



Summary of Community Based Provision of Services for Older People in Aberdeenshire 2020/21

Prepared on behalf of

Aberdeenshire Third Sector Strategy Group



Introduction

The Aberdeenshire Third Sector Strategy Group (TSSG) joined Aberdeenshire Frailty Pathway Delivery Group in August 2020. The Frailty Pathway Delivery Group were responding to the movement of geriatric beds in wards 303 and 304 at Aberdeenshire Royal Infirmary into the community and looking at developing alternative provision in Aberdeenshire. It is hoped that the TSSG can contribute to the work around Operation Home First/ Hospital at Home model and offer local intelligence of services focused on the preventative agenda within the local community.

It is becoming widely recognised that the Third Sector has the potential to provide preventative services for older people. The Third Sector's ability to connect with local communities, offer "lived" experience and offer a holistic and flexible approach to service provision has been reflected in national policy. The key characteristics often attributed to the sector argue they have an advantage over public and private organisations to potentially achieve better outcomes for user groups.

Across Aberdeenshire there are many examples of Third Sector organisations successfully providing innovative preventative support valued by older people and also by commissioners. It is understood that reshaping care provision for older people will require a complex programme of major transformational change affecting a range of services. This will not happen overnight but as we consider a more coordinated and personalised approach in the face of wider challenges facing councils and partners it is worthwhile taking stock of the community based provision already established across the area. Once there is a clearer picture of the current landscape it will be easier to identify gaps in local service provision which in turn presents great potential to co-design, co-produce and co-deliver a suite of community based services to support the clinical provision within the Hospital at Home model.

This document captures a summary of Community Based Services for Older People across Aberdeenshire gathered via the partners of the TSSG. The level of response from all six areas of the Local Authority varied, also the current pandemic situation will impact on whether or not many of the non essential services are active, therefore it cannot be claimed that this is as comprehensive a picture as desired at this time. However, it is believed that there is sufficient data to provide a strong indication of the level and kind of community based support available.

Categories

This local information was harvested based on the TSSG's awareness of what type of service provision was available through their networks which could possibly support the non clinical requirement of the Hospital at Home situation. Further discussion and engagement with HSC partners will help to further identify potential service requirements, however, the information provided within this document is intended to offer a foundation on which build the intelligence of Third Sector support and requirements for the model.

The services were categorised as below:

- ◆ Advice/Signposting
- ◆ Advocacy
- ◆ Befriending Services
- ◆ Care Home Facilities
- ◆ Care in the Home
- ◆ Day Care Centres
- ◆ Dementia Friendly Groups
- ◆ Exercise Classes
- ◆ Equalities and Additional Support Needs
- ◆ Gardening/Handyman
- ◆ IT
- ◆ Lunch Clubs
- ◆ Meals on Wheels
- ◆ Men's Sheds
- ◆ Older People Social Groups
- ◆ Respite care
- ◆ Shopping/Prescription Collection
- ◆ Transport
- ◆ Walking Groups
- ◆ Other

Information regarding local Community Councils, Church Groups and Community Associations focused on geographically based support for all residents in most settlements is available. This data has not been included in this summary, as whilst many of these groups would be available to offer support to older people within the community this would not necessarily be their core or primary activity.

The Aberdeenshire Wide Picture

Of the gathered data, 134 Community Groups and Organisations defined their service under the suggested categories with a further 24 captured under 'Other' including National condition specific Organisations, Alternative Therapies, and Specialist Care Organisations offering support for people living with cancer, stroke, deafness for example.

One organisation which operates across Aberdeenshire which did not fall under the categories but provides an extremely valuable service is Good at the End (G.A.T.E.) which provides help and support with end of life planning.

