questions about their understanding of what adult social care does, their experience of adult social care and what is important to them. In response to the last question, the majority of responses (10.37%) was "support to remain independent".	
	Ongoing Engagement The Adult social care strategy consultation is currently open and closes on 24 October 2021. The strategy is the beginning of the public conversation and there will be some key projects	

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	to get involved with over the next few months. People are also being invited to join the Your Voice network – an opportunity to engage more with adult social care and make sure that the opinions of people are represented and heard. People can engage at four levels: Register for updates Join our discussions Be part of our projects Shape social care	
2. KCC should produce a corporate strategy aimed at tacking loneliness and social isolation in Kent. The strategy should set out clear objectives, as well as roles and responsibilities, and should strengthen coordination and collaboration between KCC services	At the meeting held on 26 July 2019, Scrutiny Committee agreed that relevant elements of this recommendation would be discharged through the development of a Civil Society Strategy. After a Covid-related delay, The Kent County Council Civil Society Strategy went out to public consultation on 6 September 2021 for a 4-week period. The consultation closed on 3 October 2021. The KCC Civil Society strategy replaces the 2015 VCS Policy and is also a key strategy in delivering against the outcomes of the Council's Interim Strategic plan.	In progress Completion November 2021
	 The Aims and objectives of the strategy are: a recognition of the contribution of civil society in Kent and the VCSE (the 'social sector') as a core part of that a commitment to supporting civil society to flourish a commitment to a strategic relationship with the social sector that recognises its diversity and goes beyond those that have a financial relationship with the Council a commitment to build on the partnership working we have seen over the last year between both public sector 	

partners and the VCSE 5. a commitment to support the social sector to be sustainable 6. a commitment to safeguarding the independence of VCSE organisations. It will be used: • to shape our relationship with civil society in the future and the social sector as a core part of that • to provide a framework to guide the approach to the Council's engagement with the social sector • to provide consistency in our approach to grant funding to the social sector • to shape our commitment to an offer of support to the social sector and the principles which underpin it, including fair funding. It has been developed through ongoing engagement with the sector and sector representative bodies. In its first annual report on the loneliness strategy, HM Government recognises that "Civil society is key to reducing loneliness". Therefore, by recognising and supporting a civil society in Kent, we will be able to actively address the issue of social isolation and lonelinesss. Following the period of formal public consultation, the revised draft is scheduled to be discussed at Policy and Resources Cabinet Committee on 9 November 2021 and the final draft will go to Cabinet for endorsement on 9 December 2021.	Recommendation	Progress to date	Status
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3. KCC should organise a high-profile event to launch its strategy. This should involve partner organisations from the public, private and voluntary sectors. A key objective of this event should be to promote closer collaboration in order to prevent or reduce loneliness and social isolation in Kent.	Prior to the Covid pandemic a launch of the strategy had been planned to take place in Sessions House, Maidstone. Given the current climate, the new strategy is likely to be launched digitally through KCC communications and social media. Please see recommendation 8 for more information of the campaign.	Complete
4. KCC should work with the Government, local partner agencies and the voluntary sector to enable Kent residents to access, from both a single online source and a single contact number, information on services, activities and support that could help to reduce their risk of feeling lonely. KCC should also consider the opportunity of volunteering in the Government's pilots to explore how better use of data can help make it easier for people to find local activities, services and support	Single online source of information Officers have been working with colleagues from Kent and Medway Clinical Commissioning Group (Integrated Care Commissioning Team) and local voluntary sector organisations to implement a Kent and Medway Directory of Services (DOS) for community-based activities, resources and support. DOS provide information about activities, groups and organisations that are operating in local areas and are an essential tool for residents, social prescribers and other signposting professionals seeking to link people to activities that can support them. The new platform will bring together four existing public facing online DOS into one Kent and Medway directory. The current directories are: • Connect Well East Kent: covering East Kent (Folkestone, Hythe, Ashford, Canterbury, Herne Bay, Whistable and Faversham). Owned and operated by Social Enterprise Kent • Connect Well Kent: covering Canterbury, Faversham, Whitstable, Herne Bay, Sandwich and Ash: owned and	In progress. Completion November 2021

