

Appendix D: Expert testimony papers

Expert witness 1 – Melissa March

Section A: NCCSC to complete	
Name:	Melissa March
Job title:	Executive Director
Address:	Learning for the Fourth Age 4 Stoneygate Avenue Leicester LE2 3HE
Guidance title:	Social Care of Older People with multiple long term conditions
Committee:	Guidance Development Group (GDG) for Social Care of Older People with multiple long term conditions
Subject of expert testimony:	Social isolation
Evidence gaps or uncertainties:	<p>There is no good research evidence about the ability of interventions to reduce social isolation, and provide stimulating and social activity for older people with multiple long term conditions, whether they are living in community dwellings or in care homes. The aims of such activity might be to reduce loneliness, increase social contact with people of all ages, continue to sustain and develop interests, activities and identities of older people, and enable older people with multiple long-term conditions to participate meaningfully in their local communities. These are all outcomes which research tells us are valued by older people.</p> <p>This group of people are likely to have health and mobility problems which act as barriers to social participation and other activity. They may also be living with dementia, have sensory impairment, and may not speak English as a first language.</p>

Question 2.1.6 How can older people with multiple long-term conditions living in the community or in residential care be supported to participate in community, family and social activities?

The GDG would welcome examples and case studies of ways in which social care and other practitioners can stimulate creative activities and social participation in their own homes or communities and in care homes. Outcomes sought would be reduction in social isolation, increase in social opportunities, increase in participation in their communities and more meaningful and enjoyable lives.

Innovative activities related to proactive/preventative support – Beth Britton (GDG member) provided a reference to this organisation which she thought may be useful in respect of how services can support people to remain independent and active for longer.

Section B: Expert to complete

Summary testimony:

[Please use the space below to summarise your testimony in 250–1000 words – continue over page if necessary]

Learning for the Fourth Age (L4A) provides learning opportunities for older people receiving care. We focus on better quality of life, mental stimulus and delaying the onset of dementia by learning through activities, pastimes and roles, which bring pleasure and meaning. Learning Mentors encourage existing interests or developing new ones, with resources meeting support needs.

L4A is a social enterprise providing learning opportunities to older people receiving care across in Leicester and Leicestershire. A not-for-profit organisation, we work with over 150 older people each week and have 80 volunteers at any one time. During 2013/14, L4A volunteers provided over 14,500 hours of volunteering time to fourth agers living across Leicester and Leicestershire. Any surplus created is reinvested in to our work with some of the oldest people across the city and county.

L4A is strongly established in Leicester, with a track record of providing high quality, personalised learning opportunities to older people receiving care. Our work makes a real difference to the quality of older people's lives and provides mental stimulus, for example using new technologies, and getting engaged with absorbing practical activities, such as gardening, art and music.

From "Exploring Learning in Later Life: External Evaluation of Learning for the Fourth Age (L4A)" by independent evaluators: Dr Trish Hafford-Letchfield (University of Middlesex) and Dr Peter Lavender (NIACE) in December 2013:

Learning for the Fourth Age (L4A) provides learning opportunities for older people receiving care. We focus on better quality of life, mental stimulus and delaying the onset of dementia by learning through activities, pastimes and roles, which bring pleasure and meaning. Learning Mentors encourage existing interests or developing new ones, with resources meeting support needs.

Independent evaluators, Dr Trish Hafford-Letchfield and Dr Peter Lavender, found:

“There are significant benefits. L4A’s creates successful learning partnerships with traditionally neglected groups of older people in poor health and with limiting disabilities.”

“L4A has developed methods that engage older people in one-to-one learning, in couples and groups, with some taking up lead roles eg facilitating music appreciation, art and computing.”

“We saw rich examples of learning experiences.... “Within care homes, older people had made significant progress, found new skills and knowledge and had become more confident by:

- learning new things (e.g. painting)
- keeping the body active (e.g. knitting): learning for health (e.g. armchair exercise)
- learning what’s going on in the world (e.g. discussion of news) learning more capability
- keeping the mind active (e.g. discussing topics, books ‘Tess of the d’Urbervilles’)
- stimulating the process of learning (e.g. through arts-based learning)
- reflecting on a life well spent (through reminiscence using films, biography, and storytelling).
- helping maintain independence (e.g. better social contact, making new relationships)
- developing skills and knowledge for survival (e.g. online shopping, emailing relatives)
- learning to understand and build relationships with other people in relation to age and ethnicity, and particularly being in contact with younger people
- learning about oneself in later life and how to connect, contribute, feel productive and promoting resilience where there are adverse health conditions.

These make a significant difference to individuals’ wellbeing, bringing new ideas, improving understanding and maintaining a positive outlook. L4A is creative and ground-breaking in non-formal learning.

