



## Winter Wellbeing 2016/2017

### Evaluation Report

April 2017

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## 1.0 EXECUTIVE SUMMARY

North London Cares' 2016/17 Winter Wellbeing project, the sixth that we have delivered consecutively, has been the **most targeted** and **integrated** to date. Supported by Camden and Islington Public Health, London Catalyst, The Big Give, The Funding Network and Octopus Giving, the purpose of the project is to help neighbours over the age of 65 to stay **warm, active, and healthy and connected** during the most isolating time of the year.

This year, from November 2016 to March 2017, North London Cares' community outreach coordinators and young professional volunteers knocked on **1,732 doors, speaking face-to-face with 1,042 older neighbours**. In total **324 people received further help** – or “interventions” – as a result of those initial interactions. The project allowed us to identify some of the most isolated older neighbours in our home boroughs including people who might otherwise fall through gaps in the provision of mainstream or statutory services, as well as to provide **reassurance** and **build community** at an otherwise difficult time.

In Camden we targeted older people in **social housing** and also in **private rented housing** who may not be accessing or even eligible for council services but who may nevertheless be isolated. Previous Winter Wellbeing projects had focused solely on older people in social housing, so we wanted to spread the value of our work beyond that demographic this year. In Islington we focused on speaking to our oldest neighbours – those over 80, who are shown to be the most at risk of winter morbidity and mortality<sup>1</sup> – in council owned properties. We also worked intensively through existing **community networks** to expand our reach, promoting activities in GP surgeries, chemists and local businesses that often encounter older people at risk of isolation. This targeting ensured this year's Winter Wellbeing programme was **the most efficient we have completed, with 31% of people we spoke to receiving a deeper intervention**. Importantly, around a third of people who received an intervention in fact received **multiple interventions**.

The headline numbers highlight the importance of sustained investment in this programme to allow year-on-year improvements to the work. Although this year our overall project budget was smaller, our long term planning, targeted approach, and prioritisation allowed us to achieve greater impact and greater value for money than ever (see p.26). In that sense, we

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<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/excesswintermortalityinenglandandwales/2015to2016provisionaland2014to2015final>

believe the Winter Wellbeing project this year was close to its optimum scale, investment level and manageability.

That said, in each of the last six years designing and delivering this project, North London Cares has learned something new – and there remains room for improvement. As noted in previous evaluation reports, bringing forward the commissioning is the single most important factor that could help improve the work. This would allow North London Cares to deliver a **pro-active** as well as a reactive project, helping neighbours to connect to local services and activities ahead of the cold snap in January and February, enabling more timely conversations about flu jabs, and allowing more creative outreach and tighter management across the whole of the project.

This more preventative approach will be vital in the context of increasing winter pressures on health and social services, which have again been under strain in 2016/17, the **rapidly growing population of older people** in Camden and Islington, the increased likelihood of more unpredictable weather patterns, and further imminent reductions in local authority budgets across departments.



## 2.0 INTRODUCTION

Since 2011 North London Cares has worked with local authorities and other community partners on our Winter Wellbeing project. The aim of the work has always been – and remains – to ensure that older people in Camden and Islington can stay **warm, active, healthy and connected** during the potentially isolating winter months, when days are short, the cold weather can make people fearful of going out and morbidity and mortality dramatically increase.

The Winter Wellbeing project, designed and honed year-on-year by North London Cares, aims to complement and deepen the work of statutory services by offering a **proactive community outreach dimension**. From a strategic public health perspective there are two ambitions. The first objective is **pro-actively to make contact** with older neighbours who may be **housebound or isolated**, to ensure that people who may otherwise be unforthcoming in accessing public services do not fall through the gaps in statutory provision. The second objective is to take a **preventative approach**, identifying concerns early on so that they do not become **emergency cases**.

In addition, there is a third community element: to identify older people at risk of isolation who may wish to be part of local activities to help them strengthen their social networks, feel less lonely, more active and ultimately to be better connected to the rapidly changing world around them throughout the rest of the year.

The core of the Winter Wellbeing project is therefore based around door knocking at the homes of people over the age of 65 in Camden and Islington, to provide accessible, relatable, informal interactions and interventions to at-risk neighbours through a combination of **conversations, friendships, provisions and referrals** to health and social services, as well as community activities including those provided by North London Cares directly – in particular our regular Social Clubs and one-to-one Love Your Neighbour friendships. This year we also expanded our community outreach dimension, with a particular focus on connecting with **community pharmacies**.

This report outlines the purpose, methods, process and impact of that ambitious work, setting out the aims, results and various evaluations we have made in order to make the project even **more relevant** in future.

### 3.0 CONTEXT

Centrally located within the capital and with an already diverse culture and demographics, Camden and Islington are rapidly changing boroughs – transforming under the trends of **globalisation, digitisation, migration, gentrification and the housing bubble** that have reshaped so much of the city and its population in recent years.

This social mix gives both boroughs an enormous amount of vibrancy and dynamism. But it also means that **social challenges** and **public health inequalities** are at times magnified in ways they may not be elsewhere.

