

KENT COUNTY COUNCIL

SELECT COMMITTEE - LONELINESS AND SOCIAL ISOLATION

MINUTES of a meeting of the Select Committee - Loneliness and Social Isolation held in the Swale 1 - Sessions House on Wednesday, 12 September 2018.

PRESENT: Mr M A C Balfour, Mrs P M Beresford, Mr D L Brazier, Ms K Constantine, Ms S Hamilton, Mr A R Hills, Ida Linfield and Mr K Pugh (Chairman)

ALSO PRESENT:

IN ATTENDANCE: Mr G Romagnuolo (Research Officer - Overview and Scrutiny), Miss T A Grayell (Democratic Services Officer), Mrs A Taylor (Scrutiny Research Officer) and Miss E West (Democratic Services Officer)

UNRESTRICTED ITEMS

**1. Penny Southern (Corporate Director for Adult Social Care and Health)
(Item 1)**

The Chairman welcomed the guests to the Committee and reminded the Committee of the Terms of Reference. A short introduction was given by Members and officers.

Q – Please introduce yourself and provide an overview of the roles and responsibilities that your post involves.

Mrs Southern introduced herself as the newly appointed Corporate Director of Adult Social Care and Health and said that she had been in-post for 6 months and had worked in Social Care for over 32 years. She said that she had worked in partnership with the local Clinical Commissioning Groups across Adult Social Care and Health, discharged the statutory obligations of the Director of Adult Social Services and was a Member of ADASS (Directors of Adult Social Services) in the south east region. She referred to the Social Isolation Select Committee and said that although the Committee focused on social isolation, it was important to recognise all of the implications in the individuals' living circumstances when tackling social isolation.

Mrs Southern said she was passionate in ensuring that the services provided by Adult Social Care and Health in Kent focused on being approachable to everyone that used the services, as well as ensuring that Kent's statutory responsibilities were adhered to to ensure that appropriate connections were made. She said that a report had been taken to the Adult Social Care Cabinet Committee on 9th March 2018 which focused on Commissioned Services for Adult Carers of Vulnerable Adults. She said that Medway Council had produced a useful strategy to reduce social isolation and Kent were not looking to follow in their footsteps by

creating a similar strategy because there was a clear strategy for Adult Social Care and Health in Kent, which was regularly monitored, updated and shaped.

Q – Do Kent County Council have a Social Isolation Strategy?

Mrs Southern said that there was a strategy for Adult Social Care and Health called ‘your life, your wellbeing’ which covered all elements for individuals experiencing social isolation and loneliness. She said that if social isolation and loneliness was tackled in the right way and sufficient strategies were delivered, the issue would improve. She said that Adult Social Care and Health in Kent felt very comfortable with the current ‘your life, your wellbeing’ strategy, and if the strategy needed to be refreshed, officers would work towards ensuring that the strategy was up to date and provided relevant information.

Q – Who is impacted by Social Isolation and why?

Mrs Southern said that from an Adult Social Care and Health perspective in Kent, it was important to recognise that all individuals were impacted by Social Isolation in some way. Although she added that there were particular contributing factors which influenced social isolation and loneliness in relation to older people and those factors were listed in the ‘your life, your wellbeing’ strategy. The main contribution to social isolation and loneliness was ill-health. She said that she sensed a lack of confidence due to the way generations were developing with social media which therefore could lead to individuals experiencing social isolation and loneliness. She said that although many older people struggled to use technology and social media, it was important to remain positive about social media as it enhanced many parts of day-to-day life and there are a significant number of older people that embrace technology.

Two other factors which contributed to individuals feeling isolated and lonely was bereavement in friends and family members and working as a carer. She talked about a personal experience and said that a family member had cared for her step father when he was unwell, and they had felt very isolated as the caring was constant. She said that it was important to balance intergenerational issues such as technology and said that individuals with grandchildren and children were more likely to be taught how to use technology such as FaceTime and WhatsApp. She said that there were also individuals that would never use the technology through fear of change, and therefore the response to this particular group of individuals would have to be different.

Q – How can we, if at all, help individuals who are experiencing Social Isolation and Loneliness in person?

