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Part 1. An Overview of Napier Connects - What our Community Needed and Why

While the majority of older people in communities throughout New Zealand actively participate in a wide range of activities, around 10% of older people are socially isolated and a further 12% are at risk of becoming so.

Social isolation can negatively impact on a person's health and wellbeing, while participation in community activity can impact positively and is a great way for older people to contribute their knowledge, skills, experience, wisdom and stories with others.

The Napier community was approached by then-Minister for Senior Citizens, Hon Jo Goodhew in June 2012 with a view to initiating a community response to the issue of social isolation among Seniors. Napier was an ideal starting point because of our supportive elected leaders, active and wellconnected NGO sector and because there

were community groups and organisations here already looking at how they could respond to the issue of social isolation. Napier is also representative of many provincial centres, in that it has an ageing population which is impacting on our population structure.

We've found that older people at risk of social isolation relate and respond best to people they already interact with (e.g. care providers, doctors, family members etc.) so Napier Connects works to create programmes and activities that are simple, free from red tape and provide the amount of connection people are comfortable with. We encourage other groups and individuals to do the same, and look forward to the network of activity and connection in our community growing over time.

For more information and background on the Napier Connects Project and how it came about, we welcome you to explore further here:

Helpful Resources:

Documents:

- Literature Search
- HB Elderly Service Provider Survey.

Websites:

- www.napier.govt.nz/ ID Profile or Statistics NZ
- www.msd.govt.nz/what-we-can-do/seniorcitizens















Part 2. Our Approach - How we implemented Napier Connects

The development and implementation of Napier Connects has been a fantastic team effort and we've learnt a lot along the way. In this section we share details of the steps taken from initial planning right through to measuring success.

Your council or organisation is welcome to follow some or all of our steps, though of course every community has different needs, so approaches throughout New Zealand will probably vary.

Our number one piece of advice is this: Be flexible. This type of project involves many people and moving parts, so adapting to things as they change is key.

We wish you well as you work through your own positive ageing and community engagement project, and we look forward to hearing about initiatives from around the country.









Planning (including Critical Success Factors)

Once community agencies received the request from the then-Minister for Senior Citizens, Hon Jo Goodhew and an initial meeting was called by Ministry of Social Development staff, we moved into planning phase, which consisted of these three main steps:

- 1. Getting support from community leaders
- 2. Establishing the Steering Group
- 3. Creating our Guiding Document

1. Getting support from community leaders

Napier Connects is led by the community, for the community. But the backing of municipal and community leaders and government organisations has given the project important credibility and help. We ensured the following support early on and believe it really helped to keep our path smoother than it would have been otherwise:

- The Ministry of Social Development's regional office. A key staffer was at the initial meeting with the Minister so they were in the loop from the start and that person is a member of the Steering Group.
- The Ministry's Senior Services, who helped Age Concern apply for a grant for a community intern.
- Department of Internal Affairs' Napier office staff member was the initial key contact for Community Connectors¹.
- Napier's Mayor.

This wide-ranging support enabled us to take these steps:

- Establishment of the Steering Group
- Development of our guiding document a 'Community Connection Overview'
- Identification and consultation with 'Community Connectors' at a World Café
- Community consultation through surveys and research

- Resourcing of Napier Connects, with no existing budget
- Project branding and publicity of its benefits and successes

2. Establishment of the Steering Group

The initial meeting with the then-Minister for Senior Citizens was called by the Ministry of Social Development and attracted many individuals already involved in community projects, as well as those in professional roles within related organisations, Council and Department of Internal Affairs.

In the meeting, the need for a Steering Group was identified, and the group was founded by most of the attendees, with other members co-opted in the early planning stages of the project.

The Steering Group's role was to develop the programme and resulting activities (some of which were led by Community Connectors) and then hand them over to the Community Connectors to put them into action. The group has so far been tasked with setting goals, proposing the programme's projects, arranging resourcing, and networking. Because of the varied nature of the group's responsibilities, it has been important to have members who are able to influence, are flexible, adaptable and who collaborate freely.

At present, members of Napier Connects' Steering Group come from these organisations.

- Age Concern Napier
- Grey Power
- RSA Napier
- Volunteering Hawkes Bay
- Te Kupenga Hauora-Ahuriri
- Napier City Council
- Ministry of Social Development
- Red Cross

In the Steering Group there is no chair or leading organisation. We take turns hosting meetings, which take place about once a

1 Older people and others with strong networks throughout the community











quarter, and more often when needed. We take and circulate minutes.

Our membership reflects our goals. For example, Napier Connects does not focus on health, so nor does membership of the Steering Group. But membership changes as our goals shift.

At meetings we update each other about the progress of activities we're setting up. This sharing of knowledge has had some really positive effects, like resource sharing, combining services, adjusting services to meet current needs (for example, lowering the minimum age for joining a group to encourage greater uptake), identifying gaps and opportunities (for example, the community

connectors group identified transport as a barrier, at the same time vehicles are sitting idle), creating new activities like the Working Bee, promoting existing activities (for example, the Age Concern Napier newsletter tells readers about activities and volunteering opportunities).

3. Creating our Guiding Document

The Steering Group created a guiding document, Community Connection Overview and has used this as a reference point throughout the Napier Connects project. The Community Connection Overview is a table that describes people's level of connection with the community and their wellbeing. It proposes actions, and who could lead them.

Community Connection - Overview

Key purpose: Napier's older people engage in their community

Low Engagement					High Engagement
Connection	May receive services in the home	Is unaware/unsure about attending services	Attends services/ activities	A community contributor	A community connector
Wellbeing	Unwell	May require assistance to participate	May access support to participate	Independent	Independent
Possible Solutions	Community connectors provide information, encourage in-home activities with others	Community connectors provide information about services and encourage attendance (buddy)	Services may clash/ duplicate	Opportunities to facilitate: • Volunteering • Education • Social interaction (through interest/social groups)	Opportunities to lead
RECE	IVING	PARTIC	ipating	CONN	IECTING

As you can see above, the Overview shows a continuum. At the left of the connection scale are people who may not have much contact, and may receive services at home like home help or Meals on Wheels. On the right are people who might be busy volunteers with strong, interconnecting networks.

The goal is to bring people from the left of the table, who are more isolated, towards the right end, where they can contribute and connect more. The principle aim is to meet each individual's need for connection at their own level of comfort.













The document – especially its visual nature - has been useful also for explaining and describing the Napier Connects project to those outside the Steering Group.

Useful Resources:

- Community Connection Overview
- Community Connection Overview -Notes
- Napier Connects Draft Project Plan
- Activity Tracker
- Communication Plan, Activities & **Outcomes**
- Consultation Plan
- Project Timeline

Consultation

Consultation with our community was central to our approach and enabled us to better understand the needs and wants of those we're trying to engage with in the longer term.

Our consultation process consisted of two main parts:

- 1. Identifying Napier's 'Community Connectors'
- 2. Community Consultation-surveys and research
- 1. Identifying Napier's 'Community Connectors'

Using the 'World Café' approach (meaning leading open, informal discussions in 'conversation clusters' so everyone has the opportunity to share their views), we invited









people with community connection to a oneday consultation about Napier's services and gaps in those services for older people at risk of social isolation.

The people we invited have wide, strong networks ('fingers in lots of pies') and who we thought would be keen to put Napier Connects projects into action.

A consultation plan and a summary of quidelines helped our team to guide conversations, which happened over a cuppa, and were friendly and informal. The open questions we asked included:

- Tell us what you think about services for people at risk of social isolation — what's going on, and what more could be done to increase community connections?
- What's going on in the voluntary sector, and what more can be done?
- What are the barriers for people getting involved with the community, and how can they be overcome?

After the World Café consultation session we asked the invitees if they'd like to be Community Connectors and almost all agreed. We also sent them all the summary of what had happened and resulted from the discussions, so these 'Community Connectors' were made to feel involved and in the loop from the outset.

The idea is that Community Connectors are the people who put Napier Connects plans and projects into action – they're the foot soldiers. Our steering group at present works alongside the Community Connectors, but as the project develops the Community Connectors will hopefully take more of a lead.

The group has an informal structure and a fluid membership. Many are older people and all have fantastic can-do attitudes. The initial group of 25 has grown as they've invited more volunteers to join them.

The Connectors use an 'Activity Tracker' document at their meetings to organise and track activities.



2. Community Consultation - surveys and research

In the consultation phase of Napier Connects, several different tools and surveys were used to collect information and the views of older people in our community.

For example, the intern who worked with Age Concern held one-on-one interviews and focus groups. We've also surveyed transport and other sectors, asking for opinions around

- What activities and programmes are offer for older people in Napier?
- What / where are the gaps?
- What are the needs of the users of these programmes?

We've used events like the retirement expo to survey people, and that has also raised awareness of the Napier Connects project.











Useful Resources:

Documents:

- Activity Tracker
- Consultation Plan
- World café project:
 - Project Plan
 - Workshop Programme
 - Workshop Summary & Facilitator Sheets
 - Workshop Participant Information Summary
 - Feedback Form
 - Workshop Feedback Report
 - Example Organisation Survey Form

Websites:

www.theworldcafe.com

Resourcing

As is the case with many new collaborative initiatives, there was no new funding available for the Napier Connects project.

To resource Napier Connects, we identified requirements as the venture has progressed and relied heavily on 'people power'.

To start with, the time and expertise contributed by the Steering Group was enough to keep the project moving, but as it developed from the planning phase to the implementation phase, more resourcing was required.

Continued consultation was needed after the World Café workshop, and the steering group members did not have the capacity to undertake that. So Age Concern Napier made a funding application to the Department of Internal Affairs' Community Internship Programme. It was successful and an intern was employed for five months to undertake the consultation work.

Age Concern's intern worked on Napier Connects for five months, focusing on collaboration and consultation. They:

- Identified activities already happening in the community
- Explored how we could improve existing activities to address social isolation
- Consulted with older people about what services they wanted.

As Napier Connects progressed, Steering Group member organisations gave support and some funding. Members gave through support 'in kind' such as skills and contacts; and in time, attending meetings and doing administration. Organisations provided funding through operational budgets, and discretionary grants.

Projects cost little or nothing to begin with. However, once the projects were established we needed support for them so they could become self-sustaining.









Useful Resources:

Websites:

- www.communitymatters.govt.nz/ Funding-and-grants---Forms#cip
- www.fis.org.nz

Measuring Success

We set out with clear goals and measured success so we could check the effectiveness of Napier Connects and make decisions on how to proceed.

Setting Goals

A sub-committee of the Steering Group developed a *review framework* for Napier Connects, based on the Results Based Accountability (RBA) model. The RBA approach suits us because it uses plain language — ideal for our broad range of audiences. It's a simple, clear approach that uses data we already have, or could get easily.

Tracking Progress

The Steering Group has been able to record and monitor the progress of each project using the Activity Tracker.

A Steering Group member managed the tracker, calling for regular updates and reports back to the group. The Community Intern reported back regularly to the group about the progress of the internship work plan.

Measuring Progress

Using the simple RBA approach, we looked at Napier Connects' progress on two levels: an overall success measure (population measure) and the component measures (projects etc.)

For the population measure we used data from an existing survey (Napier Social Monitor). For measuring progress and success of individual projects we used a variety of approaches. Guidelines that were developed for another

local programme – Safer Napier – were used to decide on the evaluation methods.

Critical Success Factors

After 12 months of working on Napier Connects, the Steering Group have identified the following learnings to support a successful initiative:

1. Responsiveness to local community

It is essential to respond to what your community needs and prioritises. Knowing what is already available in your community and what the gaps and opportunities are will help develop projects and activities that are locally meaningful. A wellnetworked community sector contributes greatly in this area.

2. Leadership support

Particularly in the initial stages, leadership support from community and organisational leaders is essential, predominantly to give the programme credibility and resource support.

3. Committed and resourced Steering Group

The Steering Group played a pivotal role in planning and delivery. Attention to appropriate membership was crucial.

4. Action oriented, simple approach

Keeping things simple and taking action got the initiative underway quickly. We make short gains quickly.

5. Enthusiastic community connectors

Well-connected members of the community enable the programme to get going quickly. This is where a community-led approach came into its own. There must be acceptance that the programme can take on a life of its own. Establishing clear, wellcommunicated objectives at the beginning was helpful for keeping activities aligned with the goals of Napier Connects.









6. Flexibility and inclusiveness

Community is an ever-changing place. Staying open to new needs and solutions is essential. Keeping an 'open door' to those who want to become involved throughout the programme means that it can continue to grow, change and respond to local needs.

7. Small steps and experimentation

A key element was trying things out, evaluating and improving things that worked, and stopping things that didn't. Valuing small steps allowed bigger and better things to come about. Just getting people together had an immediate and positive effect on engagement levels.

Useful Resources:

Documents:

- Review Framework
- Activity Tracker
- Community Internship Workplan
- Safer Napier Evaluation Guidelines

Websites:

- http://www.raguide.org
- http://www.napier.govt.nz/index. php?pid806













Part 3: Case Studies from Napier

In this section you are invited to explore a sample of case studies from Napier Connects. They offer a taste of what is possible when you get positive people and practical planning together to make small but significant improvements in a community.

We hope these examples provide your organisation with some ideas, and we're keen to hear about the initiatives you develop within your own communities.















Community Connectors Progress Update

JPDATE ON ACTIVITIES UNDERTAKEN SINCE "CONNECTORS" MEETING HELD 12 MARCH 2013

All activities and updates relate to the 11 key themes identified from the World Café Workshop held December 2012 that most of you attended. The key themes are:

- Promote positive stories
- Education opportunities
- Intergenerational opportunities
- Focus on neighbourhoods (neighbourhood connectors)
- Use existing resources etc use existing databases etc to get Information out or provide services (e.g. MSD database)
- Keep it simple, keep it fun and social
- Reduce barriers to attend services (transport, money, awareness)
- Use senior skills/experience
- Personal approaches needed
- Ask target groups what they want
- Ensure cultural appropriateness.

Issues Identilled and sugge	issues identified and suggestions offered from community commetting its match 2013 – OFDALE ON PROGRESS	ty connectors infecting 12 ivi	aicii 2013 - OPDAIE ON PRO	JGRESS
lssue/item	Suggestion offered	Action	Progress/outcome to date	Related to key theme
1. Rotary pathway	Could cycle shops and	No responsibility assigned. An evaluation is being	An evaluation is being	Personal approaches
Cyclists are not regarding	shops selling cycles provide		undertaken on the	needed.
the needs of pedestrians	their customers with a	Possibly Rotary and	pathways lead by Disability	1 1 1 1 1 1 1 1 1 1
on the pathway.	flyer or suchlike promoting	Ulsability information	Information Trust.	Education opportunities.
-	consideration of walkers on	Irusur		Intergenerational
Limited access points along the nathway?	the nathway?			
footpath to rotary pathway		NO responsibility assigned.		opportunities.
for wheelchairs and	Could Rotary consider	Possibly Rotary and		
mobility scooter to access.	more connecting footpaths Disability Information	Disability Information		
	to main pathway?	Trust?		





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Issue/Item	suggestion offered	Action	Progress/outcome to date	Related to key theme
2. Transport issues to	Red Cross have offered	SC to liaise with Red Cross	Visited with Red Cross	Reduce barriers to attend
attend services and/or to	the use of their vans. The		8/4/13. Red Cross waiting	services.
volunteer	terms and availability need		on new HBDHB contract	
	to be clearly defined.		details to decide if their	ose existilig resources.
	Talk with HBRC on public	SC to look into this	vans may be available for	
	transport services for		other uses.	
	elderly.		No progress to date. HBRC	
	-	-	considered a stakeholder if	
	Identify current volunteer	SC to look into this	Elderly Transport project is	
	driver numbers in Napier		planned.	
	available for elderly people		Initial meeting held in Mav	
	to access.		2013 with HB Trust for	
	; ; ; ; ;		the Elderly about possible	
	Consider creating a central	SC to look into this	transport project.	
	point for coordinating			
	volunteer drivers and		No progress to date but	
	sharing these drivers		have received approval	
	among a variety of services		(May 2013) to undertake	
	providers.		this elderly transport	
			research if an interested	
			community group will lead	
			this project.	
			No progress but this	
			activity could align with	
			project proposal above.	









Issue/item	Suggestion offered	Action	Progress/outcome to date	Related to key theme
3. Untapped skills of older people Provide opportunities for older people to share skills with the community.	Create a venue (like a Men's Shed) for skill sharing. E.g. knitting, sewing, cooking, gardening, furniture restoration. Target under 65 year olds as well to utilise venue.	SC, DR, JG & KS to investigate this further.	Some of our Connectors visited with All Saints Church Men's Playgroup 4 May 2013. This group have a facility and repair goods for sale at Church galas plus odd jobs in community. This is an excellent men's shed	Use senior skills/ experience. Personal approaches needed.
Many elderly lack confidence and undersell themselves	How about asking older people what they would like to offer and contribute to others and the community? Schools could liaise with elderly services and visa versa.	SC has offered to conduct a questionnaire trial on his neighbourhood support group.	Model. KS met with Salvation Army in Faraday St April 2013. Alzheimer's Napier are looking to develop a Men's Shed at their facility in Marewa. Survey completed by approx. 33 residents. Some of these residents indicated interest in being knowing about other community activities they could participate in	Use senior skills/ experience. Personal approaches needed. Focus on Neighbourhoods.











lssue/item	Suggestion offered	Action	Progress/outcome to date	Related to key theme
4. Community groups working closer together	Promote elderly services on offer through Napier GP's.	KS (VHB Trustee) looking into VHB website capacity.	VHB approved the use of the website and a link has been developed.	Reduce barriers to attend services.
	Utilise local newspapers to promote services.		Information about the Napier Connect activities	
	More services combining newsletters/magazines.		is currently being placed in this link.	
	Hold community workshops with groups.		www.volunteeringhb.org.nz Click on Napier Connect link	
	Use CAB resources better.			
	Utilise VHB website.			
	Letter sent to all pensioners registered with Napier W&I to promoting services available and asking them to offer their skills.			
5. Neighbourhood	How about creating		No action on this idea.	Promote positive stories
Support (NS) 53% of Napier Streets not involved in NS	"friendly" challenges between NS groups to increase memberships and promote sense of community.		Napier City Council and NS currently working to update database all NS groups .	Personal approached needed Focus on Neighbourhoods









Village Walkers

Every second Tuesday, a keen bunch of seniors set out for their regular walk. With at least eight people on every walk, they are hard to miss in their fluoro vests – they even stop traffic!