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red co pla bo an Th org ha qu po iss info	operated by Red Zebra Connect Well West Kent: covering West Kent. Owned and operated by Involve Kent Simply Connect: Covering Medway. Owned and operated by Imago Medway bringing all of these together into one platform we will duce duplication of information and quality assurance of mmunity assets, reduce confusion for residents about which afform to use, especially for those living on or near area andaries, ensure longer term sustainability of the information d fill gaps where DOS do not currently exist. The Voluntary Community and Social Enterprise sector ganisations that own and administer the existing directories, we agreed to play a key role in the ongoing maintenance and ality assurance of the content of the directories — providing a sitive, local solution to the ongoing resource and commitment sue that frequently accompanies such large directories of ormation. The ficers from Kent County Council are involved and actively porting the project as a direct result of the recommendation the Select Committee. The Kent and Medway platform is being developed by Simply branect and is expected to go live in November 2021.	

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	Single telephone contact number Officers recognise there are many numbers already available for people who are socially isolated to contact for advice and support. For example, community navigation contracted providers, KCC contact point, providers (such as Age UK). Whilst community navigation providers are well placed to signpost people and deliver social prescribing services, publicising these numbers widely holds an inherent risk to the capacity of the contracted organisations to meet additional demand, without additional funding.	
	In addition, the new community-based wellbeing contracts are being let in a phased approach as part of the process of moving historic adult social care grants onto contracts. These contracts will provide services that people can access directly, but also will provide an element of signposting.	
	Contracts are already in place (Started 1 April 2021) for West Kent, East Kent Coast (Thanet, Dover, Folkestone & Hythe) Contracts currently in procurement for a planned contract start date of 1 April 2022 are North Kent (DGS) and East Kent (Ashford, Canterbury, Swale).	
	While there is still the aspiration for a single brand and number, a single phone number may not be achievable, although it will be explored.	
5. The Committee fully endorses the social prescribing model, which enables organisations to refer people – including those	Interreg funding was secured by partners in France and England to deliver the Connected Communities project. Through this initiative, a new Social Prescribing Plus (SP+)	Complete

services that offer support for social, emotional, or practical needs.	service is being tested in several pilot areas in Kent by the Public Protection Group which has significant experience	
The Committee also endorses the pilot to assess the effectiveness of Kent Community Wardens acting as 'community connectors' and playing a central role in the identification, referral and support of people who suffer from social isolation and loneliness. The Committee recommends that, if necessary, funding should be found to ensure that this project is completed. If the pilot is successful, an understanding will be needed of how the role of Community Wardens would fit alongside social prescribing structures in the County.	working on the front line with residents, with vulnerable residents, and within communities, for example tackling antisocial behaviour. The project offers the Community Warden service (within the Public Protection Group) the opportunity to formally recognise this aspect of their role by developing a Social Prescribing Plus (SP+) model that is being tested during the project and evaluated by University of Essex. The new role of Community Connector provides home visits to isolated and vulnerable older residents aged 65 and over, who live independently in their own homes. The Community Connectors take traditional office-based services out into the community. They ask what interests and hobbies the individual has and then connect them with relevant events and groups nearby. The aim is to link isolated, vulnerable older people, who might otherwise repeatedly visit their GP through loneliness rather than medical need, with social groups and regular activities in their communities. The increased social activity should help older and isolated individuals feel more connected and involved with their community, local activities and regular social groups so they are able to make friends and build their resilience. Eight part time community connectors recruited from within the existing warden service work in four pilot areas. Pilot areas generally comprise two to three wards within each of the following districts. Pilot areas were identified using data	