Mrs Southern said that whilst it was possible to help many individuals who were experiencing social isolation and loneliness reach out to their communities, some individuals did not reach out nor could we be aware of everyone and this made it difficult to help them. She said that social isolation and loneliness was addressed face-to-face through Kent County Council’s Carers Contract which was a carers network which made connections locally in communities across Kent and made connections with groups of people who ordinarily would not use the services that

Kent County Council provided. She said that with the integrated teams that Adult Social Care and Health within Kent County Council worked with, advice and signposting would be given to individuals receiving provision.

Q – What if individuals experiencing Social Isolation and Loneliness cannot afford technology to keep in contact with family and friends?

Mrs Southern said that technology was not offered as a statutory service to individuals experiencing social isolation or loneliness. She said that it was vital that appropriate connections were made for socially isolated individuals to ensure that they engaged with their community and were taking part in communal activities if they wanted to. She talked about a personal experience and said that she had helped her Mother to join sewing groups by looking through parish council magazines because she enjoyed sewing.

Q – In relation to the death of individual's pets, can we make connections with veterinary provisions?

Mrs Southern said that whilst the death of an individual's pet can be a crucial contributing factor to social isolation and loneliness, there were no specific schemes in place which focused on the bereavement of a pet, but there were many voluntary groups that could look at that as a separate issue. She said that unfortunately, it was impossible to resolve all of the issues relating to isolation and said that the statutory responsibilities within Adult Social Care and Health were the main priority, and that some services would be looked provided if there was capacity to do so. She said that as the Adult Social Care and Health budget became increasingly tighter each year, the statutory services that Kent County Council provided needed to be prioritised.

Q – What work have you carried out as a 'befriender' and what are the different ways of communicating?

Mrs Southern shared her experience as a Befriender and informed the Committee about Befriender Services. She said that she took on the role of a befriendee when she was appointed as the Director of Adult Social Care and Health to regain contact with the residents in Kent that needed to be supported and said that she needed to understand the types of people that Kent County Council provided services to. She said that she applied to become a befriendee through a friend and said that a befriendee could contact individuals through telephoning, or visiting, and she chose to visit the lady she was matched with face-to-face. She said that the lady she was matched with was 92 years old and was an amazing person who had achieved many great things in her life. She visited the lady every fortnight and would spend a lot of time with her and take her to the shops. She said that it was a wonderful, and very valuable experience and was a befriendee for one year.

Q – What interventions could be made for vulnerable adults before the critical stage of becoming socially isolated or lonely?

Mrs Southern said that in relation to prevention work, basic social work skills such as listening and understanding the individuals needs were needed. She talked about a personal experience and said that although her Mother lived far away, she could sense that her Mother was lonely and felt isolated and therefore made sure she visited her regularly and spent time with her. She said that it was important to ensure that experiences were person-centred and all staff within Adult Social Care and Health were being trained to ensure that they were sensitive to the specific needs of individuals.

Q – Have Kent County Council got the type of workforce that could help individuals who are socially isolated to join certain clubs or groups based on their interests?

Mrs Southern talked about the type of workforce within Adult Social Care and Health in Kent County Council and said that there was a continuum of staff whose rates of pay differed, based on experience. She said that when Kent County Council connected with the wider workforce sector, organisations would work with Kent County Council to ensure that the Adult Social Care and Health staff were supported and trained to a sufficient level, she added that Adult Social Care and Health in Kent had had great success around apprenticeships. She said that she would be able to provide Adult Social Care and Health's workforce figures to Members of the Committee outside the meeting.

Q – Do Kent County Council’s Adult Social Care and Health services reach rural areas where it is harder for individuals to get out of social isolation?

Mrs Southern said that more work could be undertaken in order to reach the socially isolated individuals who were living in rural areas, but the services that Kent County Council provided did reach rural areas. She said that social isolation and loneliness was worse for individuals living in rural areas because there was no link from friends and family, and therefore these individuals did not know how to access Kent's services. She said that whilst Adult Social Care and Health in Kent did not have the money to resolve all issues in Kent, Adult Social Care and Health focused on the areas where there was a particular problem.

Q – Is the prevention of Social Isolation and Loneliness is a statutory responsibility?

