



# **Winter Wellbeing 2016/17**

## **Evaluation report**

April 2017

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## **1.0 Executive summary**

South London Cares' 2016/17 Winter Wellbeing project, the third that we have delivered consecutively, has been the most successful to date. At the most isolating time of the year – with shorter days and with the threat of snow and ice, already isolated older people can find themselves even less likely to leave the house or have visitors. This means they're less likely to access resources that can make life easier, and less likely to enjoy the relationships that make life worth living. Our Winter Wellbeing project identifies people aged over 65 at risk of isolation and through a combination of **conversations, provisions, referrals and friendships** helps older neighbours in Southwark and Lambeth to stay **warm, active, healthy and connected**.

Over the course of this year's project, the Winter Wellbeing team spoke face-to-face with **1,280 older neighbours**, the highest number of older people we have reached over the course of a Winter Wellbeing project. Of these, **354 people** received further help – or “interventions” – as a result of those initial interactions; the fact that almost one in three people (28%) we spoke to readily took up help suggests a significant need for this type of community outreach.



Through this work we have identified some of the most isolated older neighbours in our home boroughs including people who might otherwise fall through gaps in the provision of mainstream or statutory services, as well as to provide **reassurance** and **build community** at an otherwise difficult time.

There are hundreds of stories that attest to the project's urgent demand. There's Sandra, who we met in a pharmacy. She had been hospitalised and on life support following pneumonia and a collapsed lung last year. Due to ongoing financial hardship, she did not own a winter coat, her phone was regularly being cut off (adding to her sense of disconnection), and she could not afford to keep the heating on. We gave her some warm clothes, awarded her a grant to help her keep her home warm, and successfully applied for ongoing financial support from our

partners The Mercer's Company, so she will no longer have to choose between heating and eating.

And there's Patricia, who told us she regularly goes "days without a conversation" and that she was resigned to the TV being her company. Upon attending her first social club she told us "I've had so much fun today, and I'm giddy... because I know my life has just changed". We have also matched Patricia with a young professional volunteer who now visits her once a week for a little extra company and friendship.

This year the Winter Wellbeing project expanded in terms of the number of people reached, while also better targeting people at risk of isolation. With one in every ten visits to the GP made by people with no other condition than loneliness<sup>11</sup>, our decision to focus our outreach in primary care settings allowed us to reach more people without either family or community networks – and to reach more people who needed "deeper interventions" than in previous years: we helped more people with housing, heating, transport and finance than ever before.

While Winter Wellbeing has once again improved in quality and focus this year, we know that more can be done in future. While we were able to work in conjunction with primary care, local businesses and community groups to deliver a project that made a big difference to hundreds of older people, we have seen how valuable a closer partnership with local authorities can be. This year, for a sixth year, our sister charity North London Cares' project was commissioned by the Camden and Islington Public Health team, which gave access to lists of addresses of older neighbours who were contacted both by letter and face-to-face. This targeted approach created efficiencies and, crucially, enabled more engagement with more people who were unable to leave their homes.

That said, South London Cares' Winter Wellbeing project has improved year on year over the past three years. As we look to next year's work, we want to innovate further, with a greater emphasis on a preventative approach, vital in the context of increasing winter pressures on the NHS, further imminent reductions in local authority budgets, more unpredictable weather patterns, and the **ageing population** in Southwark and Lambeth.

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<sup>11</sup> [Loneliness is the reason one in 10 visit their GPs claim charity](#), *The Independent*



## 2.0 Introduction

For each of the past three years, South London Cares has delivered ambitious annual Winter Wellbeing projects to help older people in Southwark and Lambeth to stay **warm, active, healthy** and **connected** during the winter months. Last year, our work reached thousands of older people and offered practical help and social and emotional connection to many neighbours at risk of isolation. This year, we aimed to build on previous years' successes and establish closer ties with primary care providers and local businesses to identify people without the support networks that can prevent challenging situations from escalating to crises.

Councils, healthcare providers, and other agencies are, of course, already on high alert during the cold weather, and South London Cares' Winter Wellbeing project aims to complement and deepen their work by offering a **community outreach dimension** in a way that larger organisations are often not able to.

From a strategic public health perspective there are two ambitions. The first is to make contact with older people who may be **isolated**, to ensure that people who might otherwise be unforthcoming in accessing mainstream public services do not fall through the gaps in statutory provision.



The second ambition is to take a **preventative approach**, identifying concerns early on so that they do not become emergency cases. The focus of Winter Wellbeing 2016/17 was therefore about talking to older people within their own communities – in supermarkets, GP surgeries at the bus stop and in many other locations – in every case providing accessible, relatable interactions and interventions to neighbours at risk of isolation through a combination of **conversations, provisions, referrals to statutory services and connection to new friendships and social activities, including those hosted year-round by South London Cares.**



The Winter Wellbeing project **identifies**, and supports, some of our more **socially isolated** older neighbours in Southwark and Lambeth. The interactions we create through this pro-active outreach often have immediate as well as ongoing benefits, as neighbours join in with South London Cares' year round Social Clubs and Love Your Neighbour (one-to-one) programmes, or other local activities. This has the added benefit of strengthening neighbours' social networks, helping

people feeling less lonely and more active – and ultimately of helping people to become better connected to the rapidly changing world around them.

This report outlines the aims, methods, and impact of this ambitious work. It assesses what worked and what did not alongside some specific case studies, and includes recommendations to ensure the project remains efficient and relevant and continues to improve in future years.

