Community Hubs: A partnership approach to creating community based services for older people in Gloucestershire

This case study for the Housing LIN (Learning and Improvement Partnership) provides an overview of the initial findings from the first year’s evaluation of the development of Community Hubs in Gloucestershire. It is based on a paper originally prepared for the Director of Public Health to demonstrate the outcomes being achieved for older residents in the county. In particular, it found that many older people withdraw or desist completely from attempting new activities. By providing a broad range of activities within a safe, comfortable environment, Community Hubs will engender an ethos of active ageing and positive outcomes in wellbeing will follow. With the growth of social prescribing on the horizon, the Community Hubs represent a very viable option for health professionals to refer/recommend into.

Prepared for the Housing Learning and Improvement Network by Jill Kearsley, Programme Director, and Lesley Gilmour, Therapy and Wellbeing Coordinator.
Background

There are 19 Community Hubs for Older People operating countywide in Gloucestershire. They are either purpose built within Extra Care Housing Schemes or are situated within traditional Sheltered Housing Schemes, Village Halls and Day Centres. A full list by town, place and organisation is provided in table below and a map at Appendix One.

The most established hub is seven years old and the newest hub was launched in October 2014. They offer drop-in daytime opportunities or half and offer whole day opportunities for people over 55 upwards or lower if the health and care need is applicable.

<table>
<thead>
<tr>
<th>Town</th>
<th>Hub</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>Tewkesbury</td>
<td>Marina Court</td>
<td>Hanover/GCC/CleeveLink</td>
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<td></td>
<td>Clee House</td>
<td>Housing and Care 21</td>
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<tr>
<td>Gloucester</td>
<td>Duke of Beaufort</td>
<td>Housing and Care 21</td>
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<td></td>
<td>Badger Vale</td>
<td>Gloucester City Homes</td>
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<td></td>
<td>Charter Court</td>
<td>Gloucester City Homes</td>
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<tr>
<td></td>
<td>Broom House</td>
<td>Gloucester City Homes</td>
</tr>
<tr>
<td></td>
<td>Oliver Close</td>
<td>Gloucester City Homes</td>
</tr>
<tr>
<td></td>
<td>Clapham Court</td>
<td>Gloucester City Homes</td>
</tr>
<tr>
<td>Cheltenham</td>
<td>Wallace House</td>
<td>Cheltenham Borough Homes</td>
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<tr>
<td>Stroud</td>
<td>Stroud Community Hub</td>
<td>Uplands Care Services</td>
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<tr>
<td></td>
<td>Chantry Centre</td>
<td>World Jungle</td>
</tr>
<tr>
<td>Forest of Dean/</td>
<td>Sheppard House</td>
<td>Newent Association for the Disabled</td>
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<td>Newent</td>
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<tr>
<td>Forest of Dean/</td>
<td>Foxes Bridge Community Hub</td>
<td>GCC, Crossroads, Forest Sensory Services</td>
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<td>Cinder ford</td>
<td></td>
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<tr>
<td>Cotswolds</td>
<td>Bourton on the Water</td>
<td>Bromford Housing</td>
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<td></td>
<td>Mulberry Court</td>
<td>Housing and Care 21</td>
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<td></td>
<td>Coobe House, Tetbury</td>
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<tr>
<td>Cotswold South</td>
<td>St Birinus Court, Lechlade</td>
<td>Bromford Housing</td>
</tr>
<tr>
<td>Cotswold North</td>
<td>Jameson Court, Moreton in Marsh</td>
<td>Bromford Housing</td>
</tr>
<tr>
<td>Lydney</td>
<td>Goode Court</td>
<td>Housing and Care 21</td>
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The Evaluation Design

The evaluation took place between 25 April and 22 July last year, during which time 288 evaluation forms were completed independently or with help from hub leaders or carers.

The Evaluation Design consisted of six subjective questions with before and after Likert Scale scores out of ten in order to measure how attendance at a hub could impact upon health and wellbeing.

