

Blackburn with Darwen POSITIVE AGEING FRAMEWORK

Working towards Blackburn with Darwen
becoming an 'age friendly' place



Age Well
Partnership



Foreword

Welcome to Blackburn with Darwen's trailblazing Positive Ageing Framework. Ensuring our Borough is a place which promotes and supports positive ageing is a key priority for the Council, the Place Based Partnership and all our partners. To achieve this we need to work together as a whole system and the Positive Ageing Framework provides a blueprint to do this. Now, more than ever, there is the need to provide a place which supports people's health, wellbeing, and quality of life and enabling people to age well will also ultimately reduce pressures in our health and social care system. The Framework provides an opportunity to raise awareness of positive ageing, drive forward system and behaviour change and support leaders across the borough to consider positive ageing in local decision making. Older people have significant experience, skills and knowledge to share and contribute to our borough in many ways. It is in all our interests to work together to ensure our place enables people to remain healthy and well, connected and involved as they age.



A handwritten signature in black ink that reads 'Damian Talbot'.

*Cllr Damian Talbot
Executive Member for
Public Health and Wellbeing*

Blackburn with Darwen's Positive Ageing Framework



This Positive Ageing Framework has been developed to improve and support positive, healthy ageing for the population of Blackburn with Darwen, and has been overseen by the Age Well Partnership. It aims to promote an asset and rights based approach to ageing rather than the 'needs-based, deficit' approach so often applied to older people and ageing; and to recognise that older people are not one homogenous group and are all individuals. It also aims to balance and encourage personal responsibility and the need for individuals and families to plan and prepare for older age and adopt healthy practices at all stages of life; and to support a community based response with the development of supportive age-friendly environments and intergenerational harmony and support to make choices that support health and wellbeing.

The Framework is intended to be used to influence policy and planning decisions, along with the design, commissioning and delivery of services and support. It aims to promote a whole system approach to supporting healthy, positive and active ageing so that all people have the opportunities to remain physically, cognitively and emotionally active as they age. To be most effective, support and planning needs to start early and be embedded across the whole life course. So whilst this Framework does absolutely advocate and support 'ageing well' for those already in later life, it must also be used to influence planning and delivery across start well and live well priorities.



Key Opportunities

Employers and Workplaces

- Increase support for workforces on financial planning and pre-retirement planning
- Improvement of policies which promote and support longer working
- Recognition of need to support the increase of digital skills in the workplace

Place Policy Makers

- Commitment to Blackburn with Darwen becoming an 'age friendly' place and gaining World Health Organisation accreditation
- Ensuring transport planning takes into account access to essential services and amenities
- Ensuring housing planning decisions take into account housing needs in later life

Service Commissioners

- Commitment to ensuring all relevant commissions include a requirement to support better ageing
- Consider digital inclusion within all relevant commissions
- Ensure that all commissioned services provide age appropriate and tailored offers, accessible to people in later life

Local Authority

- Develop and implement a digital inclusion strategy
- Promote opportunities for intergenerational mixing in service developments
- Integrate positive ageing into workforce development programmes

Local NHS and other providers

- Integrate self-care, healthy lifestyle and positive ageing messages into all appropriate interactions
- Provide workforce training on the impact of ageing on health and positive ways to respond to this

All partners

- Develop and integrate collaborative information campaigns on self care, financial planning and the benefits of meaningful activity
- Develop a network of positive ageing champions

Local Context – An Ageing Population

According to the 2021 Census Blackburn with Darwen has a population of 154,800 of which 21.3% are aged under 15, 64.3% are aged 15 to 64 and 14.5% are aged 65 and over with 1.7% aged 85 and over. This means that Blackburn with Darwen currently has a population profile with higher numbers of children and lower numbers of older adults than the North West region as a whole and the England average. However, the Census also shows that in the ten years since 2011, Blackburn with Darwen has seen an 18% increase in those aged 65 and over compared to just a 3% increase in both children aged under 15 and adults aged 15 to 64 indicating that the population profile of the Borough is changing, with the 65+ population expected to rise by almost 40% in the next 20 years and the 85+ population by over 80%¹. The older population will also become more ethnically diverse as it grows.