This is particularly true among many of the older people North London Cares works with. Many of the neighbours we meet through the Winter Wellbeing project and our other core activities feel **isolated from, or left behind by, the world and services around them**, which they often believe are changing too fast and are beyond their control and understanding.

Meanwhile, changes in the environment have led to people feeling anxious about **unpredictable weather**<sup>2</sup>, and particularly about the isolating potential of very **cold, dark winters**. 2012/13 brought at least five bitterly cold snaps and repeated heavy snow right up until April. Such deep winters create specific health risks and greatly increases **morbidity and mortality, with older people at particular risk**. Socialising and visiting relatives becomes harder, negatively affecting people's wellbeing and **adding to mental and physical health challenges longer term**. In 2013/14 excess winter deaths were at their highest rate since 1999.<sup>3</sup>

The majority of excess winter deaths occur in people aged over 75 years, as well as people with respiratory diseases, circulatory diseases, dementia and Alzheimer's<sup>4</sup> – all conditions prevalent amongst older people. 70% of people in Camden and Islington aged 65 and over are diagnosed with one or more long-term condition, and 61% are diagnosed with multiple long-term conditions<sup>5</sup>. This makes them more **susceptible to the effects of cold**. This

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<sup>2</sup> <https://northlondoncares.org.uk/blog/community-resilience-project-the-full-report>

<sup>3</sup> <http://www.bbc.co.uk/news/health-34919149>

<sup>4</sup> <http://strategicsociety.org.uk/wp-content/uploads/2013/03/Cold-Enough-Excess-Winter-Deaths-Winter-Fuel-Payments-and-the-UKs-problem-with-the-cold.pdf>

<sup>5</sup> <http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000044/pat/6/ati/102/page/0/par/E12000007/are/E09000007>

challenge is growing in our two boroughs, as the proportion of people aged over 65 years is increasing – by 20% in Islington and 16% in Camden over the next 10 years.<sup>6</sup>

As these health, environmental, community and demographics shifts occur, the NHS and social care are being placed under severe pressure<sup>7</sup> – with record numbers of people and waiting times in A&E, ‘dangerously high’ levels of bed occupancy and GPs increasingly asking people to ‘stay away’.

The Winter Wellbeing project has therefore been designed and delivered to ensure that the **community infrastructure** is in place to support a growing number of potentially vulnerable older neighbours to keep warm and well within their own homes – and in an attempt to make services more streamlined and relatable to people’s needs.

This is a task North London Cares performs throughout the year. Our model is shown<sup>8</sup> to reduce loneliness amongst 73% of older neighbours we work with, to help 86% feel better connected to the world around them, to keep people active, and to improve people’s happiness and sense that they have more people to rely in times of need<sup>9</sup>. Moreover, it is targeted to those most at risk of isolation – including people who live alone and people in social housing<sup>10</sup>.

It is specifically targeted at tackling the social challenges of loneliness, isolation and disconnection – which in turn become health issues – at the root: in the communities in which they occur. And it is intended to bring older people together with the younger neighbours so that everyone can feel part of our rapidly changing city, rather than left behind by it.

Winter Wellbeing is a key part of this vision. It softens the effects of problems presented during the harshest part of the year and seeks to ensure that local older people **do not develop new health problems** from isolating weather and seasonal conditions.

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<sup>6</sup> Taken from ‘The Mayor and Burgesses of the London Borough of Islington and North London Cares Agreement for the Provision of a Winter Wellbeing Programme’, 22 December 2015.

<sup>7</sup> <http://www.bbc.co.uk/news/health-38570960>

<sup>8</sup> <https://northlondoncares.org.uk/blog/the-difference-you-make-nlcs-impact-evaluation-2011-2014>

<sup>9</sup> <https://northlondoncares.org.uk/blog/our-impact-on-wellbeing-happiness-and-having-more-people-around>

<sup>10</sup> <https://northlondoncares.org.uk/blog/annual-report-2015-16>

## 4.0 OBJECTIVES

This year, Winter Wellbeing took on a more community-led feel than ever, with contributions from Camden and Islington Public Health, The Big Give, London Catalyst, Octopus Giving and scores of individual small donors. Beginning in late November 2016, the project was smaller than last year's but the **key objectives** remained largely the same:

- To enable **older** neighbours to remain **safe and warm** within their own homes through **preventative** activities targeting exposure to excess cold and fuel poverty;
- To **improve the access** for older neighbours to health and housing services, grants and benefits that they are eligible for through **information and direct referral** into these services;
- To ensure older neighbours that are socially isolated are **identified and linked into community activities** such as social networks, local groups and other community activities.