The group was set up at a focus group session where a group of seniors got together to talk about community safety with the Council. One of the members said that they didn't like to walk out and about on their own. Other members of the group offered their company and pretty soon the idea of a walking group was formed.

The group has been going since September 2012, and as one member says:

"it's much more than a walking group, it has a real family feeling – we learn so much about each other, sharing all our stories".

The group has 13 members and is growing all the time as others in the neighbourhood hear about it. The walkers encourage people to join, putting invitations in letterboxes and inviting people they know. There people at all levels of fitness in the group, it is not a race – everyone goes at their own pace. It's a social thing, as Maggie puts it:

"we talk the whole time and before you know it the hour is up".

Because the group take off from their street, it is an easy thing to do. No transport or organising is needed, when everyone is ready, they just go. There is no pressure to attend the fortnightly walkers, although one member, Camp Mother Gwenda, rounds everyone up!

The group has gotten to know others in the wider neighbourhood, people on the walking route wave out or chat to the group as they go past.

Quick Profile:

What: Village Walkers

Where: Taradale/Greenmeadows

When: Every second Tuesday Number: 13 and growing

Support: Encouragement / fluoro vests

- Social interaction
- Safety in numbers
- Improved neighbourhood atmosphere
- Connecting with wider neighbourhood















EIT Mentors

The basis of this programme is 'knowledge sharing'. We have a wealth of talented and skilled seniors in our community, many of whom have retired from specialised professions. At the same time, we have a Polytechnic training our future professionals. One community connector and Napier Connects Steering Group member, Ron Rowe, saw a gap. How could we retain all those valuable skills that exist in our community while supporting our future workforce in developing the skills we are so short of here in Hawke's Bay and in New Zealand? The idea of the mentoring programme was born.

He approached the Eastern Institute of Technology Hawke's Bay (EIT HB) to see if they might be interested in a mentoring programme that could match older persons with students on their courses. EIT HB supported the idea from the outset, seeing the benefits this intergenerational exchange could have on both parties. A trial was conducted in Semester 1 of 2013. As a result of the trial, a full programme was rolled out in Semester 2 with upwards of 10 mentors registering their interest.

Prospective mentors attend a workshop and are then 'matched' to a student. The programme has been well supported by staff, who have been invaluable in both identifying potential mentees and in the matching process.

The main job of the mentor is to act as a 'sounding board' and to help students come up with their own solutions to the challenges they face. Mentoring is about developing self-belief and having someone in your corner. It's not about teaching or counseling, EIT have skilled staff available for students who need this kind of support.

Mentors get a lot out of the programme too. They can take part in a vibrant, learning environment where their skills are valued. Jason, a mentee from the pilot, said:

"the help given me was great and I got a 74% PASS in my electrical certification"

Quick Profile:

What: EIT Mentors

Where: EIT Taradale Campus Number: 10 mentors and

Support: Volunteer coordinator

- Skills sharing
- Intergenerational interaction
- Youth development
- Added value to education opportunities















Working Bee 🐱

In December 2012, five homes in Tamatea got a make-over. Napier City Council, Age Concern Napier and Neighbourhood Support coordinated the working bees. The idea was about getting neighbours together and at the same time to help out a senior homeowner.

The majority of the 23 volunteers who registered were from the local neighbourhood support group. Volunteers also came from the organisations involved, the Napier Youth Council and two Napier City Councillors. Volunteers spent two hours weeding, painting, water-blasting and planting and then shared a cuppa and some morning tea with the homeowner.

The homeowners were rapt with the results, one homeowner said she was:

"thrilled to bits"

to have been selected. Following the working bee, Age Concern was able to organise one of their volunteers to visit one of the houses on a monthly basis so the garden could be kept nice. Neighbourhood Support facilitated a new group to start in one of the streets that did not have one when the working bees took place.

The project is now being expanded to include a home safety checklist and will be supported by the Police, the Fire Service and ACC, and will be offered to a whole street at a time.

Quick Profile:

What: Street Working Bee

Where: Tamatea

When: December 2013

Number: 5 homes-23 volunteers Support: Staff time, materials

- Neighbourhood connection
- Intergenerational interaction
- Improved street look















Expo - Retirement Living: Retirement Planning

Napier Age Concern responded to the frequent requests it receives for information about retirement planning by getting everyone in one room. The full day Expo held in May 2013 at Napier's War Memorial Conference Centre hosted providers offering a huge range of services. The Expo was not just for people who were already retired, but also those who were coming up for retirement. The Expo also provided a great networking opportunity for community organisations, business and agencies working within the 'retirement industry'.

Over 200 people visited the 43 stalls. They accessed a raft of information on a huge range of services including legal advice, housing needs, recreational opportunities, financial planning, care options and health services. The local Volunteer Centre was kept busy with prospective volunteers.

Feedback about the event was excellent. Most people left with a better understanding on what is available for them and how to access what they need. The stallholders also found the event a great opportunity to engage with current and future clients and customers as well as other providers.

Sarah Potter from Age Concern said:

"the event was so successful and because of the support we got from the Ministry of Health and local sponsors, it was really cost effective too".

She says that the Expo has generated a lot of interest in the services available for seniors.

Quick Profile:

What: Retirement Expo

Where: Marine Parade, Napier

When: May 2013 Number: Over 200

Support: Funding and sponsorship

Cost: \$4000

- Social interaction
- Increased awareness of services available
- Greater preparedness amongst seniors
- Networking for providers
- Positive focus on ageing













Digital Seniors

Digital Seniors was a collaborative project between Napier City Council, Age Concern Napier and the Community Conduit Group. It was also part of the Napier Connects programme that aims to reduce social isolation amongst seniors by assisting them to strengthen their connection and participation in their community.

A community hub was established at the Age Concern Napier office as a base for Digital Seniors. The project was a pilot running for eight months from July 2013 to March 2014.

"The most terrible poverty is loneliness and the feeling of being unloved."

Mother Theresa.

A New Zealand general social survey (NZGSS) carried out in 2010 by Statistics NZ indicated that social isolation and loneliness was becoming a social and health issue especially for the ageing population and for people living alone.

Research shows this is linked with health issues such as increased mortality, depression, high blood pressure and dementia. Social isolation describes the absence of social contact i.e. contact with family or friends or community involvement. Loneliness is the difference between desired and achieved levels in the quality and quantity of social contact.

Quick Profile:

What: January 2014

Where: Age Concern Napier

When: Training- Monday, Wednesday,

Thursday - open suite weekly

Numbers: 10 (plus casuals) - waitlist of

25 and growing

Support: Refurbished computers (donated), software, venue

- Access to technology
- Connection to family / whanau
- Intergenerational skills sharing
- Social interaction
- Volunteer opportunities















International Day of the Older Person - Flash Mob

Watch the video here: www.youtube.com/watch?v=S-XEogTzGDw



Quick Profile:

Started: October 2014 Where: Napier Library When: 1 October 2014

Numbers: 90 approx + onlookers Support: Event management

- Positive perception of Seniors
- Intergenerational connection
- Social interaction
- Fun for all!











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Literature search

Reducing loneliness and social isolation in older people

SEARCH FOR

Virginia Wilton

17 August 2012

What you asked for

You and your community groups in Napier are interested in identifying intervention strategies which would reduce social isolation and loneliness in older people. The focus is on getting a feel of what works to make older people actively engaged. You may perhaps write a summary of the research findings. The search is to be from 2000.

Search summary

As loneliness has strong associations with depression and its adverse mental and physical health consequences, it is considered an independent risk factor for depression. Not surprising then that much of the intervention literature speaks of reducing it in order to improve quality of life and functioning in the elderly.

I have found many intervention strategies, and it appears that the befriending and social group ones are most effective as they reduce loneliness and boost well-being by a large measure. The search has been sometimes restricted to the years after 2005 owing to the large amount of published material available on this subject.

Search method

The databases used for this search were:

Social Care, EbscoHost Research Databases, Informit (an Australian database) and the Internet.

The search results are presented according to intervention strategies.

Accessing the results

Items with links can be accessed directly. Contact us if you want any of the hardcopy items.

It may take up to five working days to obtain hardcopy items from external suppliers. Urgent (same or next day) requests can be made. In some cases, we may not be able to supply the items.



A6362010











Search results

- 1. The internet
- 2. Radio and telephone
- 3. Living arrangements
- 4. Befriending and social groups
- 5. Primary preventative services
- 6. Specific needs and interventions
- 7. Welfare rights and stipends
- 8. Minority and community groups
- 9. General items

1. The internet

Older Australians and the Internet: bridging the digital divide

Link to document

National Seniors Productive Ageing Centre. 2011. 32 p.

Older people with low internet skills are unable to conduct business or access important services over the web. They can be isolated from their community and family at a time in their lives when feeling connected is very important. This report sets looks at what older Australians who never or rarely use the internet know about the types of online products and services available to them, and how they might use these to improve their daily life. It identifies the barriers to internet use that exist for the over 50s, and what kind of support is needed to overcome these and bridge the digital divide

Escape loneliness by going digital: A quantitative and qualitative evaluation of a Dutch experiment in using ECT to overcome loneliness among older adults

Link to document

T. Fokkema and K. Knipscheer.

Ageing & Mental Health. 11(5): 496-504; 2007.

Note: ECT stands for electronic communication facility.

This study evaluates the outcomes of an Internet-at-home intervention experiment that intended to decrease loneliness among chronically ill and physically handicapped older adults through introducing them to the use of an electronic communication facility. Both the participants and the control persons experienced a reduction in loneliness over time. Moreover, the changes in loneliness were significantly greater among the participants compared to the control persons. Email was found to facilitate social contact. Furthermore, the computer and Internet were often used to pass the time, taking people's minds off their loneliness. Unexpectedly, the intervention also improved people's self-confidence.











Can the internet improve the well-being of the elderly?

David Mellor, Lucy Firth and Kathleen Moore.

Ageing Int. 32(1): 25-42; 2008.

Note: Please note the year of publication.

This article reports on a project that aimed to evaluate the potential of the Internet to reduce social isolation amongst the elderly, and thereby, improve psychosocial functioning. Twenty residents of a retirement village in Australia volunteered to be given access to, and training in, the use of computers and the Internet. After 3 months, they exhibited little change in measures of selfesteem, positive affect, personal well-being, optimism and social connectedness. However, they reported that they found the use of the Internet to be of great benefit. Over the 12 months of the study data collected suggests that impact of the Internet on the wellbeing of the elderly may be more complex than suggested, and broader than was assessed psychometrically.

Videoconference program enhances social support, loneliness, and depressive status of elderly nursing home residents

Link to document

Hsiu-Hsin Tsai, Yun-Fang Tsai, Hsiu-Hung Wang, Yue-Cune Chang and Hao Hua Chu. Ageing & Mental Health. 14(8): 947-954; 2010.

The purpose of this Taiwanese guasi-experimental study was to evaluate the effectiveness of a videoconference intervention program in improving nursing home residents' social support, loneliness, and depressive status. Results showed that subjects in the experimental group had significantly higher mean emotional and appraisal social support scores, had lower mean loneliness scores, and lower mean depressive status scores at three months after baseline. As it appeared that videoconference program alleviated depressive symptoms and loneliness in elderly residents in nursing homes, it could be used for residents of long-term care institutions, particularly those with better ability to perform activities of daily living.

'I feel less lonely': what older people say about participating in a social networking website Alison Ballantyne.

Quality in Ageing and Older Adults. 11(3): 25-35; 2010.

This article highlights results from a pilot project that implemented an internet social networking intervention and evaluated the effect it had on older people's experience of temporal loneliness. Six people aged 69 to 85 years were recruited from a community aged care programme in South Australia. All participants were connected to the internet and provided with one-on-one tutoring in how to use the social networking site. Findings revealed four major themes: the participants' experience of loneliness; technology as an enabler; providing a supportive environment; and connectivity. A case study shows how social networking can help reduce the participants' experience of loneliness.









2. Radio and telephone

Silver Memories: Implementation and evaluation of a unique radio program for older people Link to document

Catherine Travers and Helen P. Bartlett.

Ageing & Mental Health. 15(2): 169-177; 2011.

A unique radio program Silver Memories, specifically designed to address social isolation and loneliness in older people by broadcasting music (primarily), serials and other programs relevant to the period when older people grew up - the 1920-1950s, first aired in Brisbane, Australia, in April 2008. The impact of the program upon older listeners' mood, quality of life (QOL) and self-reported loneliness was independently evaluated. The results showed a statistically significant improvement in measures of depression and QOL from baseline to follow-up but there was no change on the measure of loneliness. It was concluded that listening to Silver Memories appears to improve the QOL and mood of older people and is an inexpensive intervention that is flexible and readily implemented.

An Exploratory Study of Carers' and Care Staff's Perspectives of Silver Memories—A **Unique Radio Program for Older People**

Catherine Bartlett Travers Helen. Act. Adapt. Ageing. 34(2): 135; 2010.

Note: Related to the above item.

The aim of this evaluation was to ascertain the perspectives of both carers of older people and residential care staff regarding the impact of a new radio program, Silver Memories, on the behavior and well-being of older listeners, as well as their opinions regarding the program's quality and appeal. The majority of respondents thought that listening to Silver Memories positively influenced the well-being, morale, and behavior of older listeners very much or greatly. Relaxation was the most frequently reported benefit and older listeners with dementia appeared to receive the greatest benefit. The friendliness and quality of the program were also rated highly. It was concluded that old-time music and programs such as those broadcast by Silver Memories appear to be beneficial for older people.

The use of telephone befriending in low level support for socially isolated older people - an evaluation

Mima Cattan, Nicola Kime and Anne-Marie Bagnall.

Health and Social Care in the Community. 19(2): 198-206; 2011.

Telephone befriending schemes have long been considered an effective method to reduce loneliness among older people. This study investigated the impact of a national scheme for 40 isolated and lonely older people, involving 8 project sites in the UK. Different models of telephonebased befriending services helped older people to gain confidence, re-engage with the community and become socially active again. They impacted on their health and well-being because of the following outcomes: life is worth living; gaining a sense of belonging; knowing they had a friend; a healthy mind is a healthy body; the alleviation of loneliness and anxiety; increased self-confidence; ordinary conversation; a trusted and reliable service; the future - giving something back. These telephone befriending schemes provide low-cost means for socially isolated older people to become more confident and independent and develop a sense of self-respect.









Telephone Support Groups for Seniors with Disabilities

Miriam Stewart, Karen Mann, Susan Jackson, et al. Canadian Journal on Ageing. 20(1): 47-472; 2001.

The growing population of seniors with disabilities experiences unmet support needs and loneliness. Although support deficiencies can be overcome by peers in support groups, most support groups are inaccessible to older adults with limited physical functioning. Accordingly, this project aimed to develop and test the impact of an accessible telephone support group intervention for seniors with disabilities. Qualitative analyses of the telephone transcripts and post-intervention interviews of participants and leaders revealed decreased support needs, diminished loneliness, and enhanced coping. Selection, training, and support of peer and professional leaders and member control of discussions were important ingredients of successful support groups.

Dialling up social care for older people

Pat Fitzsimmons.

Working with Older People. 14(3): 10-14; 2010.

For 20 years Community Network has pioneered the use of social telephony as a means of delivering social care in the UK. Social telephony adopts the concept and technology of telephone conferencing to provide telephone support and befriending groups for vulnerable and marginalised people. As well as highlighting the scale and causes of the problem of social isolation, the article takes a look at different types of telephone befriending groups and why the telephone is currently a far better solution for delivering this type of support than web-based alternatives. The article also explains: how telephone befriending groups work; how much they cost; evaluating the success of the groups; and, most importantly, what the groups can achieve.

3. Living arrangements

Loneliness, housing and health in Australia

Link to document

Adrian Franklin, Bruce Tranter

Australian Housing and Urban Research Institute. 38 p. 2011.

This essay explores the relationship between loneliness and housing, and considers whether housing policy in Australia can help address its impact on health. It discusses the rise in loneliness in contemporary society and its policy relevance, and demographic groups at risk, including single people, migrants, homeless people, older people, single parents, and younger adults. The essay draws on the international research literature and the findings from a 2009 survey of Australian adults. The authors conclude that housing is a critical point of intervention, and policies should be developed that address housing pathways, biographies and careers.









Living arrangements of older persons around the world

Link to document

United Nations. Dept. of Economic and Social Affairs. Population Division

New York: United Nations, 2005. 216 p.

Note: Gives a good overview besides international comparisons.

This publication provides the first global survey and analysis of the patterns and trends in the living arrangements of older persons, with comparable data for more than 130 countries. Demographic, social and economic correlates of living arrangements of people aged 60 years or over are analysed, focusing on co-residence with family members, solitary living and the institutionalisation of older persons.

Social well-being in extra care housing: an overview of the literature

Link to document

Lisa Callaghan. 2008.

Note: Social well-being is defined as involving social relationships, social participation, social networks, and social support.

The aim of this literature review was: to identify how social well-being has been defined in the literature; to identify what factors affect social well-being; and to identify how social well-being could be measured in the housing and care setting. Searches were conducted of a large number of databases and of the internet. In terms of environmental characteristics, the literature covers the areas of physical design, approach taken to activity provision within the housing and care setting, links with the local community, and staffing and care. The literature on social factors includes friendships and social support, loneliness and isolation, social activity and participation, and social climate.