Resident Population:

154,800

Largest lower tier local authority in the wider Lancashire area.

census 2021



21.3%
Aged under 15

64.3%
Aged 15 to 64

14.5%
Aged 65 and over

1.7%
Aged 85 and over

Population increase: 2011 - 2021

3% rise
Aged under 15

3% rise
Aged 15 to 64

18% rise
Aged 65 and over



Population prediction: Next 20 years

40% rise
Aged 65 and over

80% rise
Aged 85 and over



Local Context – How Well is the Population Ageing

Blackburn with Darwen reports a worse health profile than the England average across a range of indicators, including life expectancy and healthy life expectancy at 65; the proportion of people reporting their day to day activities are limited a lot by a health problem or disability; and rates of coronary heart disease, stroke, hip fractures due to falls, and dementia². All of these factors impact on the opportunities to age well and have a positive older age and also have the potential to put significant pressure on local health and care systems. In addition, the Borough was hit hard by the Covid pandemic with high infection rates, high levels of people seriously ill from Covid, and local or national restrictions and shielding guidance in place for significant periods of time. The longer term impact of the Covid pandemic on the physical and mental health of older people is well documented and has only served to magnify and highlight the need to think about ageing differently and the importance of physical, cognitive and emotional activity in supporting optimal ageing. The borough also has high levels of health inequalities affecting particular communities and as the older population becomes more diverse, there is a risk of inequalities widening without a targeted response.

Whilst it is absolutely recognised that there will always be people who need to access additional services, care and support and this should be of the highest quality, there is a need to shift the dialogue to have as much focus on how we support people to age better and be healthier longer as there is on how we manage the increasing numbers of older people who need to access services. This conversation is much broader than health and care provision and needs to consider employment, financial security, housing, the local environment and 'place' and community and social connectedness which are all important contributors to health and wellbeing. As the diversity of the older population increases planning and developments also need to take into account the existing health inequalities and the views, needs and assets of different sections of the community and different responses to address these.



Engagement

The development of this Framework has been underpinned by a range of engagement:

- with the local population across Blackburn with Darwen, some of whom are older now and some of whom will become older
- through 4 engagement partners who carried out targeted engagement with particular communities. These were Blackburn with Darwen Carers Service, One Voice, Lancashire LGBT and Care Network which supported engagement with people with a learning disability or autism.
- with a range of stakeholders across the local authority and local NHS

A full list of engagement activity is included at appendix 1.

The engagement was carried out through conversations on four overarching themes – financial security in later life, connectedness and involvement in community life, physical and mental health and wellbeing, and environment and safety- with a number of sub-themes within each.

A full list of the engagement topics is included at appendix 2.

The outputs from the engagement include a number of key themes which are outlined below along with a brief overview of the current picture and context and opportunities for action. Whilst there were some particular needs/themes identified from the targeted engagement, for example the need for improved respite/ sitting services to enable carers to be involved in community activities or to work, overall there were few differences in the outputs from the engagement with specific groups from the more general engagement.



Financial Security in Later Life

Key themes from engagement

People understand the need to plan financially as they get closer to retirement and later life, but reported a lack of information and support to do this. Awareness of, and accessibility to planning support was low. Carers and foster carers in particular highlighted the challenges around planning for the future financially and a lack of support to do so.

Any information and support needs to consider the 'optimal' age to target people. Whilst it is acknowledged that the 'earlier the better' people reported that it was unrealistic to expect most younger people to engage in planning for later life, due to the other priorities for their income, such as childcare and mortgage payments.

People's expectations and ambitions for their financial position in later life were not high. Most talked about ensuring they had enough money to pay the bills without worrying and a bit left over to enjoy life, and for homeowners being mortgage free was a high priority. There was also an obvious trend around feeling that they may need to support family financially, either adult children or older relatives and wanting to be in a position to do this. There were some distinctions in attitude between those who had children and those who do not. Feedback from those who do not indicated that they felt more financial freedom, but recognised that they will probably have to support and arrange to care for themselves as they age.