In order to fulfill these objectives, North London Cares pledged to:

- Target older neighbours living in both **social housing and private rented housing** in the most socially deprived wards of Camden;
- Target older neighbours in **social housing**, particularly those in the **most deprived wards** and those **over the age of 80**, in Islington;
- Deploy a pro-active **door knocking** and **community outreach** campaign;
- Distribute **resources and leaflets** outlining existing health, housing and social care services in order to:
  - Promote discussions about maintaining good winter health, including through:
    - Flu vaccinations;
    - Heating checks and home insulation;
    - Ensuring sufficient food is in place;
    - Making connections to local handyman services;

- Work closely with the WISH+ and SHINE teams (the councils' own seasonal health service portals) in Camden and Islington to **address wider issues** potentially impacting on individuals' health;
- Link people socially isolated or at risk of social isolation into **community based social activities** (provided by North London Cares and other partners);
- Provide emergency warmth such as **clothing and blankets** to people identified as being **most in need**;
- Provide **emergency small grants** to neighbours with urgent financial issues related to the winter – including people with pre-existing medical conditions exacerbated by cold weather, people on state pensions only, those whose circumstances had rapidly changed during the winter, and people with very high fuel bills.

## 5.0 DELIVERY

The Winter Wellbeing project is made up of a number of interactions and interventions, which together comprise the **pro-active outreach approach** that North London Cares has built over six years to identify isolation and connect older neighbours to the community. Specifically, those 'interactions' occur through door knocking, community outreach, local network engagement, business engagement, speaking at community events, targeted letters, media coverage and follow-up calls. 'Interventions' include referrals to health and social services, seasonal provisions, benefits and energy advice and housing teams – and to opportunities to build social networks including through North London Cares' own activities and those of our local partners across Camden and Islington. This section summarises each area of that outreach effort; the next section summarises specific numbers of 'interactions' and 'interventions'.

### **5.1 Door knocking**

This year North London Cares set out to knock on 750 doors in Camden and 750 in Islington. In Islington we targeted the **oldest neighbours (over 80)** who lived alone in council housing in the **most deprived areas** – specifically Archway/Holloway, Caledonian Road, King's Cross/Farringdon and Clerkenwell. In Camden we targeted neighbours in the social housing and the **private rented sector** in the most deprived areas including Kilburn/Abbey Road, Queen's Crescent/Kentish Town, Regent's Park/Primrose Hill and Bloomsbury. Lists of older

neighbours to approach were secured from Camden and Islington Councils' Housing team, and shared with North London Cares by encrypted data transfer.

Each of those 1,500 neighbours received a letter co-sent on behalf of North London Cares and Camden or Islington Councils in advance of our visit, in order to introduce the project and its aims. As a result of these letters we received scores of phone calls. Many people asked for specific help, others simply thanked us and said they didn't require any assistance at that particular time. Regardless, the letter helped **legitimise the project** and **reassured neighbours** who might otherwise have been sceptical about a knock on the door from a stranger. Indeed, a significant number of neighbours remembered receiving the letter when we met them, softening the ground for more productive conversations.

Whether we managed to speak to neighbours on the doorstep or not, all neighbours (access permitting) received a North London Cares **Winter Wellbeing leaflet** – increased in size since last year from A5 to A4 – with a contact telephone number and information about the interactions and interventions available, as well as a reminder to get flu jabs.

For neighbours we were able to contact or who later contacted North London Cares in need of specific assistance we offered a range of interventions, including:



- Delivery of **blankets, hats, and socks** when people were struggling with the cold;
- Provision of **small grants of up to £100** for people suffering from fuel poverty and rapidly changing circumstances related to the winter which might deepen isolation and/or anxiety;
- Signposting to North London Cares' **Social Clubs** and **Love Your Neighbour** programmes, and introductions to the core North London Cares team running those projects where appropriate;
- **Referrals** to WISH+ (Camden) and SHINE (Islington) for people in need of:
  - Urgent repair of **broken boilers** and resolution of other heating issues;
  - A visit from an **'energy doctor'** to help insulate or warm their homes;

- **Financial advice** on cold weather payments or other welfare benefits;
  - Other domestic support – for example home repair work;
- Other referrals to council or other agencies, where necessary, aiming to address more serious issues such as **complex mental health problems**, physical health and **occupational therapy needs**, and social care requirements.

### **5.2 Community outreach**

There was a greater emphasis on community outreach this year in order to diversify the ways we reached people. We prioritised pharmacy outreach as **community pharmacies** already have a trusted relationship with many older neighbours and they are spaces where people largely feel comfortable in talking about their health and wellbeing. We worked with several pharmacies, setting up stalls on-site to talk to people about staying warm and well.



### **5.3 Local network engagement**

In order to increase the layering of the message and tap into the power of existing networks we promoted the Winter Wellbeing messages through community groups and charities including Healthwatch Islington, The Friendship Network, Voluntary Action Camden, Food Cycle, Age UK Camden, Camden Food Bank, Camden Federation of Private Tenants and Haverstock School (which has a network of older people as well as young families with older parents or grandparents).

#### **5.4 Business engagement**

As in previous years we sought to work with **local businesses**, particularly **on and around estates** where we focused our door knocking, by distributing flyers for display on counters and in shop windows and briefing staff to signpost neighbours towards our programmes.

Specifically, we targeted small businesses that tend to be visited by more isolated older people: betting shops, chemists, cafes, pubs and laundrettes. Libraries across Camden and Islington also promoted the project by distributing North London Cares' Winter Wellbeing flyers to their memberships.

