

# Healthy Ageing Planning and Proposed Priorities

# Background and stocktake

- North Yorkshire joined national network of age friendly communities
- Engagement began in Hambleton, Selby and Harrogate. Findings of the engagement were fed back to areas but formal action plans were not developed
- Plans to implement findings and roll out age friendly communities put on hold during covid
- Lots of activity still continued:
  - Review of older people's forums and contract award for voice and participation work (Community First Yorkshire)
  - North Yorkshire Sport programmes for older adults
  - Fuel poverty work
  - Covid support hubs
  - Discussion about dementia/age friendly pilot in Settle
  - Dying matters sessions held
  - International day of the older person event 1<sup>st</sup> October in Northallerton
- Public Health restructure – healthy ageing post

# National and local context

- OHID [Consensus on Healthy Ageing](#)
- Centre for Ageing Better [national strategy](#) (includes leading good homes enquiry)
- NHS Humber and North Yorkshire: North Yorkshire Place Priorities and ageing well programme of work
- Review of the North Yorkshire Health and Wellbeing Strategy

# What is productive healthy ageing?

## The influence on health outcomes:

- 30% healthcare factors
- 20% behaviours
- 50% the wider environment



## Financial security

- not worried about the future
- flexible work that is rewarding



## Productive Healthy Ageing



## Resilience

- build physical and cognitive reserve
- learning opportunities



## Meaning and purpose

- high quality work
- caring
- volunteering



## Connectedness

- social support
- friendships and family networks



## Physical health

- increasing physical activity
- healthy diet and weight

# North Yorkshire data

- Life expectancy for both men and women is higher than the England average. However there are significant inequalities in life expectancy and healthy life expectancy.
- The number of people in the older age groups within North Yorkshire is increasing. The proportion of people aged 65 and over in 2001 was 18.2% and had risen to 20.7% by 2011. During the same period the over 85 age group increased by 24.0%.
- Projections indicate that the population aged over 85 is expected to increase in North Yorkshire by approximately 35% by 2030, compared with a 30% increase in England. A 23% increase is also anticipated for those in the retirement category in the county.
- There are about 68,500 people aged 65+ with a limiting long term illness in North Yorkshire. Of these people, 44% (29,954) report that their daily activities are limited a lot because of their illness (POPPI, 2020).

# Other insights

- Increase in fuel poverty and concerns around cost of living
- Employment rate of over 50's is lower than the national average
- Public health outcomes worse than national average for:
  - Admission episodes for alcohol related admissions (over 65's)
  - Abdominal aortic aneurysm screening
  - Recorded prevalence of dementia and estimated dementia diagnosis rate (over 65) (Low)
  - Cumulative percentage of those eligible to receive an NHS health check

# Feedback from previous engagement

- Generally positive feedback about living in and growing old in North Yorkshire
- Lots of activities – awareness/affordability/access by all?
- Housing –needs to be adaptable/more bungalows. Affordable care
- Concerns about reliance on technology. E.g. online forms, automated tills, on-line records, closure of services such as banks
- Men less likely to attend activities on offer. Cooking skills for widowers
- Transport – mixed feedback. Good in towns, issues in more rural areas.
- More intergenerational work (schools/care settings/older people's groups)
- Public toilets/bus shelters/availability of seating/pavements/pedestrian crossings – not always age friendly
- Lack of volunteers
- People want to stay where their friendship/family networks are

# Case study

83 year old lady moved to Scarborough. Very active and keen to take part in a range of activities



Made a decision to give up driving due to the good bus service and sold her car.

However the buses on that route were cancelled with no consultation due to lack of use.

Now struggles to get to doctors appointments (different appointments in different surgeries), activities and has to walk up an incline to access public transport.

Has been informed about dial a ride but has said this is not for her.