### **3.0 Context**

Across Britain, the services and communities that provide dignity, opportunity and wellbeing in later life are under severe pressure"<sup>11</sup>. Between 2011 and 2016, local authority spending on care for older and disabled people fell by 11% in real terms, meaning "growing numbers of people are outside the system, struggling with basic needs"<sup>12</sup>. Between 2009 and 2014, there was a 26% decrease in the number of older people receiving care funded by local authorities, falling from 1.1million to 853,615.<sup>13</sup>

But as public sector budget reductions put pressure on health and social services, our older population continues to increase at pace. In Southwark and Lambeth, the challenges are pronounced. In 2015, it was predicted that the over 65 demographic in Southwark would grow

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<sup>11</sup> <https://www.kingsfund.org.uk/publications/social-care-older-people>

<sup>12</sup> **Elderly Britons bearing brunt of cuts to social care, report says, *The Guardian* , 15 September 2016**

<sup>13</sup> **ibid**

by 32% over the next ten years – the fastest-growing age group in the borough<sup>14</sup>. In Lambeth, it is projected there will be a 43% growth in the 60+ age group by 2031, compared to a 16% projected growth for all ages<sup>15</sup>. The increase in over-85s, in particular, “will significantly increase age-related long term conditions and demand for care services”<sup>16</sup>.

Further deepening these challenges, older people in Southwark and Lambeth are also **at risk of isolation** from the communities around them, which are often perceived to be changing too fast and too far beyond their control. It is estimated that 75,000 over-75s in London feel lonely often or most of the time.<sup>17</sup> The trends of globalisation, digitization, migration and gentrification connected to the housing boom have re-shaped so much of London in recent years. In Southwark and Lambeth these changes have been pronounced. The Peckham made famous in the television show *Only Fools and Horses* is now a hub for the creative industries and synonymous with young professionals; meanwhile *The Independent* judges that in “no part of London is the before-and-after effect of gentrification so marked as in Brixton”<sup>18</sup>.

Communities are fluid: only 50% of Lambeth residents have lived in the borough for more than five years, and approximately 12% of the population leave each year and are replaced by new arrivals<sup>19</sup>. The result is that, where once people could expect to be surrounded by neighbours they knew well, anonymity is now the new normal.

The social mix gives both boroughs an enormous amount of dynamism. But it also means that social problems and **public health inequalities** are at times magnified in ways they might not be elsewhere. Meanwhile, changes in climate have led to older people feeling anxious about unpredictable weather<sup>20</sup>. Very **cold winters** – like that of 2012/13, which brought heavy snowfall and at least five bitterly cold snaps – bring with them fears of isolation. In addition, the rising **cost of living** has led 4.5 million people into **fuel poverty**, and one in 20 older people unable to heat their homes<sup>21</sup>. And despite a mild winter in 2014/15, the Office for National Statistics recorded that there were **43,900 ‘excess’ winter deaths** (defined as the difference

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<sup>14</sup> Southwark Demographic fact sheet

<sup>15</sup> Page 12, [Lambeth: State of the Borough 2012](#)

<sup>16</sup> Page 17, [Lambeth Local Development Framework](#)

<sup>17</sup> Jonathan Clifton (2011) Social isolation among older Londoners (London: IPPR), p.9.

<sup>18</sup> [The gentrification of Brixton: How did the area's character change so utterly?](#), *The Independent*

<sup>19</sup> [Lambeth State of the Borough 2016](#)

<sup>20</sup> [North London Cares: Community Resilience Report 2013](#)

<sup>21</sup> [Annual Fuel Poverty Statistics Report, 2015](#)

between the number of deaths that occur each winter (from December to March)<sup>22</sup>. That is a 140% increase on the previous year, and the **highest excess winter mortality for 15 years**.

Such **social, financial, environmental** and ultimately **emotional** conditions have the potential to create a crisis for older people: they can increase morbidity and mortality amongst an already at risk group, deepen pre-existing medical conditions, and have a serious negative effect on **mental and physical health**. They also make socialising or visiting relatives more difficult, impacting on **wellbeing** and adding to vulnerabilities. And they increase pressure on health and social services already undergoing huge challenge and change.

South London Cares' Winter Wellbeing project has therefore been designed and delivered to ensure that a **community infrastructure** is in place to support a growing number of potentially vulnerable older neighbours to stay warm and well within their own homes – and to make services more accessible and relatable to people's needs.

It delivers major community-facing outreach during the harshest time of the year: through various channels and mechanisms we identify older neighbours affected by the community and public sector changes described above, and by connecting them to local services and informal activities, help people to tackle problems before they become emergencies.



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<sup>22</sup>[\*Excess Winter Mortality in England and Wales, 2014/15 \(Provisional\) and 2013/14 \(Final\)\*](#)

## **4.0 Objectives**

The core aims of South London Cares' Winter Wellbeing project are to identify people over the age of 65 at risk of isolation or struggling with the cold, and to offer **practical** and **emotional support holistically**.

This means:

- Enabling older neighbours to stay **safe and warm** within their own homes through **preventative** activities targeting exposure to **excess cold and fuel poverty**;
- Improving **access** for older neighbours to health and housing services and grants and benefits that they may be eligible for, through **information and direct referral** into these local authority-provided services;
- Ensuring older neighbours who are **socially isolated or at risk of isolation are identified and linked into community networks and activities** such as South London Cares' **Social Cubs** and **Love Your Neighbour** programmes.