Section A: NCCSC to complete	
Name:	Rachel Mortimer
Job title:	Founder – Engage and Create
Address:	Virtual: www.engageandcreate.co.uk
Guidance title:	Social Care of Older People with multiple long term conditions
Committee:	Guidance Development Group (GDG) for Social Care of Older People with multiple long term conditions
Subject of expert testimony:	<p>Research Question 2.1.6:</p> <p>Social isolation: How can older people with multiple long-term conditions living in the community or in residential care be supported to participate in community, family and social activities?</p>
Evidence gaps or uncertainties:	<p>There is no good research evidence base concerning the ability of interventions to reduce social isolation, and provide stimulating and social activity for older people with multiple long term conditions, whether they are living in community dwellings or in care homes. The aims of such activity might be to reduce loneliness, increase social contact with people of all ages, continue to sustain and develop interests, activities and identities of older people, and enable older people with multiple long-term conditions to participate meaningfully in their local communities. These are all outcomes which research tells us are valued by older people.</p> <p>This group of people are likely to have health and mobility problems which act as barriers to social participation and other activity. They may also be living with dementia, have sensory impairment, and may not speak English as a first language.</p>
<p>The Guideline Committee would welcome examples and case studies of ways in which social care and other practitioners can stimulate creative activities and social participation in their own homes or communities and in care homes. Outcomes sought would be reduction in social isolation, increase in social opportunities, increase in participation in their communities and more meaningful and enjoyable lives.</p> <p>Care homes linking to community: Philippa Thompson (Guideline Committee member) suggested that Rachel Mortimer provides the kind of community/continuity activities that we were talking about in care home and could give evidence/case studies.</p>	

Section B: Expert to complete**Summary testimony:**

[Please use the space below to summarise your testimony in 250–1000 words – continue over page if necessary]

Rachel Mortimer is a social entrepreneur and professional artist. Her background is an eclectic mix of media organisation (ITV, Saatchi's), teaching and caring. Having gained a Montessori Diploma with distinction she is currently completing a BSc Psychology. Rachel started Engage & Create after visiting a dementia care home and realising the lack of opportunities for residents to participate in meaningful activity that provided cognitive stimulation. She developed the Ignite Sessions to provide a cultural and stimulating way of getting people engaging with each other. They will be available to access via a licence later this year with training in the technique used to facilitate these sessions with people at all stages of dementia.

Rachel has been awarded a Fellowship from The School of Social Entrepreneurs, been a winner of the SE Assist programme (Legal & General), Juice FM's chosen social enterprise 2014/15

Research Question 2.1.6: Social isolation: How can older people with multiple long-term conditions living in the community or in residential care be supported to participate in community, family and social activities?**What we know**

- Social identities are built from group membership. Feeling a sense of belonging affects our self-esteem
- Passive activities (watching tv/listening to radio) for both women and men increase risk of death
- Social activities are very important for not only wellbeing but longer life

Solution 1: Future planning, build to encourage community inclusion and social opportunities

- Humanitas NL - Apartments for life - sick and healthy people live together, old and young, poor and rich, migrant and Dutch. There is a deliberate mixing of residents, in terms of health status and socio-economic status. Their inclusion is seen as an important element in avoiding an 'institutional' feel.
- Hogeway Dementia Village – themed houses of 6/7 people. The restaurant & theatre are open to the public, help towards the running costs and bring local community into the setting breaking down barriers.

Solution 2: Making the most of what we have, bring the outside in

- Engage & Create's Ignite Sessions for people with dementia – Use culture as an opportunity to bring people together, Ignite Sessions introduce art appreciation as a social experience in care homes/day centres/art galleries
- Festival in a Box, Bloomsbury – connect festivals to care homes and bring parts of them into the home or create 'dementia friendly' performances
- Community Visitor Scheme, Essex - dedicated community volunteers befriending those in care homes. Encouraged participation in activities.
- Gloucestershire Care Homes Part of Our Community (POPPs) – unlocked potential and skills of current care home workforce. Used quality training to help activities

coordinators.

Solution 3: Sharing spaces, the outdoors

- Kastaniehaven, Denmark - Kindergarten and care homes use the same spaces, older people can watch the children playing.
- Dementia Adventure (Essex) - provide easy walks on wheelchair friendly paths in local parks

Solution 4: Sharing spaces, residential care and learning

- Lasell Village, Boston, USA - Combines retirement community with the cultural, social, and recreational opportunities of lifelong learning
- Hillcrest Mable Rose, Omaha, USA - Students from the Montessori School visit every Friday to study alongside the centre's residents
- Peder Lykke Centre, Copenhagen - Day High School offers opportunity to have an active life, challenging and developing individuals

Solution 5: Sharing spaces, virtually

- CNA Language Exchange, Brazil – retirement home residents and language students share conversation over Skype to help improve children's English language skills. They also become pen pals.

Solution 5: Sharing spaces, creatively

- Alive! Activities Paint Pals project – intergenerational project twinning junior schools with care homes to send painted postcards to one another.

Solution 7: Creating communities within the care home

- The Gentlemen's Club, Truro - While decreasing well-being tends to be the norm in long-term residential care, building new social group memberships in the form of gender clubs can counteract this decline, particularly among men.

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