Identifying Living Arrangements That Heighten Risk for Loneliness in Later Life: Evidence From the U.S. National Social Life, Health, and Ageing Project

Emily A. Greenfield and David Russell.

Journal of Applied Gerontology. 30(4): 524-534; 2011.

The authors used data from a national sample of adults aged 57 and older to estimate associations between a variety of living arrangements and loneliness to identify risk factors. In contrast to respondents living with a spouse/partner, respondents who were living alone, living with children without a spouse/partner, and living with other relatives or friends without a spouse/partner reported more loneliness. Living alone was associated with greater loneliness among men than women, but living with children without a spouse/partner was associated with greater loneliness among women. Results suggest the importance for interventions aimed at reducing loneliness to target adults who live alone, as well as adults who live with others besides intimate partners, and to consider gender differences in the propensity for particular types of living arrangements to affect loneliness.









Ageing in place in the United Kingdom

Andrew SIXSMITH and Judith SIXSMITH.

Ageing Int. 32(3): 219-235; 2008.

Ageing in Place is a key component of UK policy on older people and housing. Helping older people to 'age in place' at home is seen to benefit the quality of life and also provide a costeffective solution to the problems of an expanding population of very old people. The research suggests that while ageing in Place may bring social and psychological benefits, there can also be a significant downside on an everyday level. Home in old age can be a place of negative experiences, such as isolation and loneliness and there are often significant weaknesses in terms of informal support, physical environment of the home and neighbourhood and social network, which undermine the person's ability to live independently. The paper then briefly reviews recent UK initiatives to use "telecare" to address some of these issues.

From exclusion to inclusion: housing and support for older people who are homeless or at

Bruce Judd, Alan Morris and Kay Kavanagh.

Parity. 18(1): 58-59; 2005.

An estimated 300,000 older Australians on low incomes do not own their own homes and are therefore vulnerable to homelessness or to being housed in inappropriate, inadequate or unstable accommodation. This article outlines an AHURI project that investigated the housing and support needs of older homeless people, through a survey of ACHA (Assistance with Care and Housing for the Aged) agency workers and clients. It emphasises the need to provide a variety of housing options and specialised support services for older people who are homeless or at risk, and notes the challenges posed by this need in view of an ageing population, the lack of affordable private rental accommodation and the winding back of public housing programs.

4. Befriending and social groups

At a glance 60: preventing loneliness and social isolation among older people Link to document

For Excellence Social Care Institute 2012.

Karen Windle, Jennifer Francis and Caroline Coomber

Note: The link to the full document is Here

This briefing explains the importance of tackling social isolation and loneliness, particularly among older people. It highlights the adverse effects of feeling isolated and describes a number of services that have been found to help reduce the problem. It also includes case study examples of two services - a befriending scheme and social group - that help to help mitigate loneliness and isolation and improve the wellbeing of older people.









Promoting social support and social networks among Irish pensioners in South London, UK Link to document

Bob Cant and Ann Taket.

Diversity in Health & Social Care. 2(4): 263-270; 2005.

The study aimed to explore the nature and extent of unmet mental health needs among Irish pensioners living in a socio-economically deprived borough in South London. The study's findings demonstrated that the project provided space for social interaction among otherwise isolated Irish pensioners, many of whom experienced multiple morbidity. The project worked successfully to overcome the sense of stigma that prevented many of its members accessing statutory services. It also identified needs among carers. There was an Irish cultural ambience at the project centre, which generated a sense of belonging among members, and assisted in the development of social networks. The project initiated other forms of social support through the use of volunteers and developed befriending and telephone support services.

VitalLinks: nurturing emotional well-being in older people through one-to-one communication

Kathleen Gillet and Melanie Dixon.

Working with Older People. 13(4): 20-23; 2009.

VitalLinks, is supporting and promoting befriending for older people. This article considers the new service, and how befriending enhances well-being through one-on-one communication. The initiative allows older people, their families, carers, and other professionals to search for the nearest available befriending schemes. Ranked in the top five of service options that older people consider important, befriending is a good example of low level practical support that is especially effective as a form of early intervention, often allowing older people to live in their own homes and have a 'life worth living'. Schemes such as this can reduce loneliness for older people, and at the same time increase their emotional well-being - in an ever-changing world of online communications, the value of face to face contact is often forgotten.

Groupwork as a tool to combat loneliness among older people: initial observations Julie Heathcote and Chia Swee Hong.

Groupwork. 19(2): 121-130; 2009.

Independent living and caring for an ageing partner is known to increase loneliness, described as an unwelcome feeling or lack of companionship. Help the Aged has suggested that participation in meaningful activities can reduce isolation and loneliness. This article describes the positive impact of groups on older group members and the staff working with them. By providing companionship, engagement, support and activity, groupwork can bring structure to the lives of older people and their carers who may be feeling 'lonely' and 'isolated' and consequently can impact upon their quality of life. The author concludes that while groupwork is not the solution to reducing social isolation for everyone, for some people it is a positive step in the right direction.









An exploration of the value and mechanisms of befriending for older adults in England Helen Lester.

Ageing and Society. 32(2): 307-328; 2012.

Befriending services are an intervention used in many countries to target social isolation in older adults. This study finds that befriending offers some compensation for loss of elective relationships from older adults' social networks, providing opportunities for emotional support and reciprocal social exchange through development of safe, confiding relationships. Befrienders broadened befriendees' perspectives on life, particularly among older adults in residential care. Social engagement was a powerful mechanism of action, particularly in terms of connecting people back into the community, reinforcing meaningful social roles and connecting to a past life that had often been significantly disrupted by loss.

Breaking the cycle of loneliness? Psychological effects of a friendship enrichment program for older women

C. M. S. Martina and N. L. Stevens.

Ageing Mental Health. 10(5): 467-475; 2006.

The present study examines effects of participation in the friendship enrichment program, an intervention that is designed to stimulate improvement in friendship, self-esteem and subjective well-being, as well as reduction in loneliness among older women. The results indicate that the program was successful in attracting lonely older women who were willing to work on their friendships. Many participants reported improvement in the quantity and quality of their friendships. The program was moderately successful in stimulating improvement in subjective well-being and awareness of the need for an active stance toward achieving goals in social relations, especially in friendship. Loneliness among the participants was reduced, but it also declined in the control group, and both groups continued to experience loneliness. One conclusion is that an effective intervention to help older women reduce their loneliness should be multi-dimensional focusing not only on friendship but also on other personal and situational factors contributing to loneliness.

No country for old men? The role of a 'Gentlemen's Club' in promoting social engagement and psychological well-being in residential care

Ilka Gleibs.

Ageing Mental Health. 15(4): 456-466; 2011.

A common, negative, effect of residential care is social isolation. This is especially true of men, who are marginalised as a result of reduced numbers and greater difficulty in accessing effective support. This study investigated whether increased socialisation with others of the same gender enhances social identification, well-being, and cognitive ability. Findings revealed a clear gender effect. For women, there was evidence of maintained well-being and identification over time. For men, there was a significant reduction in depression and anxiety, and an increased sense of social identification with others.









Supporting relationships and friendships: a workbook for social care workers

Suzan Collins. 2010.

Note: A cost effective tool. Available only as an interlibrary loan.

Receipt of care in residential services or their own homes can result in service user becoming very isolated. This workbook is designed to provide social care staff with the knowledge and skills to understand what friendships and relationships mean to these service users' health and well being. The workbook book is appropriate for all staff supporting people with mental health needs, people with a learning or physical disability, older people and people with dementia. It can also be used as a cost effective training resource in both residential and domiciliary settings.

Magic Me Programme Profile

Susan Langford.

Journal of Intergenerational Relationships. 1(4): 95; 2003.

Magic Me programme specialises in intergenerational arts projects. It is based in Spitalfields, London, England. These projects are stated to be creative and educational and they bring together the old and young from diverse sections of the community, thus tackling isolation. It is also stated that a real relationship develops during these programs as each child works with a regular adult partner. It challenges them to take risks and become aware of their own potential.

5. Primary preventative services

Effectiveness of day services: summary of research evidence

Link to document

U. K. Age. 2011.

This briefing updates the research evidence on the effectiveness of day services featured in the publication 'Day services for older people. Quality and effectiveness: a resource for providers and commissioners' (2008). The briefing summarises the key points of the literature review. Due to the lack of evidence focusing on day services, research is also included on activities to reduce isolation and loneliness. The few studies that specifically evaluated the impact of day services found that older people and their carers benefitted from them. The review also identified the different types of day services that can address older people's need for social contact, exercise, to engage in and make contributions to society.

Adult day groups: addressing older people's needs for activity and companionship Tamara Tse and Linsey Howie.

Australasian Journal on Ageing. 24(3): 134-140; 2005.

Adult day groups (ADG) are used by older adults living at home in the community in Australia. Their aim is to prevent social isolation and to maintain independence through supporting social networks and providing a program of activities that enhance the physical, intellectual and social well being of the participants and carers. The study included observation of four ADGs and interviews with five female and three male clients. Four major themes were derived from data analysis: the importance of companionship with staff and clients; how participants valued keeping occupied in activities not achievable at home: how home was experienced as a place where time passed slowly and there were insufficient things to do; and participant dissatisfaction with ADGs.











Prevention: Promoting well-being

Link to document

For Excellence Social Care Institute. 2011. Note: An example of primary prevention.

The services featured in this film are specifically aimed at reducing loneliness in later life and include a luncheon club and separate tea dance club, both based in Dorset. These types of services are sometimes referred to as 'primary prevention' and are aimed at people who have few or no social care needs or symptoms of illness. Therefore the focus is on maintaining independence and good health and promoting well-being. 'Primary prevention' can involve the provision of universal access to good quality information, promotion of health and active lifestyles, delivery of practical services and the provision of social groups, such as the ones featured in this film. The film begins by introducing two people, Brian and Gwen who describe the enormous impact that recent bereavement has had on their lives. Both Brian and Gwen are clear about the beneficial effects of the groups they joined, including feeling healthier, fitter, no longer feeling lonely and, for one of them, even finding love again!

Care to live or live to care?: an insight into the experiences of ageing parent carers Link to document

Sue King, Johnson Nsiah, Caitlin McDowell, John Bellamy Anglicare NSW.: 26 p.; 2010.

The Anglicare Support Coordination program in New South Wales aims to help older parents caring for an adult child with a disability. This report presents intake information on the issues facing these older carers, including wellbeing, stress, social support, isolation, life satisfaction, service access issues, service gaps and limitations, and what the carers say they need. The report also examines whether these services - such as targeted intervention, transition planning, and alternative accommodation - make a difference, as well as recommendations for policy and service delivery.

Promoting health and wellbeing in later life: interventions in primary care and community settings

Link to document

Helen Frost, Sally Haw and John Frank. 2010.

Note: Please search for "isolat" to check out the relevant parts.

The aim of this Scottish review is to provide an overview of the evidence for interventions that prevent or delay physical disablement in later life with a view to informing policy makers and developing equitable intervention strategies. A search was conducted to find information relevant to research, interventions, policies and programmes delivered in Scotland or internationally that aim to impact on health and reduce inequalities in older people. The key policies and frameworks that have been published internationally and in Scotland relevant to the care of an increasingly ageing population are discussed. One of the specific interventions considered is the category of interventions to prevent social isolation and loneliness.













Catholic Healthcare Community Services Community Connections program : enhancing the quality of life of older people who have experienced homelessness

Alan Morris.

Parity. 21(7): 39-40; 2008.

Community Connections is a day centre program that provides support services for older people in inner Sydney who have experienced homelessness. This article describes the program and its impact in breaking down the barriers of social exclusion and isolation among elderly people. It discusses the program's positive effects on participants' physical and mental health, self esteem and living skills.

Making life better for older people: an economic case for preventative services and activities

Link to document

Great Britain Office of the Deputy, Prime Minister. 2005.

The experience of exclusion affects people of all ages. However, exclusion can be particularly acute in later life. It is all to rare that people who are excluded in mid-life are able to break the cycle of exclusion in later life. Indeed, it can often become more acute. The impact of age discrimination on both the aspirations of individuals and the environment within which they operate can lead to exclusion. Too often this exclusion is compounded by the failure of services which are not managed cost-effectively.

Older people's participation in political activity—making their voices heard: A potential support role for welfare professionals in countering ageism and social exclusion

Link to document

Karen Postle, Peter Wright and Peter Beresford. Practice (09503153). 17(3): 173-189; 2005.

Note: Encourages activists work.

Drawing on findings from research, this paper explores key issues relating to older people's participation, highlighting their disillusion with traditional political activity and the exacerbation of their exclusion through powerlessness. Some older people are taking part in new forms of political activity, marking a shift of focus from self-help to campaigning. They frequently gain strength and encouragement from campaigning achievements. This offers potential for building capacity among older people. By supporting such activity and involving older people in the development of policies and services, health and social care workers can support older people to counter discrimination and influence issues that particularly affect them.

Self-efficacy and depression in late life: a primary prevention proposal

Link to document

D. G. Blazer.

Ageing & Mental Health. 6(4): 315-324; 2002.

Feelings of sadness and loneliness are ubiquitous in late life and a risk factor for depression and perhaps other mental illnesses in late life. Targeting sadness and loneliness for an intervention addresses both primary risk reduction for depressive disorders and promotion of overall mental health in the elderly. The author argues that the attainment of positive mental health depends in considerable part upon an individual's self-efficacy - the belief that one can organise and execute









the courses of action required to develop and enhance a person's belief that he or she can act in ways that lead to a desired goal. The extant literature suggests that many potential approaches may be available to develop and enhance self-efficacy in the elderly - approaches that potentially could be broadly applicable in community settings.

Preventing social isolation and loneliness among older people: a systematic review of health promotion interventions

Mima Cattan, Martin White, John Bond and Alison Learmouth.

Ageing & Society. 25(1): 41-67; 2005.

The effectiveness of many interventions to prevent and alleviate social isolation and loneliness among older people has been questioned because of the lack of evidence. A systematic review was conducted to determine the effectiveness of health promotion interventions that target social isolation and loneliness among older people. Quantitative outcome studies between 1970 and 2002 in any language were included. Articles were identified by searching electronic databases, journals and abstracts, and contacting key informants. Thirty studies were identified and categorized. Most were conducted in the USA and Canada, Nine of the 10 effective interventions were group activities with an educational or support input. Six of the eight ineffective interventions provided one-to-one social support, advice and information, or health-needs assessment. The review suggests that educational and social activity group interventions that target specific groups can alleviate social isolation and loneliness among older people.

6. Specific needs and interventions

The psychosocial impact of vision loss on older people Link to document

Samuel R. Nyman, Margot A. Gosney and Christina R. Victor. Generations Review, 20(2), April 2010, (published online). 2010.

Provides a review of research into the effects of vision loss on the mental health and social functioning of older adults (aged 60 and over). The review looked at seven outcomes, categorised as: depression/mental health; anxiety; quality of life; social functioning; loneliness; social support; and interventions. Findings reflected complex inter-relationships among these outcomes. The article concludes that interventions directly addressing psychosocial needs are more effective than those addressing them indirectly through instrumental support.

SCIE research briefing 21: identification of deafblind dual sensory impairment in older people

Link to document

For Excellence Social Care Institute. 2007.

Rising life expectancy and increasing numbers of older people in the population means a growing number of individuals are affected by dual sensory impairment. Raising general awareness of problems and potential solutions is essential to maximising individual quality of life and minimising social isolation. Simple interventions, such as ensuring regular sight and hearing checks or holding conversations in well-lit areas, can be very effective in improving the quality of life of people with











dual sensory impairment. Families, carers and other 'non-specialists' can play a crucial role in early identification, hopefully leading to appropriate and timely interventions.

Supporting Older Women in the Transition to Driving Cessation

Bryanton, Olive; Weeks, Lori E Lees, Jessie M.

Act. Adapt. Ageing. 34(3): 181; 2010.

This study explores how older women have their transportation needs met following driving cessation and the factors influencing the transition to driving cessation. They often used different mobility options to continue their participation in different types of activities, and they experienced reductions in social activity participation. Location and access to public transportation, access to stable mobility options, control over mobility options, and planning for driving cessation influenced adaptation to driving cessation. The results provide direction for the development of appropriate mobility options and the development of effective programs to reduce the negative impact of driving cessation

An exploration of loneliness: Communication and the social networks of older people with cerebral palsy

Liora Ballin and Susan Balandin.

Journal of Intellectual and Developmental Disability. 32(4): 315-327; 2007.

In this paper, the authors present some findings from a larger qualitative study on the loneliness experiences of older people with cerebral palsy. Seven older adults with cerebral palsy participated in in-depth interviews. Six themes were identified. All participants agreed that the themes of communication and social networks are most important when considering loneliness. In this paper, the participants' discussion of these two themes and their related topics are presented. The results demonstrate the need to provide support and training in communication to older people with cerebral palsy who experience communication difficulty, as well as to their communication partners. They also indicate the need for policy development to assist older adults with cerebral palsy to develop and maintain their social networks and form relationships that are rewarding and enriching.

Rebuilding connections: creating opportunities for socially isolated older Australians: evaluation of the Brotherhood of St Laurence Community Care Socialisation Program Link to document

Michael Hillier.: 32p; 2007.

The Brotherhood of St Laurence's Socialisation Program was designed to support and improve the social engagement of older people and people with a disability through community groups and recreational activities. It assesses the impact of the Socialisation Program on clients' quality of life and social well being. Care managers reported that older people's social networks, self esteem and sense of identity had all improved under the Program; family carers reported that the Program had provided them with quality respite, even when they attended the group activities with the person they were caring for.











7. Welfare rights and stipends

Can welfare-rights advice targeted at older people reduce social exclusion?

Suzanne Moffatt and Graham Scambler. Ageing & Society. 28(6): 875-899; 2008.