In order to fulfil these aims, this year we offered a range of different interventions, including:

- The delivery of **blankets, gloves and socks** for neighbours struggling with the cold;
- **Small grants of up to £100** for people struggling with fuel poverty and rapidly changing circumstances related to winter which might deepen isolation and/or anxiety;
- Distributing resources and leaflets outlining **local authority health, housing and social services** to:

- Promote discussions about maintaining good winter health, including through:
  - Flu vaccinations;
  - Heating checks and home insulation;
  - Ensuring sufficient food is in place;
  - Preventing falls;
- Offering follow up **visits, phone calls and connection** to South London Cares' Social Clubs and Love Your Neighbour programmes to neighbours at risk of isolation;
- Referrals to Southwark and Lambeth Councils' Safe and Independent Living (SAIL) scheme to **address wider issues** potentially impacting on individuals' health and wellbeing, and the now inner London-wide Seasonal Health Interventions Network (SHINE) scheme;
- Other referrals to Council or other agencies (including Adult Social Services, Citizens Advice, Action on Energy) to address issues such as complex **mental health needs, financial difficulty, physical health and occupational therapy** needs, **housing issues** (including insulation and heating), and **social care** provisions.

## **5.0 Approach**

Unlike our sister charity North London Cares, which this year ran its sixth consecutive Winter Wellbeing project in close partnership with Camden and Islington's Public Health department, South London Cares was unable to obtain access to lists of addresses of neighbours over the age of 65 from our partner local authorities (due to differences in data protection approaches). We therefore thought creatively about how we could identify older people who were struggling and/or isolated in the colder months, building on innovations we had tested in our two previous years delivering this project.

In 2014/15 we combined talks at social events attended by older people with identifying neighbours in sheltered housing units. Upon evaluation, however, we concluded that people attending social events or living in sheltered housing units often already had access to support





networks who could provide assistance in difficult circumstances. For this, reason, in 2015/16, we focused on reaching older people at risk of isolation where they are – on high streets, in betting shops, launderettes and greasy spoons – as well as in sheltered housing units we had not previously visited.

The contact with local businesses was successful during the 2015/16 project: it helped us to reach people who were not already connected to local services, and who struggled to access information about which services were available for people needing help in the winter months and beyond. We therefore decided to reach out in more local businesses in this year's project – while also taking into account that older people may be less likely to frequent their high streets as frequently in the colder months.

We therefore considered the places older people might be more likely to attend in winter, even when especially isolated and anxious about leaving their homes. Given that by the age of 65, “most people will have at least one long-term condition and by the age of 75 most will have at least two”<sup>23</sup> we decided to prioritise GP surgeries and pharmacies where older are likely to frequent. We also decided that, having visited 42 mostly council-support sheltered housing units last year, we would concentrate our efforts on reaching people in private sheltered housing units this year – enabling us to target people who may be better off financially, but still deeply isolated.



<sup>23</sup> *Making our health and care systems fit for an ageing population*, The King's Fund, David Oliver, Catherine Foot, Richard Humphries <https://www.kingsfund.org.uk/publications/making-our-health-and-care-systems-fit-ageing-population>

In order to make the project as efficient as possible, we chose 12 areas in our two boroughs in which we already had a presence through year-round South London Cares social clubs, and each week focussed on one of the areas. Before the project commenced we combined our existing knowledge with research to identify the following in each area:

- GP surgeries;
- Pharmacies;
- Businesses which older people were more likely to frequent (particularly supermarkets);
- Community groups we had had no previous contact with;
- Private sheltered housing units.

Through a mixture of written, phone and face-to-face contact (and in many cases all three types of communication) with the above groups, we set up partnerships and outreach events through the winter months. This approach enabled us to reach out to older neighbours who were often not currently engaging with local actives or services other than the NHS, and who were therefore most at risk of social isolation and problems that could escalate if left unidentified.





## **6.0 Delivery**

We began our outreach work in November 2016, working week-by-week through the following 12 areas in Southwark and Lambeth:

- West Norwood;
- Camberwell;
- Elephant and Castle;
- Streatham;
- Stockwell;
- Walworth;
- Clapham;
- Peckham;
- Herne Hill;
- Brixton;
- Bermondsey;
- Kennington.



Our outreach work in Streatham offers a typical example of our approach and is highlighted in the next section. It is worth noting that although we tried to fit all of the outreach for one area into one week, it was not unusual for partners to get back to us once our area of focus had moved on, or to be unable to accommodate us in the week we were hoping to be in the area. In these cases we were of course flexible, attending at a later date.

## **6.1 The project in practice: Streatham**

In Streatham we had 260 face-to-face conversations with people aged over 65, and made 58 'deeper interventions' (for example help with housing, heating and referrals to other local services or activities). These interactions took place in a deliberately wide variety of settings, including:

- An outreach stall at Streatham Common Sainsbury's;
- Three mornings speaking to patients at Dr Masterton and Partners GP Surgery;
- Speaking at The Friendly Club (a weekly group for older members of the community, which was recommended to us by a GP at Dr Masterton's Surgery);
- A talk at Streatham Ice and Leisure over 55s group;
- Door-knocking at Wavel Court sheltered housing unit;
- A presentation at the Amicus Horizon south London steering group;
- Running a Christmas quiz at the Valley Road Surgery with their Patient Participation Group (PPG);
- Speaking at a Warm and Well event run by a consortium of Streatham GP practices;
- Chatting to older passersby at the Streatham Hill Post Office bus-stop.