***“I loved life and this has taken the joy away”***



# Proposed healthy ageing plan

- Strategic Approach to Healthy Ageing in North Yorkshire
- Health and reducing inequalities
- Housing
- Employment and financial security
- Age Friendly Communities

# Strategic approach to healthy ageing in North Yorkshire

## **Suggested outcomes:**

- There is a strategic approach to healthy ageing in North Yorkshire with a shared vision that is led by over 50's

## **Suggested actions:**

- To establish a governance structure and sponsor for healthy ageing that feeds into the health and wellbeing board
- To develop a shared vision for healthy ageing in North Yorkshire that informs the HWB strategy
- To carry out a healthy ageing needs assessment "the state of ageing in North Yorkshire" which includes the voice of over 50's
- To engage with community groups and older people's networks to identify what is working well and where there are opportunities for improvement
- To develop genuine co-production
- Explore opportunities for ageing to be embedded in the new council e.g. equality impact assessments, organisational development (over 50's)
- North Yorkshire Council sign up to UK consensus on healthy ageing

# Health and reducing inequalities

## **Suggested outcomes:**

- Everyone has the opportunity to live a healthy and good quality later life
- All programmes focus on reducing inequalities

## **Suggested actions**

- Focus on the inequalities that exist amongst older people
- To work with partners to identify the need, review evidence base and develop work around:
  - the prevention of frailty and falls
  - Nutrition and hydration in older people
  - Increasing physical activity from mid life
  - Drugs, alcohol and sexual health
  - Increasing screening and immunisation uptake amongst older people (pneumococcal, flu, shingles, AAA)
  - Mental health and suicide
  - Oral health (particularly in care settings)
- Sensory Impairment
- Develop a public health menu of interventions for care settings and social care providers
- Promote discussions around end of life care and dying matters
- Refresh the dementia strategy

# Housing

## **Suggested outcomes:**

- Everyone can live in age-friendly, accessible, healthy homes in intergenerational communities

## **Suggested actions:**

- Make recommendations on housing needs of older people following engagement
- Promote programmes available to reduce fuel poverty
- Review examples of good practice/research around developing age friendly homes
- Ensure there are a diverse range of housing options for older people and that their needs are embedded in housing and planning strategies
- Explore use of assistive technology building on current progress

# Employment and financial security

## **Suggested outcomes:**

Everyone has access to good jobs in their 50's and 60's that are right for them

More people have financial security in later life

## **Suggested actions:**

- Work with partners to implement a pension credits campaign
- Age friendly workplace programmes (including NY Council opportunities)
- Develop programmes based on the outcomes of the engagement
- Ongoing work around digital inclusion

# Age Friendly Communities

## **Suggested outcomes:**

- North Yorkshire is an age friendly place where people are able to live healthy and active later lives
- North Yorkshire is accepted by the WHO Global Network of Age friendly communities.

## **Suggested actions:**

- To find out what is important to over 50's living and working in North Yorkshire, and to co-produce programmes of work based on the findings
- Launch a tackling ageism campaign
- Identify opportunities for intergenerational programmes e.g. around growing food, housing
- Ageing without children work
- Influence work around volunteering, befriending and low level support programmes to support the healthy ageing agenda e.g. shopping, cleaning, gardening schemes
- Develop projects based on the outcomes of the engagement that are co-produced with older people. e.g. Take a seat/friendly bench scheme, older adults ambassadors, age friendly charter, ageing without children
- Apply to join the WHO Global Network for age friendly Cities and Communities and the UK network of age friendly communities



# Timescales

- July-October: Feedback on priorities from stakeholders
- 1<sup>st</sup> October: international day of the older person. Events and launch of survey for over 50's
- November onwards (subject to sign of):
  - Establish healthy ageing governance
  - Collate and analyse findings of survey
  - Healthy ageing action plan (includes age friendly communities) finalised and implementation begins
- Quick wins as well as longer term actions

# Feedback

- Is there anything missing?
- Other opportunities to develop and embed healthy ageing?
- Thoughts on next steps?