In relation to continuing to work there were significantly mixed views on whether people would want to do so, with many seeing the benefits financially, mentally and socially but others determined to be in a position to retire as early as possible. Some views were clearly linked to health issues, and others related to the issue of wanting to be able to support others financially. Those who have or will continue to work talked about the importance of flexible and supportive employers and having the right policies and systems in place to encourage working into later life. Being able to keep up with technology and having the right digital skills was also highlighted as a potential barrier to both applying for jobs and also within the workplace.





Financial Security in Later Life

The current position

Blackburn with Darwen has higher rates of economic inactivity amongst those over 50 than England average (64.6% against 58.2%) and lower rates of employment amongst over 50's at 33.8% against the England average of 40.4%. It also has a higher proportion of households claiming Pension Credit (18.3% against 11.7%) indicating households with lower pension income available. Given the changing demographics of the Borough if people are not supported and encouraged to work for longer the risk of workforce shortages will increase.

Opportunities for action

There is an opportunity for employers across the public, private and voluntary sectors to improve the support provided to their workforces around financial planning for the future, broader than just information on their pension offer. Local employer networks should consider developing a package to support this.

Promotion of the support available for financial planning such as the Government funded free Money Helper service should be increased and co-ordinated.

Employers should be supported to develop and implement appropriate workplace policies to encourage and facilitate the recruitment and retention of older workers. This should include specific support to manage the impacts of the menopause on the female workforce. Again business and employer networks can play a role in promoting and facilitating this.

The local Employment and Skills board needs to include a workstream specifically focussed on development of the older workforce.

All digital strategies need to include a focus development of workplace digital skills.



Connectedness and Involvement in Community Life

Key themes from engagement

Without exception the importance of social connections was recognised as very important for mental health and wellbeing. However, whilst there was a lot of feedback about the positive impact of various groups and connections we were reminded that not everyone is a 'joiner' and group activities are not the solution for everyone. It was also clear that assumptions cannot be made, and someone who is alone may not be lonely, and someone surrounded by others can be experiencing loneliness.

Feedback also shows that it is often a 'life event' or change of circumstance which disrupts someone's social connectedness. Key examples given were loss of a partner, retirement, a deterioration in health or having to stop driving. However, there were mixed views on the importance of having some 'meaningful activity' in your life. Many saw the benefits of things such as volunteering, community work or learning something new, but some did not. We heard stories of people who had stopped working, without any plan as to how to fill their time, only for their mental and physical health and wellbeing to deteriorate quickly.

Accessibility of community activities and facilities is key – both in terms of getting to them, and them feeling appropriate, welcoming and 'for them'. Cost and access to information about what is available were highlighted as key. Information should also not just be available digitally as this is a barrier. The availability of public transport was described both as a key enabler, and a barrier, depending on where people lived and the importance of having localised access was emphasised. This was particularly so for the more rural areas of the borough and for people from Asian heritage communities. Several people also particularly talked about the importance of belonging to a faith organisation and the connectedness this provides.

Digital inclusion more broadly was a divisive topic. Many saw the benefits of digital technology and used it, particularly for social connections and for some, particularly some carers, this was a lifeline. Others really did not see the benefits of technology, including smart mobile phones, were fearful of it, did not know how to keep up with it ever changing, and were therefore excluded from using digital tools. Cost was reported as a concern for both those who currently use digital devices, and those who don't.

Mixing across generations, not just younger/older but all ages was overwhelmingly seen as important. People were clear on the benefits and felt it was important to have opportunities to mix. Skill sharing was highlighted as a key benefit with examples given of younger people helping with digital skills and older people with learning how to cook or other practical skills. Within the discussions around finances it was also recognised that skills around budgeting and financial planning could be shared across generations. There was a recognition that this does not always need to be organised or arranged, many people have these opportunities through their own families, social networks or volunteering, but for some arranged programmes would be of interest.