However, based on previous years' experience and recommendations, which demonstrated comparatively low returns from engagement with local business, this area of work was secondary to face-to-face engagement and other outreach methods.

#### **5.5 Community events**

This year we spoke to 168 neighbours at community events in day centres and community centres. Our older neighbours were also introduced to the Winter Wellbeing project at North London Cares Social Clubs across Camden and Islington. This also helped layer the message and gained us advocates for the project in additional communities.



A North London Cares Social Club in Islington in December 2016

## 5.6 Targeted letters

Targeted letters were sent to 500 extra neighbours over 65 in each borough who were not due to receive a visit. Letters outlined the purpose of the project and the interventions available. People who wanted more information were asked to call or email North London Cares.

## 5.7 Media

We worked with four local newspapers – the Camden New Journal, Kentishtowner, Islington Tribune, and the Ham & High – to promote this year’s project. These titles are **read by local people** including older neighbours and helped to improve the visibility and recognition of the project. The project also featured in the December/January issue of Camden Magazine, which is distributed to every home in the



### 9. Befriend an elderly person

Spend time you'd otherwise waste on Netflix volunteering at **North London Cares**, a charity that runs a Love Your Neighbour scheme, connecting young professionals with elderly neighbours who might need help or just a chat over a cuppa. (There's also one for south London).

## North London Cares reaching out to older people

Winter can be the most isolating time of year, especially for older people. North London Cares will again be running an outreach project to help older neighbours stay warm, active and healthy. Supported by us, their Winter Wellbeing programme will aim to hold warming conversations with around 1,500 older people throughout the borough. They will reach people through door knocking, letters and phone calls, social clubs, stalls at supermarkets and food banks, work in chemists and GP surgeries, and by distributing blankets, coats, scarves and socks to those most in need. Visit the website below to get involved.

Find out more

 [northlondoncares.org.uk](http://northlondoncares.org.uk)

borough. During the winter period this year North London Cares also featured in The Guardian, BBC Radio 5, Time Out, BBC News Website, Huffington Post, and in a speech on social integration by the Mayor of London.

## 5.8 Follow-up calls

All referrals to local authorities were submitted through the **SHINE/WISH+** portals on the same day that the first interaction occurred. Warm clothes, blankets and small grants were delivered in as timely way as possible – and always between one day and one week after the initial interaction. We checked in with everyone who received a deeper intervention within four weeks of meeting them, normally over the telephone. We also conducted a small number of satisfaction surveys with a randomised selection of neighbours (see p.23).

## 5.9 Activity timeline

Winter Wellbeing aims to help people stay warm and well during the coldest and most isolating time of the year – the winter. The work was commissioned on the last day of November, and geared up in the second week of December. Its most active outreach period has always been in January and February, when the isolating effects of the season are at their deepest, and snow can be expected. The project was completed in mid-March, and evaluated at the end of that month.

	December	January	February	March
Targeted letter				
Business engagement				
Mapping data/routes				
Door knocking				
Community events				
Follow-up calls				
Evaluation & Report				

## 6.0 PROJECT SUMMARY

### 6.1 The project in numbers

This year, Winter Wellbeing was **better targeted than ever**, with more “deeper interventions” per interaction – and per pound of council investment – than in previous years. **Specifically:**

- **1,732 doors** were knocked – 882 in Camden, 850 in Islington;
- **Over 3,000** leaflets containing cold weather and health information were posted or handed directly to older neighbours through community outreach events, door knocking and through our existing community networks;
- **1,042 interactions** were shared between older people and our young professionals, with conversations about the cold weather and isolation occurring in each;
- **324 people** received specific further help (158 in Camden, 166 in Islington); 426 interventions were made in total (209 in Camden, 217 in Islington);

- **30 small grants of up to £100** were distributed – 15 in Camden and 15 in Islington, totalling **£2,100** (£1,020 in Camden, £1,080 in Islington);
- **60 blankets** were delivered to older neighbours – 36 in Camden, 24 in Islington;
- **31 people** were given **warm clothes including** hats and socks, 22 in Camden, 9 in Islington;
- **102 people** were referred to the councils for further services including housing and benefits advice, social care guidance and energy advice through WISH+ and SHINE – 41 in Camden, 61 in Islington;
- **168** were spoken with **at local events** and community outreach – 101 in Camden, 67 in Islington;

## 6.2 Breakdown by borough, gender, age, intervention type

**Table 1** (below) shows that we knocked at more doors in Camden (largely as a result of more sheltered housing outreach) but created very similar numbers of deeper interventions for older neighbours in each borough and in fact marginally more in Islington.

**Table 1: Borough by borough breakdown**

	<b>Camden</b>	<b>Islington</b>	<b>TOTAL</b>
<b>Doors knocked</b>	882	850	1,732
<b>Neighbours receiving an intervention</b>	158	166	324
<b>Total number of interventions</b>	209	217	426
<b>Percentage of doors knocked resulting in interventions for individual neighbours</b>	18%	20%	Average: 19%

**Table 2** (below) shows that most of the deeper interventions came as a result of face-to-face interactions on the doorstep. Indeed, over half of all the interventions that we made came as a result of door knocking. This clearly shows the centrality of door knocking to the project – and the value of face-to-face interactions over any other form of communication. People like to be spoken with one-to-one – and asked how they’re getting on – and this is one of the unique value-adding aspects of the Winter Wellbeing projects.

