

Quest 2016 – Gplus 22

Engaging with Older People

Guidance Notes

Issue 2 – July 2016



Outcomes

- To provide inclusive opportunities for older people to participate in sport and physical activity using insight and a need based approach.
- To promote and support an active lifestyle for older people using market research.
- To address inequality in a pro-active way, through effective interventions and collaborations.
- To involve older people in the planning and leadership of activities.
- To provide evidence of positive outputs and outcomes that will lead to long-term impact on the health of older people including physical and mental well-being through increased participation, involvement and social engagement.

Suggested Guidance

Physical Activity Guidelines for Older People

The current guidelines are:

- Older adults who participate in any amount of physical activity gain some health benefits, including maintenance of good physical and cognitive function. Some physical activity is better than none, and more physical activity provides greater health benefits.
- Older adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
- For those who are already regularly active at moderate intensity, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous activity.
- Older adults should also undertake physical activity to improve muscle strength on at least two days a week.
- Older adults at risk of falls should incorporate physical activity to improve balance and co-ordination on at least two days a week.
- All older adults should minimise the amount of time spent being sedentary (sitting) for extended periods.
- For more about the UK physical activity guidelines for older adults and information about support and dissemination please go to www.bhfactive.org.uk/olderadultsguidelines

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Key links

- Age UK
 - Health and fitness section: <http://www.ageuk.org.uk/health-wellbeing/> - information on age-related health conditions, advice on staying fit and healthy
 - Keeping fit: <http://www.ageuk.org.uk/health-wellbeing/keeping-fit/> - getting moving; fitter feet; walking tips; falls prevention; easy exercise
 - Health and wellbeing projects: <http://www.ageuk.org.uk/health-wellbeing/fit-as-a-fiddle/> - Inspire and Include; Fit for the Future; Cascade Volunteering Training; Fit as a Fiddle (although ended resources are still available); Get Going Together; Dementia Friendly Programme; Health and Wellbeing Resources.
- BHFNC: Older People overview: <http://www.bhfactive.org.uk/older-adults/index.html> - training (e.g. Functional Fitness MOT); events; resources; projects
- DCMS Sporting Futures Strategy: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/486622/Sporting_Future_ACCESSIBLE.pdf
- EFDS: overview <http://www.efds.co.uk/> - Be informed; be inclusive; be active. Inclusive Fitness and Inclusive Mark.
- PHE: <https://www.gov.uk/government/organisations/public-health-england> - contacts regional and local centres; national strategy
- Sport England: Strategy Towards an Active Nation <https://www.sportengland.org/media/10629/sport-england-towards-an-active-nation.pdf>
- Vulnerable adults : EFDS policy guidance: http://www.efds.co.uk/assets/0000/3509/Child_and_Vulnerable_Adult_Protection_Policy_for_web_with_statement.pdf; Difference between safeguarding children and vulnerable adults guidance: <https://www.sportscoachuk.org/sites/default/files/Differences-in-Safeguarding-Children-and-Vulnerable-Adults.pdf> (Anne Craft Trust and the Sports Coach UK)

PLAN

How does the organisation pro-actively use insight and engage Older People in the planning and design of its services and programmes?

EXAMPLES OF BEST PRACTICE

- Demographic data, research and tools are used to understand the needs of older people
- Objectives for targeting older people are documented in a plan
- There are working relationships with organisations for older people in the area
- Partnership working is in place with local healthcare providers
- Potential savings have been estimated for healthcare costs
- Guidelines are used

SUGGESTED GUIDANCE

- Is demographic data and market research and other tools (for example Sport England’s market segmentation tool) used to better understand the needs of older people in the area
- Are there objectives targeting older people, and are these documented in a business plan, marketing plan or action plan. Are the objectives differentiated between people who are 50 plus (early/ just retired) and 80 plus (later life), and specific community groups (BME, faith communities, older men and older women)

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- Are there relationships with organisations for older people existing within your community, for example local Age UK office
- Is there partnership working with the local healthcare providers, for example Clinical Commissioning Group (CCG)
- Are the potential savings estimated for healthcare costs of helping more older people to be active in your area
- Are guidelines used for example:
 - Age UK? <http://www.ageuk.org.uk/health-wellbeing/>
 - Department of Health Guidelines for Physical Activity? www.bhfactive.org.uk/olderadultsguidelines
 - Department for Culture, Media and Sport ‘Sporting Future Strategy’?
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/486622/Sporting_Future_ACCESSIBLE.pdf
 - Sport England: Strategy Towards an Active Nation? <https://www.sportengland.org/media/10629/sport-england-towards-an-active-nation.pdf>
 - English Federation of Disability Sport? <http://www.efds.co.uk/>
 - The British Heart Foundation National Centre for Physical Activity and Health resource materials? <http://www.bhfactive.org.uk/older-adults/index.html>
 - Safeguarding Standards for Vulnerable Adults?
http://www.efds.co.uk/assets/0000/3509/Child_and_Vulnerable_Adult_Protection_Policy_for_web_with_statement.pdf;

DO

How does the organisation communicate its commitment, and demonstrate its ability, to provide services for older people?