We also put posters up and/or left leaflets in four pharmacies, three supermarkets and four cornershops.

"I've got nothing to do. This is brilliant. I'm so pleased you came and spoke to me! Do continue to go up to people: they may not want to speak to you at first, they'll be so pleased you did, to find out about what's going on."

***Barbara, 78, who we met in Streatham Common Sainsbury's. She's since been along to our Spring Swing Dance and a trip to the Ritzy in Brixton.***

## 6.2 GP surgeries

This year our innovative partnerships with GP surgeries were an important part of the Winter Wellbeing project. We started connecting with those health centre by emailing or writing to every GP surgery in the borough, outlining our Winter Wellbeing project and offering to come into the surgery to promote public health winter messages, as well as talking to older patients about different ways that we and other services could help.

“We know that loneliness is linked to an increase in use of NHS services and is a serious public health issue. This is why it is important that health services and charities offering support to older people work together to identify and reach the most vulnerable. This early offer of support is essential to help reduce strain on local services this winter.”  
**Marcus Rand, Campaign to end Loneliness.<sup>1</sup>**

We then followed up with phone calls to the surgeries we particularly wanted to target (according to approximate information on the number of older people in the ward, levels of poverty, as well as proximity to our monthly activities).

In some cases, where we did not hear back from GPs or receptionists, we visited the surgery in person to both drop off leaflets and to talk to the Practice Manager about whether it was something they would be interested in partnering on. As a result, we ran **12 outreach mornings at GP surgeries** – approximately one for every week of the project. This allowed us to reach older people whose sole outings were to the GP surgery, and who were particularly vulnerable.

For example, we met Raymond, who was living with a heart condition, as well as chest, breathing and leg problems. He lived in a big house which he couldn't afford to heat, so was going to bed at 3pm in an attempt to keep warm. We were able to



provide him with a small grant to help with heating, and also put him in touch with The Royal British Legion for further help.

We also trialed different ways of working with Patient Participation Groups (PPGs) to reach out to older patients who were at risk of isolation. This resulted in us helping the Valley Road Surgery PPG to organise a Christmas party for 32 older patients at risk of isolation.

At the event we ran a quiz as a ‘taster social club’ to get people interested in South London Cares’ regular group activities across Southwark and Lambeth and also spoke about the different ways we could help. This resulted in 10 deeper interventions, and we are already planning another event with the PPG for 2017.

### **6.3 Pharmacies**

We connected with 37 pharmacies who supported our outreach across the two boroughs during this year’s project. Identifying older people at pharmacies worked best, as with the GP surgeries, when a member of the South London Cares team was embedded within the pharmacy, connecting with customers through conversation.

This was particularly effective when the same member of the team went back repeatedly, building a rapport with both the pharmacy team, who then began making referrals of customers when South London Cares were not present, as well as building a rapport with some customers – who became familiar with the Winter Wellbeing project and began spreading the word amongst their own networks.



## Case study: Hills Pharmacy, Kennington Lane

Over the course of this year's Winter Wellbeing project, South London Cares held four outreach sessions at Hills Pharmacy, each time setting up a table with information on how we could help older neighbours. We struck up conversations with 44 customers over the age of 65 – five of whom received a 'deeper intervention'.

The value of returning was made clear when we met Sandra, 68, for the second time at Hills Pharmacy in January 2017. The first time we had met her, in November, Sandra had been interested in social clubs but not any other help. The second time we bumped into her in the pharmacy, her trust in South London Cares was established, and she opened up about her struggle to keep warm: **"I am freezing in my home and only have 30p to last me over the weekend for the heating until my pension comes through on Monday."** Very quickly – the same day – South London Cares arranged a small grant so that Sandra could keep the heating on.

Going through Sandra's finances with her, it became clear that this financial hardship was not a one-off. Her phone was regularly disconnected, she was without a winter coat, and her "warm cardigan" had holes in, all which were affecting her health: she had been hospitalised and on life support following pneumonia and a collapsed lung in 2016. Together we applied for ongoing financial support from South London Cares' partners The Mercers' Company. Upon hearing that her application was successful, Sandra told us: **"I've had such bad things going on. This is the first thing I've been happy about in so long. I'm in tears, happy tears."**

## 6.4 Local businesses

Although we chose to focus primarily on GP surgeries and pharmacies (to reach people who were not getting out and about over winter) we also wanted local businesses at the heart of the community – greasy spoons, pubs, barber shops – to play a big part in the project. We therefore spoke to managers and put up posters or left leaflets at **176 local businesses** across our target boroughs.

It is worth noting that the The Tiger, a pub in Camberwell that we first made contact with during outreach for our Winter Wellbeing project in 2015/16, has since become a delivery partner: South London Cares now holds monthly ‘Beer and Boardgame’ social clubs there. This demonstrates how outreach can prove fruitful in a variety of ways, as well as the generosity of businesses in the community.



This year, our partners at Team London Bridge even encouraged professionals in their network to donate new warm items of clothing – which were then delivered to older neighbours who had told us that they were feeling the chill at home – as part of our Winter Wellbeing project.

We also did outreach in eight different supermarkets across the two boroughs during this year’s project. We found that supermarkets were a particularly effective setting for reaching high numbers of older people, particularly those who might not already be linked up with public services.