This paper reports a small qualitative study into the effectiveness of a welfare-rights advice and acquisition service for men and women aged 60 or more years that was provided through a local primary health-care service. Additional financial and non-financial resources were obtained by accessing previously unclaimed state-welfare benefits. It was found that these significantly improved the participants' quality of life. The impact of additional resources was considerable and included: in- creased affordability of necessities and occasional expenses; increased capacity to cope with emergencies; and reduced stress related to financial worries. Knowledge of and access to welfare-rights services also appeared to have a positive effect. It is argued that a level of material resources above a basic level is necessary for social relations and for accessing services and civic activities, and can reduce social exclusion among older people

Evaluating the Senior Companion Program: A Mixed-Method Approach

Sandra S. Bullet.

Journal of Gerontological Social Work. 47(1): 45-70; 2006.

This article reports on a mixed-method assessment of the Senior Companion Program (SCP), a federal program which provides volunteer opportunities with small stipends to low-income older adults, 60 years of age and older, who provide companionship and offer assistance to frail community elders. Informants reported relatively large social networks and low levels of depression and loneliness. Thematic analysis of the qualitative data revealed the benefits of the program for both volunteers and their clients: companionship, independence, reduced anxiety, giving, and rewards.

8. Minority and community groups

The Impact of Professionally Conducted Cultural Programs on the Physical Health, Mental Health, and Social Functioning of Older Adults

Gene D. Cohen, Susan Peristein, Jeff Chapline, Jeanne Kelly, Kimberly M. Firth and Samuel Simmens.

Gerontologist. 46(6): 726-734; 2006.

The aim of this study was to measure the impact of professionally conducted community-based cultural programs on the physical health, mental health, and social activities of individuals aged 65 and older. Results revealed positive findings for the effectiveness of the intervention such that the intervention group reported a higher overall rating of physical health, fewer doctor visits, less medication use, fewer instances of falls, and fewer other health problems than the comparison group. The intervention group also evidenced better morale and less loneliness than the comparison group













Beyond the Bible and the Cross: a Social and Cultural Analysis of Chinese Elders' Participation in Christian Congregations in the United States

Link to document

Gehui Zhang and Heying Jenny Zhan.

Sociological Spectrum. 29(2): 295-317; 2009.

Social isolation and lack of social support system resulting from immigration and Ageing process serve as the major drive for the elders to pursue social and cultural recognition from Chinese Christian gatherings. Besides religious services, social service functions of churches and opportunities for fellowship are other factors that explain Chinese elders' church involvement. In conclusion, we argue that social and cultural services are needed to particularly assist Chinese seniors to adjust and adapt to their elderly lives in the host country.

Veiled entrapment: a study of social isolation of older Chinese migrants in Brisbane, Queensland

David Ip, Chi Wai Lui and Wing Hong Chui. Ageing and Society. 27(5): 719-738; 2007.

This paper presents the findings of a study of the support and service needs of older Chinese people in Brisbane. The findings indicate that older Chinese people, and particularly women, experience significant restrictions in their activity patterns, social isolation and loneliness. Their lack of proficiency in the English language, and the difficulties they have in accessing languagesupport and interpretation services, limit their autonomous mobility and make them heavily dependent on their adult children, not least for transport. Their physical and psychological wellbeing is affected further by strained relations with their adult children, and these are compounded by financial concerns. The implications of the findings for welfare policy and practice are discussed at the end of the paper.

A Community-Based Participatory Critique of Social Isolation Intervention Research for **Community-Dwelling Older Adults**

Myra Sabir, Elaine Wethington, Risa Breckman, Rhoda Meador, M. C. Reid and Karl Pillemer. Journal of Applied Gerontology. 28(2): 218-234; 2009.

This article examines the dialogue within Research-to-Practice Consensus Workshop that critiqued academic research priorities regarding social isolation among community-dwelling older adults and identified practice-based suggestions for a social isolation research agenda. The group's critique resulted in several key recommendations for future research including the need for a social isolation measure with specific capacity to identify isolated older adults during a community crisis. This study demonstrates that the Research to-Practice Consensus Workshop model can be used successfully to identify priority areas for research that have implications for community practice, construct an evidence base more relevant for community application, strengthen existing community- researcher partnerships, and build agency and practitioner capacity to take part in community-based participatory research.













How Local Interventions Can Build Capacity to Address Social Isolation in Dispersed Rural Communities: A Case Study from Northern Ireland

Deirdre Heenan.

Ageing Int. 36(4): 475-491; 2011.

Existing research has demonstrated the significance of social networks in relation to physical and emotional well-being. This paper identifies the issues pertinent to these dispersed communities and reviews a locally-based active ageing group, which aims to build capacity and encourage community cohesion. The research highlights the importance of initiatives which build on and enhance the sense of community, while simultaneously challenging the assumption that older people are needy, dependant, avaricious users of services with little or nothing to contribute.

Migrants: let people decide, says Vanstone [Minister for Immigration and Multicultural and Indigenous Affairs, Amanda Vanstone]

Paul Starick.

The Advertiser.: 3:2003.

Social isolation is a major problem of growing old, and is more significant for the elderly from culturally and linguistically diverse backgrounds (CLDB). Issues include a reduced pool of contemporaries of similar cultural background and reduced access to culturally appropriate recreation and services. Communication barriers may be compounded by physical barriers. Research has identified four sets of variables that are predictors of social isolation: demographic factors, acculturation attitudes, intercultural contact variables, and psychosocial adjustment factors. Isolation is also associated with four groups of variables related to affective states and well being, inadequate social skills, emotional arousal and conflict, poor self regard, and negativistic attitudes. Policy makers need to recognise that an immigrant background can have a significant effect on social isolation.

Inclusion rather than exclusion: respite care which promotes cultural identity, sense of belonging and adventure

Link to document

D. Dambergs. 2002.

This paper teases out the more pressing issues that need to be considered when developing respite services for culturally and linguistically diverse older persons in the community. The paper also gives an overview of a multicultural respite service that is currently being developed on the Queensland Sunshine Coast. The Sunshine Coast Multicultural Respite Service has sought to demonstrate creative ways of delivering respite services that invite the participation of culturally diverse community groups, mainstream service providers, carers and persons of varying age groups.











9. General items

The campaign to end loneliness.

Ferguson Laura;

Working with Older People, 15(2), 2011, pp.66-70.

This paper aims to give an overview of the issue of loneliness, an update of issues heard of from across the country, as well as some positive stories and projects being delivered to alleviate loneliness in older age. It describes the current research into loneliness in older age. Loneliness is a highly subjective emotion that is difficult and complex to measure. This paper highlights the first steps being taken by organisations working, under the umbrella of a recently launched Campaign to End Loneliness, towards further reducing loneliness in older age

Addressing loneliness in a retirement village community: A pilot test of a print-delivered intervention

Link to document

Gracia, Natalie Moyle, Wendy Oxlade, Deborah Radford, Katrina.

Australasian Journal on Ageing. 29(4): 179-182; 2010.

Note: A cost effective way of raising awareness of loneliness and social well-being.

The study explored perceptions of a self-help print-delivered intervention aimed at encouraging social well-being and addressing loneliness in an Australian retirement village community. 58 residents received a series of five factsheets addressing various dimensions of loneliness. The factsheets raised awareness of the importance of social well-being and loneliness. However, the approach was considered difficult to update and was not appropriate for those from a non-English speaking background or with vision impairments. The non-face-to-face approach also was unable to address issues of loneliness associated with bereavement.

Are services and activities for socially isolated and lonely older people accessible, equitable, and inclusive?

Link to document

Mima Cattan.

Research Policy and Planning. 23(3): 149-164; 2005.

Note: Please note the year of publication. Perhaps users are consulted more these days.

This article presents finding from a survey and interviews undertaken as part of a study whose purpose was to explore the appropriateness and accessibility of activities intended to alleviate social isolation and loneliness among older people. The findings suggest that access to services and activities were often not tailored to the needs of those who were most lonely and isolated. Older people were rarely involved in developing or evaluating programmes intended for the socially isolated and lonely.









Agenda for later life 2011: public policy and an ageing society

Link to document

U. K. Age. 2011.

Note: The report focuses mainly on the way national Government and the wider public sector impact on British lives as the baby boomers age. Please search for "isolat".

The barriers older people face tend to be greatest in terms of money, isolation, marginalisation, and their health and care needs. This report details Age UK's annual audit of the way public policy is shaping later life. The organisation stands up for almost 14 million people in the UK who have now reached later life.

Social exclusion among older people: a preliminary study from inner-city Melbourne Link to document

Catherine Waterhouse.: 21p; 2005.

This study investigated the views of Brotherhood of St Laurence clients, aged 48 to 75 years, on issues of social exclusion for older people. The themes explored were: income; a safe place to live; social contact and support; good health; housing; transport; independence and choice; participation and feeling heard.

Improving access to information: a key requirement for reducing social exclusion Charlie Hislop.

Working with Older People. 14(4): 38-43; 2010.

Southampton City Council is involved in a European project called Cities in Balance and has been looking at how older people access. Barriers to information access include lack of knowledge and use of technology, lower levels of social networking in later life, high levels of aural and visual impairment, inadequate language and literature skills to understand modern communication and a strong distrust of corporate branding and advertising. Older people prefer to receive information by word of mouth, are more likely to retain information if it is useful at the time it is received, want to be able to access information as and when they need it and are often likely to need assistance and interpretation in order to use information. The author concludes that information strategies for older people also require strong partnership working through community and neighbourhood networks.

Risk factors and intervention programs for depression in nursing home residents: nursing home staff interview findings

Namkee G. Choi, Richard J. Wyllie and Sandy Ransom. Journal of Gerontological Social Work. 52(7): 668-685; 2009.

25 nursing home staff members were interviewed to examine their perceptions and experiences of risk factors for residents' depression, current depression intervention programmes and specific needs for staff training. The interviewees identified residents' sense of loss and grief and feelings of isolation and loneliness as the causes of their depression. Barriers to providing effective depression interventions were: an overdependence on antidepressant medication, low Medicaid reimbursement rate, staff shortages, residents' attitudes and nursing home culture. Staff members wanted training on skills to monitor nonverbal signs and changes and to systematically screen for different types of depression; education about antidepressants and their effects, and systematic training in different types of psychosocial and behavioural interventions for late-life depression in residents with various levels of physical disabilities and cognitive impairments.













THE DEPARTMENT OF INTERNAL AFFAIRS



HAWKE'S BAY ELDERLY **SERVICE PROVIDER SURVEY REPORT**

JUNE 2011









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Executive summary

This research was undertaken in response to Statistics New Zealand figures indicating that between 2010 and 2031 there would be a significant increase in the elderly population in New Zealand.

The Department of Internal Affairs (DIA) manages Lottery and COGS (Community Organisation Grants Scheme) funding. Elderly service providers are among the annual funding recipients. As well, many elderly service providers have funding contracts with other government organisations and/or receive grants from a variety of community funding agencies.

The research suggests that the expected increase in New Zealand's elderly population will have an impact on the future capacity of elderly service providers to adequately meet the needs of their members/clients.

This report looks at the Hawke's Bay region and is based on the results of the surveys undertaken by DIA Napier with participating elderly service providers. These elderly service providers were chosen because they are Lottery and COGS funding recipients.

The scope of this research is limited to the social and/or advocacy services provided by the participating elderly service providers. Intentionally excluded are the service providers undertaking services in the areas of health, politics, sports, philanthropy and religion.

Additionally, only those members/clients who visit the participating elderly service providers for social activities have been surveyed. members/clients who attend these elderly service providers through government-contracted services such as Elder Abuse have been excluded.

Two surveys were undertaken: one with 11 Hawke's Bay elderly service provider managers/trustees and the other with 321 of their members/clients.

Survey 1:

The manager/trustee survey was undertaken to answer the following question:

"Is the current level of elderly services in Hawke's Bay able to manage future elderly population growth?"

The results of this survey suggest that the current level of service provision will not be able to manage the expected elderly population growth in the future.

The main issues that will impede these elderly services from managing expected elderly population growth in the future include the:

 inability of elderly service providers to source sustainable funding without which it is not possible to keep operating under their current structures









expected growth in the number of members/clients from low socioeconomic environments without significant additional financial contribution towards undertaking relevant activities for their benefit.

Survey 2:

The objective behind the members/clients survey was to answer the question below:

"Does the current level of services for elderly meet your needs?"

It appears from the results of this survey that the members/clients are currently very satisfied with the level of services they receive from the elderly service providers.

A large percentage of the members/clients are European, female and have an income of \$25,000 or less.

There are, however, emerging issues that will impact on the future satisfaction of elderly members/clients. These include affordability of services, transportation costs and the desire of members/clients to have increased availability of services.

This report recommends that DIA Napier be given permission from the Team Leader, Wellington and Hawke's Bay, to:

- support and encourage the elderly service providers who have participated in this research, to further discuss the gaps in information and the questions emerging from the survey findings
- engage with key community stakeholders to identify what joint activities can be undertaken to ensure quality future services for the elderly in Hawke's Bay.









Background

NATIONAL OVERVEIW OF THE ELDERLY POPULATION

Statistics New Zealand figures show that by 2051, one in four New Zealanders will be aged 65 years and over, and of them 24% will be over 85 compared to 11% in 2001. The largest increases in the older population are projected to occur between 2021 and 2031 when the "baby boom" generation of the 1950s and 1960s will have moved into this age group.

Population ageing has policy implications because government, national and local, is largely responsible for the funding and provision of age-related services. Older people need more health services than younger people. An increased ageing population will require an increase in the level of resources devoted to health care.

The Ministry of Social Development developed the New Zealand Positive Ageing Strategy in 2001 in response to issues identified as a result of the projected growth in the number of older people arising from the large population of "baby boomers" beginning their entry into retirement. The purpose of the New Zealand Positive Ageing Strategy is to improve opportunities for older people to participate in the community in whatever ways they want to.

The concern arises around the potential burden that a lower number of people under 65 will have to support the needs of an increasingly older population.

The goals of the New Zealand Positive Ageing Strategy are listed below.

Income	Secure and adequate income for older people			
Health	Equitable, timely, affordable and accessible health services for			
	older people			
Housing	Affordable and appropriate housing options for older people			
Transport	Affordable and accessible transport options for older people			
Ageing in place	Older people feel safe and secure and can age in place (in their			
	homes)			
Cultural diversity	A range of culturally appropriate services allows choices for older			
	people			
Rural	Older people living in rural communities are not disadvantaged			
	when accessing services			
Attitude	People from all ages have positive attitudes to ageing and older			
	people			
Employment	Elimination of ageism and the promotion of flexible work options			
Opportunities	Increasing opportunities for personal growth and community			
	participation			

According to the New Zealand Positive Ageing Strategy, the involvement of local government, businesses and the community sector is required for the









achievement of these goals. No single agency can be solely responsible for delivering services to the elderly.

The National Health Board report entitled Trends in Service Design and New Models of Care (2010) identified the following implications for an ageing population:

Change pressures	Implications			
An ageing population	The likely impact on overall demand is unclear (as people will be healthier at older ages) but the nature of required services is likely to shift toward an emphasis on long-term conditions and associated support services and towards increased complexity (for example patients will tend to have more comorbidities, requiring longer lengths of stay in hospital and more complex procedures)			
An ageing population	Increased demand for more culturally responsive			
amongst Maori,	support services			
Pacific and non- Europeans				
Large variances in the	Workforce shortages and pressure to shift the local			
distribution of ageing	focus of health and support services from young to old			
Labour shortages as the workforce ages, especially in rural areas	health professionals, more effective use of available			

HAWKE'S BAY ELDERLY POPULATION OVERVIEW









Hawke's Bay residents aged 65 years and over account for 13.9% of the resident population - compared to the national average of 12.3%. This equates to 20,521 elderly residents aged 65 years and over residing in Hawke's Bay.

Territorial	Age in Years									
Authority	0 -9	10 – 19	20 – 29	30 – 39	40 – 49	50 – 59	60 – 69	70 – 79	80 +	Total
Wairoa	17% 1,434	16% 1,380	10% 825	11% 969	15% 1,269	14% 1,167	9% <i>7</i> 35	6% 501	2% <i>2</i> 01	8,481
Hastings	16% 11,046	16% 11,382	10% 7,086	13% 9,291	15% 10,710	13% 8,925	8% 5,979	6% 3,969	3% 2,457	70,842
Napier City	13% 7,461	15% 8,130	11% 5,844	13% 7,248	15% 8,088	13% 7,152	9% 5,211	7% 3,894	4% 2,337	55,359
Central Hawke's Bay	14% 1,833	15% 1,995	9% 1,167	12% 1,614	16% 2,019	15% 1,935	10% 1,242	6% <i>7</i> 38	3% 423	12,957
Hawke's Bay Region Total	15% 21,774	16% 22,887	10% 14,922	13% 19,122	15% 22,083	13% 19,179	9% 13,167	6% 9,102	4% 5,418	147,639
NZ Total	14% 561,555	15% 506,228	13% 513,417	14% 578,112	15% 607,125	12% 486,315	8% 328,152	5% 218,181	3% 128,898	4,027,953

Table sourced from Statistics New Zealand 2006 Census data

While the percentage of Hawke's Bay's elderly population is higher than the national average by only 1.6%, there are high densities of elderly population in Napier City, the suburb of Havelock North in Hastings and Waipukurau. To be precise:

- 15.6% of people in Napier City are aged 65 years and over
- 22% of people in Havelock North are aged over 65 years and over
- 19.3% of people in Waipukurau are aged 65 years and over.

Sourced from Statistics New Zealand 2006 QuickStats data

HAWKE'S BAY PROJECTED ELDERLY POPULATION FROM 2011-2021 BY ETHNICITY











The table below shows figures sourced from Statistics New Zealand – Sub national Ethnic Population Projections.

For the purpose of this table, the figures displayed represent:

- the population projection numbers for the 65+ years age group
- the percentage of 65+ year olds per ethnicity.