Mrs Southern said that in order to meet Kent County Council's statutory responsibility to look after the wellbeing of Kent's residents, there were certain services that Adult Social Care and Health needed to deliver on which would focus on improving the innovative areas of Adult Social Care. In relation to GP surgeries, she said that it was important to collectively explore partnership opportunities. She said that Adult Social Care and Health alone could not prescribe what GP's delivered and had no jurisdiction in relation to how GP's worked. She said that GP's connected most of Kent's residents, and that some clarity of the expectation of GP's needed to arise from that. She said that everyone should be aware of what their responsibilities were in relation to loneliness and isolation, and partners needed to deliver services to prevent loneliness and social isolation and support Kent County Council's services. She said that it was important to ensure that all of Kent County Council's Adult Social

Care and Health services had a purpose and a benefit to the users. She said that it was difficult to understand where the resources would be best put unless measures and impacts could be recognised. She said that Kent County Council needed to review outcomes and ensure that services are being provided to residents in an innovative way.

Q – What more can Kent County Council do in order to combat Social Isolation and Loneliness?

Mrs Southern said that within Adult Social Care and Health, combatting social isolation and loneliness was a priority. She said whenever services were commissioned, outcomes were always considered, and Adult Social Care and Health ensured that interventions were meeting service user's needs. She discussed the interesting measures that had been taken in relation to Adult Social Care and Health's 'younger adults with learning disabilities' through the pathway and enablement services to see how the group moved onto local groups. The outcome of the services was to support individuals until they felt ready to undertake activities and clubs on their own without support.

Q – Are there any other issues, in relation to the review, that you wish to raise with the Committee?

Mrs Southern said that she valued the Loneliness and Social Isolation Select Committee and said that it was important to explore all options in relation to how social isolation and loneliness could be measured. She reminded the Committee that it was important that Members understood their own role and responsibilities in relation to preventing social isolation.

**2. Mr Mike Hill (Cabinet Member for Community and Regulatory Services)
(Item 2)**

1. Members welcomed Mr Hill, Cabinet Member for Community and Regulatory Services to the Select Committee Hearing.
2. Mr Hill explained that he had held the portfolio for Community Services since 2005, this portfolio contained core front line services which had a large impact in terms of social isolation in Kent.
3. The portfolio could be divided into 4 broad groupings:
 - a. Public protection, Regulatory Services, Community Safety, Trading Standards, Kent Scientific Services, Coroners, Public Rights of Way, Gypsies and Travellers, Community Wardens and Emergency Planning. Mr Hill was also the Chairman of the Kent Community Safety Partnership and the Chairman of the Police and Crime Panel;
 - b. Libraries and Archives;
 - c. Countryside Leisure and Sports, Countryside Partnerships and Volunteering;
 - d. Culture and Creative Services, including Turner Contemporary.

4. The Chairman explained that there was not currently a specific stand alone strategy for loneliness and isolation, but that it was contained within an overarching strategy. The Chairman stated that Community Wardens and the Voluntary Sector played an important role and he asked Mr Hill how he saw KCC's strategy for loneliness and isolation developing.

5. Mr Hill commented that all the services within his portfolio had a role in preventing social isolation. He particularly referred to libraries which were used as safe havens and he considered that there should be a stand alone strategy to tackle loneliness and isolation. This should be in two parts, the first offering activities for residents, places to visit, areas with internet access and the second targeting intervention more directly to combat social isolation. Community Wardens had a large role in targeting people who were socially isolated, their roles had changed from being a law and order service to working with communities, to be aware of vulnerable people in communities and to signpost them to the agencies which could help.

6. Mr Hill also referred to the Home Library Service which was run by volunteers and was a regular point of contact for many residents and an important part of their lives.

7. The Trading Standards Service had evolved and was now part of the front line community safety work, it now focussed on people who had been subject to scams and other fraud.

8. Members were pleased to hear about the Home Library Service and asked for more information about how many library services there were throughout Kent. There were suggestions that library hours should be increased; the library was considered to be a location to meet other people, gain access to computers and education for free.

9. Mr Hill stated that a new library strategy was due to be published, the core issue was the buildings of which there were 99. These were considered to be a vital point of contact for communities and it was hoped that this view would be supported, libraries were more than just book lending services.