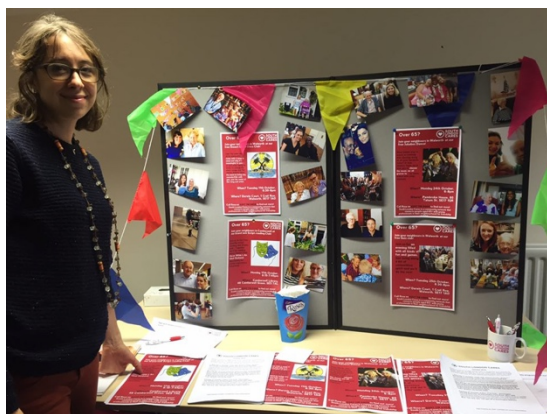
### **Case study: supermarket outreach**

We met Phillip in a supermarket in February 2017. He was initially reluctant to talk to us, citing that organisations had let him down before, and suggesting we would not be able to help. He eventually told us he was sleeping in the living room due to rotten bedroom window frames that had led to freezing temperatures. This had resulted in pneumonia – and huge fuel bills, as he desperately and futilely tried to heat his home. We awarded him a grant to help him pay for his heating, and also got in contact with the council, his landlord, to make them aware of the situation. His windows have since been fixed, and he’s booked into attend his first social club in April. He told us:

**“Instead of ice outside I had ice indoors. You’ve been a great help... I don’t spend so much on the gas anymore. I don’t have to put a coat or a hat on to keep warm anymore.”**



## **6.5 Local partners**



We have learnt from previous Winter Wellbeing projects delivered by both South London Cares and our sister charity North London Cares, with whom we work closely, that older people who feel left behind can also feel suspicious of new things and may therefore be less likely to take up initiatives they haven't come across before. Obtaining the endorsement of trusted community partners was therefore essential.

Across Southwark and Lambeth, we therefore wrote to 200 local organisations (statutory and third sector) whom we'd partnered with over the previous 26 months since South London Cares first opened, asking them to publicise our project and to refer to us any older neighbours who might need help to stay active, warm, healthy and connected. This led to us giving talks and holding stalls at events run by Help for Carers, Healthwatch, Southwark Charities, Golden Oldies and Southwark Pensioners' Forum, to name a few.

We were also active members of the 'Keep Warm, Keep Well' group in Southwark – bringing together representatives from organisations such as Citizen's Advice, Southwark Council, Age UK Lewisham and Southwark, Red Cross and Time and Talents to share resources, discuss plans, and report on progress in supporting older people during the winter months. Initiatives such as Age UK Lewisham and Southwark including our leaflets in their winter packs, and South London Cares' promotion of Time and Talents' Cycle Without Age project ensured that the brilliant and diverse help offered in Southwark felt more coherent and could therefore be taken up by more people.

We also wrote to the 800 older people on South London Cares' Social Clubs mailing list in November 2016, to introduce the Winter Wellbeing project, to offer help, and to mobilise advocates that helped us spread the word about the project.

## **6.6 Sheltered housing units**

Over the course of the project we visited 18 sheltered housing units. This was deliberately fewer than last year, as we wanted to focus on private sheltered housing units that we had not previously visited, in order to reach people who were not already aware of South London Cares or our Winter Wellbeing project; in our experience, private sheltered housing residents were less likely to have been identified through the councils' own cold weather services.

"I was looking at my diary for February and it was empty: now it's full!"

**Fadha, 70, upon finding out about South London Cares, signed up to 12 social clubs.**

The majority of our interactions in Sheltered housing Units this year were door-to-door, one-to-one. In every case, we created a flyer, which the scheme manager circulated to all the neighbours in the unit a week before we visited. This meant people were more receptive to us: they knew we were coming and had already had an introduction to South London Cares activities and vision – and the objectives of the Winter Wellbeing project – making them more likely to answer the door and be open to a chat.



On a few occasions, sheltered housing unit managers did not want us to go door-to-door, so invited us to speak at their tenants' meeting. We found that this was consistently a less effective way of engaging with residents: the meetings tended to be relatively poorly attended, and people were less likely to reveal problems that needed addressing in a group setting. As our experience was similar last year, we were able to warn sheltered housing unit managers that this was likely to be the case, and the majority agreed to let us door-knock – and in a few cases, having spoken at poorly attended meetings, and having gained the trust of the managers, they allowed us back to door-knock at a later date.



## **6.7 Volunteers**

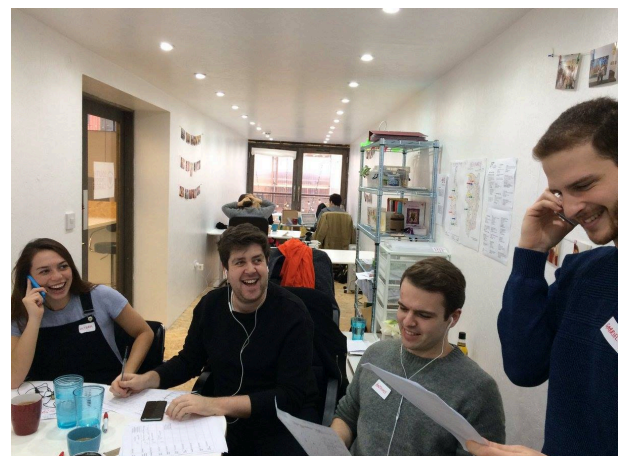


This year we organised Winter Wellbeing Volunteer Days, mobilising corporate volunteers from **EY** as well as specialists in fuel poverty from the **Department of Business, Energy and Industrial Strategy**.