1. How active were you before attending a Community Hub and how active are you now you attend?
2. How would you rate your level of social contact before and after attending a Community hub?
3. Please rate stimulating new things you were trying before and then after joining a Community Hub.
4. Please rate your ability to cope with activities of daily living (ADL) before and since joining a community hub?
5. Please rate your level of independence both before and after you started attending a community hub.
6. Thinking about your health and wellbeing, please rate your before and after level of health and wellbeing through joining a Community Hub.

An additional line for optional qualitative comments was provided.

The average percentage improvement across all six questions was 16.5%.
Countywide Results – individual question averages out of 10

<table>
<thead>
<tr>
<th>Question</th>
<th>Before</th>
<th>After</th>
</tr>
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<tbody>
<tr>
<td>How active were you .....</td>
<td>4.99</td>
<td>6.60</td>
</tr>
<tr>
<td>Your level of social contact .....</td>
<td>5.15</td>
<td>7.05</td>
</tr>
<tr>
<td>Stimulating new things .....</td>
<td>4.60</td>
<td>6.88</td>
</tr>
<tr>
<td>Ability to cope with ADL .....</td>
<td>5.50</td>
<td>6.81</td>
</tr>
<tr>
<td>Level of independence .....</td>
<td>6.01</td>
<td>7.17</td>
</tr>
<tr>
<td>Health &amp; wellbeing .....</td>
<td>5.53</td>
<td>7.03</td>
</tr>
</tbody>
</table>

The Improvements

**Question One** - How active were you before attending a hub and how active are you now you attend?

There was a **16.15%** improvement.
Qualitative feedback, specifically on exercise and physical activity, centred on the quality of delivery from excellent instructors and the improvements to physical health. Other outcomes that were mentioned related to increased confidence through attending exercise classes that enabled clients to participate and be active in other areas of life. In addition to the physical outcomes of exercise classes, ranging from increased range of movement, better flexibility and greater endurance, the social benefits were mentioned on many responses. It is also worth noting the comment from one participant who attended a Backward Chaining workshop, where participants are taught the therapeutic method of getting down to and up from the floor. Exercise classes within Community Hubs, particularly those on pathways following Falls Clinics are working actively to support the County’s Ageing Well policy to reduce falls and hip fractures in Gloucestershire’s Health and Wellbeing Strategy 2012-2032 “Fit for the Future”.

- “Physically a great help”
- “Classes have made my movement better”
- “I enjoy the class and getting to know more people”
- “I fell but was able to get myself up by remembering the lesson” – (Backward Chaining)
- “Made me a lot more confident to go out”
- “I feel great after class!”
- “I pulled a hamstring and it was difficult walking – it is now 100% improved after exercise directed to the problem”
- “After attending classes twice a week, my GP has been able to reduce my blood pressure medication”

The following exercise classes/physical activity initiatives have been added to Hub programmes. Depending on local supply of instructors, programmes will vary from one hub to another.

- Healthy Heart/ Cardiac Rehab Phase IV for Blood Pressure control
- Tai Chi Chi Kung and Traditional Tai Chi for Falls Prevention
- Zumba Gold – Latin style movement to music
- Line Dancing
- Croquet
- Seated Exercise for Strength, Balance and Postural Stability
- Active Balance – standing balance exercise for Falls Prevention
- Yoga and Relaxation
- Walking for Health
- Circles Dancing
- Armchair Badminton
- Indoor and Outdoor Games
- Yoga
- Pulmonary Rehabilitation
- Gardening/Grow your Own
- Electronic Games – Nintendo Wii

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Question Two – How would you rate your level of social contact before and after attending the hub?

There was a 19.5% improvement.