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	analysed by the Kent Public Health Observatory (KPHO) along with supporting datasets such as the Age UK Loneliness heat maps and local knowledge. In the Summer of 2021, low case numbers prompted a review of the original pilot area selection. As a result the footprint for Folkestone and Sheerness have been expanded, to enable the service to be available to more residents. The Thanet pilot wards were switched in recognition that other existing SP providers were covering this area, and therefore other areas with similar need within Thanet were identified; Westgate-on-sea.	
	Folkestone	
	Maidstone	
	• Thanet	
	• Sheerness	
	The 8 part-time community connectors have been operational since March 2021. Case numbers have been slow to pick-up initially, and this has been a similar experience for some other partners, and expected to be linked to the pandemic. However, a number of cases have and are progressing with success stories and case studies being collected.	
	The project aims to build strong support networks in the pilot areas so local people such as shop workers, local business owners, neighbour and volunteer groups are more aware of older and isolated people in their community. The aim is that they will identify these individuals and signpost the Community Connector to them and maybe even provide some support or	

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	companionship, possibly by organising local events and activities themselves.	
	This will be achieved through campaigns and training to educate organisations, local groups and individuals to support older people in the pilot areas, so they are better informed and more resilient to potential threats to their independence such as scams, doorstep crime, loneliness and isolation. The aim is that through the support network, vulnerable, older residents get the help they need and are protected against scams, doorstep criminals and fraudsters.	
	There will also be a focus on working alongside and creating referral pathways between other social prescribing and community navigation schemes that operate in the pilot areas, including the Dementia Friendly Communities team.	
	The Connected Communities initiative involves local authority and academic partners from England and France. Through cross border collaboration Kent will also share knowledge with and learn from other p#artners.	
	An internal Connected Communities Project Board is established to provide robust Project Management governance arrangements for KCC. The senior responsible officer (Legal Person) in KCC for the Connected Communities project and Chair of the Project Board is Head of Public Protection.	
	As noted in the officer response to the select committee recommendations, Growth, Environment and Transport (GET) offers a suite of services in addition to the community warden	

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	service and community assets that can receive social prescriptions. Many of these, such as libraries, are listed in the Simply Connect social prescribing directory of service. This offer is also referenced directly in the service specification for the new Universal Wellbeing Service. The key elements include:	
	 a) The Provider is expected to work in partnership with other community services in Kent to ensure effective partnerships are developed and the best use of resources are achieved. The type of services should include, but are not limited to those shown below: Live Well Kent Community Navigators Kent Advocacy Services Home Improvement Agencies Carers Services; Home Care Services; Arts, cultural and heritage providers; and Sports and physical activity providers b) Providers will be expected to consider asset-based approaches in coordination with other KCC and community services such as: 	
	 Trading Standards (Victim Support) Community Wardens Libraries (events & schemes) Kent Country Parks (e.g., easy access walks) Countryside Management Partnerships (including mental health and conservation valunteering programmes) 	
	health and conservation volunteering programmes)Explore Kent (promotion of green spaces); and	

Recommendation	Progress to date	Status
	KCC Kent Sport (information at <u>www.kentsport.org</u>)	
	These requirements are also reflected in the tender evaluation questions.	
	ASCH and GET are also actively seeking ways to work more closely together in future for the benefit of residents. Representatives from GET recently attended a workshop with the Adult Social Care Practice Test and Build team to talk about the services that they provide. The recording of this meeting is being shared throughout adult social care as part of a regular newsletter and follow up workshops will take place.	
	A key feature of the resilient community's element of the adult social care Making a Difference Everyday programme is to define and establish closer, collaborative ways of working between adult social care teams, local communities and organisations delivering services in local areas – engaging more effectively with GET colleagues is a key strand in this process.	
6. KCC's Public Transport team should investigate the feasibility of expanding the Kent Karrier service, and should continue to offer financial support and information to those who wish to introduce or expand a community transport service	Kent Karrier is a wholly discretionary public transport service and forms part of the supported bus budget. It is accessible to residents over the age of 85, residents who have a medical condition that makes travelling on public transport difficult and residents who live in a rural area more than 500 meters from a bus route or railway station.	In progress Completion October 2021
	The service provides a door-to-door service from resident's homes to a nearby supermarket using minibuses. There is a £5 membership fee to residents using the service and a fare of	