Both groups of volunteers added a valuable dimension to the project, helping us to engage with more older people and creating connections between young professionals and their neighbours who often live side-by-side but inhabit different worlds. Volunteers engaged local businesses in Peckham, Walworth, Clapham and Herne Hill with our Winter Wellbeing Project. Volunteers who were involved with

the Winter Wellbeing project the previous year, and therefore more confident in speaking to older neighbours, also helped us to engage with older neighbours on the street: flyering people proved an effective way to reach big numbers of people in a small amount of time and again meant we reached people without support networks and not linked up with local services.

For the first time, we also held a **Winter Wellbeing phone bank**: volunteers re-engaged with hundreds of older neighbours who we had previously met through outreach, but who we had not heard from in a few months. These calls helped us to identify people who were struggling to keep warm, active, healthy and connected over winter. People receiving the calls commented that they were **cheered to be thought of** during what could be a very isolating time of year, and the contact encouraged many people to get back involved with social clubs.



## Case study: Patricia

We met Patricia, 84, at a Healthwatch event in October 2016 and she expressed an interest in getting involved with our Social Clubs, telling us **"Sometimes I go days without a conversation"**. As we had not heard from her, a volunteer participating in our phone bank gave her a call to tell her about our Winter Wellbeing project and invite her along to a special business visit. After attending, she told us:

**"I've not been out of the house properly in a long time and I often feel anxious when I do – I'm used to the TV for company. I've had so much fun today, and I'm giddy, not just because of the mulled wine, but because I know my life has just changed!"**

In recent months Patricia has been finding it harder to get out of the house and to social clubs, so to help keep her connected, we've matched her up with a volunteer, Helene, 34, who visits her once a week.



## 6.8 “Generic” door-knocking



We were aware that one of the weaknesses identified in previous Winter Wellbeing projects was that a large proportion of time was spent engaging people in sheltered housing units, who were in most

“There are no words in the English language that can describe how thankful I am...My life is so sparse. It [social clubs] has given me something to look forward to.” **Stella, 80**

cases well looked after on a practical level. We therefore wanted to reach more older people outside of sheltered schemes this year, but we were also aware that our approach of focusing outreach in

GP surgeries, pharmacies and supermarkets excluded people who were not able to get out of their homes – often the least active, healthy and connected people – so we also wanted to continue trialling ways of targeting people in their homes.

We had to be careful as unsolicited door-knocking is something older people are often anxious about, so we looked for community partners who could, quite literally, open doors for us. A good example of this was our partnerships with the Community Flat on the Springfield Estate in Stockwell. They provided us with a list of doors to knock on, and ID that would be recognised and trusted by people on the estate.



This enabled us to listen to people’s problems on the doorstep, discuss how we could help, and also promote initiatives on the estate being run by the Community Flat. The outreach at Springfield Estate resulted in 37 interventions – including, in one case, a woman in her eighties who was living in conditions that raised safeguarding concerns. As well as improving the conditions of many older neighbours on the estate, this shows the value of exploring new partnerships in delivering the Winter Wellbeing vision.



## 7.0 Project summary

This section outlines some of what this year's Winter Wellbeing project achieved in terms of numbers of outputs and project strengths and weaknesses. It also contains further case studies on some of the older neighbours who benefitted from the project, and how the work helped them to feel warmest, more active, healthier and better connected this winter.

### 7.1 Project in numbers

Through South London Cares' Winter Wellbeing project in 2016/17:

- **1,280 face-to-face conversations** were held;
- **354 older neighbours** received **further specific help**;
- A total of **406** deeper interventions were made;
- **2,500+ leaflets** containing cold weather advice were given to older people in Southwark and Lambeth;
- **21 libraries** also distributed those leaflets to their memberships;
- **20 small grants of up to £100** were given to those in most urgent need – £1,600 in total;
- **88 blankets and items of warm clothing** were delivered to people who felt cold in their homes;
- The project mobilised **30 young professional volunteers**;
- **176 businesses** displayed South London Cares' Winter Wellbeing posters – further spreading the message of the importance of seasonal health;
- We gave Winter Wellbeing presentations at **25 community events**;
- We had conversations with older people in **18 sheltered housing units**.



## 7.2 Further case studies

Numbers are important, but they do not tell the whole story. Part of what makes the Winter Wellbeing project important is its highly personal approach: we treated every person we met as an individual, spending time listening to their problems (with no time limits to conversations, and follow-up calls), and helping people to access what they needed – regularly helping to make sense of confusing forms or online processes that are so fundamental to navigating the modern world.

Here are a few of those stories.



We met **Amina, 85**, in November 2016, while door-knocking at a sheltered housing unit. Amina is originally from Zimbabwe and now lives alone, with her remaining family living in South Africa. Amina told us she was feeling the cold, so we delivered a blanket to help with the chill. She also told us she'd been feeling isolated, so we matched Amina up with Victoria, 27, a volunteer who now visits Amina each week as part of South London Cares' core Love Your Neighbour programme. The first time she visited Amina,

Victoria took flowers and soup to cheer her up. Amina told us, **"I'm so touched. Now all afternoon I'll be happy. No one's ever brought me flowers here. It's so nice to know there are people who care."**

**Shelagh, 82**, has inoperable cancer and is unable to leave her house, so had been using her phone to pay her council tax. The phone number she used to call is now an automated service so when she had a query about her payment, she found she did not know how to get help. Remembering that we had been in touch the year before as part of our Winter Wellbeing project, Shelagh gave us a call. After discussing different options in person and understanding Shelagh's preferred choice, we visited her and took her through the process of paying her council tax online, bringing her confidence and peace of mind in the process.