By no means an exhaustive list, but the following social activities have been trialled at Community Hubs:

- Coffee Mornings and Afternoon Teas
- Race Nights
- Excursions
- Lunch Clubs
- Card Games and Board Games
- Snooker, Pool, Indoor Bowls
- Discussion Groups and Quizzes

Although some hub attendees commented that they had large families and maintained interests outside the hub, many were very appreciative of the opportunity for social interaction, thus alleviating loneliness and isolation. Every type of activity including one-to-one and group afforded the prospect of social contact. It is obvious that the social contact is the catalyst for recruitment and participation in structured group activity. Social contact is also proving invaluable as part of the grieving process.

- “I enjoy the social activities since I am unable to join in any physical ones”
- “Social contact is a great help, either getting out and about alone or in a group”
- “It is the only two days I get out of the house to see people”
- “If I did not come here I would have no social contact apart from family”
- “I find it helpful – otherwise we sit at home for hours on end”
- “I like the sense of camaraderie”
- “Since I lost my wife, the hub has enabled me to talk to people again”
- “I find activity has taken the edge from extreme grief for my wife of sixty years, who sadly died earlier this year”
- “I’m glad to be here, I’ve made lots of friends and I enjoy having a laugh”
Question Three - Please rate stimulating new things you were trying before and then after joining a Community Hub.

There was a 22.9% improvement.

This question elicited the largest percentage improvement response. Of all six questions this represented the lowest perceived starting point (4.6/10). If the Community Hubs can introduce a broad range of stimulating new activities it follows that the social interaction will be the initial outcome measure and the physical, cognitive & sensory results will follow. When these outcomes are achieved we should start to see higher reported improvements in ADL, Independence & Health.

- “The activities are stimulating and enjoyable”
- “It has broadened my horizons and given me a broader interest in things”
- “Coming here has given me a lot of confidence to socialise and go out and try new activities”
- “The hub is stimulating in a safe environment”
- “it’s lovely to go out and get encouragement to join in activities”
**Question Four - Please rate your ability to cope with activities of daily living (ADL) before and since joining a Community Hub.**

There was a **13.15%** improvement.

Coping with activities of daily living and daily self-care tasks is key to maintaining independence.

The percentage improvement in this category is relatively low, but this particular evaluation did not establish or take into account the confounding factors of deteriorating health that is taking place simultaneously with the upper end of this age group. Those attending hubs from the community working preventatively had a higher starting point with activities of daily living and reported fewer changes as they had relatively fewer issues with ADL compared to clients residing at housing scheme hubs or attending day centre hubs.

One client cited large positive increases in activity, social contact and stimulating new things but rated his ADL, Independence and Health and Wellbeing as decreases, qualifying his results by adding “Deteriorating health problems mean I am now more dependent on people”.

Nevertheless, on a countywide level, the overall change in ability to cope with ADL was a positive one.

- "Automatic Doors and Thresholds easier now although windows are still difficult"
- "The hub has helped me to maintain my skills"
- "Without the hub my husband and I would be housebound. Also I’ve got my cooking confident owing to cooking at the centre"
- "Being with other visually impaired people I’ve picked up hints and tips from peer support"
- "My abilities are very limited due to my hearing and mobility but I always try my best and do things that I can"
**Question Five - Please rate your level of independence both before and after you started attending a Community Hub.**

There was an **11.57%** improvement.

To promote Independence, Health Promotion and Social Care surgeries have been added to Hub agendas:

- Hearing Aid Clinics, Visual Impairment Surgery
- Age UK surgeries, Village Agent Surgeries
- Telecare
- Voluntary Transport
- Access and Mobility Surgery
- Memory Cafe
- Safe at Home, Police Community Support Officers,
- Healthwatch
- Keep Warm, Keep Well

This question elicited the smallest margin of improvement (11.57%) of all the questions. This is due to the fact it had the highest of all starting position with an average of 6/10 countywide.

The surgeries work towards the KPI in Fit for the Future of reducing the number of excess winter deaths among people aged 75 and over by signposting them to services and organisations that promote awareness of these issues.