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	between £2.00 (from urban areas) to £3.50 (from rural areas). The service is delivered through contracted providers: Thanet Community Transport Association (Thanet, Folkestone, Hythe, Canterbury and Dover) Compaid (rest of the county) The service is monitored to understand demand on existing routes. The Public Transport team also provide information and advice and grants to community transport groups and is currently engaged in developing a Bus Service Improvement Plan for Kent in response to the National Bus Strategy. This plan includes the development of Enhanced Partnerships. The Improvement Plan which needs to be in place by 31 October 2021 includes proposed initiatives addressing: Network development Alternative delivery methods, including an initiative to continue Kent's positive work with respect to community transport, continuing to refine a toolkit to support the growth of the sector and to run grant schemes to provide capital funding to key projects. Fares and ticketing Infrastructure and priority Environment and Air quality	Status
	 Innovation and digital accessibility Public transport information Highways and network management 	

Recommendation	Progress to date	Status
7. KCC's Public Transport team should encourage organisations in Kent's transport sector to develop ways of connecting people – such as the Talking Bus service – so that transport networks play the greatest role possible in tacking loneliness and social isolation.	Progress to date During 2018, Kent County Council undertook a countywide public consultation regarding the future of rural transport in Kent. It was called 'The Big Conversation' and the purpose was to help KCC understand how to get the best value from the subsidy the Council provides for rural transport and the degree to which bus users were open to using different forms of transport. The Council also wanted to find out whether there are better more sustainable ways of providing transport to rural communities not currently served by commercial operators. As part of the process, the Council allocated funding to provide a number of pilot routes for a 12 month period. This Rural Transport Initiative (RTI) pilots new or amended bus routes, including taxi bus, hopper service and feeder service, and uses smaller vehicles where numbers on existing routes are low making routes commercially unviable. Three of the pilots began in July 2019 and were scheduled to end in June 2020, with the Maidstone pilots commencing in February 2020 and ending in February 2021. The pilots operate off peak, Monday to Friday, meaning that the Council can make better use of some vehicles that are used for other purposes such as school transport. Three pilots include: • Tenterden Hopper: • Sandwich Connect • Sevenoaks Taxi Bus • Services 13 & 59	In progress Completion October 2021

Recommendation	Progress to date	Status
	All of the above pilot schemes were being monitored using passenger usage information but were on hold due to the pandemic.	
 8. KCC should work with the Government to develop a Kent-focused campaign to raise awareness of the issues and loneliness and social wellbeing. The campaign should provide information including: The consequences of loneliness and social isolation The support that is available and how to access it 	A small working group of officers has been working to design and plan the campaign. The focus of the campaign was to be twofold: • Making people who are experiencing loneliness aware of the support that is available to them • Encouraging people to engage in informal volunteering / neighbourliness through small acts of kindness to support vulnerable people within their community However, it came to the attention of this group that Kent Community Foundation (KCF) are running a 'knock and check' campaign through the winter. The focus of this campaign was on promoting acts of neighbourliness, such as those seen at the beginning of the Covid -19 pandemic, where people would knock on their neighbours door to make sure that they were OK and ask whether they needed anything. The idea being that this would be essential in supporting vulnerable people in the community through the winter months. Rather than risk duplicating or risking the impact of a campaign that was more fully developed, the Cabinet Member for Adult Social Care and Public Health agreed to endorse and promote the KCF campaign which was subsequently launched on 26 October 2020.	Complete

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	This approach not only prevented duplication but gave the KCF campaign wider reach and built on the partnership working we have undertaken with KCF and others during Covid as part of the recovery work. The campaign had over 50 separate pieces of media coverage and the booklet they produced had over 1000 views.	
9. KCC should sign up to the Government's pledge to support its employees by addressing loneliness and building social connections. KCC should also encourage local employers across all sectors to adopt the pledge to support their own employees' social wellbeing and health.	KCC Human Resources (HR) department made contact with Campaign to End Loneliness who worked with the government on both the strategy and the employer's pledge. During these conversations, it become clear that there is no pledge per se for employers to sign up to. However, there is a Loneliness Employers Leadership Group that "aims to support the take up and impact of the "Employer Loneliness pledge" as a first step in increasing the knowledge of "what works" and the quality and quantity of action to tackle loneliness and connectedness across the economy." KCC signed up to this group and was the only public sector organisation represented. The group intended to publish a good practice guide in spring 2020 and an officer from the Council's Human Resources team attended a meeting of the group on 24 March 2020. Due to covid work on this has been suspended. It is unclear if or when it will begin again. In KCC work has focused on developing a range of materials, support and virtual resources that can support employees isolated through home working as a result of the pandemic.	Complete