Fewer neighbours received a deeper intervention as a result of calling us after receiving a letter or leaflet, although this method of reaching out did allow some people in the most difficult circumstances to contact us at the beginning of the project – rather than waiting for a knock on the door.

Whilst the number of interventions made as a result of older neighbours or their relatives seeing flyers in the community or encountering community outreach events or stalls was lower than by other methods, we know anecdotally that those techniques did help to make the project more visible. People commented on having seen our posters in local shops and at local services.

**Table 2: Source of neighbours’ deeper interventions**

	<b>Camden</b>	<b>Islington</b>	<b>Total</b>
<b>Door knocking</b>	73 (46%)	73 (44%)	<b>146 (45%)</b>
<b>Call</b>	33 (21%)	17 (10%)	<b>50 (15%)</b>
<b>Letter</b>	22 (14%)	35 (21%)	<b>57 (18%)</b>
<b>Event/Stall</b>	12 (7%)	8 (5%)	<b>20 (6%)</b>
<b>Word of Mouth</b>	6 (4%)	3 (2%)	<b>9 (3%)</b>
<b>Flyer</b>	5 (3%)	7 (4%)	<b>12 (4%)</b>
<b>Social Club</b>	0 (0%)	2 (1%)	<b>2 (1%)</b>
<b>Referral</b>	4 (3%)	4 (3%)	<b>8 (2%)</b>
<b>Other</b>	3 (2%)	17 (10%)	<b>20 (6%)</b>
<b>Total</b>	<b>158</b>	<b>166</b>	<b>324</b>

**Table 3: Types of interventions**

	<b>Camden</b>	<b>Islington</b>	<b>Total</b>
Help with benefits	9 (4%)	7 (3%)	16 (4%)
Broken boiler	1 (0%)	3 (1%)	4 (1%)
Warm clothes	22 (11%)	9 (4%)	31 (7%)
Housing/home issue	10 (5%)	23 (11%)	33 (8%)
Energy doctor	23 (11%)	38 (18%)	61 (14%)
Blanket	36 (17%)	24 (11%)	60 (14%)
Small grant	15 (7%)	15 (7%)	30 (7%)
Other	6 (3%)	6 (3%)	12 (3%)
Love Your Neighbour	27 (13%)	24 (11%)	51 (12%)
Social Clubs	60 (29%)	68 (31%)	128 (30%)
<b>TOTAL</b>	<b>209</b>	<b>217</b>	<b>426</b>

**Table 3** (above) contains a breakdown of the types of intervention we made in each borough. The numbers suggest little difference across the boroughs apart from around housing: more than twice as many issues were highlighted in Islington as in Camden, possibly as a result of targeting exclusively social housing in Islington and because neighbours felt that the council were accountable in a way that private landlords are not. Another difference between the boroughs was that neighbours in Camden requested more blankets and warm clothes than in Islington. This may also reflect a perception that those in private housing (whom we knocked in Camden but not in Islington) need to ‘make do’, while those in social homes could be referred to the council for a longer-term solution.

From our analysis we also know **that 64%** of neighbours receiving a deeper intervention were **women, 36% were men** (in Camden, 63% were women and 37% were men; in Islington 65% were women, 35% were men). There was more of a discrepancy across the boroughs when it came to the age ranges of neighbours who received a deeper intervention – with more than twice as many ‘older old’ receiving support in Islington. This may also be because of the profile of people living in social, rather than private housing.

**Table 4: Age ranges of neighbours receiving a deeper intervention**

	<b>Camden</b>	<b>Islington</b>	<b>Total</b>
60-65	1 (3%)	3 (4%)	4 (4%)
65-70	13 (41%)	4 (6%)	17 (17%)
70-75	3 (9%)	6 (9%)	9 (9%)
75-80	6 (19%)	11 (16%)	17 (17%)
80+	9 (28%)	43 (64%)	52 (53%)

NB: This is a sample as we do not know the ages of all neighbours receiving interventions.