EXAMPLES OF BEST PRACTICE

- Information important to older people is clear in the marketing material and is available in different formats
- Positive imagery is used in marketing materials
- There is a network of older people champions to act as advocates
- Older people are reached and engaged. Different ways are used to communicate with older people
- A range of activities are provided suitable for older customers at different stages of aging
- Intergenerational programmes are explored
- Concessionary schemes are offered
- A Buddy Scheme and/or mentoring scheme for volunteers is established
- Feedback is sought, is shared and acted upon

SUGGESTED GUIDANCE

- Is the information that is important to older people clear in marketing materials and is this available in alternative formats, for example large print versions (such as easy access; loop systems; toilets on site; parking close by)
- Do you use positive imagery in your marketing materials
- Have you a network of older people champions to act as advocates
- How are older people in the local area reached and engaged? Are different ways of communication used, for example through GP surgeries; local chemists;

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libraries; day centres; churches; local charities or housing associations

- Is there a range of activities suitable for older customers at different stages of aging provided, for example activities attractive to 50-65 age group are likely to be very different to programmes for the 80 plus
- Is the use of intergenerational programmes that attract mothers and daughters, grandparents and grandchildren been explored
- Are there concessionary schemes offering discounts to older people
- Is a Buddy Scheme for new users established and/or a mentoring scheme for volunteers
- Is feedback actively sought from older customers in the differentiated age groups? Is this shared and acted upon

How do you ensure that staff are confident and knowledgeable in engaging with older people?

EXAMPLES OF BEST PRACTICE

- The Customer Charter references the needs of older customers
- Staff receive training specifically for dealing with older people
- Coaching staff have completed CPD regarding working with older people
- Older people are encouraged to become involved and are recruited
- Staff and coaches are trained in safeguarding vulnerable adults
- Equality objectives are included in staff's performance appraisals

SUGGESTED GUIDANCE

- Does your Customer Charter specifically reference the needs of older customers
- Are staff receiving training specifically for dealing with older people; do they understand and respond to the needs of older people
- Are coaching staff completing specific CPD on working with older people
- Are older people encouraged to become involved and recruited, for example as staff, volunteers and board members
- Are staff and coaches receiving training in safeguarding of vulnerable adults
- Are equality objectives included in staff's performance appraisals

MEASURE

What measurement tools are in place to enable the organisation to assess uptake and satisfaction levels of older people?

EXAMPLES OF BEST PRACTICE

- Data is gathered to measure all areas
- Surveys are carried out to measure satisfaction levels
- Feedback is measured and analysed; older customers are recommending the service to others
- Are the participants representative of the local population profile
- Feedback from stakeholders involved is gathered; are they recommending the service to others
- Costs savings are calculated for health care services.

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SUGGESTED GUIDANCE

- Is data gathered for measuring specific areas, for example new participants, usage, retention and income figures
- Are surveys carried out to measure the levels of satisfaction of older customers
- Is feedback from older customers measured and analysed; is it known if older customers are recommending the service to friends and family
- Are the older people participating in the initiatives and activities, representative of the local population profile
- Is feedback from stakeholders that are involved with older peoples' services gathered; and is it known if they recommending the service to others, for example their clients, members, colleagues and other organisations
- Are cost savings calculated for local healthcare services

REVIEW

How are older people fully involved in the shaping of services and the review of performance?

EXAMPLES OF BEST PRACTICE

- Data gathered is analysed and reviewed and it is known what works well and what is exceeding targets
- Reviews on services are carried out, areas for improvement and development are identified, older people are involved
- Targeted marketing and promotion performance is reviewed and there is cost/ benefit analysis
- New customers are attending and existing older customers are staying longer
- Unit economic cost for services are calculated and reviewed
- New external research is obtained and this is applied to the services offered

SUGGESTED GUIDANCE

- Is the data for services for older people analysed and reviewed, for example for the different age groups; and is it known what is working well and what is exceeding targets
- Are reviews on services carried out and are areas for improvement and areas for further development identified; are older people and stakeholders involved in reviewing the services
- Is targeted marketing and promotion performance reviewed? Is there cost/ benefit analysis, for example what it is costing and how much additional usage/ market penetration is achieved
- Are new customers attending your programmes in the different age groups and are existing older customers staying for longer
- Is the unit economic cost for the services calculated and is this reviewed, for example to see if it can be reduced without affecting the quality of provision
- Is new external research on older people obtained and is it applied to the services for older people that is on offer

IMPACT

How do stakeholders clearly identify the positive impacts the programmes have on the lifestyle, health and well-being of older people?

EXAMPLES OF BEST PRACTICE

- Objectives targeting older people have been achieved

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- Inactive older people are being attracted and their attitudes and behaviours are changing to an active lifestyle. The conversion rate is increasing
- Quantitative and qualitative evidence is available of the positive impact services are having
- Services are helping older people access other services that will benefit them
- The estimated social return on investment is known for the different age groups
- Estimated cost savings to the health service due to the programmes are known
- The infrastructure of individuals and groups providing services for older people is stronger
- Facilities are accessible and fit for purpose and fully inclusive and accessible for disabled older people
- Safeguards for vulnerable adults are stronger and more robust
- Interventions are identified that have a proven track record of positively impacting on older people

SUGGESTED GUIDANCE

- Is there evidence that the objectives targeting older people have been achieved
- Are inactive older people being attracted and are their attitudes and behaviours positively changing towards an active lifestyle? Is the 'conversion rate' of engaging an inactive older person and helping them to adopt an active lifestyle (beyond 10 weeks) increasing? Is this different for the different age groups
- Is there quantitative and qualitative evidence of the positive impact the services are having on the older people who use them
- Are your services helping older people to access other social or health interventions that will also benefit them
- Is the estimated social return on investment of services for older people known and can this be calculated for different ages
- Is the estimated cost savings to the health service by older people engaged in the programmes calculated
- Is the infrastructure of volunteers, mentors and voluntary groups providing services for older people in the area stronger
- Are facilities in your area more accessible and made fit for purpose for older people as a result of interventions; are the facilities fully inclusive and accessible for older people with disabilities
- Are safeguards for vulnerable adults stronger and more robust as a result of the interventions
- Are there interventions identified that have a proven track record of positively impacting on older people and can these be scaled up across your area or replicated in other areas