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10. KCC should adopt the Government's standard approach to measuring loneliness, which is based on the UCLA Loneliness Scale, and should encourage partner organisations and service providers in Kent to do the same in order to ensure consistency across the county.	Officers recognise the importance of building an evidence base for services and interventions funded through public money. When designing impact measures, it is important to consider what we want to measure, how we want to measure it, who will be involved and what we want to understand from the information collected.	Complete
	In relation to social isolation and loneliness, the Office for National Statistics (ONS) has published an outcomes measurement tool, package of information and methodological guidance for using it. This tool is being included in government surveys, as well as the Public Health Outcomes Framework and is endorsed by Community Fund and What Works Wellbeing in "A brief guide to measuring loneliness for the charities and social enterprises".	
	The ONS tool is based on the University of California at Los Angeles (UCLA) 3-item loneliness scale which asks people indirectly about emotions associated with loneliness: • How often do you feel you lack companionship? • How often do you feel left out? • How often do you feel isolation from others? And a fourth direct question: • How often do you feel lonely?	
	In light of this and after conversations with voluntary sector providers delivering social prescribing and community-based services, officers have reviewed their initial response to this recommendation and determined that while the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) currently being used by the Public Health Division is an appropriate measure of	

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	wellbeing, it does not measure social isolation and loneliness directly.	
	Officers have therefore concluded that the preferred method to measure social isolation and loneliness is the ONS tool. The specification for Universal Wellbeing Services is outcomes focused. This means that KCC as commissioner has specified the outcomes that the services provided should achieve but has left scope for the bidding providers to identify how they will achieve the outcomes. Personal outcomes were identified through a co-design and consultation process. The specification also includes system and outcomes, however because the contract does not specify what services should be delivered in order to meet the outcomes, it cannot really specify how impact should be measured. Therefore, bidding providers are also asked as part of the evaluation process to identify how they will measure and evidence that outcomes are being achieved.	
	This leaves scope for KCC to work with successful providers to build ONS Social Isolation and Loneliness Measure into the evaluation methodology for the services they provide.	
11. KCC should set up a panel – which should include KCC members – to monitor the effectiveness of interventions, promote best practice, and review progress against the objectives of the Loneliness and Social	A panel was established in response to this recommendation. The panel was set up by Cllr Ken Pugh, who also chairs it, and consisted of elected members who were also members of the Select Committee.	Complete
Isolation Strategy.	There was one meeting of the panel on 22 January 2020 when officers attended to provide an update regarding progress towards the select committee recommendations. This was a positive and supportive meeting and illustrated member interest	

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	in the issue of social isolation and loneliness across the whole organisation. There was a recognition that the issues of social isolation and loneliness extend beyond the recommendations of the committee and there was a positive conversation about how to embed awareness of the issue across the Council so that we can see a system wide approach being implemented. Moving forward, work around social isolation and loneliness is referenced in the 2020-23 Strategic Delivery Plan, under Theme 5 Stronger and Safer Communities. Specifically, Item 20 is about promoting a strong civil society and tackling social isolation and loneliness through: • Delivering the Civil Society Strategy, including developing infrastructure support to Voluntary, Community and Social Enterprise Sector (VCSE) • Delivering the Social Isolation and Loneliness Select Committee Action Plan	
	Within the relevant directorates, work will broaden beyond implementing the recommendations of the Select Committee to include ongoing cross directorate projects such as Universal Wellbeing Support. Consideration will be given to how social care practise needs to consider and respond to social isolation and loneliness alongside wider discussions about how and what we commission. As such, this work will become integrated into business as usual for directorates. Oversight and monitoring of the work will be undertaken through established governance processes within individual directorates and the Council.	