**Margaret, 83**, is disabled, with no family in the UK. She got in contact with South London Cares via email having heard about our Winter Wellbeing project, and described how she felt "very alone." We have since matched her up with a volunteer for weekly visits. She described how the companionship has already improved her life: **"It's boosted my morale. I've stopped crying. I'm much stronger."**



We met **Tony, 71**, in a pharmacy in January 2017. He told us "Since I retired six years ago my health has deteriorated and I just sit alone all day in front of the TV." He's since become an active member of South London Cares' social clubs. In March he joined his older and younger neighbours at a pub club, film screening, and business visit.

We met **Anne, 70**, while door-knocking at a sheltered housing unit. Anne had been recently in and out of hospital, and was also finding it hard to be in her flat due to mounting clutter, which she didn't feel able to face on her own. Without family around – her son living in Australia – she was unsure who to turn to for help, and was anxious about being scammed. Using the Age UK Business Directory, we found Anne a reliable service that is currently helping her to declutter her home. Having built trust with Anne, she is now getting out and about to attend our social clubs. She recently learnt how to use her new mobile phone at one of our technology workshops in Herne Hill.



## **8.0 Project strengths**

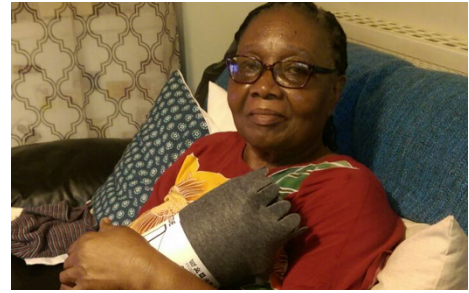
Winter Wellbeing is both ambitious in its scope and personal in its approach. This combination of breadth and depth makes it a challenging project to deliver, but the benefits for older people living in Lambeth and Southwark are clear. Specifically, we felt the project this year was a success because:

- We focused on reaching more potentially at risk older people without family or community support networks – people who are often more difficult to identify – yet we still managed to reach more older neighbours than in any previous South London Cares Winter Wellbeing project.
- We connected **354 people** to our own activities and other local community and statutory services.
- Through the course of the Winter Wellbeing project more older neighbours have attended South London Cares' social clubs – between the beginning of the project and the end, **social club attendance had increased by 36%.**
- This year we focused on **12 neighbourhoods** which we were able to research thoroughly, allowing for focussed and comprehensive outreach. Flyers were targeted for each area or specific sheltered housing units, and contained information on the most local social clubs available to people, meaning information didn't overwhelm, was local, and was easy to digest.





- We continued to **innovate** – for example running a ‘taster social’ club within a GP surgery, and a phone bank which led us to re-engage hundreds of older neighbours who we had not heard from for some time, many of whom now required further help and companionship.
- Our new links with primary care providers and local businesses, as well as local media coverage in the Peckham Peculiar and Dulwich Diverter, heightened the project’s profile.
- This year the Winter Wellbeing project benefitted greatly from links with the Seasonal Health Intervention Network (SHINE). They quickly assessed our referrals for around 30 possible interventions, including energy efficiency, fuel debt and housing quality and even gave support to our trust fund applications for individual neighbours.
- The **personal approach** and **lack of bureaucracy** (avoiding confusing forms for older neighbours to fill out, for instance) meant people could relate to the project on a human level.
- We built a number of **successful partnerships** with other local community groups and increased South London Cares’ profile – and the impact of social isolation amongst our older neighbours – in the community.
- We involved **corporate volunteers** – which also led to new fundraising opportunities for South London Cares and our partners.
- We were able to execute the project **efficiently and to time**.
- Following on from last year’s project, we created a services directory for both Southwark and Lambeth, building on the very useful information in the Age UK directories. This meant we could help people to access relevant services more speedily.





We continue to update and add services to the directory year-round, adding lasting value to the seasonal work.

## **9.0 Project recommendations**

There are also a number of challenges in delivering a project of this scale and with so many people and moving parts. Below are some of the challenges we faced in delivering the winter project in 2016/17 and some recommendations for improving the project further in future years.

### **Reaching neighbours most at risk of isolation**

- As we did not have aggregated lists of addresses from Southwark and Lambeth Councils, our focus was outreach out in the community, which meant that we did not reach many people who were housebound.
- We know from our sister charity North London Cares' experience that with lists of addresses targeting specific demographics and provided by the Councils, the Winter Wellbeing project is able to spend more time focusing on helping those most in need, and is more able to reach housebound older people.
- Although we have evaluated that our partnerships with primary care providers were successful in finding isolated people in need of help, our visits to these settings often yielded a low number of interactions (frequently there would only be a few older patients to talk to per visit).

**Recommendation:** Next year, we should seek to complement our innovative outreach in GP surgeries, pharmacies and local businesses by deepening our partnership with Southwark and Lambeth Councils and the local Clinical Commissioning Groups to identify isolated older people more efficiently. If it is not possible to get lists of people aged over 65 in a similar way to our sister charity at North London Cares, we will look into opportunities to build on our ties



with Tenants and Residents Associations and Resident Service Officers within the housing teams.

### **Improving planning**

- Researching, planning and making contacts in each of our 12 targeted neighbourhood areas took longer than we had anticipated.