	European 65+ years	Maori 65+ years	Pacific Island 65+ years	Asian 65+ years	Total 65 + years	% of total HB population
Hawke's Bay						
Population projection numbers for the 65+ years age group 2011	21,500	1,900	200	300	23,900	172,600 (13.8%)
Population projection numbers for the 65+ years age group 2021	28,400	3,100	300	600	32,400	180,100 (17.9%)
Percentage of 65 +year olds per ethnicity 2011	17.5%	4.9%	2.8%	6.5%		
Percentage of 65 +year olds per ethnicity 2021	23.2%	7.2%	3.2%	9.8%		

LOTTERY GRANTS BOARD AND COGS FUNDING OVERVIEW









The Lottery Grants Board vision is: "New Zealanders building strong sustainable communities".

The 'Model to Focus Grant Activity' is supposed to contribute to the desired end state of:"connected communities and a high quality of life."

The key funding objectives of Lottery community funding are to:

- · support volunteers
- enable people to help themselves
- enhance community wellbeing and address disadvantages
- promote community participation, inclusion and identity.

The applicants must meet at least one of the above objectives.

The applicants must also meet at least two of the following key criteria to be considered for funding:

- enhance capability and increase capacity
- mitigate community organisation funding gaps
- consider the needs of older people, Pacific people and other ethnic communities, people with disabilities, women and youth
- have regards for the needs and aspirations of Maori.

The elderly are specifically mentioned as a priority group at the National Lottery as well as the Hawke's Bay Lottery Community Committee level.

ELDERLY SERVICES IN HAWKE'S BAY









A search through the Charities Commission Register (14 October 2010) identified 189 service providers under the search criteria of:

- social service
- elderly
- · Hawke's Bay.

Refining the search to filter out those community organisations undertaking health or church- related activities resulted in the identification of 77 Hawke's Bay groups registered as agencies providing some form of social or advocacy services for the elderly.

Out of these 77 Hawke's Bay groups, a total of 48 are registered as Lottery and/or COGS recipients and funded to provide some services for elderly clients.

A further breakdown was conducted to identify service providers that:

- are 100% elderly clients focused
- provide social and/or advocacy services
- work within Hawke's Bay
- · receive Lottery and/or COGS funding.

This resulted in a total of 13 Hawke's Bay community organisations that receive Lottery and/or COGS funding to provide social and/or advocacy services for only elderly clients. These are:

- Heretaunga Seniors
- 60s Up Movement
- AFB Lusk
- Ahuriri Kahui Pakeke
- SeniorNet Hawke's Bay
- Napier Day Care for the Elderly
- Taradale Senior Citizens
- Age Concern Napier
- Age Concern Hastings and CHB (Considered two distinct groups)
- Age Concern Havelock North
- Age Concern Flaxmere
- Age Concern Wairoa.

Method











SCOPE OF PROJECT

To gain agreement from the 13 identified groups to be part of this project. This will involve undertaking an organisational assessment, completing an interview questionnaire and involvement in providing members with the opportunity to participate in a client satisfaction survey. (Appendix 1)

The project intends to:

- provide a combined overview of the income, expenditure and client numbers of the groups participating in this project, in addition to the elderly services provided by them
- conduct an assessment of the elderly services through surveying the responses of the elderly service managers/trustees to the following question: (Appendix 2)

"Is the current level of elderly services in Hawke's Bay able to manage future elderly population growth?"

conduct an assessment of client satisfaction via clients involved with these services to answer the question: (Appendix 3)

"Does the current level of services for the elderly meet your needs?"

The scope of this report is limited to:

- social and/or advocacy services provided by the 13 identified community services providers
- undertaking two assessments via surveys
- reporting on the results of the surveys

OUTLINE OF THE ASSESSMENT PROCESS TO BE CONDUCTED

Elderly service provider managers/trustees survey

Meeting, either face-to-face or as agreed, to participate in assessment to identify:

- current services delivered
- how effective their organisational structure is as rated against a set of indicators
- future service plans
- · issues in operating.

Elderly service provider members/clients survey

The members/clients to be given surveys via staff and volunteers of the elderly services they attend to identify:

- the type/s of services received
- the reason/s for visiting services
- regularity of the services over a one week period









- rating of the services delivered
- suggestions for improving services
- barriers to attending services.

Assistance was sought from, and given by, DIA Research & Evaluation Unit on the survey design. This included advice with regard to developing survey questions and managing information.

MANAGING INFORMATION OBTAINED FROM THIS PROJECT

There is an expectation that no individual elderly service provider or any member/client who participates in this project will be identified.

The elderly service providers that agree to participate will be listed in the final report, but all information will be shown as an evaluation of the combined survey results or a random number will be assigned to each service provider.

There will be two types of reports written from this project:

1. Individual elderly service provider reports

These reports will provide information to each participating service provider showing survey results relating to their individual service from the managers/trustees as well as the members/clients perspective. These reports will belong to the particular service provider to use the information as they see fit. These reports will also be available to the DIA staff for internal purposes only.

2. Final report

This report will contain the combined results of all participating elderly service providers and will be available to all:

- participating elderly service providers
- interested stakeholders
- DIA staff.

This report will show the combined results of the two surveys conducted with the managers/trustees and the members/clients.

This report will identify if there are any common findings, themes or observations from the survey results.









Results

Twelve elderly service providers out of the 13 identified agreed to be part of this project. The groups that took part in this project were:

- Heretaunga Seniors
- 60s Up Movement
- AFB Lusk
- Ahuriri Kahui Pakeke
- SeniorNet Hawke's Bay
- Napier Day Care for the Elderly
- Age Concern Napier
- Age Concern Hastings and CHB (Considered two distinct groups)
- Age Concern Havelock North
- Age Concern Flaxmere
- Age Concern Wairoa.

All 12 interviews with the managers/trustees were conducted during March 2011. Interviews with 11 participating elderly service providers were completed.

Each participating service provider was given members/clients surveys for staff and/or volunteers to hand out, collect and post back to DIA Napier office.

Nine out of the 12 participating elderly service providers returned their member/client surveys. The 9 groups were:

- Heretaunga Seniors
- 60s Up Movement
- AFB Lusk
- Age Concern Napier
- Age Concern Hastings and CHB (Considered two distinct groups)
- · Age Concern Havelock North
- Age Concern Flaxmere
- · Age Concern Wairoa.

The final combined results are from:

- 11 elderly service provider managers/trustees surveys and interviews
- 321 individual service provider members/clients representing 9 elderly service provider groups.







Activity undertaken:

A combined overview of income, expenditure and client numbers of the groups participating in this project, in addition to the elderly services provided by them

A total of 12 groups	Combined findings	Comment		
Total income per annum	\$877,344	Average of \$73,112		
2010		income per group		
Total expenditure per	\$918,642	Average \$76,553		
annum 2010		expenditure per group		
Funding sources 2010				
 Government 	\$54,211	Funding for elder abuse		
grants	(6%)	services and mobility		
		scooter assessments		
		and training		
Community grants	\$501,640 (57%)	Variety of funders		
 Self-generated 	\$321,493	Sourced from raffles,		
income	(37%)	subscriptions,		
		memberships,		
		meal purchases,		
		activity fees		
 Lottery/COGS 	\$195,639	Predominantly to		
	(39% of total	support salaries and		
	community grants)	volunteer and		
A constant at a constant	10.000	administration costs		
Annual client numbers	10,000	This figure was sourced from Lottery and COGS client registrations. The number appears to represent the number of potential elderly people these groups could attract in the area they operate in		
	570	This was the total number of client surveys the groups asked for to survey their clients over a one week period		
Paid staff	32	2.4 paid workers per		
		group on average		
Volunteers	246	18 volunteers per group		
		on average		
Total Lottery/COGS	\$1,382,392.00	\$138,239 spent per year		
amount of funding from		on average on these		
2001 -2010 to all 12		services through		
groups		Lottery/COGS		









GENERAL FINDINGS FROM COMBINED RESULTS

Lottery/COGS funding for these groups comes from two Lottery Committees (National and Hawke's Bay) and three COGS Committees (2 in Hawke's Bay and 1 in Gisborne).

As there are different Lottery/COGS funding regions funding these groups, the percentage of funding that each region had allocated for these groups from their annual budgets could not be calculated.

Activity undertaken:

An assessment of the elderly services through surveying the responses of elderly service managers/trustees participating in the project

The full results are shown in Appendix 4.

KEY FINDINGS FROM THE MANAGERS/TRUSTEES SURVEY RESULTS

The combined percentage ratings from all 11 groups who completed the organisational assessment are as follows:

- mission, purpose and goals –90%
- organisational structure –89%
- board participation –64%
- fiscal resources –89.3%
- capacity of volunteers -62.6%
- services and/or programmes -79.3%.

The five main issues these groups currently face are:

- sourcing funding to provide affordable and quality activities and outings to stimulate the members/clients mentally and physically
- · needing to look for alternative fundraising options to provide sustainable and consistent service delivery
- having enough skilled volunteers to lead activities
- increasing costs in transporting the members/clients to and from activities
- increasing costs to provide meals to the members/clients.

The groups have predicted that in the <u>next ten years</u> there will be:

- increased membership numbers as elderly population grows
- increased numbers of members/clients that require more intensive assistance to address multiple social needs including the inability to meet their own basic needs
- the need for "younger" seniors to be utilised to support the "older"
- more trends towards the one-stop shop approach to assist the elderly in multiple areas of their lives
- the need for elderly services to merge or work closer together











- the need to meet the support requirements of elderly people, particularly those aged 75-95 who are still able and want to live as independently as possible in the community
- the need to provide affordable activities to cater for the expected future fitter and healthier senior citizens.

Activity undertaken:

An assessment of client satisfaction through members/clients involved with participating services.

The full results are shown in (Appendix 5)

KEY FINDINGS FROM MEMBERS/CLIENTS SURVEY RESULTS

Out of a total of 321 members/clients responding to the survey:

- 94% were of NZ European or European ethnicity, 2.8% other, 2.8% Maori, 0.4% Asian, 0% Pacific Islander and 0% Indian
- 83% were female, 17% male
- 13% had an annual income of \$10,000 and under, 64% between \$10,001 and \$20,000, 13% between \$20,000 and \$25,000, 5.5% between \$25,000 and \$30,000 and 4.5% over \$30,000
- 66% were aged between 71-85 years, 18% were between 86 and 91+ and 16% were between less than 65 and 70.

Additionally:

- 44% visited the service 3-5 times per month (averaging once a week)
- 87.5% stayed 1-4 hours each time they visited
- 96-98% were very satisfied or satisfied with the hours of opening, helpfulness and courtesy of staff, and the quality and affordability of the activities or services provided
- 49% belonged to other services, groups and clubs.

The top three services members/clients came for were:

- > social company (43%)
- activities and entertainment (38%)
- ➤ lunch/food (19%).

The problems that the members/clients had in getting to and from elderly services were identified as:

- having to rely on friends for transport
- mobility scooters are an unsuitable transport option in wet conditions
- many members/clients can no longer drive or are without cars. There are not enough current service provider vans to cater for those who need to use them to travel to and return from a service. This causes delays and inconveniences in getting the members/clients to and from some services
- bus timetables are not compatible with service opening hours
- it has become unaffordable for many members/clients to use private transport to travel to and from activities.











Other activities that the members/clients would prefer were identified as:

- meals available more often during the week
- elderly services open every day with a drop-in type facility for them to
- a one-stop centre for elderly that can accommodate multiple activities and health clinics
- more opportunities to participate in community festivals and events and visit other districts.











Discussion

The scope of this project was very narrow, and the elderly service providers that participated were chosen to evaluate only the 'social' activities they undertake with the members/clients. Discussions about contracted services undertaken for government agencies were deliberately avoided to identify why members want to attend these providers, as opposed to "needing" to visit these providers.

There were a total of 321 members/clients of nine of the11 elderly service providers who participated in this project. The total number of the members/clients of all 11 elderly service providers is not known.

Statistics New Zealand figures for 2011 show that Hawke's Bay has 32,400 residents aged 65 years and over. The survey was completed by 321 elderly clients representing only 0.99% of the current elderly population of Hawke's

Similarities in activities that all services undertake:

Ten out of the 11 elderly service providers who participated in the survey undertake similar services and activities. Some offer more transport assistance than others and/or have takeaway meals available for the members/clients to purchase. One elderly service provider provides computer training as its core service.

The majority of the activities that are provided require a minimal level of physical fitness. This suggests that a majority of the members/clients have limited physical abilities and prefer to undertake more sedate activities.

The activities of "Sit and Be Fit" and indoor bowls are the most strenuous exercises that the members/clients undertake. A majority of the members/clients attend these services to play cards and housie, do craftwork, have a meal and socialise with each other.

A majority of the members/clients (89%) indicated that they were very satisfied or satisfied with the activities, service delivery and the cost of the programmes they participate in.

All the participating elderly service providers plan and deliver activities during set time periods on specific days of the week.

Organisation assessment:

From the combined results of the Organisational Warrant of Fitness (WOF), the two main areas for improvement are with regard to:

- board participation –64%
- capacity of volunteers -62.6%.









The participating elderly service providers identified the need to attract and retain a pool of 'younger' and healthier older people to work in volunteer roles for group activities. This may prove difficult with the statistical information showing that people may require to work past the current retirement age because of expected skills shortage in the workforce in the future increasing the age of retirement in the process, and that there is the need to be more financially secure before becoming reliant on government superannuation.

Despite elderly service provider managers/trustees indicating the need to provide more volunteer training and mentoring, the members/clients have indicated a high level of satisfaction (89%) with the helpful attitude of staff members and volunteers.

Demographics of clients:

The responses showed that the majority of elderly people who attend these services belong to a set of distinctive and narrow demographic groups, namely:

- NZ European/European (96.8%)
- female (83%)
- between 71-85 years of age (66%)
- with an income of \$25,000 and under per annum (90.5%)
- attending the services for social contact.

The results show that 2.8% of the members/clients are Maori and 0.4% Asian. There were no recorded Pacific Island or Indian clients.

Maori and Pacific Island communities operate by making all family (including extended family) members co-operate and provide mutual support to meet each other's needs.

Maori have a strong whänau/hapu support system, and Pacific Island people of all ages are supported by their church.

Ninety per cent of the members/clients live on an income of \$25,000 or less. Health research undertaken in most developed countries suggests a strong connection between low income and poor health.

As per a Treasury Working Paper entitled Poverty, Income Inequality and Health (2001) by Judge and Paterson, people with low incomes face specific challenges in maintaining their health. Also, they are more likely to live in poor environmental situations with limited access to health care facilities. These may include inadequate housing and food, limited resources to stay warm and inability to participate in social activities.

It was identified from the members/clients survey that 52% of the members/clients use service provider vans or public transport or walk to get to and return from the elderly service providers centres. This suggests that many members/clients are fully reliant on others to transport them to and from the participating elderly service provider centres.











Forty-nine percent of the members/clients belong to other services, clubs or groups. These members/clients are engaged in a similar range of social or light craft or exercise activities with a variety of other service providers.

The members/clients observed that they would want the participating elderly service providers to be open every day, provide a drop-in type facility for them to meet informally and operate a one-stop centre that can accommodate multiple activities, meals and health clinics.

The one-stop centre concept suggested by the members/clients may have been developed as a means to reduce their financial costs in visiting other service providers for a limited period of time each week and paying each of the service providers to engage in very similar activities.

There would be definite savings in both transport and subscription fees for the members/clients if there was one service able to better provide for their social and recreational needs. As well, other types of services, say, those relating to health, budgeting and housing could be delivered through this central point.

Issues with obtaining future funding to sustain services:

The participating elderly service providers have reported a significant increase in the cost to provide transport and meals to the members/clients. Some services are struggling to attract adequate funding to provide a variety of quality and affordable activities.

The three sources of funding for the participating elderly service providers are community grants (57%), member contributions (37%) and government grants (6%).

Sourcing adequate funding is likely to become a serious concern for the participating elderly service providers as the current pool of community and government funding is shrinking or being allocated to support new initiatives.

It will also be difficult for the participating elderly service providers to increase the participation costs for the current members, as a majority of them (90.5%) receive an annual income of \$25,000 or less.

Additionally, it is apprehended that a significant number of future elderly people will be within the low socio-economic bracket, as the effects of the recession and increased costs of living are placing limits on their ability to ensure financial security at the time of retirement.

This could result in limited opportunities for the participating elderly service providers to be able to increase future membership contributions towards future activities, despite an anticipated increase in membership numbers.

The results have shown that there are important gaps in information that were not covered by the limited scope of the surveys undertaken. In particular, this











research could benefit from further investigation around the following questions:

- What percentage of the total membership of the 10 participating elderly service providers is 321 (that is, the number of members/clients who answered the survey)?
- What percentage of these members/clients have supportive family members living in close proximity to them? Do the results suggest that these members/clients live alone and have limited family or extended family support networks around them?
- Why is there a low percentage of elderly men attending elderly service provider activities? Are the activities provided too female-orientated, or not operating within environments that suit men?
- Why are the more affluent elderly residents in Hawke's Bay not attending these elderly service provider activities?
- Have any studies been undertaken on the current members/clients to identify what issues they face in meeting their basic needs and accessing adequate health care?
- What planning is being done by the participating elderly service providers in ensuring future sustainability of their services? In particular, is consideration being given to looking at options including:
 - > sharing provider resources
 - providing more services/activities
 - increasing operating hours of activities
 - having in place the one-stop shop being asked for by members/clients
 - sourcing new funding revenues.
- Is it expected that there will be a future growth in the number of elderly Maori, Pacific Island and non-European members in the future? Why are the participating elderly service providers not attracting non-European ethnic groups?
- Current funding of these services is predominantly benefiting elderly European members. Does this indicate that the funders may not be adequately supporting or having any regard for the needs of elderly Maori, Pacific Island people and other ethnic groups?

These issues need to be explored further to ensure that no elderly ethnic groups are being disadvantaged or deprived of the opportunities to stay socially connected in their communities.











Conclusion

This report is based on DIA Napier undertaking surveys with participating elderly service provider managers/trustees in Hawke's Bay and undertaking a survey with their members/clients.