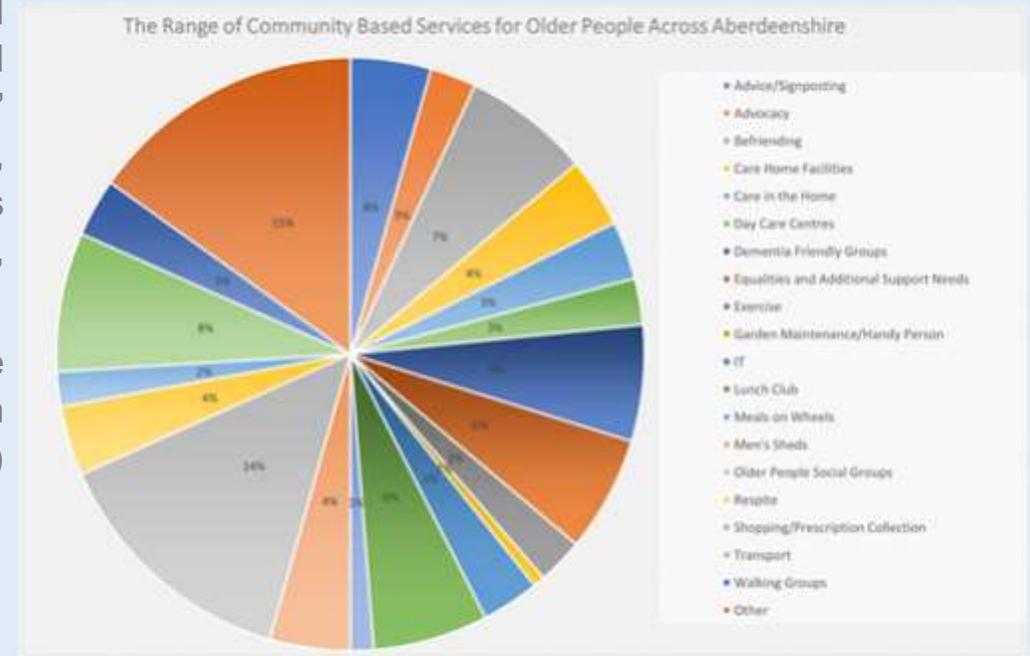


Fig.1

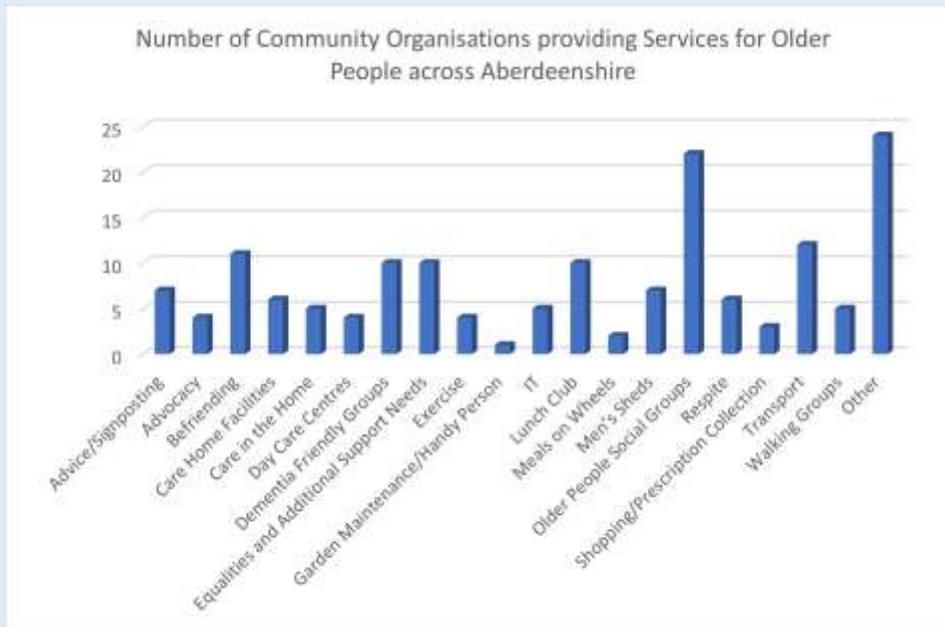


Fig.2

The information represented in *Fig.1* and *Fig. 2* gives an overview of the range of community-based services for older people across the whole Shire. Note that the majority of services captured are focused on tackling loneliness and isolation through social interaction, befriending services, and lunch clubs. However, due to the current pandemic and restrictions many of these services are suspended but it is hoped levels of support will resume once we begin to approach the Recovery Phase. The COVID19 situation has impacted this data with a number of groups extending their services such as prescription collection and shopping to the whole community as can be found via the interactive maps.

Services Available by Area

The data represented in the following charts provides an indication of the available support within North, Central and South Aberdeenshire areas. As noted earlier, there have been challenges with many services being affected by the restrictions caused by the pandemic therefore the detail is not as exhaustive as hoped. However, there is scope to clearly identify potential gaps in provision from the data supplied.