- “Since coming to the hub, I have tried to be very independent, and I like my own space to do what I want in my own time, although over the last five months my health has dictated how much independence I actually have”
- “I feel more independent to attend and interact socially”
- “The social activities are invaluable as one gets older and with exercise it makes it very practical as well as for coping with one’s independence”
Question Six - Thinking about your health and wellbeing, please rate your before and after level of health and wellbeing through joining a Community Hub.

There was a **15.06%** improvement.

In many cases it is not only the Hub attendee who stands to benefit but also their unpaid carers, tying in with the Gloucestershire Health and Wellbeing Strategy of helping to manage dementia and giving support to carers. “I have a day to myself knowing that he is in safe hands – Worth every penny!”

By working in partnership with the business sector, public sector and the voluntary sector the hubs are introducing activities to groups and individuals that focus simultaneously on prevention and rehabilitation thus helping people to live longer, healthier and more fulfilling lives in accordance with Healthy Lives, Healthy People.

Social Prescribing can connect people to activities in community hubs that will benefit them by offering non-medical sources of support. There is increasing evidence to support the use of social interventions for people experiencing a range of common mental health problems. The countywide network of Community Hubs is an infrastructure ready for social prescribing in the future.

- “I’m not very good, but I’d be a lot worse without this support”
- “It has made me a lot more confident in general”
- “The hub has done wonders for me”
- “Coming to the hub has improved my diet and health and I am eating well and healthily. Activities and support here make a big difference”
- “The hub and instructor have given me an enhanced outlook on life”
- “I look forward to Tuesdays – I feel great after the class!”
- “The hub is a well-attended facility with excellent tutors”
- “The hub has had a positive impact on my life. I feel much more confident now”
The Next Steps

◦ To Continue to give support to the existing Hubs
◦ To open more hubs countywide, working with new ExtraCare schemes
◦ To link with Social Prescribing Projects to offer a network of support for referrals
◦ To Maintain a Health and Wellbeing ethos within the hubs
◦ To perform a similar evaluation in 12 months time

Learning Points / Summary

• All activities are vehicles for social interaction.
• Activity and Social Interaction help with the grieving process
• The introduction of stimulating new activities is the catalyst for improvements in all areas of subjective wellbeing.
• In all measured areas qualitative feedback demonstrated increased confidence.

A recent study, Subjective wellbeing, health, and ageing (Steptoe, Deaton & Stone, 2014) published online in The Lancet has concluded that wellbeing may have a protective role in health maintenance and quality of life. It recommends that Health-care systems should be concerned not only with illness and disability, but also with supporting methods to improve positive psychological states. This study endorses the work of Gloucestershire County Council’s initiative to establish a network of Community Hubs fulfilling a preventative agenda improving wellbeing.
Appendix One
About the authors

Jill Kearsley is a strong advocate of joint working and over the years has developed a solid expertise in commissioning services across Social Care, Health and Housing, breaking down boundaries across agencies. Jill was Programme Director of the first ExtraCare Housing Scheme in Gloucestershire and is leading on the Community Hub project, supporting organisations with the transformation process.

Lesley Gilmour, BSc Hons Exercise and Health, established the first Gloucestershire Community Hub within an ExtraCare Housing Scheme in Tewkesbury. A holistic approach to health and wellbeing has always been the central tenet of service provision. Lesley continues to work with Jill Kearsley countywide, supporting a network of emerging new hubs, assisting hub leaders with the transformation process and pushing creative boundaries to facilitate new ideas and exciting initiatives within community hubs.

Note

The views expressed in this paper are those of the authors and not necessarily those of the Housing Learning and Improvement Network.

About the Housing LIN

Previously responsible for managing the Department of Health’s Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading ‘learning lab’ for a growing network of housing, health and social care professionals in England and Wales involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

Further information about the Housing LIN’s comprehensive list of online resources and details on how to participate in our shared learning and service improvement networking opportunities, can be found at: www.housinglin.org.uk

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