The managers/trustees survey was based on answering the question:

"Is the current level of elderly services in Hawke's Bay able to manage future elderly population growth?"

The results of this survey suggest that the current level of service provision will not be able to manage elderly population growth in future.

The survey results indicate a rise in costs to provide quality activities, transporting members/clients and attracting and retaining skilled volunteers.

Service providers are aware that in the next 10 years, there will be an increase in the number of members/clients. There will also be the need for:

- more intensive assistance for the members/clients
- more sustainable funding to continue to operate.

Some of the service providers have highlighted the need to merge or work closer together to share resources and be able to offer the members/clients a variety of activities.

The members/clients survey was based on answering the question:

"Does the current level of services for elderly meet your needs?"

The results of this survey show that the members/clients are currently very satisfied with the level of services they receive from the participating elderly service providers.

However the members/clients of the participating elderly service providers are predominantly from a set of very narrow demographic groups: they are primarily European and female and have an income of \$25,000 or less.

The three main reasons that the members/clients attend these services are social contact, meals and activities. Many members/clients belong to other groups, clubs or services that provide similar activities.

Suggestions for improvements include the development of a one-stop shop for elderly that operates as a drop-in type facility providing affordable transport and activities.











This project identified that the participating elderly service providers are catering to the needs of a small percentage and a narrow demographic band of the Hawke's Bay elderly community.

The results show that the narrow focus of this project has highlighted a number of questions and information.

The report recommends that the participating elderly service providers should be encouraged to further discuss the gaps in information and the questions emerging from the survey findings. This might assist them by providing a basis for planning future service delivery to ensure that they can support increased membership numbers.

DIA is in a position to provide advice and assistance to these service providers. Supporting elderly service providers and their members has the potential to contribute to the realisation of the key objectives of Lottery Grants Board, namely:

- · supporting volunteers
- enabling people to help themselves
- enhancing community wellbeing and addressing disadvantage
- promoting community participation, inclusion and identity.









Recommendations

The report recommends that the participating elderly service providers should be encouraged to discuss the gaps in information and the questions emerging from the survey findings. This might assist them by providing a basis for planning future service delivery to ensure that they can support increased membership numbers.

The types of opportunities that exist for the participating elderly service providers include:

developing marketing and community awareness to attract more:

- financially independent members/clients
- members from other ethnicities
- male members/clients

formulating strategies to:

- deliver appropriate cultural services
- pool resources between services
- work together to reduce operation costs
- investigate the "one-stop shop" concept further
- attract and retain quality volunteers
- tap into a wider variety and source of funding.











References

Office of the Senior Citizens (Administered by Ministry of Social Development), The New Zealand Positive Ageing Strategy 2001. http://www.msd.govt.nz/about-msd-and-our-work/publicationsresources/planning-strategy/positive-ageing/index.html

Ministry of Health (2010), National Health Board Trends in Service Design and New Models of Care.

http://www.nationalhealthboard.govt.nz/sites/all/files/trends-service-designnew-models-care-jul2010.pdf

Statistics New Zealand 2006 Hawke's Bay resident population www.stats.govt.nz/~/media/Statistics/Publications/.../2006.../pdf

Statistics New Zealand (2009), Sub national Ethnic Population Projection 2011-2021.

http://www.stats.govt.nz/browse for stats/population.aspx

K. Judge and Paterson, Iain (2001). Poverty, Income Inequality and Health. http://www.treasury.govt.nz/publications/research-policy/wp/2001/01-29/twp01-29.pdf









Appendix

Appendix 1



Te Tari Taiwhenua

INVITATION TO PARTICIPATE

Elderly Service Provider Project

As the Manager/Coordinator/Trustee of an elderly service provider you are invited to participate in a project being undertaken by the Napier Office of the Department of Internal Affairs.

Your participation is optional.

Attached is the project brief to provide information on the purpose of this project.

If you are interested in participating in this project please email:





PROJECT BRIEF











PURPOSE OF PROJECT

Statistics New Zealand predicts that by the end of 2018 one in four New Zealanders will be over the age of 65. This has implications for future demand for elderly related services including health.

This has prompted a need to undertake a research project to discuss the following issue:

Is the current level of elderly services in Hawke's Bay able to effectively manage future elderly population growth?

SCOPE OF PROJECT

A search on the Charities Commission website and the Lottery Grants Administration website was undertaken to identify service providers that:

- are 100% elderly client-focused
- provide social and/or advocacy services
- work within Hawke's Bay
- receive Lottery and/or COGS funding.

The search results showed a total of 13 Hawke's Bay community organisations that receive Lottery and/or COGS funding to provide social and/or advocacy services for only elderly clients. These groups are:

- Heretaunga Seniors
- 60s Up Movement
- AFB Lusk
- Ahuriri Kahui Pakeke
- SeniorNet Hawke's Bay
- Napier Day Care for the Elderly
- Taradale Senior Citizens Association
- Age Concern Napier
- Age Concern Hastings and CHB (considered two groups)
- Age Concern Havelock North
- Age Concern Flaxmere
- Age Concern Wairoa.

It is the above 13 community organisations that will be asked to be part of this project.

PROJECT ACTIVITIES

The project intends to:

· conduct an assessment of elderly services through surveying Managers of these services to answer the question:

"Is the current level of elderly services in Hawke's Bay able to effectively manage future elderly population growth?"

Conduct an assessment of client satisfaction through surveying clients involved with these services to answer the question:











"Does the current level of services for the elderly meet your needs?"

produce a report discussing survey findings to provide information to the participating elderly services providers.

SURVEY PROCESS

Elderly services provider's managers' survey:

Meeting, either face-to-face / by telephone /via email with elderly services provider's managers to identify:

- · current services delivered
- annual number of clients
- effectiveness their organisational structure
- barriers to networking with other groups
- future service plans
- · operational issues.

Elderly services provider's clients' survey:

Engaging support for elderly services provider's managers/staff/volunteers to conduct the client survey over a one week period to identify:

- · type/s of services received
- reason/s for visiting this service
- regularity of services over a one week period
- service/s preferred and the reason/s and why
- rating of the service/s delivered
- suggestion/s for improved service/s
- barrier/s to attending service/s.

Note: The client survey will not identify any individual clients who participate.

The collection and evaluation of the information for the survey will be undertaken by Department of Internal Affairs staff member. A completed report will be given to participating elderly services providers for information purposes.





Appendix 2 **ELDERLY SERVICE PROVIDER MANAGER/COORDINATOR/TRUSTEE SURVEY**

This survey is about the identifying if current services provided to elderly people are meeting their needs. The survey results will be used to help elderly service provider groups to plan better services.

The survey will be analysed by the Department of Internal Affairs. The results will be used to help the Department to ensure elderly services are relevant to the needs of the community.

Mission, purpose and goals.	Yes	No	Some	Comments
Do elderly services have:				
A clearly written mission statement?				
An annual process for setting/renewing				
goals?				
A strategic plan?				
An annual report?				

Organisational structure.	Yes	No	Some	Comments
Do committees:				
Have a clear statement of purpose?				
Have a specific role/job description for each				
staff member?				
Have a specific role/job description for each				
volunteer?				
Review membership and structure annually				
for relevancy?				
Systems/practices in place to ensure				
compliance with all legal requirements?				













Board participation.	Yes	No	Some	Comments
Does the organisation currently have:				
Committed and active members?				
Enough people to carry out its purposes and goals?				
Board members with the right mix of skills to lead/direct?				
No difficulties in recruiting new Board members?				
100% attendance of all Board members at Board meetings?				
Fiscal resources.	Yes	No	Some	Comments
Are the organisation's resources:				
Costed out on a cost per activity/project				
budget				
Sourced from a variety of funders/contracts?				
Reported to Board at all Board meetings?				
Partly made up of membership				
subscriptions?				
Partly made up of fees from clients attending activities/services?				

Capacity of employees and volunteers.	Yes	No	Some	Comments
Do employees undergo induction when				
commencing work for the organisation?				
Do volunteers undergo induction when				











commencing work for the organisation?		
Do employees have regular mentoring and		
coaching sessions?		
Do volunteers have regular mentoring and		
coaching sessions?		
Do employers attend training and		
development courses that are paid for by the		
organisation?		
Do volunteers attend training and		
development courses that are paid for by the		
organisation?		
In your view do employees have the		
required skills to assist the organisation?		
In your view do volunteers have the required		
skills to assist the organisation?		
Is the recruiting process for new employees		
easy?		
Is the recruiting process for new volunteers		
easy?		
Is retaining adequate numbers of employees		
easy?		
Is retaining adequate numbers of volunteers		
easy?		

Services and/or programs	Yes	No	Some	Comments
Ares there action plans for each programme				
or activity?				
Are evaluations undertaken on each				











programme or activity?	
Are outcomes from each programme or	
activity measured?	
Are client/customer/participant survey	
evaluations undertaken on each programme	
or activity?	
Is the number of	
clients/customers/participants recorded for	
each programme or activity?	
Is the annual number of clients receiving	
help from your group recorded?	
Is the ethnicity, age and gender recorded for	
each client/customer/participant?	
Is a final report on the evaluation of	
programmes/activities given to your	
Committee for annual planning purposes?	

Total score out of			
Total number of questions	Yes	No	Some
·			
Multiply total by	5	0	2.5
Total			
% score			













General discussion section:

Organisation

1. group	When did you last review each client activity/service your undertakes in terms of:
	Cost effectiveness?
	Meeting clients' needs?
2.	Can you identify the groups or forums your organisation regularly works with or attends?
3. plann	What are the main issues your organisation is facing in ing future activities/services?
4 years	What do you think your organisation will look like in 10 time?





Job role	
How long have your worked in the field of elderly services?	
How long have you worked for this elderly service provider?	
Have you had any other job roles with this elderly service provider? (If yes, can you please list them?)	
How long have you been in the position of Manger/Coordinator/	
Trustee!	
Organisation:	
Person completing survey:	
Date:	
Thank you for your time in responding to this survey	











ELDERLY SERVICES CLIENTS SURVEY

This survey is about the identifying if current services provided to elderly people are meeting their needs. The survey results will be used to help elderly service provider groups to plan better services.

The survey is **anonymous** and the answers you give will be added together so you can't be identified.

The survey is voluntary and you do not have to take part.

This is not a test and there are no right or wrong answers.

Please tick the box of the answer you choose or write your answer in the space provided.

The survey will be analysed by the Department of Internal Affairs. The results will be used to help the Department to ensure elderly services are relevant to the needs of the community.

The survey forms will be destroyed once the results have been analysed.

1. How many times have you used this service over the last month?

Once	
Two – three times	
Three – five times	
Five to ten times	
More than ten times	

2. How long do you stay each time you visit this service?

1 – 2 hours	
2 – 3 hours	
3 – 4 hours	
4 – 5 hours	
5 – 6 hours	
6 – 7 hours	
Over 7 hours	









3. How do you rate this service in the following areas?

	Very satisfie d	Satisfie d	Neither satisfied nor dissatisfied	Dissatisfie d	Very dissatisfied
Hours of opening			dissatisfied		
Helpfulness and courtesy of staff					
Activities or services provided					
Affordability of activities or services					

4. What is the main type of transport you use to get to this service?

Service van/bus	
Own transport	
Public transport	
Walk	

5. Do you have any problems travelling to this service?

Yes	
No	









6. If yes, what are they?	
7. What are the three main services that you come for?	
8. Are there other activities or services you would like this service to provide?	
Yes	
No	
9. If yes, what are they?	
10. Do you have any problems regarding the quality of the activities or services?	
Yes	
No	
11. If yes, what are they?	
	











12. Do you have any problems regarding the delivery of the activities or services?
Yes
No
13. If yes, what are they?
14. Do you have any suggestions to improve the delivery of the activities or services?
Yes
No
15. If yes, what are they?
16. Are you a member of other:
Services?
Yes
No
Groups?
Yes
20









No	
No	
Clubs?	
Yes	
No	
17. If yes , what other services, g	roups or clubs do you belong to?
-	
18. What is your age group?	
65 -70 years	
71 -75 years	
76 -80 years	
81-85 years	
86-90 years	
91 years and over	
19. What is your gender?	
10. What is your gender.	
Male	
Female	
21. What is your ethnicity? (tick a	all that apply)
F	
NZ European	
NZ Maori	
European	
Pacific Island	

Asian	
Indian	
Other (please specify)	











22. What is your annual income?

\$0- \$5,000	
\$5,001 - 10,000	
\$10,001 - \$15,000	
\$15.001 - \$20,000	
\$20,001 – 25,000	
\$25,001-30,000	
More than \$30,000	

Thank you for your time.









Final Managers'/Board comments and organisational score card in no particular order **Provider 1**

Answered 32 questions with 7 questions not applicable.

Total number of questions to be scored	Yes	No	Some
32	28	7	0
Multiply total by	5	0	2.5
Total	140	0	0

Total possible score 160 (32x5)	140
% score 140/160	87.5%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 75%
- Organisational structure -80%
- Board participation –100%
- Fiscal resources -100%
- Capacity of volunteers –83.3%
- Services and/or programmes 85.7%

The results of the Management/Trustee survey show:

- This group is operating effectively in all organisational areas
- The main issues this group faces is funding to provide affordable activities and outings to stimulate members' mentally and physically
- This group anticipates a larger membership base in the next ten years. This will require the planning of new activities and programmes.

This group has approximately 72 members that meet to participate in activities, outings and listening to key community speakers. The group has no paid staff and relies on volunteers, mainly people on their committee, to plan all activities.











Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	28	9	2
Multiply total by	5	0	2.5
Total	140	0	5

Total possible score 195 (39x5)	145
% score 145/195	74.3%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 100%
- Board participation 80%
- Fiscal resources 83.3%
- Capacity of staff & volunteers 50%
- Services and/or programmes 75%

- This group has a strong organisational structure in place. This includes systems in place to comply with legal requirements around annual reporting, financial management and Board approvals for budget spending.
- There is an opportunity to strengthen in the organisational area of supporting staff and volunteers. While this is funding dependent, this group has indicated a need to develop more structured recruiting and on-going training processes. This will assist the group to maintain both adequate numbers and a higher skill level of both staff and volunteers.
- An emerging risk facing Flaxmere Age Concern is the current reliance on one person to be the central point of contact for activity planning, client work, sourcing funding streams and promoting the vision of this group. The group needs to ensure that when this person vacates their current role, the group can continue to operate strongly.
- In discussions with the Manager it was noted that this group is seeing an increase in the number of under 65 year olds wanting to become members. This age group of members tend to be unemployed or sickness beneficiaries, on low incomes and are isolated from their peers by not being active in the workforce.
- It is anticipated the next 10 years will see:
 - Increased membership numbers in both the low income individuals who cannot afford high membership fees to join other









- clubs, and those who are physically unable to participate in more active pastimes;
- > Increased numbers of members who require more assistance to address multiple social needs including food, living costs, ill health and dysfunctional families.









Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	29	3	7
Multiply total by	5	0	2.5
Total	145	0	17.5

Т	otal possible score 195 (39x5)	162.5
%	score 162.5/195	83.3%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 90%
- Board participation 60%
- Fiscal resources 90%
- Capacity of staff & volunteers 95.8%
- Services and/or programmes 75%

- This group is under the umbrella of the Waiapu Anglican Social Services Trust Board This ensures that there is strong organisational structures in place including systems in place to comply with legal requirements around annual reporting, financial management and Board approvals for budget spending.
- There is an opportunity to strengthen in the organisational area of board participation. While it is acknowledged this group has committed and active board members, there are opportunities for this group to develop policies and procedures for recruiting and retaining new board members with a wide variety and mix of skills to further enhance the work this group undertakes.
- The two main issues facing this group are:
 - Decreasing funding sources that impacts on wages and the ability of this group to promote its services
 - > Limited time to undertake research into need of members to improve programme delivery.
- It is anticipated the next 10 years will see:
 - More trends towards community based care services for increasing elderly population with a stronger promotion on healthy living
 - Changes in programme/ activity content of current elderly service providers to cater for more member's needs.









Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	32	6	1
Multiply total by	5	0	2.5
Total	160	0	2.5

Total possible score 195 (39x5)	162.5
% score 162.5/195	83.3%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 100%
- Board participation 80%
- Fiscal resources 80%
- Capacity of staff & volunteers 66.6%
- Services and/or programmes 87.5%

- There is an opportunity to strengthen in the organisational area of capacity of staff & volunteers. While it is acknowledged that this group has committed and active volunteers, there are opportunities for this group to develop policies and procedures for recruiting and regular training of volunteers to ensure the continued safe practices when working with members.
- The two main issues facing this group are:
 - Having enough volunteers with the confidence to lead group
 - Being able to afford quality entertainment for members'.
- It is anticipated the next 10 years will see:
 - > The Lusk Centre continuing to operate under its philosophy and being able to adapt and grow services to meet any future challenges of caring for elderly clients.











Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	35	1	3
Multiply total by	5	0	2.5
Total	175	0	7.5

Total possible score 195 (39x5)	182.5
% score 182.5/195	93.5%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 100%
- Board participation 100%
- Fiscal resources 100%
- Capacity of staff & volunteers 79%
- Services and/or programmes 100%

The results of the Management/Trustee survey show:

- Age Concern Napier has a robust organisational structure that provides members with activities and services that are well planned and supervised
- This group scored 100% is all organisational areas except for capacity of staff & volunteers. This area scored a high 79% and indicated a possible area of improvement exists in developing procedures for recruiting and retaining volunteers and staff with the appropriate skills to work alongside members.
- The two main issues facing this group are:
 - > Obtaining sufficient funding to cope with increased numbers of members
 - Looking for alternative funding options as traditional income sources are becoming less secure.
- It is anticipated the next 10 years will see:
 - > Growth in the senior population that will increase demand for services
 - > A need to increase elderly social activities and support programmes
 - A need for "younger" seniors to be utilised to support "older" seniors.











Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	16	9	14
Multiply total by	5	0	2.5
Total	80	0	35

Total possible score 195 (39x5)	115
% score 115/195	58.9%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 75%
- Organisational structure 60%
- Board participation 30%
- Fiscal resources 100%
- Capacity of staff & volunteers 33.3%
- Services and/or programmes 68.7%

The results of the Management/Trustee survey show:

- The results of the WOF show this group has potential to improve in the organisational areas of:
- Board participation, and
- Capacity of staff & volunteers.

This could involve the group developing a process for attracting new board members with the desired skills required to lead this group and providing volunteers with creating a more robust training programme to recruit and mentor volunteers.

- The main issue facing this organisation is the inconsistency of funding sources. Many funding sources are one-off or discretionary resulting in fluctuating and uncertain annual financial budgets. This impacts on the ability of this group to plan sustainable future activities.
- This group anticipates the next 10 years will see an increase in elderly Maori members.









Answered 37 out of 39 questions.

Total number of questions to be scored	Yes	No	Some
37	29	1	7
Multiply total by	5	0	2.5
Total	145	0	17.5

Total possible score 185 (37x5)	162.5
% score 162.5/185	87.8%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 100%
- Board participation 70%
- Fiscal resources 100%
- Capacity of staff & volunteers 86.3%
- Services and/or programmes 68.7%

- The group has robust organisational systems in place to manage financial and human resources. The group has committed and active board members and is currently looking to induct new members with fundraising skills.
- Programmes plans are undertaken for each activity and some evaluation of these activities are undertaken
- The two main issues facing this group are:
 - Looking to provide more self-sustaining activities to reduce funding dependency
 - Needing to grow capacity and skill sets for future services
- It is anticipated the next 10 years will see:
 - More of a trend towards a one-stop shop approach to assisting the elderly
 - > A significant growth in the number of elderly residents, particularly in the Hastings suburb of Havelock North.



Answered all 39 questions.

Total number of questions to be scored	Yes	No	Some
39	25	3	11
Multiply total by	5	0	2.5
Total	125	0	27.5

Total possible score 195 (39x5)	152.5
% score 152.5/195	78.2%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 80%
- Board participation 40%
- Fiscal resources 100%
- Capacity of staff & volunteers 75%
- Services and/or programmes 81%

OBSERVATIONS:

- There is an opportunity to strengthen in the organisational area of board participation. While it is acknowledged this group has committed and active board members, there are opportunities for this group to develop policies and procedures for recruiting and retaining new board members with a wide variety and mix of skills to further enhance the work this group undertakes.
- The two main issues facing this group are:
 - The increased compliance documentation needed with limited staff resources and the cost of employing skilled professional staff
 - Difficulties with small elderly services needing to develop improved services and providing evidence of outcomes to fulfil contract funding.
- It is anticipated the next 10 years will see the need:
 - > For service providers to merge and evolve to meet the needs and requirements of an increasing number of elderly people aged 75-95
 - For providers to develop more self-sustaining revenue streams.













Answered 33 out of 39 questions.

Total number of questions to be scored	Yes	No	Some
33	18	13	2
Multiply total by	5	0	2.5
Total 95	90	0	5

Total possible score 165 (33x5)	95
% score 95/165	57.5%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 50%
- Organisational structure 80%
- Board participation 100%
- Fiscal resources 50%
- Capacity of staff & volunteers 41%
- Services and/or programmes 50%

OBSERVATIONS:

- The two main issues facing this group are:
 - The increasing costs of transporting members to and from activities
 - Cost of providing meals and activities requires that a minimum weekly number of 13 members participate and maximum capacity is 20 members weekly.
- It is anticipated the next 10 years will see the need:
 - > To provide more structured services to cater for a growth in membership numbers
 - > To increase costs for activities and services provided
 - > To provide activities that cater for members who are fitter and healthier for longer.









Answered 30 out of the 39 questions.

Total number of questions to be scored	Yes	No	Some
30	26	2	2
Multiply total by	5	0	2.5
Total	130	0	5

Total possible score 150 (30x5)	135
% score 135/150	90%

The WOF scores over the 6 organisational areas were as follows:

- Mission, purpose and goals 100%
- Organisational structure 100%
- Board participation 70%
- Fiscal resources 90%
- Capacity of staff & volunteers 66.6%
- Services and/or programmes 100%

No comments or observations were made by this group.



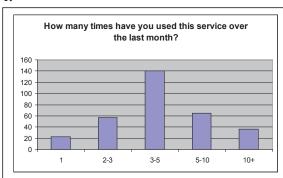




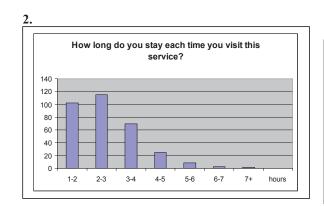
Combined Elderly Service Provider Members' Survey Results

The combined members' survey was completed by 321 people who are members of 9 elderly service providers. Some provided more than one answer to some questions and not all people answered each question.

1.

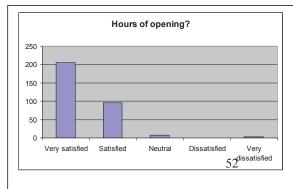


Times used	Number of	
service over a	responses from	
month	participants	
1	23 (7%)	
2-3	57 (18%)	
3-5	140 (44%)	
5-10	65 (20%)	
10+	36 (11%)	
Total	321 (100%)	



Hours stayed	Number of responses
each time	from participants
1-2	102 (31%)
2-3	115 (34%)
3-4	70 (22.5%)
4-5	25 (8%)
5-6	9(3%)
6-7	3 (0.9%)
7+	2 (0.6%)
Total	326 (100%)

3. How do you rate the service in the following areas?



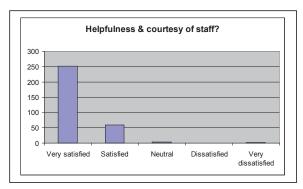
Very satisfied	205 (66%)
Satisfied	96 (32%)
Neutral	7 (1.3%)
Dissatisfied	0
Very dissatisfied	3 (0.7%)
Total	311 (100%)





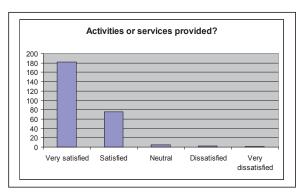


b.



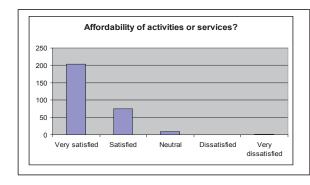
Very satisfied	252 (79%)
Satisfied	60 (19%)
Neutral	4 (1.3%)
Dissatisfied	0
Very dissatisfied	1 (0.7%)
Total	317 (100%)

c.



Very satisfied	182 (69%)
Satisfied	75 (28%)
Neutral	5 (1.9%)
Dissatisfied	2 (0.8%)
Very dissatisfied	1 (0.3%)
Total	265 (100%)

d.

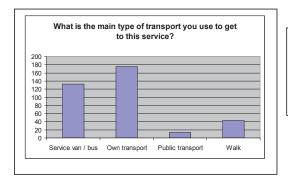


Very satisfied	204 (70%)
Satisfied	75 (26%)
Neutral	9 (3.4%)
Dissatisfied	0
Very dissatisfied	2 (0.6%)
Total	290 (100%)



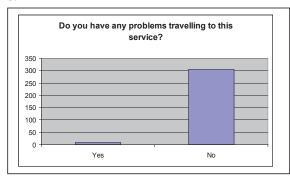




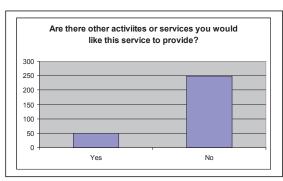


Service van/bus	132 (36%)
Own transport	175 (48%)
Public transport	14 (4%)
Walk	43 (12%)
Total	364(100%)

5.



Yes	8 (3%)
No	305 (97%)
Total	313(100%)



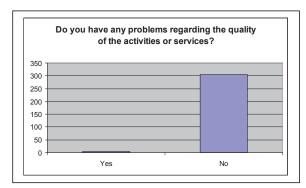
Yes	49 (16%)
No	249(84%)
Total	298(100%)





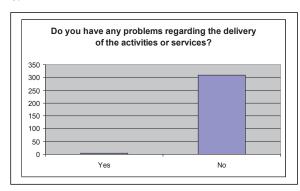




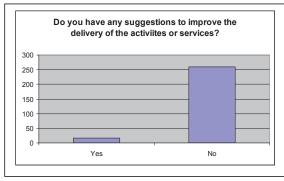


Yes	5 (1.6%)
No	305(98.4%)
Total	310(100%)

8.



Yes	5 (1.5%)
No	310(98.5%)
Total	315(100%)



Yes	17 (6%)
No	259(94%)
Total	276(100%)

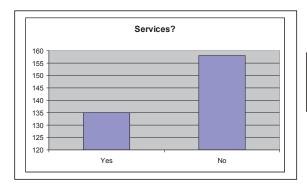




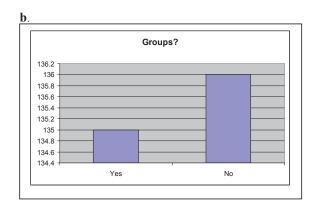


10 Are you a member of other services, groups or clubs?

a.

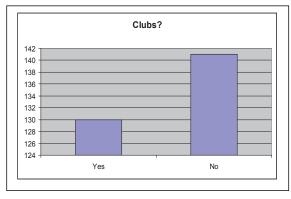


Yes	135(46%)
No	158(54%)
Total	293 (100%)



Yes	135(49%)
No	136(51%)
Total	271(100%)

c.

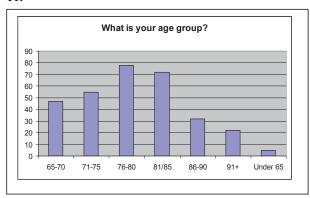


Yes	130(47%)
No	141(53%)
Total	271(100%)

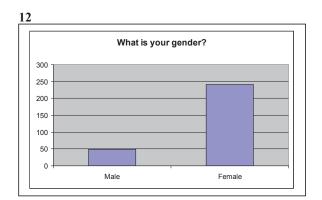




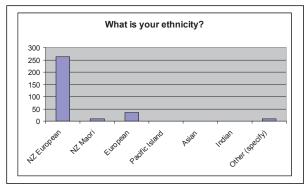




65-70 years	47 (15%)
71-75 years	55 (17.6%)
76-80 years	78 (25%)
81-85 years	72 (23%)
86-90 years	32 (11%)
91+ years	22 (7%)
Under 65 years	5 (1.4%)
Total	311 (100%)



49 (17%)
242(83%)
291(100%)

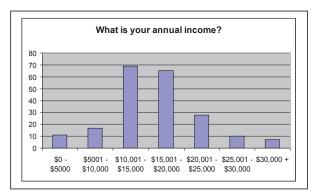


NZ European	263 (83%)
NZ Maori	9 (2.8%)
European	35 (11%)
Pacific Island	0
Asian	1 (0.4%)
Indian	0
Other	9 (2.8%)
Total	317 (100%)









\$0-\$5,000	11 (5%)
\$5001-\$10,000	17 (8%0
\$10,001-\$15,000	69 (33%)
\$15,001-\$20,000	65 (31%)
\$20,001-\$25,000	28 (13.5%)
\$25,001-\$30,000	10 (5%)
\$30,000+	7 (4.5%)
Total	207(100%)









WHAT SERVICES/ACTIVITIES DO MEMBERS'COME FOR?

Combined answers from members of the 9 elderly service providers:

- 60's up Movement
- Flaxmere Age Concern
- Heretaunga Seniors
- AFB Lusk
- Napier Age Concern
- Wairoa Age Concern
- Havelock North Age Concern
- Hastings & CHB Age Concern

The below table shows the top THREE services/activities members' recorded as the most important reason why they come to these elderly service providers.

SERVICE or	TOTAL
ACTIVITY	NUMBER
Social company	291
Activities and	254
entertainment	
Lunch/food	122
TOTAL	667



RAW DATA FROM EACH MEMBER SURVEY PER SERVICE PROVIDER

Provider 1:

What are the three main services that you come for?				
Social		2		
Fun		2		
Cup of tea		1		
Education		1		
Friendship		3		
Activities		1		
Monthly mee		3		
Committee n	neeting	1		
Companions	hip	6		
Speaker &		7		
entertainers				
Trips		4		
60 Up		1		
Second Wind		1		
Age Concern		1		
Any help I may need		1		
Walking group		2		
Lunch group		4		
To see my friends and meet new ones 1				
Keeping up with events that interest me 1				

Provider 2:

What are the three main services that you come for?				
2	Talking to people			
4	Playing pool			
2	Cup of tea			
6	Company			
3	Cards			
1	Mental stimulation			
4	Trips			
3	Companionship			
3	Socialising			
2	Activities			
2	Fellowship			
4	Friendship			
3	Meeting people			
3	Getting advice & information			
1	Borrowing equipment			
1	Tai Chi			
2	Eggs			
1	Games			
1	Snooker			
2	Speakers			
3	Bowls			
1	Transport			



Provider 3:

	What are the
	three main
	services
	you come
	for?
	Socialising
	Company of others
	Games
	Exercises
	Housie
	Entertainment
	Meal
_	Lunch
	Friendship
	Fellowship
1	Information
	Wednesday group
1	Social reasons
	Hugs
1	Social activities
3	The people
-	The fun
1	The sharing
1	Happy times
	Community Days
1	Film once a month
1	Music
2	Mental stimulation - various talks, books
3	Fitness
1	Cooperating staff

Provider 4:

What are the three main services you come for?

Friendship x2

Coffee mornings x7

Trips x9

Company/companionship x8

Advice x13

Seminars x2

Exercise classes x3

Help x11

Housie x1

Shows x3

Meet people x1

Work in office x1

Social activities x6

Information x1









Meals x1 Fun x1 Entertainment x1 Health promotions x1 Cards x1

Provider 5:

What are the three main services you come for?

4	Food						
2	Fellowship						
2	Chess						
12	Companion	ship)				
8	Recreation						
10	Games						
	Friendship						
12	Entertainm	ent					
1	Social inter	actio	on				
	Crafts						
	Company						
	Dancing						
	Special occasions						
	Playing music for dance			ing			
	Singing						
	Gardening group						
	Fun						
	Activities						
4	Meeting pe	ople)				
	Being part	of a	fam	ily			
	Quiz						
	Cooking Su	ında	ıy lu	nch	l		
	Cards						
	To help peo	p people					
2	Cup of tea						
	As a volunt						
	Socialising						
4	Mahjong						
1	Music						







Provider 6:

9	Morning tea
10	Foot clinic
	Tai Chi
3	Meetings and
	discussions
2	Winter
	warmer
	programme
2	Morning tea in Mahia
2	Massage
1	Socialising
	with friends
1	Newsletter
1	Film

Provider 7:

What are the three main reasons you come for?

General Service		
Social	71	
Activities	61	
Top three	Company of others	52
reasons people attend	Meals/lunch	19
	Games/entertainment	61



Provider 8:

What are the three main reasons you come for?

What are the three main services that you come for?				
14	Lunch			
8	Bowls			
6	Rumicub			
6	Housie			
6	Bus trips			
5	Company			
3	Sit and be fit			
3	Ezee meals			
3	Cards			
2	housie			
2	Foot care			
2	Crib			
1	Jigsaw puzzles			
1	Sensible & helpful staff			
1	Activities			
1	Crafts			
1	Space and facilities			

Provider 9:

What are the three main reasons you come?

Outings	14
Helpful information	7
Exercise – sit and be fit	6
Morning tea	5
Meetings and talks	4
Lunch	3
Frozen meals	2
Alex's jokes	2
Activities	1
Pool	1
Bowls	1
Shopping in Napier and Hastings	1
Hospital visits	1



COMBINED MEMBERS' ANSWERS

WHAT PROBLEMS DO YOU HAVE GETTING TO THIS SERVICE?

- Have to rely on friends
- Not recommended to use mobility scooters in wet conditions x 2
- Many members can't drive or are without cars. The current vehicles are not enough to cater for those who need more of this service. There are delays and inconveniences in getting members to and from this service.
- Costs me \$33 per week to travel and pay for activities
- Have own transport but need to use crutches. Quite awkward sometimes
- I have bad eyesight
- Bus timetables do not work well with opening hours of centre
- Affordability of private transport
- Distance to travel to centre

WHAT OTHER ACTIVITIES WOULD Y OU LIKE THE SERVICE TO PROVIDE?

- As I organise trips for the elderly as a hobby/small business, would like to tap into organising trips away for elderly or there must be some people who like to travel but haven't the confidence on short or longer trips, especially to visit family
- Hospital visiting
- Quiz
- Dance
- Gardening tips
- Knitting/crochet
- Crafts
- Zumba
- Overnight stays at different towns
- Visiting places of interest
- More meals
- More garden trips and picnics
- River cruises
- More bus trips
- Bus trips around the countryside
- Have speakers at morning tea who do not speak for too long
- Would like centre to be opened for longer hours
- More phone lines phone always engaged when members trying to ring
- More demonstrations with people coming in to show what they do and have a
- "Show and tell" seeing what hobbies others' have
- Transport from Mary Doyle to Centre for lunchtime Wednesday concert x 2
- More bring and buy sales
- More outings x2



65











- Go to Napier RSA for a meal
- Tai Chi x 3
- More pool/bowls
- Out of town newspapers being made available
- More sit and do activities
- More frequent midday dinners
- More parking
- Service not available everyday Monday to Friday
- Insufficient room at Centre
- Drop-in facility for tea/coffee/chat
- Flexibility for new activities
- Tai Chi
- Floral art
- Film days
- More men
- Computer skills no SeniorNet in my area
- More health clinics held at centres
- More guest speakers
- Have our own building
- Go to concerts, shows, festivals
- Open more days per week
- Indoor bowls



COMBINED MEMBERS' ANSWERS

WHAT OTHER SERVICES, GROUPS OR CLUBS DO YOU BELONG TO?

