

**From:** Graham Gibbens, Cabinet Member for Adult Social Care and Public Health  
Andrew Ireland, Corporate Director, Families and Social Care

**To:** Health and Wellbeing Board

**Subject:** Befriending Services

**Classification:** Unrestricted

**Summary:** This paper sets out a response to the research published by Campaign to End Loneliness in which Kent was awarded a Bronze status for its approach to reduce social isolation and loneliness.

The paper describes the prevalence of social isolation within Kent and the impact that it can have on individual physical and emotional health. It identifies the approach that Adult Social Care are taking to address social isolation across the county, namely through the development of a core offer of community based services, which includes befriending. The paper outlines the business case for investment in befriending both in terms of improved outcomes for the individuals receiving the support and in financial terms for health and social care.

**Recommendation(s):**

This paper is presented for information purposes only.

**1. Introduction**

- 1.1 This paper sets out a response to the research published on 19<sup>th</sup> June 2013 by the Campaign to End Loneliness which reviewed the early progress by health and wellbeing boards to tackle loneliness and social isolation.
- 1.2 Of the 128 strategies reviewed, 61 acknowledged loneliness and / or social isolation as a serious issue, with 8 reaching a gold standard. 53% had not recognised social isolation as an issue needing to be addressed.
- 1.3 The Kent Health and Wellbeing Board were awarded a Bronze award.

**2. Financial Implications**

- 2.1 During 2013-14 KCC Families and Social Care are already committed to investing £220k in befriending services. This existing provision is funded by locality budgets from Older People / Physical Disability teams and supports socially isolated individuals age 55 years and over. It has been accounted for in budgets for 2012-13.
- 2.2 The additional £380k investment is to ensure that services are more consistent across Kent and to expand the service to all socially isolated and vulnerable adults, not just those over 55 years. The additional investment is from health monies.

### **3. Bold Steps for Kent and Policy Framework**

- 3.1 The additional investment in befriending services will support Bold Steps for Kent by:
- Helping the Kent economy grow: additional investment in the voluntary sector supports the future sustainability of this sector.
  - Putting the citizen in control: socially isolated individuals are supported to build confidence and engage in socially meaningful relationships, giving them more control over their lives and the opportunity to participate in their community. In addition, volunteering opportunities to befriend benefit individuals and support the development of Big Society.
  - To tackle disadvantage: by supporting individuals to rejoin and participate in their communities, befriending prevents socially isolated individuals becoming disadvantaged and ostracised from daily life.
- 3.2 The investment in befriending services supports the Transformation of Adult Social Care Programme by avoiding the use of traditional services, such as domiciliary or residential care, to alleviate the emotional and physical symptoms of social isolation. It will enable individuals to remain in their own homes and communities, resulting in a shift of resources out of expensive long term care, making care home admission a last resort and supporting choice and control for the individual.

### **4. The Report**

#### 4.1 The impact and prevalence of social isolation / loneliness

- 4.1.1 A large body of psychological research has demonstrated a robust association between social isolation and worse health, including cardiovascular disease, increased morbidity, depression and cognitive decline.
- 4.1.2 One American study showed that loneliness is a predictor of hospital A&E use independent of chronic illness. It found a statistically significant correlation between loneliness score and total hospital emergency visits.
- 4.1.3 In Kent, it is estimated that across the present population aged 65 and over, between 5 and 16 per cent report loneliness, while 12 per cent feel socially isolated (SCIE briefing 30 Oct 2011)
- 4.1.4 That means of the people in Kent aged 65+ between 13,000 and 42,000 would say they were lonely and 31,000 would be feeling socially isolated (using Kent Census Data 2011).
- 4.1.5 We also know that 88,200 people in Kent over the age of 65 live on their own, which can be a proxy indicator for loneliness (Kent Facts and Figures 2010)
- 4.1.6 Early results from the 2011 Adult Social Care User Experience survey (893 people in Kent).
- 25% of respondents say they do not have enough social contact.

- 66% of these lived in the community
- 75% of those 65+ who are living in the community say they do not do anything they value or enjoy with their time.

4.1.7 Communication difficulties can lead to feelings of loneliness. For people with learning disability or autism a lack of social skills and inability to engage in social small talk can affect ability to connect with a community.

4.1.8 For people with sensory impairments feeling cut off from society is a reality shared with commissioners. RNID research found that people with hearing impairment are likely to withdraw from social activities which involve large groups of people and in situations where they do take part.