### 6.3 Analysis

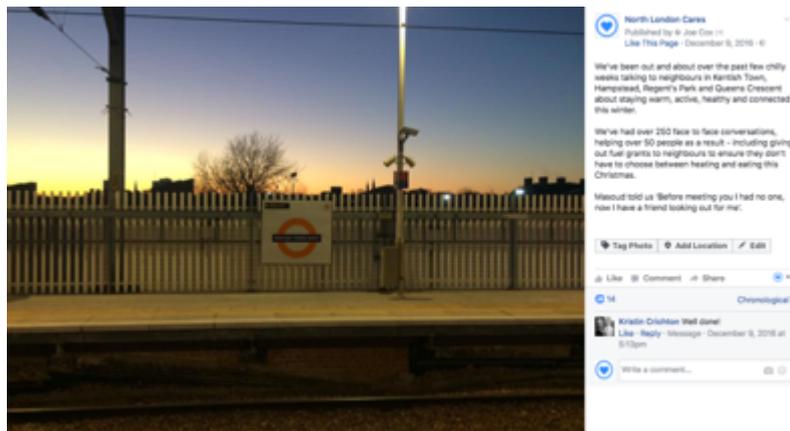
During the course of Winter Wellbeing 2016/17 we had several reflections about the effectiveness and importance of the project. Specifically, our experience tells us:

- The reaction to our visits and phone calls was **overwhelmingly positive**. The pre-visit letters and a mention that we were working in collaboration with Camden and Islington Councils, as well as the **people skills** of our outreach officers and our community as well as health messages, helped us to gain trust on the doorstep quickly.
- The most common response on the doorstep was that neighbours didn't need any specific practical help but that they were **grateful for the conversation** and felt **reassured** that they had a **number to call** and a recognisable community group to lean on in case of future difficulties.
- The messaging of “warm, active, healthy and connected” was **clear and understandable**. It was initially easier to talk about the most tangible requirements such as **warmth and health**; this often allowed us to bridge into sometimes more challenging conversations about **loneliness and isolation – and how to overcome those experiences through local social interactions**.
- Door knocking is still the most effective way to reach out to and talk with older neighbours. 45% of all people receiving deeper interventions were first encountered through this method. Initially fearful or sceptical neighbours can be helped to feel quickly at ease by an empathetic **face-to-face interaction**. Our experience tells us that high quality face-to-face interactions also have a more lasting effect in building **community cohesion** and lessening isolation than phone calls and letters alone, which although useful as an initial contact can feel less personal without the face-to-face follow-up.
- Anecdotally **we felt that people in private rented housing (who we spoke to in Camden) were less likely to ask for ‘practical help’ around housing** as they felt their landlord was another layer of bureaucracy they would have to negotiate. They were, however, very appreciative of the fact that they had been approached despite

renting their own homes privately.

- In Islington, where we targeted the oldest neighbours, many were **unable to answer or apprehensive about people coming to their doors**. This suggests that as many types of outreach methods as possible are needed to reach our oldest neighbours.
- Door knocking fewer neighbours than last year but over the same area means that neighbours are **less concentrated geographically**. **This meant fewer doors could be knocked per outreach coordinator per day than in previous years – adding a small but new inefficiency**.
- Our experience conducting outreach with older men, including through our work as the lead partner on Ageing Better in Camden Men's Action project, suggests that door knocking is the most **effective way to talk to and connect with older men** (who may be particularly at risk of isolation and who are often less connected to community and charitable organisations).
- The letters and door knocking, as well as community outreach, meant isolated neighbours were less likely to fall through potential gaps in statutory provision. The pre-visit letter meant that **those in urgent need phoned** a named individual at North London Cares – rather than perceived bureaucracies in the councils – immediately.
- Every neighbour we spoke to was reminded about the importance of flu jabs. Almost everyone was aware that the **flu jab was freely available**. A few neighbours said that they were **glad of a reminder** and that they would have the flu jab as a result of our conversation. The vast majority of neighbours had either had their flu jabs already or felt strongly against having one for a variety of passionately held views – perceived ineffectiveness and previous negative reactions were the most commonly cited.
- The infrastructure of the project as a whole was **professionalised**, including through secure data and records management. This is just one benefit of year-on-year funding and can be further improved in future.

- A minority of those we spoke to on the doorstep were **unable to converse in English**. Quite often family members were able to help, but the diversity of our boroughs can make it difficult to plan for all the necessary translations that may be required. In previous years we have produced flyers in Bengali and Somali – but realistically these were of minimal value because there are various regional dialects and myriad other languages spoken too.



## 6.4 Case studies

Happily, the majority of older neighbours we spoke to did not feel they needed a deeper intervention but felt reassured that a friendly face, a relatable “neighbour” could be contacted in case they needed anything in the future. Countless times we were told that this was the

*“I know I can count on you.  
Having somebody else I know  
makes me feel better.”*

***Nicea, Caledonian Road***

first time that anyone from the community had knocked on the door just to check how people were getting on, and that this helped neighbours to **feel better about the future and that ‘someone cares’**.

We met neighbours who needed **practical help urgently** but had slipped through the cracks and were finding it difficult to secure the help they needed. Rishita<sup>11</sup> from Holloway was suffering with multiple serious health problems which were being exacerbated by the fact that her heating had not worked for weeks. We began advocating on her behalf and a problem which had taken weeks to be solved was quickly rectified due to our partnership with SHINE.

<sup>11</sup> Name changed.

We also met several neighbours who were suffering with mental health problems and who needed urgent support. As a result of our interactions we were able to notify health professionals who were able to intervene.



*“I think it’s really important as you are bringing neighbours together. You are doing a fantastic job.”*

**Raynaldo, Holloway**

Through the project we met neighbours who had become isolated suddenly through dramatic changes in their circumstances. The real strength of this project, **the mixing of the practical and social**, can be seen through one of these stories – Anthony’s<sup>12</sup>.