10. In response to a question about the number of Community Wardens and where they were deployed Mr Hill explained that there were 70 wardens and their areas were set out on KCC's website. In relation to scams a Member asked if there was further contact after the initial issue had been resolved, Mr Hill explained that follow ups were carried out and if necessary residents were signposted to other organisations which were able to help.

11. Members were hugely supportive of the community wardens, the link between them and charitable services was invaluable along with their support for vulnerable people.

12. The Chairman explained that the Select Committee would be visiting the Community Wardens to understand more about their role.

13. In response to a Member's comment about opportunities for partnership working Mr Hill explained that the Council was looking at Cultural Commissioning and building further partnerships however this was not easy in the current financial climate. A Member commented that the Select Committee would be putting cost benefits onto the aspirations of the Select Committee. It would be helpful to set out a cost benefit analysis of the Community Wardens and other preventative services.

14. A Member asked how it was decided which areas community wardens should be deployed to and Mr Hill explained that this was done on a needs basis.

15. Mr Hill explained that much of his portfolio was not a statutory service, however he was convinced of the huge value in areas such as Community Wardens. Members considered that one of their recommendations should be to retain and if possible increase the number of Community Wardens in Kent. Mr Hill explained that previously there had been 100 wardens and this had been reduced to the current level of 70, he strongly recommended that the number of wardens did not go below 70. One Member asked whether it would be possible to run a pilot scheme to look at deploying wardens in areas where it would be possible to measure their output. Mr Hill informed Members that historical evidence was available around the effectiveness of Community Wardens as well as a report by Christ Church University which might be worth the Select Committee's consideration.

16. In response to a question about what more could be done to reduce social isolation and loneliness Mr Hill considered that it was vitally important to strengthen communities. Social isolation occurred where communities were weak or non-existent. It was considered that residents felt happiest when they were surrounded by friends and were safe, with places to go and things to do. There was a stark difference between living somewhere where that happened and where it didn't happen.

17. It was important to support the infrastructure of communities and Members considered that the voluntary sector in parts of Kent was very strong. The Chairman referred to volunteers who used their own cars to take residents to hospital and the value of services such as this. One member also referred to residents with very niche needs, who would possibly not access services to meet their needs. It was considered necessary to look at benefits for volunteers as they were such a valuable part of communities.

**3. Mr Mike Whiting (Cabinet Member for Planning, Highways, Transport and Waste)
(Item 3)**

1. Mr Whiting explained his role as Cabinet Member and offered a written report (*circulated to the Select Committee after the meeting*) which set out in detail how the Public Transport department delivered services which sought to counter loneliness and social isolation. He explained that the department's mission statement was to "help enable access to education, health and

community services for diverse users across Kent, through the planning, procurement and management of public transport services".

2. This was done by managing the subsidised bus service and delivering statutory and discretionary bus services, as well as community transport services and the free bus pass service for older and disabled people. Statutory services included those on which children relied to travel to school, while the other services listed above were mostly discretionary. Community Transport covered a range of services, including the County Council's own Kent Karrier service and services delivered by other operators but supported by the County Council.

3. Mr Whiting acknowledged the role that transport services could and did play in addressing social isolation and said the County Council needed to find a way to manage service provision and support isolated communities by making the best use of the resources available. However, much of the service which could contribute most to addressing social isolation was discretionary rather than statutory and, as such, was not the subject of any extra funding from the Government.

4. **Mr Whiting was asked how committed the Cabinet was to overcoming social isolation, especially in rural areas where people could not access services due to a lack of transport, by helping more people to access community transport services.** He explained that there was a general commitment to addressing these issues, by the Cabinet and by all elected Members. Many other issues arose from social isolation, as people could not go out and about, attend medical appointments, visit friends and take part in clubs and social activities. The ability to engage socially was known to have a positive impact on people's physical and mental health and benefit their quality of life. However, he was unaware of any statistical study to quantify the impact of investment made in community transport and the benefit this investment would bring.