4.1.9 Additional RNID research has found that feelings of loneliness and in turn, frustration, can affect partners of people who are deaf (RNID, In It Together 2010 cited in Action on Hearing Loss 2011b). (Draft Kent Sensory Needs Assessment 2012)

## 4.2 Kent's approach to reducing social isolation / loneliness

4.2.1 Many other voluntary sector organisations funded by Adult Social Care, such as Age UK and Carers Support Organisations, combat social isolation by providing services such as day opportunities, befriending and peer support.

4.2.2 For example, KCC has invested £180k per year to ensure that there are Dementia Cafes and Peer Support Groups in every district, offering social opportunities for people living with dementia and their carers to meet other living with the disease and gain access to high quality advice and information.

4.2.3 A key strategic objective for Adult Social Care is to build community capacity. This will enable KCC to invest in a range of community services that tackle social isolation holistically, rather than relying on specific types of service working in isolation. We will build community capacity by investing in:

- Befriending
- Day opportunities
- Care navigators
- Improved access to community spaces and services

4.2.4 Development of 12 Dementia Friendly Communities and Intergenerational Projects across the county will reduce social isolation as communities become more 'friendly' and accessible to all vulnerable adults, not only those living with dementia.

## 4.3. The case for befriending

4.3.1 Befriending can result in wider societal benefits in building social capital and promoting self care. For the individual it can enable them to better self care as social relationships can lead to improvements in their emotional and

physical well being and in doing so promote and maintain good health and overall quality of life, self resilience and control.

- 4.3.2 Community Based Prevention Initiatives has been piloted and evaluated within the last 10 years through a range of programmes.
- 4.3.3 Kent Brighter Future Group (BFG) project evaluation report August 2009, of 60 users of BFG befriending services. The great majority (70%) felt the service had improved their lives and half felt it had made them feel much better. Around half also thought their health had improved as a result. About half felt it had made them more independent, for instance through learning how to deal with a fall.
- 4.3.4 The Partnerships for Older People (POPP) evaluation has shown that small services providing practical help and emotional support to older people can significantly affect their health and well-being, alongside more sizeable services expressly directed to avoiding their need for hospital. Most of the older people using POPP services had relatively high levels of need, but they nonetheless experienced improved outcomes and reported greater satisfaction than the comparison group, as a result of using these services (PSSRU1). Services might include befriending, care navigation, information and advice.

#### 4.4 Social return on investment

- 4.4.1 The estimates of need and the findings on prevention of the Social Exclusion Unit show that :
- reducing age-specific dependency rates by 1 per cent per year would reduce public expenditure by £940m per year by 2031
  - reducing the rate of institutionalisation by 1 per cent a year could save £3.8bn
- 4.4.2 POPP projects appeared to have the following outcomes:
- a significant effect on emergency bed days: an additional investment of £1 in POPP services would produce greater than £1 savings on emergency bed days.
  - Overnight hospital stays reduced by 47%
  - Use of A&E Departments reduced by 29%.
  - There were also fewer physiotherapy/occupational therapy and clinic or outpatient appointments, with a cost reduction of £2166 per person.
  - A 12% increase in health-related quality of life was found for those individuals receiving practical help.
- 4.4.3 Evaluation of Kent Invoke project showed that changes in service use by those in the POPP programme resulted in a cost reduction of £180 per person.
- 4.4.4. The Volunteering England website states that research evaluation in 12 small UK social welfare voluntary organisations showed returns of between £2 and £8 for each pound invested.

## 5. Conclusions

This paper summarises the investment that adult social care is making in befriending services in order to reduce the level of loneliness and social isolation amongst adults in Kent.

Social isolation can have a significant impact on the physical and emotional health of individuals, resulting in a poor quality of life for individuals, but also costly care packages for health and social care.

Befriending services can reduce social isolation resulting not only in improvements in the quality of life for individuals, but also financial savings to health and social care.

## 6. Recommendation(s)

Recommendation(s): This report is for information only
--

## 8. Contact details

Report Author

- Name and title: Samantha Sheppard, Commissioning Manager
- Telephone number : 07795540071
- Email address : Samantha.sheppard@kent.gov.uk

Relevant Director:

- Name and title : Andrew Ireland, Corporate Director - FSC
- Telephone number
- Email address: Andrew.Ireland@kent.gov.uk