Having received the introductory letter from the Winter Wellbeing partnership, Anthony initially called North London Cares about a housing issue and wanted to discuss his situation face-to-face.

We helped him with a small grant, which he used to buy a heater as he was cold in his home. This acted as a bridge to discuss additional social issues. Anthony revealed that he’d had a tough time recently as a result of family break-up and that he craved more social interaction.

**He has already started coming to North London Cares Social Clubs and we are in the process of finding him a young professional friend through our Love Your Neighbour programme.**

Many neighbours we met initially to speak about one issue, having had that issue resolved, phoned us at a later date about a different challenge. For instance, we spoke to Hetty in Caledonian Road initially about a housing issue and delivered her a blanket.

*“What a blessing that you found me among private tenants!”*

**Sabine, Kilburn**

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<sup>12</sup> Name changed.

After a couple of weeks Hetty gave us a call and said that she would like help with benefits advice. We then made another referral to the council to ensure she received the advice she needed.

This highlights the importance of the **person centred approach** we take. By making a connection with neighbours and letting them know they can call us – and trust us – at any time we can forge an ongoing reassuring relationship in a way other agencies may sometimes struggle to.

We also met scores of older neighbours who had gradually become isolated, many of whom expressed an interest in joining our Social Clubs – group activities for older and younger neighbours to **share time, laughter, friendship and new experiences together.**

All of these interactions and chances to build new relationships help to combat isolation and loneliness in the longer term, not just during the winter. The legacy for this investment therefore far outstrips immediate impact.

The importance of being out in the community was highlighted many times including through chance encounters with older neighbours.

We met Peter when knocking on his neighbour's door.

We got chatting and discovered that Peter was cold in his home, and couldn't afford to keep the heating on at night. **We subsequently helped him with a small grant which he put towards new curtains to keep his flat warmer.**

**Now Peter knows that there's a community organisation at the end of a phone line when he's in similar difficulty, or when he's looking for a friend or something new to do in the local areas.**



*"It makes me optimistic about the future."*

**Sandra, Kentish Town**

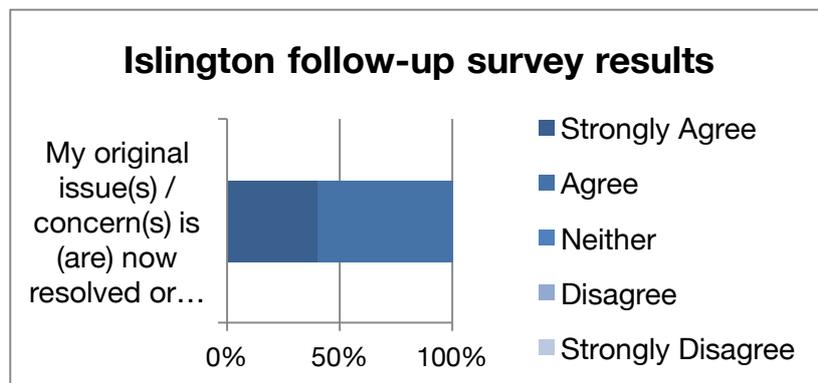
## 7.0 EVALUATION

### 7.1 Survey Results

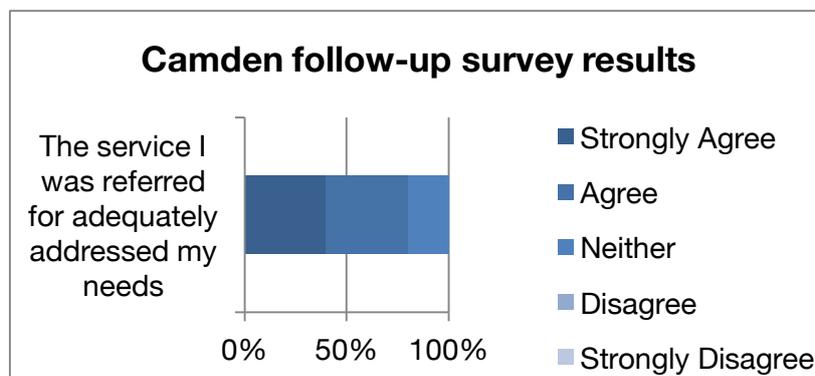
As well as checking in with all neighbours who received an intervention within two weeks, we also took a snapshot of the views of neighbours who received an intervention at the end of the project by surveying five neighbours in each borough, selected at random. While it would be a mistake to read too much into such a tiny sample the intention was to give an overall guide – and the results were encouraging:

- All the neighbours we spoke to in Islington felt that their original issues or concerns were resolved or improved as a result of our intervention;
- Four out of five of the neighbours we spoke to in Camden felt that their original issues or concerns were resolved or improved. In the instance of the neighbour that felt the original situation was unchanged, this was because of a dispute about benefit eligibility which was ongoing.