5. Social Services was a huge area of local authority expenditure, and it would be helpful to be able to demonstrate that every £1 spent on preventative services could save a given figure on the support services which would be required to address the negative effects of loneliness and social isolation. It was important also to assess if each £1 spent could be spent more effectively and if it was being spent in the right place. He pointed out that the Kent County Council had continued to subsidise bus services while many local authorities had not. If evidence were to arise that funding could be directed more effectively, the County Council should take notice of this.

6. **It was suggested that, if a link between the relief of social isolation and tangible savings to NHS services could be demonstrated, the County Council could ask the NHS to make a contribution to the costs of providing those preventative services.** Mr Whiting agreed that prevention was certainly better than cure and suggested that this could perhaps be a recommendation that the Select Committee might want to make.

7. Mr Whiting was asked about the pattern of uptake of the free bus pass across the county and if there was any geographical variance. This was part of the Big Conversation. Bus companies would be aware of the pattern of use of the free pass and would be able to provide statistics for its use, and would also be well aware of the needs of rural communities. Local residents' groups had embraced the concept of 'use it or lose it' and had been successful in the past in getting some rural services reinstated.

8. A comment was made that bespoke local transport services were critical in helping rural communities access the medical and other facilities which could help people to live independently for longer and avoid them needing to access care services later, at a greater cost to the County Council.

9. Mr Whiting was asked how and when budget allocations for transport service were made. He explained that budget setting was an ongoing process.

10. The Chairman commented that statutory bus services did not necessarily meet the requirements of rural communities. Mr Whiting explained that there were no statutory bus services for older people. The statutory services were tailored to the needs of school children, to meet the County Council's duty to help children to access a school place, but there was no equivalent statutory duty to provide services for older and disabled people and for those in rural areas. The Kent Karrier service had various age and medical criteria with which potential users would need to comply.

11. The County Council worked hard with local bus operators to provide services where they were most needed. For each journey made by a passenger using a free pass, a service operator might receive only £1 in income, and if a service were carrying only a few passengers on each journey, that service would very quickly become non-viable, economically. The County Council needed to test the Government's appetite to increase its funding contribution to help such services to continue running, but in the meantime it would continue to make best use of the available funding.

12. The point was made that social mobility was not the only solution to loneliness and social isolation; one could be alone in a busy supermarket or at a social venue. Bespoke transport services and use of technology could help to some extent, but many people could not afford or were not able to use technology. Also, rural communities were not the only ones struggling with access problems; some urban housing estates experienced similar problems and had no bus service on a Sunday or bank holiday. Although it was understood that bus companies would not want to run a non-profitable service, they could surely not afford to ignore whole sections of their potential clientele. They could afford to run some lightly-used services, and such services were highly valued by the people who did use them. Mr Whiting gave an example of services in Romney Marsh, which had been improved as part of the Big Conversation. He added, however, that the County Council was not a commissioner of services in the way that, for example, Transport for London was a commissioner.

13. The point was raised that the Bus Bill included the possibility for services to be provided by franchise, but the Secretary of State had made it very clear that franchises would only be available to unitary authorities and mayors. Kent, as a Shire county, would not be able to commission services in this way.

14. Reference was made to the Talking Bus service, which was currently being trialled in Maidstone by Arriva. Older people would catch the bus with the purpose of chatting during the journey. They would go to a coffee morning or other event and then catch the bus back for another chat. This was a project that the Select Committee could look at. Mr Whiting said this was a good idea and something he would support. As with the Kent Karrer service, people catching the bus at the same times through the week would meet the same group of fellow passengers and be able to get to know each other. The journey could itself become a social experience and benefit participants in more ways than allowing them to access shops and events.

15. Reference was made to past public meetings about local bus services, attended by Arriva, following which three new bus services were introduced. However, all three services were withdrawn 18 months later due to lack of use. Local people had said they did not use the services as they had been too infrequent, but the withdrawal of the services had left older people without a bus service in their village. Mr Whiting was asked, if such services were not being used, were there some areas of the county in which residents perhaps did not wish to have a bus service. Mr Whiting referred to the principal of 'use it or lose it' which applied to bus services, which the public seemed to accept and understand - until their bus service was threatened. It would be good not to have any areas of the county where there was no bus service at all, and he would seek to ensure that as many communities as possible were served. However, if a service was not being used, it would be very hard to justify continuing to spend money on it. If the County Council could build up a service to the point at which it would be commercially viable, it could then hand it back to a company to run, but something which was unsustainable financially would not be continued. Developers of new housing sites were often asked for section 106 contributions to a bus service so the new community would have a service available to them, but if this service was simply not used it would not be commercially viable and would not run for long after that subsidy ran out.