Connectedness and Involvement in Community Life

The current position

Blackburn with Darwen has a broad range of quality community facilities, activities, formal and informal volunteering and cultural opportunities available for people, many free or at low cost, and a strong community structure within many neighbourhoods. However, it ranks 39th (based on 2011 figures) amongst local authorities for loneliness with an estimated 2127 people reporting being lonely. Access to social connections and meaningful activity is not equal and depends on where people live and their financial and health circumstances.

Statistics show that 13.6% of the population volunteered during the last year with people from lower socio-economic areas half as likely to volunteer as in higher socio-economic areas³. Levels of digital exclusion are high with 29.5% of residents classified as 'e-withdrawn' – least engaged with digital. Again digital inclusion is not equal with people on lower incomes; those aged 75+; those living alone; people with mobility challenges or memory issues; people from an ethnic minority group; and LGBT people being more likely to be digitally excluded. The current cost of living rise is likely to exacerbate this as the cost of data and connectivity becomes prohibitive for many.





Connectedness and Involvement in Community Life

Opportunities for action

Development and delivery of a robust and dynamic digital inclusion strategy will support improved connectedness and inclusion both socially but also financially and reduce pressures on services if people can use self-care resources, access remote appointments confidently and access online goods and services.

The development of the new family hubs presents an opportunity to build in intergenerational mixing from the start, providing additional community based facilities and the benefits to all from this. Planning should also recognise that within the Borough we have many grandparents who provide childcare on an informal or formal guardianship basis and this group has particular support and information needs.

Information about community activities, learning opportunities, volunteering etc cannot be digital only. Collectively we need to ensure that information about these opportunities is available and accessible to all communities. Community networks and faith organisations can play a key role in sharing this information.

Provision needs to be localised, tailored and accessible to those with additional needs. Mainstream cultural events need to plan to ensure that they are accessible for all sections of the community, are 'age friendly' and that barriers to participation are not unintentionally created. This should include ensuring inclusive promotion.

There is a collective opportunity to better highlight the benefits to health and wellbeing of being involved in 'meaningful activity' whether that be learning, volunteering or community life. This should be incorporated into workplace pre-retirement offers. Employers and business networks could play a key role in supporting this.



Physical and Mental Health and Wellbeing

Key themes from engagement

Many people feel that positive ageing is related to attitude and having a 'get on with it approach', however there was a general expectation that health would deteriorate with age. Those already impacted by long term health conditions or disabilities feel that these are a real barrier to quality of life and people also report being concerned and anxious about the possibility of developing dementia and/or memory loss and how to make the most of life before this.

Access to information on how to be healthier and self-care was acknowledged as important however people reported feeling confused by the amount of information available from different sources, with sometimes conflicting information. Many people also commented on the challenges of easily accessing guidance, advice and services to support better health and wellbeing and a lack of understanding about who could provide what. For example, people still felt they needed to see a GP for things that actually a pharmacist or other practitioner could advise on. As with the previous section, information cannot only be available digitally as this is barrier for some.

Carers and foster carers reported feeling that they did not have the time or opportunity to prioritise their own health and wellbeing as their focus is on the person they care for. This was particularly the case for those who were already experience health conditions or disability themselves.

In relation to opportunities to increase or maintain physical activity levels it was clear that a broad range of accessible and appropriate activities was vital. The definition of appropriate was personal to each individual in terms of preference for type of activity and some were interested in new opportunities whilst others wanted to ensure they could continue with things they felt comfortable with and work for them. However, easy to get to and affordable were key elements of all responses. Access to safe outdoor spaces which people could access without needing to 'join a group' and for free was highlighted as very important. The link between good physical health and improved mental health was less well understood as was the importance of 'functional fitness' gained from everyday activities like carrying shopping, gardening etc and the opportunity that these provide to improve overall health and wellbeing. There were distinct differences in response from those who engaged in physical activity already and those who didn't and targeted support is needed to encourage the benefits in this second group, earlier, to reverse the thinking that it is too late to start being more active and won't make any difference.