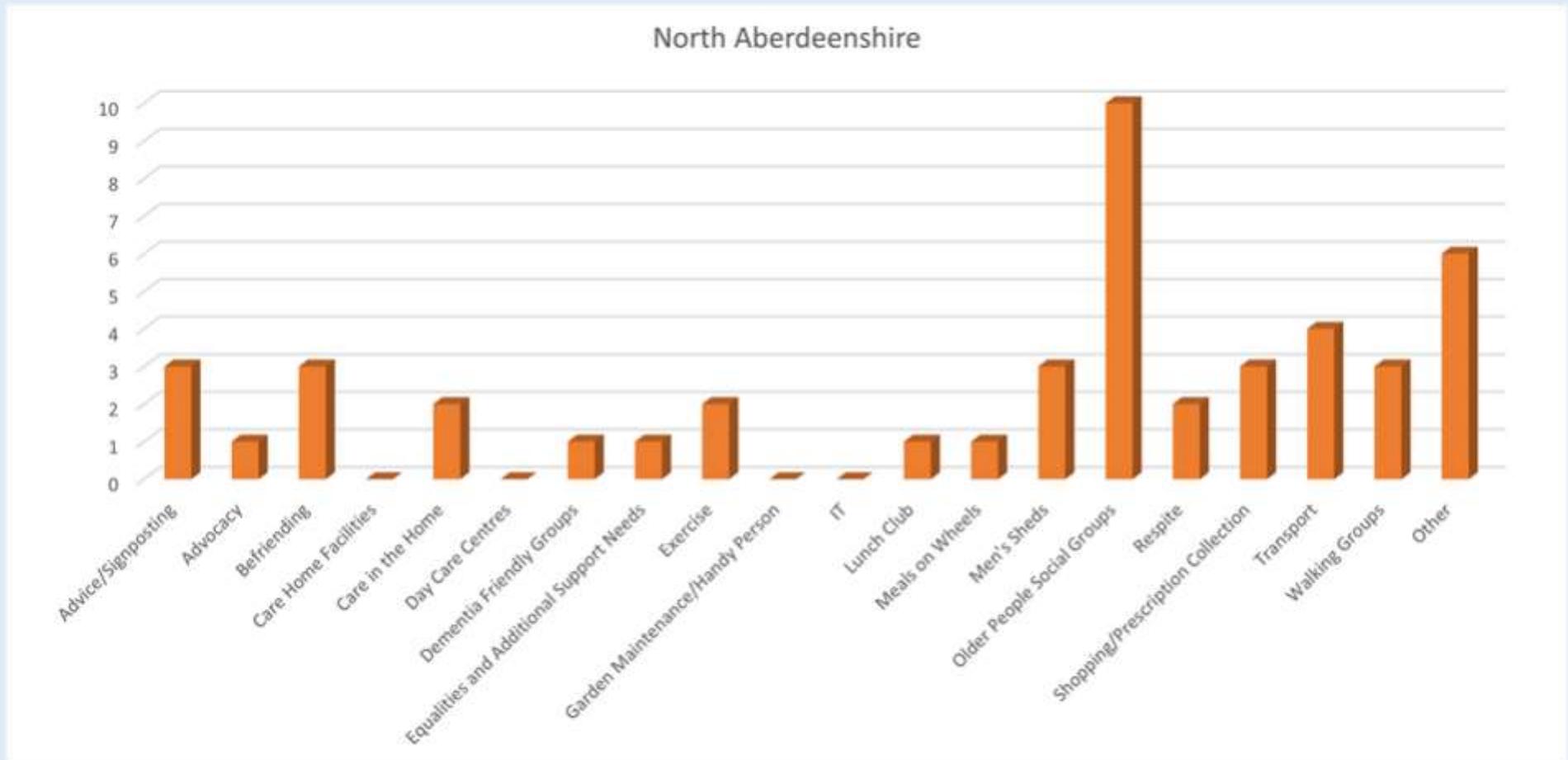


Fig.3

Services Available by Area

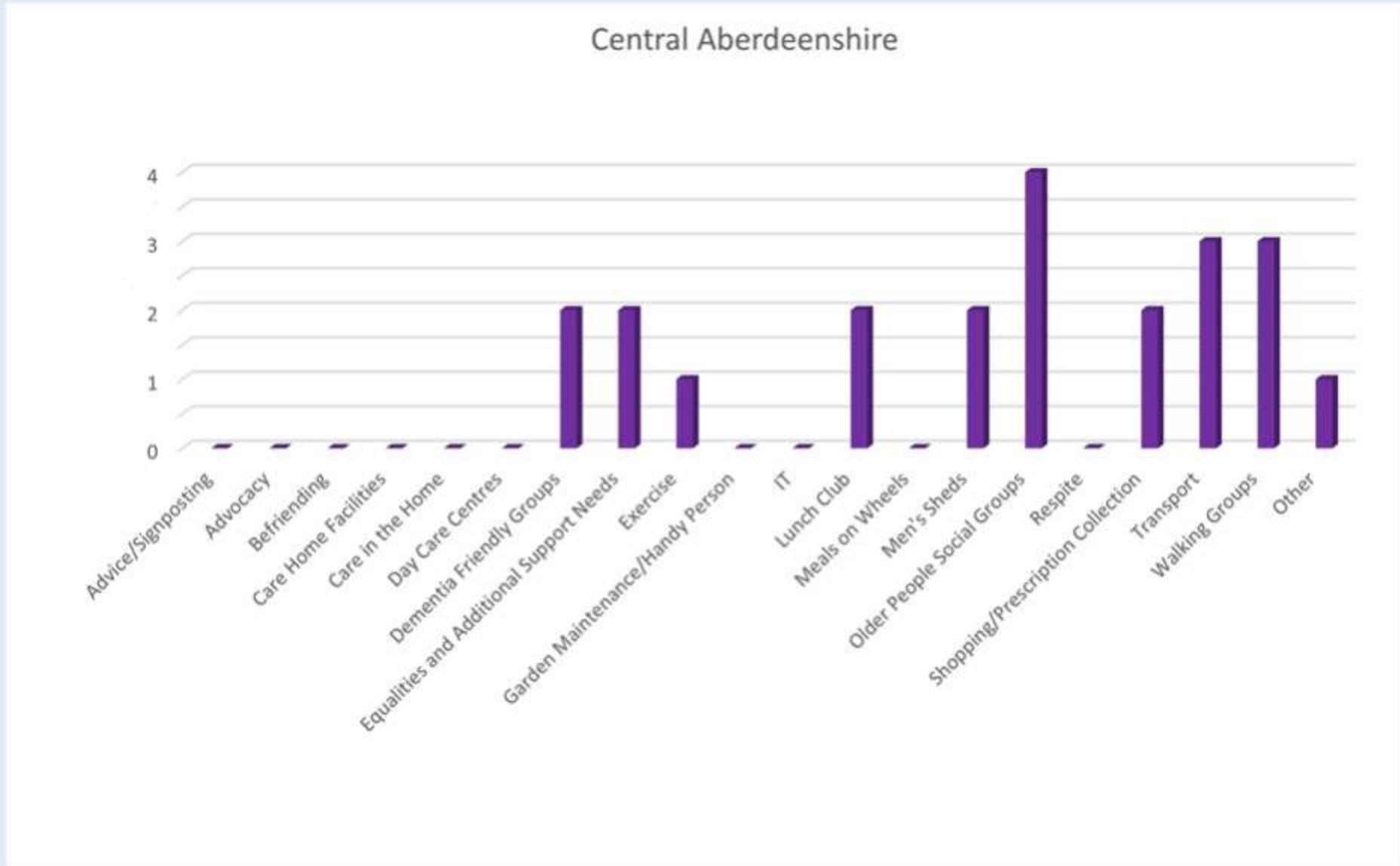


Fig.4

Services Available by Area

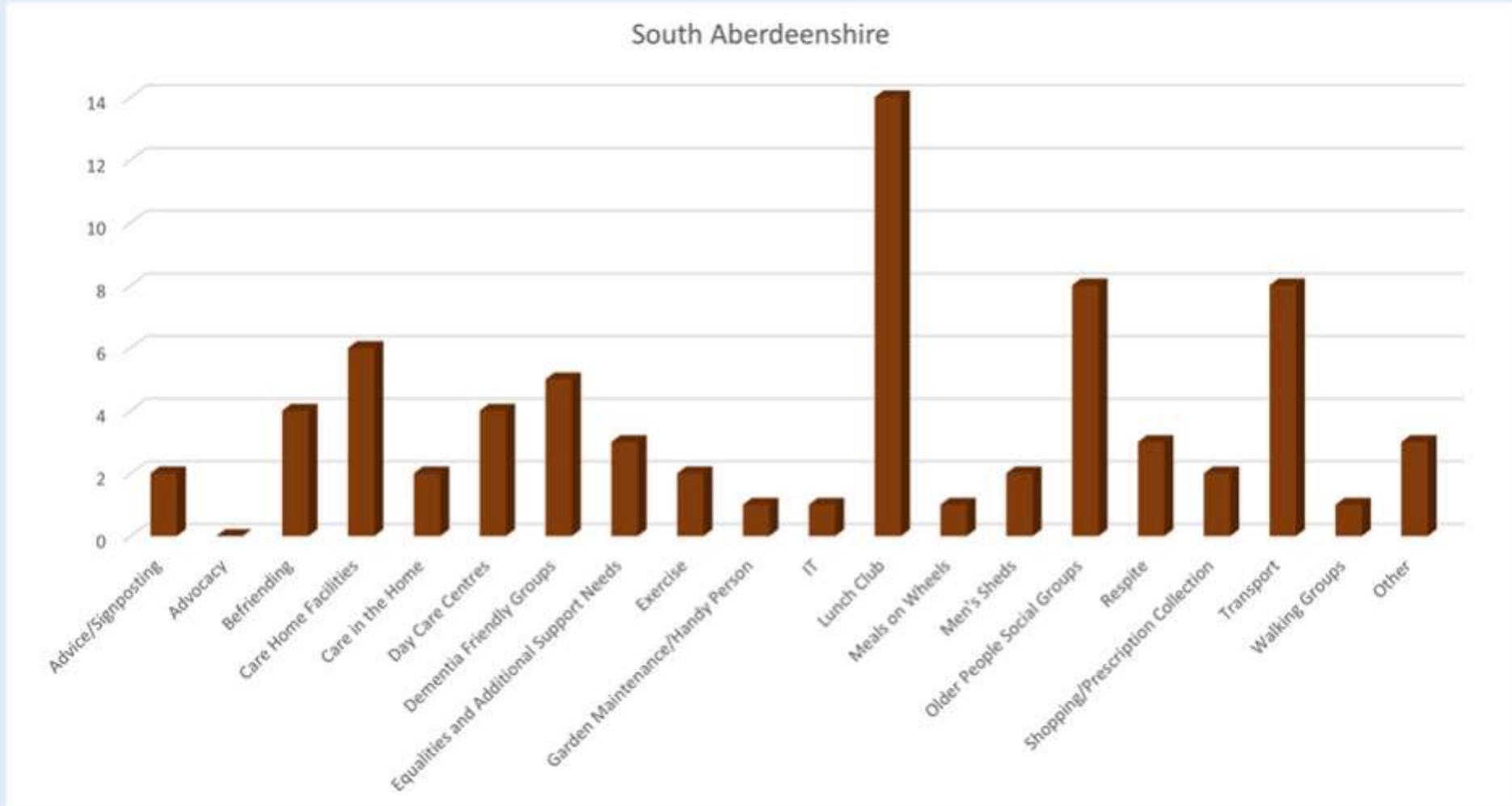


Fig.5

Services covering Aberdeenshire and Nationally

Some of the gaps in service highlighted in *Figs. 3 -5* could possibly be mitigated by support from Aberdeenshire wide and National organisations. In addition, many support services, i.e. care homes are family-owned 'lifestyle' businesses, so would not be Third Sector, but it would not be correct to conclude a gap in provision. In identifying the full picture of service provision for older people there is a need to scope all three sectors to really ascertain whether the need is being met.