**Graph 2: Islington follow-up survey results**



**Graph 3: Camden follow-up survey results**



Again those who received a deeper intervention saw the value of the project:

- *9 out of the 10 people we spoke to said that the project made them feel better connected to the community;*
- *7 out of the 10 people we spoke to said that their health and wellbeing had improved as a result of our intervention and interactions;*
- *2 out of the 10 people we spoke to said their housing issues had improved;*
- *2 out of the 10 people we spoke to said their financial situation had improved.*

*“The cheque helped me keep the heating on at the right time.”*

**Waddah, Kilburn**

Even people we spoke to who hadn't directly felt a big change in their practical circumstances felt very warmly about the project. Sabine from Kilburn said **“To know that you exist makes me feel better. You were really kind, listening and caring. You are doing your job beautifully.”**

## **8.0 RECOMMENDATIONS FOR FUTURE PROJECTS**

North London Cares has now compounded learning over six years of delivering the Winter Wellbeing project. The smaller and more targeted nature of this year's work had many advantages that we intend to take into future projects. There are also areas in which we could still improve.

### **8.1 Earlier commissioning**

Although we received neighbours' data nearly a month earlier this year than last year, we believe the project would be improved by beginning the work earlier. Receiving neighbours' data in October or early November would help us to be more proactive in the earlier stages of winter, and therefore make the project more **preventative, rather than reactive**. It would allow neighbours to receive home improvements, financial help or deeper connections in time for the height of winter in January and February. It would also allow us to plan and schedule outreach at more community events, many of which, including those in GP surgeries, have long lead-in times. **Outreach could potentially begin as early as the autumn, with messaging tweaked accordingly to *prepare* people for the oncoming winter, rather than *respond* to it.**

## 8.2 Multi-year commissioning

Commissioning Winter Wellbeing over two or more years would allow us to improve the project too. It would permit better **planning** and more up-front project investment. It would enable us **to allocate resources more effectively**, bringing in outreach coordinators and **training them** well ahead of the project start date.

## 8.3 Pre-visit letters

This year all neighbours received a joint letter from North London Cares and the councils prior to their visit. The letter helped legitimise the project and reassure neighbours ahead of our doorstep conversation. As a result, we received **scores of phone calls** during the early stage of the project – in December. In future, letters could be **dispatched earlier**, perhaps through November, and staggered over several weeks to spread interest in the work more evenly over time. This would make the project more manageable and **pro-active**.

## 8.4 Mop-up calls

Last year neighbours who we were unable to reach through door knocking received a ‘mop-up’ call. We believe that, if the budget allows, in the future we should repeat this – as it increases the likelihood that the most isolated will receive the support they need, including in cases where circumstances may be changing quickly.

## 8.5 More consistent targeting across the boroughs

This has been the most targeted Winter Wellbeing project to date but we believe that having the same targets and methods across both Camden and Islington would be beneficial. For example, targeting the oldest neighbours in Islington made sense insofar as they are an ‘at risk’ group – but many of the oldest neighbours were unable to answer their door.

## 8.6 GP promotion

Gaining support for promotion of the Winter Wellbeing project from GP surgeries can be challenging. While many GPs were initially open to the idea, securing access to GP surgeries through Camden and Islington’s Clinical Commissioning Groups (CCGs) proved difficult in reality due to pressures on health services, particularly at this time of year. With more time and resource, and a deeper partnership with the CCGs and local GP surgeries, we could potentially achieve more widespread promotion through those channels, and subsequently more messaging across the community and health sector as a whole.

## 9.0 CONCLUSIONS

North London Cares' 2016/17 Winter Wellbeing project was **targeted**, efficient and achieved its objectives for hundreds of older people most at risk of isolation, morbidity and mortality in Camden and Islington.

The project allowed us to reach some of the most at risk older neighbours in our home boroughs including people who might otherwise fall through gaps in the provision of mainstream services, as well as to provide **reassurance** and **build community** at an otherwise difficult time.

The more targeted nature of our project this year, including through door knocking homes in the **private sector**, prioritising the **oldest neighbours** and more **community outreach** added new dimensions to the project that we had not trialled before. Those new additions created much new value: **31% of the people we spoke to, in total, later received a deeper intervention; around a third of those we spoke to face-to-face received multiple interventions.**

The headline numbers highlight the **importance of preventative community outreach** to improve health outcomes in north London. But there remain areas that we can continue to improve – particularly by bringing forward the commissioning date so that North London Cares can deliver a **pro-active** as well as a reactive campaign, helping neighbours to connect to local services and activities ahead of the cold snap in January and February and carrying health messages such as on flu jabs in the timeliest way.

This more preventative approach is vital in the context of increasing winter pressures on the NHS and social care, the **rapidly growing population of older people** in Camden and Islington, the increased likelihood of more extreme weather events, and further imminent reductions in local authority budgets. Moreover, in the context of our rapidly changing communities, it is fundamental on a social level too that **we continue to look out for one another**, that we complement local service provision with community engagement, and that we continue to take the challenge of isolation and loneliness – and their impacts on our health as individuals and as a community – seriously.

**April 2017**