Good mental health was recognised as key to a positive later life, but there was limited awareness of how to access support and concern that it was not always appropriate or accessible, for example if people have limited mobility. Some also felt that clinical staff did not always understand the way that mental health can impact as you age. The same was also felt about more specialist services such as drug and alcohol support, which do not take into account the differences in impact as you age and general provision is therefore not tailored to support people in later life.

Physical and Mental Health and Wellbeing

The current position

The Borough has a wide range of quality services, support and activities available to support better physical and mental health, including targeted programmes, and free or low cost options. It also benefits from access to green spaces to support physical activity. However, at the age of 65 people in Blackburn with Darwen can expect to have less disability free years ahead of them than the North West and England averages, with males expected to have 7.4 years against 10.5 for England; and females 7 years as against 10.6 for England. In 2011, 17.9% of those aged 50-64 reported living with a severe long term condition or disability, against 10.4% for England; and 16% reported living with a long term condition as against 12.7 % for England. Due to the impact of Covid on the local population these proportions are likely to have increased in recent years. Prevalence estimates across a range of conditions including coronary heart disease, stroke and dementia are all higher than the England average. Levels of physical activity amongst the population as a whole have declined with 36.3% of the adult population recorded as doing less than 30 minutes activity per week up from 33.3% in the preceding year⁴.

The circumstances that are most likely to result in poorer mental wellbeing are prevalent in the borough – poor physical health, living in rented accommodation, living alone, being economically inactive and being mid aged, thus increasing the risk of the impact of mental health issues across the population.



Physical and Mental Health and Wellbeing

Opportunities for action

The commissioning, development and delivery of support services must include the needs of people as they age. Monitoring should include not only numerical targets but also ensuring that models of delivery are appropriate and accessible. This applies equally to generic services such as leisure centre provision and to more specialist provision such as talking therapies or drug and alcohol support.

Commissioning specifications should include a requirement to build in preventative support for people in mid and later life to maintain and improve physical health and wellbeing.

Improvement and better co-ordination of the provision of self-care and prevention information across partners so that key message are not lost.

Developments through primary care neighbourhoods provide real opportunities to embed and promote the benefits of physical activity, self-care, healthy diet and lifestyle across the life course.

The development and delivery of the Blackburn with Darwen Mental Health & Wellbeing Plan should pay particular attention to the importance of supporting positive and active ageing with specific and measurable outcomes identified.

The action plan to facilitate the delivery of the Eat Well Move More Strategy should include specific actions and outcomes related to supporting active ageing and increasing physical activity as people age. This should include supporting the delivery of the Living Longer Better programme.

The development and delivery of all relevant strategies, particularly those related to alcohol, and to trauma informed support should ensure they pay specific attention to supporting better ageing.

Workforce development programmes for the local health, social care and neighbourhood workforce should include a specific focus on the importance of a strength and asset based approach, encouraging activity and functional fitness.





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Environment and Safety

Key themes from engagement

In general people had given little thought or planning to where they would live in later life and what sort of housing provision they may need. When asked views were mixed between wanting to move to somewhere with more suitable facilities, for example, no stairs, and staying where they were as long as possible. It was felt that there was little in the way of information and advice to support planning about what may be needed or available.

It was clear from people's responses that the community where they lived was a key priority with some wishing to move to housing targeted at older people, and others wanting to remain in a mixed age community. From the targeted engagement there were several comments from LGBT people about the importance of feeling safe where you live, particularly as you age.

We heard lots of comments about accessibility of services/places particularly for people that don't drive. This was particularly the case for those living in the Borough's more rural areas. The importance of regular, affordable (or free) public transport which takes you from where you live to within close proximity to the places you need to go such as health centres, workplaces and leisure facilities was reinforced strongly.

Good street lighting, safe and even pavements and a feeling of security were highlighted as key factors in the both the places where people live and town centres feeling like good environments. Local amenities that are accessible were also important and this was particularly the case for people from local BME communities.

The current position

The borough has higher levels of over 65 households without access to a vehicle, than the England average, at 35% against 29% meaning higher levels of reliance of public transport. The likelihood of car ownership/access to a vehicle drops significantly as age increases.