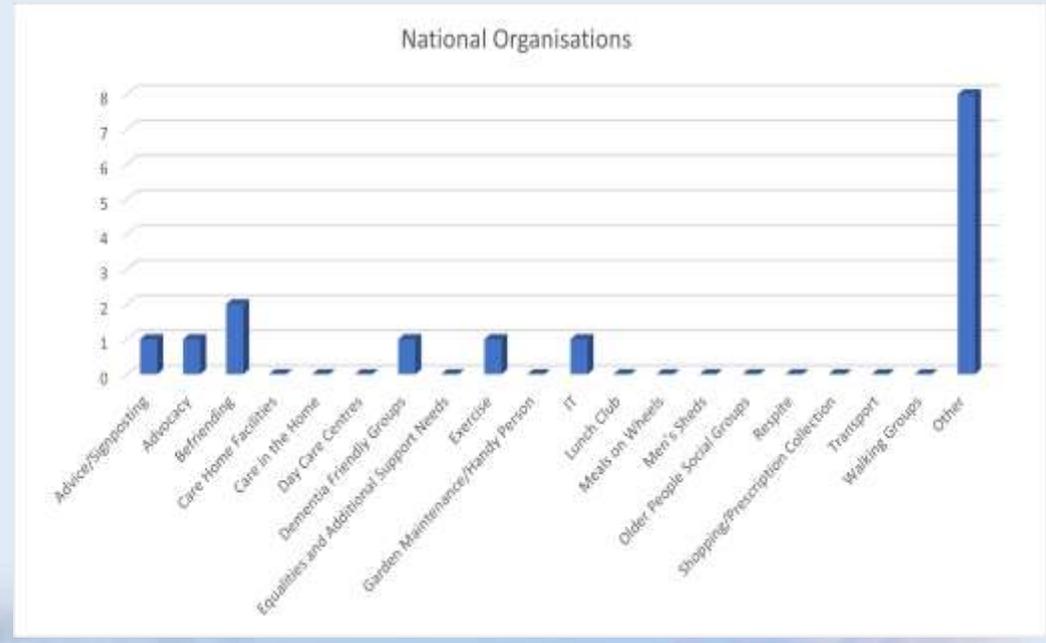
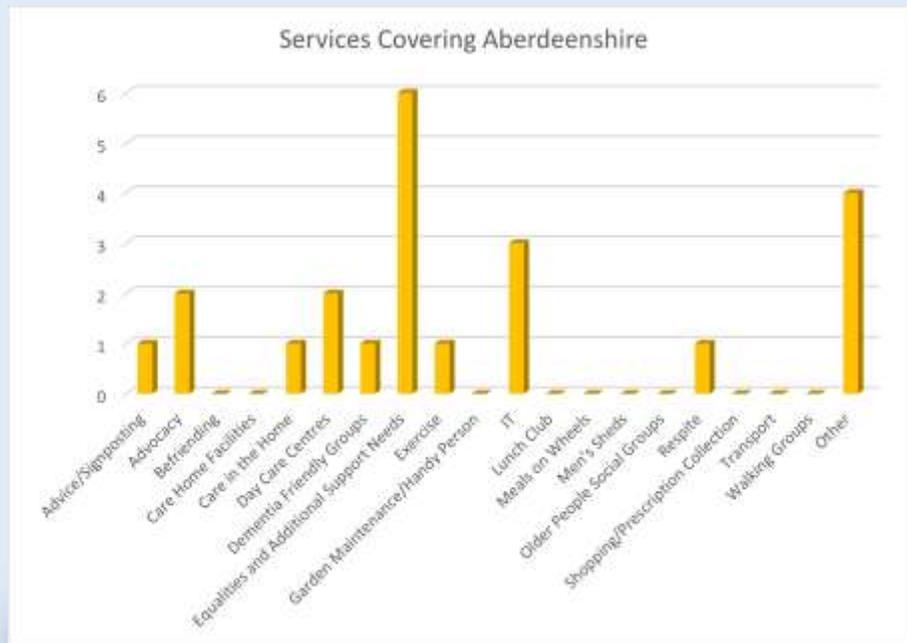


Fig.6

Fig.7



Conclusion and

The data captured for this landscaping exercise offers a snapshot of the support provided by community led organisations delivering older peoples services. Though not as comprehensive a picture as intended, largely due to the fluid nature of our circumstances surrounding the COVID19 crisis, this information can contribute to an informed foundation. A basis on which to start to build the detailed knowledge needed of the work of the Third Sector across Aberdeenshire and consider how this can be effectively integrated with the statutory services. The data does however highlight gaps in service provision and presents the opportunity to identify non-clinical service need which then could drive forward the potential to co-design, co-produce and co-deliver services which could further support the Hospital at Home model.

It is recognised that the Third Sector represents excellent value for money, and TSOs can often deliver added value services for the price of a basic public sector service, because of lower core running costs and flexible approaches.

However, often services are limited by budget availability not need, so could undoubtedly do more with potential macro cost savings by precluding need for expensive higher-level intervention.

There is also the trend moving towards older people integrating into other services that are not predominantly a service for older people. This is seen as a positive and progressive move towards inclusivity for many, but there is still the need for services and activities designed to meet the specific needs of an ageing population.