**Recommendation:** The majority of planning should take place before the Winter Wellbeing project begins, so that from November to March the team can focus on outreach within the community and immediate intervention follow-up. We should also ensure that the strong relationships that we have built throughout this year's Winter Wellbeing project are maintained throughout the year, and we should continue community outreach in these settings during the spring and summer months. We should also seek to create more partnerships with GP surgeries, pharmacies and supermarkets before the beginning of next year's winter project.

### **Reaching new sheltered housing units**

- Although we have now visited the majority of sheltered housing units at least once over the course of our three Winter Wellbeing projects, there is still a small number that we have not been able to access as we have been unable to make contact with scheme managers.

**Recommendation:** We should get back in contact with the housing associations running these schemes in summer 2017, in order to build relationships with the managers before the start of the 2017/18 Winter Wellbeing project. We would also recommend returning to the sheltered housing units we have not visited since our first Winter Wellbeing project in 2014/15.



### **Bringing forward the project start date**

- This year we began the project in November: a month earlier than in the previous two years, which made for a more balanced project. We believe the project would be improved further still by beginning the work even earlier – making it more **preventative, rather than reactive**. This would allow neighbours to receive home improvements, financial help or deeper connections in time for the height of winter in January and February.

**Recommendation:** If funding allows, outreach should begin in autumn, with messaging tweaked to prepare people for the oncoming winter, rather than help them to respond to it.

### **Complementing partners' winter work**

- This year both Age UK Lambeth and Age UK Lewisham and Southwark were also giving blankets to people over 65 in our home boroughs. The crossover of the people we interact with is not high – as both local Age UK organisations tend to reach community groups, while we are targeting individuals who are not linked in with other local activities – but it might be beneficial if we offered a different practical item for keeping warm.

**Recommendation:** During the planning stages of the 2017/18 Winter Wellbeing project, we should communicate even more closely with other local organisations, and research other practical items that may benefit older people during the winter months.

### **Re-engaging neighbours**

- The phone bank proved that re-engagement with older neighbours that we have previously met during outreach is an important and often necessary part of work in keeping some of the most isolated and therefore anxious people linked in with services and activities they can benefit from.



**Recommendation:** We should integrate re-engagement with older neighbours we have not heard from for six months or more into our year-round work to ensure continued contact with the most at risk neighbours.

### **Mobilising our most experienced volunteers to do more**

- This year we found that speaking to older people in popular shopping areas – such as East Street Market, Walworth Road and Peckham Rye – was an effective way of reaching older people who did not know how to access help for problems they were confronted with over the winter months. During our corporate volunteering days, we piloted mobilising volunteers doing this sort of outreach. We found that approaching people in the street demands confidence, a clear understanding of South London Cares and our Winter Wellbeing ‘offer’, and also resilience in the face of rejection. While volunteers were brilliant in their enthusiasm and willingness to give this a go, it was only exceptionally confident volunteers who had volunteered with us on previous occasions who were able to make meaningful interactions which resulted in deeper interventions.



**Recommendation:** Either this type of outreach should be carried out by the core team, or limited to our regular volunteers who have a good understanding of South London Cares and our Winter Wellbeing project.

## **Making advocacy more efficient and targeted**

- This year we spent more time than in previous winter projects on the phone to social services and council housing teams. Though important and necessary work, this was very time-consuming, and often demanded repeated follow-up calls.

**Recommendation:** In future, we should meet with both Lambeth and Southwark councils to discuss whether there is a way we can better make referrals, and to discuss best contact points within teams.

## **10.0 Conclusion**

South London Cares' 2016/17 Winter Wellbeing project was both our biggest to date – reaching more people than ever before – but also our most focused and efficient. Innovative partnerships with the wider healthcare, community and private sectors ensured we targeted neighbours most at risk of isolation and least equipped to cope with the challenges of winter. That was key to the success of the project, and is vital to ensuring that older people in Lambeth and Southwark have a variety of relatable interactions and interventions available to them through the most isolating time of year.

The appetite from older neighbours for this type of community outreach, in particular, is clear. **28%** of the 1,280 people we spoke to face-to-face – in GP surgeries, pharmacies, at bus stops and on doorsteps – took up our offer of either extra social connection or practical help. Many people asked for multiple interventions such as assistance to access local services, to heat their homes, and to connect with their neighbours. It is clear that the project – one that values conversation over tick-boxes, agility over bureaucracy, and combines passion with professionalism – is valuable. As well as providing interventions that both help to prevent and solve problems, the project is a means of providing reassurance and strengthening ideas of community, and giving people the opportunity to learn how they can get the support or connections they need to live more fulfilling lives.

“I have had a bad winter with colds and the various afflictions of old age and yesterday was a real lift up.... It has made a real difference to my spirits and I hope that all the lovely people involved get such kindness in their old age.” **Betty, 84**

As we look to the future, we know that the project has the potential to make an even bigger impact. Access to information on where older people are living would allow us both to reach more people overall, and more of the people most at risk of isolation – particularly those unable to leave their homes. By starting outreach in the late autumn, the project could be as preventative as it is currently pro-active: we would help neighbours to connect to local services and activities ahead of the cold snap in January and February and we could carry health messages such as on flu jabs in the timeliest way.

At a time when winter pressures on local authorities and the NHS are intensifying, and as the older population in Southwark and Lambeth rapidly grows, this targeted and personal community outreach is more important than ever. For the investment that goes in, the project has an impressive impact on communities especially because it harnesses the assets of those communities. In the coming years, this impact can increase if we continue to take the challenge of isolation and loneliness – and their impacts on our health and wellbeing – seriously.

**April 2017**