Housing stock in the borough has significantly improved during the last two decades, however many new builds are either larger family homes or age specific developments, rather than smaller private homes. Whilst the numbers of over 65 households living in private rented property is in line with England averages, the proportion of all households living in private rented property is higher than the England average. If people of younger or mid age continue to live in private rented property as they age this will significantly increase the number of older people living in less secure accommodation as they age. The borough also continues to have high levels of terraced housing stock which is energy inefficient and difficult to adapt to support independent living, with levels of fuel poverty across the population higher than both the North West and England averages, at 15.6% compared to 14.4% and 13.2% respectively.

Environment and Safety

Opportunities for action

The new Local Plan provides a timely opportunity to support economic and housing development which takes into account the needs of the population as it ages.

Broader planning and development opportunities should ensure that housing for later life are considered. This should include consideration of how digital technology can be built into housing stock to support independent living for longer.

An overarching plan should be developed to improve energy efficiency of existing homes; and to look at how properties can be adapted to support the maintenance of independence.

The World Health Organisation Age Friendly Communities best practice for places and spaces should be adopted and built into developments and planning for local areas and town centres.

Transport planning should take into account the need to support access to essential facilities and amenities and innovative solutions co-produced to support areas less well served by public transport routes.



Call to Action



In order for this framework to make a difference a commitment will be needed across the local authority and Health and Wellbeing Board partners to use and embed the principles within decision making, planning, commissioning and delivery. In order to improve the chances of local people arriving at older age with the best possible health and wellbeing, action needs to be taken across the life course and be everybody's business.

Monitoring and Implementation

Oversight for the implementation of the Framework and how it is being used will sit with the Age Well Partnership which will report into the Health and Wellbeing Board.



Appendices

Appendix 1: Positive Ageing Framework Engagement Activity

Public Engagement - Focus Groups

Age UK Blackburn with Darwen staff

Age UK Men's Group, Darwen

Over 50's group, Edgworth

Capita Blackburn Staff

Foster Carers Association

Learning Disabilities Partnership

Lingfield Court, Feniscowles

Monday Makers Group, Roman Road

Resolve Group

St Silas Church Friendship group

Public Engagement - Events/Information Stands

Age UK BwD social media

Asda Blackburn

Big Local Shop Shadsworth

Blackburn Market

Darwen Market

Royal Lancashire Show

Blackburn Pride

Westbury Gardens United Reformed Church Open Day

Stakeholder discussions

Blackburn with Darwen Older Peoples Champion

Executive Member and Strategic Director of Childrens Services and Education

Strategic Director of Resources

PCN Delivery Group

ELHT Director and Assistant Director of Integration

LSCFT Pennine Director of Operations and Community and Mental Health team leads

Pennine Population Health Programme Director

Pennine Senior Planning and Transformation Manager

Blackburn with Darwen Community CVS Chief Executive

Eat Well, Move More Strategy Group

Blackburn BID Manager

Healthwatch Blackburn with Darwen Chief Executive



Appendices

Appendix 2: Positive Ageing Framework Engagement - Topics for Discussion

We want to understand what a positive ageing would look and feel like to people across the following areas of life.

Financial security

What does a financially secure older age mean to you

How can financial planning be improved and supported earlier

If the opportunity was there would you like to work/be economically active and what would the barriers to this be and what support would you need

Connectedness and involvement in community life

What enables you to maintain friendships and social networks and what are the barriers to this

What do you see is the role of digital technology in helping you remain socially connected

What enables you to be involved in volunteering, community activities, hobbies or learning and cultural activities and what are the barriers to this

How important is being able to mix with people across ages

Physical and mental health and wellbeing

What are your expectations for your health and wellbeing as you get older

What information and support is needed to help you positively manage your own health and protect against conditions later in life

What would help to increase or maintain your physical activity levels to maintain your health as long as possible into later life

Environment and safety

What would you consider to be the right housing for you as you get older and how could you plan for this

What would make the wider environment where you live, shop, work a good place to grow older in (local area and wider town)

What needs to be in place to ensure you feel safe in your local environment