16. Mr Whiting was asked if some bus services might not have survived because they had been inadequate. He said that some had been. A frequent service using smaller vehicles would be more reliable and attract people to use it, but subsidising a service running every 10 minutes, for example, would be very expensive.

17. A comment was made that, in places where there was a reliable bus service, some residents would choose not to have a car. However, in some places, the bus service could not be relied upon as an alternative to running a car as it was too infrequent. Mr Whiting replied that service provision relied upon achieving a balance of what was affordable and what was beneficial.

For example, when a Post Bus service to a village was discontinued, a local group was formed and its members contributed to running a taxi-bus service to take residents to hospital and GP appointments and shopping in town. Users each paid £1 for a journey and the service ran successfully for six years but then stopped due to dwindling numbers.

18. Reference was made to accessibility on buses and an example given of disabled passengers being denied entry as there was only room for one wheelchair user on the bus. Mr Whiting said this practice was unacceptable. In the 3% of bus services which the County Council ran it had included a clause in the contract to state that this should not happen, but in the 97% of bus services over which the County Council had no control it was not possible to do this. All bus services, regardless of who ran them, had to be licensed by the Traffic Commissioner's office.

19. The 'little and often' model of service provision was supported, especially where this integrated with rail services, as this allowed people to make workable journeys without running a car, or maybe even owning a car. Mr Whiting agreed that this model was good and that a regular service increased usage a lot. Kings Hill was a good example of a community served by a bus service linked to the rail service at West Malling station. **It was then pointed out, however, that the two services had become un-coordinated and no longer linked effectively as the bus service had not adjusted its timetable when the rail timetable changed.** As a result, many passengers had stopped using either and drove instead.

20. An example was given of a local bus service in Ashford which had changed its pick-up point, meaning that older people wishing to catch the bus to the hospital had to walk quite a way. Mr Whiting said he would look into this.

21. It was pointed out that many people no longer needed to travel by bus to do their shopping as they shopped online and had it delivered. To use bus services to travel for leisure and social activities would not only reduce social isolation but help many people to stay younger and fitter longer and stave off ageing and depression. Technology should not be seen as an enemy; in the future everyone would be using smart phones. **The County Council could take a steering role and look forward to advances in technology and how these could benefit older people and rural communities, to address social isolation.** Mr Whiting said he agreed with this view, in part. Some people feared technology and many older people could not afford it, did not use it and did not wish to use it, so he feared that to base services on the assumption that everyone had access to and could use technology could discriminate against older people. The County Council would need to acknowledge people's fear of technology and assist them to overcome it. He agreed that many people who used bus services used them for social outings rather than shopping trips.

22. Mr Whiting was asked what more he thought could be done, or wanted to see being done, to address social isolation by using public

transport services. Mr Whiting said that a clearer understanding was needed of the issues which affect people's use of bus services, and the impact which those services could have on social isolation. The County Council could also look into the possibility of gaining any additional funding and understand better how it could use existing funds to deliver the best service possible. The Council needed to increase recognition and acceptance of the issues relating to and arising from social isolation and recognise what resources it needed to direct, to help where it could. It was important to be clear that one size did not fit all; change and flexibility where both required.

23. The Chairman referred back to the concept of £1 being spent in one service area leading to a saving of £x in another area, and said that the County Council's partners needed to contribute to addressing social isolation. However, the County Council would need to be able to evidence the correlation between investment in services to reduce social isolation and loneliness and the resultant savings made, for example, in the reduced need for NHS services. However, it may not be possible to provide such statistical evidence. Mr Whiting agreed that this may well be the case and said that if it were not possible to reach agreement locally, there would need to be legislative change, which would be costly and take a long time. However, the work of this Select Committee would surely add weight to the need for change.

24. Mr Whiting was thanked for attending the session to help the Select Committee with its information gathering.

4. Appendix
(Item 4)