Summary of combined answers:

SERVICES:	
RSA (including Air Force Association)	46
Church groups	25
Greypower	16
Senior Citizens / Heretaunga Seniors	12
Probus	11
U3A	5
Lions	4
Women's Institute	6
Red Cross, Citizens Advice, Meals on	28
Wheels, Toastmasters, Community	
Patrols	
EXERCISE GROUPS:	
Pilates, dancing, swimming, line-dancing,	29
Tai Chi, Badminton, Croquet, singing and	
music	
Bowls (indoor and outdoor)	11
HANDCRAFTS etc	
Knitting, spinning, weaving, art,	23
gardening, camera club, book clubs,	
quilting, stamp club and scrap-booking	
HEALTH	
Arthritis, CCs, Deaf, Stroke and Blind	23
associations	
GAMES	
Bridge, mah jong and chess	4
TRAVEL CLUBS	9

All recorded answers per service provider:







RSA	9
Community Patrol	2
Over 60's Club	2
Greypower	2
Quilting group	1
Meals on Wheels	1
Phone News HB	2
Church	2
Red Cross	1
Garden Club	1
Country Music	1
Travel Clubs	3
U3A	1
Savage Club	1
Ex Kindergarten Mothers	1
Bowling Club	1
Probus	1
Handcraft group	1

RSA	14	Pilates	1	U3A	1
Senior Citizens	7	Lions	1	Mah-jong	1
Deaf Association	4	Women's Institute	1	Bolivia Group	1
Blind Foundation	2	Probus	1	Bowls	1
Church groups	3	Diabetes	1	Knitting Club	1
Stroke Foundation	3	Arthritis	1	Spinning and weaving	1
BUPA	1	Enliven	1		
Grey Power	1	CCS	1		

3	Probus
1	Hastings Operatic Society
1	Theatre Hawke's Bay
6	Age Concern
1	Book Club
1	Presbyterian Support Services - Mosaics
	At Real People
1	Pani Club (Orphan's Wives)
2	Savage Club
2	Tour group
	Organ Club
2	Entertainers group
1	HB Orienteering Club
1	NZ Founders Society
1	Chess Club
1	Hastings & Districts Scots Society
1	Badminton Club
	St Columbus Board of Managers
1	KC Old Colleagues
1	House of Gordon
1	Clan Donald
1	Op shop work
1	Village Friends







7	Church
3	Dancing
1	Toastmasters
	Art group
1	Havelock North Bowling Club
3	U3A
3	RSA
	Hastings Baptist Ladies Friendly
1	Heretaunga Women's Rest
1	Church Ladies group
	Blind Association
1	Swimming group
1	Napier Rose Society
1	Greypower
1	60 Plus
1	Duart
	Vintage Car Club
1	Collectors Club
1	Masonic Lodge
1	Retired Men's

3	Grey Power
	RSA
4	Lions Club
4	Bowls /indoor bowls
	Senior Citizens
	Bridge
	Line dancing
1	Aqua aerobics
1	Tai Chi
1	500 cards
	Spinning group
1	Art group
1	Women's
	Institute
1	Wairoa & District
	Rose Society
1	Wairoa Orchid
	Society
1	Citizens
	Advice
1	Health service

3	Dance group
3	Grey Power
4	Probus
1	Spinners and Weavers
1	Enliven
3	AFB Lusk
2	60's Up Movement
1	Duart House Society
4	Blind Foundation
4	Church groups
3	RSA







1	Library
1	Founders Club
1	Mary Doyle Trust
1	Air Force Association
2	Music clubs

RSA x 8 CWI x 7

Greypower x 6

Bowls (indoor or outdoor) x3

Church x 2

Probus x 2

K.E.V x 2

Travel Club x1

Women's Club x1

Senior Citizens x1

Alive Kiwis x 1

Stamp Club x1

Red Cross x1

Camera Club x1

Arthritis group x1

Exercise group x1

Line dancing x1

Swimming group x1

Pakeke x1

RSA x 6

Church x5

Garden Club x 2

Heretaunga Seniors x2

Pani x2

Bay Tours x2

Line Dancing x1

Follies x1

Indoor bowls x1

Choir x1

Croquet x1

Travel Club x1

Flaxmere Age Concern x1

Arthritis Support Group x1





Community Connection - Overview

Key purpose: Napier's older people engage in their community

Low Engagement					High Engagement
Connection	May receive services in the home	Is unaware/unsure about attending services	Attends services/ activities	A community contributor	A community connector
Wellbeing	Unwell	May require assistance to participate	May access support to participate	Independent	Independent
Possible Solutions	Community connectors provide information, encourage in-home activities with others	Community connectors provide information about services and encourage attendance (buddy)	Services may clash/ duplicate	Opportunities to facilitate: Volunteering Education Social interaction (through interest/social groups)	Opportunities to lead
RE	RECEIVING	PARTICI	PARTICIPATING	CONNI	CONNECTING







Social Connection Project Overview Notes

The attached matrix is a culmination of the discussion at the first meeting about social isolation (initiated by Hon Jo Goodhew) and subsequent discussions with the Minister, Mayor Barbara Arnott and some attendees from the first meeting.

The matrix is intended as a discussion starter when thinking about project options taking the current landscape into consideration at the meeting on 1 August.

The matrix is split into two stages:

- Engaging- individuals at various stages of engagement with services and the community
- Volunteering- individuals contributing through volunteering

Individuals may not be able to be placed in a 'box', the boxes are indications only.

Assumptions:

- A focus on utilising existing services and resources first
- Low engagement is not a negative for all older people
- Success is providing the opportunity and support for people to engage to the level that is appropriate for them
- Our community is willing to support this concept

Connection and Wellness

Rather than focussing on age per se, levels of connection to the community and wellness of the individual are used as a better reflection of indicators of engagement and support

requirements. At one end of the connection scale, an individual may not engage with the wider community and may or may not receive services in their home (such as home help, Meals on Wheels etc). At the other end of the scale, an individual may be a high functioning (busy) volunteer with strong interconnecting networks. This 'community connector' or the community contributors could be utilised to move individuals along the scale from the low engagement end.

Possible Solutions

Some specific ideas to support people at each stage to participate, contribute or access the community have been suggested. For example, in order to support people at the lower end of the scale, we could provide a resource to people who already engage with them (e.g. Meals on Wheels, accredited visitor, Neighbourhood Support Group Coordinator) that could begin a conversation about accessing already available services.

Proposed Actions

Suggested ways to resource the different aspects identified have been made. Again it is intended that we utilise existing support mechanisms and funding. Some of the ideas will require additional resourcing.

Next Steps

- 1. Develop and confirm the matrix
- 2. Gain feedback from target groups
- 3. Develop 'project' ideas, including gaining agreement from contributing groups and agencies and seeking resources
- 4. Propose concept to Hon Jo Goodhew











Napier Connects Draft Project Plan

1 Goal and objectives

The Napier Connects project aims to encourage older people who are either socially isolated or at risk of becoming so, to become more engaged with their community by getting involved in a wide range of activities to enhance their social connectedness and participation. The project will achieve this goal by:

- promoting the benefits to older people, their families and the wider community of staying active in a wide range of activities
- promoting the valuable contributions older people make in their community, neighbourhoods and families
- working with the community to identify what existing services and supports can be enhanced
- working with the community to identify projects that support the goals
- raising awareness about the positive impact that social connectedness has on older people's health and wellbeing
- raising awareness about the benefits of volunteering and the range of activities that this includes
- busting myths about older people, volunteering and what is means to contribute
- developing a framework/model that can be adapted by other communities to improve the social connectedness and participation of older people.

2 Background

In the literature/research social isolation is often presented as a continuum while lack of social contact at one of the spectrum and extensive social networks at the other. This does not tell us much about the quality of people's contacts or their personal feelings about social connectedness.

The literature suggests several risk factors associated with social isolation. These include the recent experience of loss- in relationships, health, function, mobility, employment, social networks. People who have poor health, mental health issues, caring responsibilities, live alone, recently moved area or into residential care as also at risk, as are older people who have negative attitudes about ageing.

International research suggests there are significant social and personal costs of social isolation. UK research¹ suggests that social as an effect on mortality that is similar in size to cigarette smoking. It is associated with conditions such as cardiovascular disease, hypertension and dementia. Socially isolated and lonely adults are more likely to undergo early admission into residential or nursing care.

The New Zealand Positive Ageing Strategy² has identified the importance on increasing opportunities for social participation as important for local communities to champion as one way to improve the quality of older people's lives.

Addressing social isolation is a priority area for the Minister for Senior Citizens. The overall goals of Napier Connects respond to this priority area.











¹ Summit on Combatina Loneliness, 2012

² New Zealand Positive Ageing Strategy, 2001



The Napier City Council's Safer Napier³ policy provides excellent links with the national strategy, the Minister's priority and overall goals of Napier Connects. While older people are less likely to be victims of crime they are more fearful than other age groups about crime. Fear of crime inhibits participation and enjoyment of life. Being connected is important if older people are to age well in their communities. Many of the Napier Connects projects will provide an opportunity for people to get to know their neighbours and feel safer in their neighbourhood, leading to increased community connectedness and engagement.

3 Scope

- Based in Napier
- Role of Steering Group-link to the community connectors

4 Deliverables

This section identifies the key deliverables of the Encouraging a sense of community in Napier. As these are very high level and description, a break-down of the key task will be developed for each deliverable if required.

Deliverables	Description	Timeframe
Evidence	Review of the New Zealand and international research on the effectiveness of interventions to promote participation as a way to prevent/reduce social isolation	
Map of existing services	What existing services could be enhanced and/or promoted	
Community Internship Programme application	Complete and submit the CIP application	26 Sep 2012
Identify community connectors	Identify the older people and other key community connectors whose support for the project is vital. Have small workshops with them about the project and their role within it.	
Focus groups and workshops with key providers of services	Identify the key services and providers who interact with older people, and find out their views on: • is there an issue • what services are available • what more could be done Workshop the ideas, gain support for the World Café	
Focus group with AVS and DHB social workers	 Find out their views on: who is most at risk what services could be expanded how to support older people develop their own solutions 	

3 Adopted 6 April 2011 - http://napier.diaidocs.com/policies/safer-napier-policy.html?view=swf













Deliverables	Description	Timeframe
World Café	Workshop of key service providers and community groups to scope out the existing services to address the goals of increased participation and how these could be expanded to meet some of the Napier Connects objectives	5 Dec 2012
Entrusting the Gift initiative	Promoting the benefits of older people as mentors, intergenerational focus	
Identifying older people at risk	Develop a quick survey that can be used by AVS, DHB social workers and other to identify older people who need to be supported to become more engaged with their community	2013
Develop a framework that can be shared	Produce a framework that identifies the key actions needed to be undertaken by communities who what to address this issue	
Evaluation of initiatives	Need an evaluation of the overall project but also the moving parts within it-	
Increase awareness of the value of volunteering and older people in Napier	 World Café community newspaper profiles of older people engaged 	
Report to Minister for Senior Citizens	 Provide Minister for Senior Citizens with: notes from Steering group meetings updates on other activities report on overall project, the different initiatives and evaluation 	

5 Outcomes

Key outcome is to promote positive ageing in Napier so that all people have a positive view of ageing and older people.

NOTE: the project plan will be regularly updated and revised

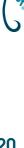














Activity Tracker

Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Increasing older volunteers Promoting volunteering through Age Concern Newsletter	From Sep 2012 a small item in Napier Age Concern newsletter about contacting office for volunteering opportunities.	Recording the increase in volunteers • After Sept issue 4 new volunteers • At the end of Jan 2013 – an increase of 15 new volunteers (from 71 in Sep 2012 to 86 in Jan 2013)	Include the Napier Age Concern monthly newsletter as another communication channel promoting Napier Connects		SP
Increasing older volunteers Age Concern volunteer pack	Increasing olderIn Jan 2013, informationvolunteerspack on volunteeringAge Concerndeveloped and distributedvolunteer packby volunteers	Recording the increase in volunteers	Record as activity promoting Napier Connects	SP	SP







Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Older people developing own solutions Greenmeadows Village Walkers	At a focus group about safety in the community held with the Greenmeadows East Village in August 2012, a resident suggested forming a walking group. Napier City Council provided high- visibility vests with Napier Connects branding. • September 2012, 8 walkers • at end of Jan 2013, 11 walkers • at end of May 2013, 13 walkers o at end of of May 2013, 13 connects branding such as a book club	Focus Group (May 2013) – full write up available. Main benefits identified were: connection with other villagers connecting with neighbours external to village (out and about) looking out for one another fluoro vests stop traffic! Key success is the informality and being able to just go! Attendance and growth There is usually at least 8 attending every fortnight The group has grown from 8 to 13 since its implementation and still growing Visit from Age Concern volunteer to see how the group works with a view to starting another group.		Older people developing their own solutions	Greenmeadows Retirement Village is a Napier City Council-owned village providing rental accommodation for older people with limited income and assets. In August 2012, Napier City Council held a focus group with the residents about their views/ concerns about community safety. Several people mentioned they did not like walking alone. Some of the walkers said they did not know their neighbours before the walking group. Greenmeadows Retirement Village is a Napier City Council-owned village providing rental accommodation for older people with limited income and assets. In August 2012, Napier City Council held a focus group with the residents about their views/ concerns about community safety. Several people mentioned they did not like walking alone. Some of the walkers said they did not know their neighbours before the walking group.





Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Promoting EIT mentoring	In month 2012, RR sent a letter to Rotary and Lions Clubs, Zonta and Napier RSA promoting Napier Connects along with the opportunities and benefits of older people mentoring younger people.	Out of this came the offer to speak on the topic at Rotary Club Napier and Grey Power	Record as activity promoting Napier Connects		
Promoting EIT mentoring	On 8 October 2012, Ron Rowe was the guest speaker at Rotary Club of Napier about the benefits and opportunities of older people mentoring younger people in the community	Number of EIT mentors	Record as activity promoting Napier Connects		











Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Increasing older volunteers EIT mentoring	Project began in 2012 with 4 mentors. In 2013, this has developed into pilot programme with processes built in to provide the mentors with support. All mentors under a security check. • Five mentors for 2013 Semester One (the mentors may mentor more than one student). • Mentors providing mentoring for Tourism and Catering Students				RR and CH (DCE, EIT) have done a lot work in getting buy-in from EIT staff and management (need to assure that the mentors would not be taking the place of paid staff) as they are the people who will refer students to the mentoring programme.







Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Promoting	On 4 October 2012, Mayor Barbara Arnott opened the Tea and Talk session (Age Concern). She about the importance of the Napier Connects project in the community saying was a perfect community to support our seniors to better connect with the community and she encouraged everyone in the room to take part—starting with looking out for someone in their neighbourhood.	N/A	Record as activity promoting Napier Connects		Mayor Barbara Arnott became Napier's first 'Age Concern Dignity Champion'
Promoting EIT Mentoring	On 15 October, RR was the guest speaker at Grey Power Napier and Districts about the benefits and opportunities of older people mentoring younger people in the community	ال کار	Record as activity promoting Napier Connects		RR was approached by several people interested in becoming mentors for EIT students after his talk













Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Engaging with older people at risk of social isolation Neighbourhood working bee	On 6 December, 23 volunteers worked on 5 properties of older people. It is hoped to have another working bee with Rotary and Neighbourhood Support involvement. In the longer term, the Steering Group are working towards Neighbourhood Support leading this project. Update May 2013 — a working bee for Marewa is planned. The project was discussed with ACC who are seeking funding to expand the project to include home safety e.g. installation of smoke alarms etc and to reach a wider target group.	A phone survey will be undertaken with the volunteers and the recipients to get their feedback on their experience and to identify what could be done better. Preliminary survey complete – just about to do a final follow-up with recipients. Will then update this section	Recorded as activity promoting Napier Connects		A proactive Youth Council member approached Natasha about a project that he had participated in while down in Wellington at the Leadership Summit (July). It involved 'yard clean-ups' in a particular street – young people helping those in need. He wanted to see if the Youth Council could do something similar here. The project provides an intergenerational opportunity for young people to be seen positively by older people and vice versa. Neighbours are invited to help with the working bee (via Neighbourhood support group) if there is an active group) to encourage ongoing neighbourhood connections. Napier Age Concern identified from its membership those who would benefit from being recipients of the working bee.



















Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Engaging with community connectors Follow-up with World Café participants	On 14 February 2013, SK contacted 43 participants (including some who were invited but unable to attend on the day) seeking expressions of interest in meeting to discuss how to progress their ideas. On 12 March 2013, meeting of community connectors. Lack of transport and inaccessible infrastructure were identified as the key barriers to older people's social connectedness.	15 community connectors attended the meeting on 3 March	Meeting notes recorded and provided to Steering Group and community connector attendees		Follow-up from meeting 12 March 2013 1. Limited rotary pathway access points: Followed up by Neighbourhood support contacting Rotary Pathway Trust. Disability Information Trust evaluating pathways at present and keen to be involved in project. No further action to date 2. Untapped skills of older people—investigate Men's Sheds in Napier. 6 connectors from this meeting met with All Saints Church Men's Shed members 3. Transport issues: SK visited Red Cross to discuss this. No further progress although this is now becoming a priority activity









Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Engaging with older people at risk of social isolation	January 2013, survey of Tait Drive Lunch Group (made up of Age Concern members and Tait Drive NCC village residents) to identify their views of social connectedness in the community, what services they need, and the gaps	45 people attended and 31 took part in the survey: • 97% were involved in or attend some kind of community activity • 4% are, or are thinking about volunteering They identified poor heath and lack of transport as the two main barriers to older people participating in their community			Tait Drive Lunch Group meets every Monday for socialising and lunch (which is provided by a committee volunteers).
Engaging with service providers Identifying the services they provide	On 14 February 2013, SK contacted 58 service providers inviting them to find out how they could become involved with Napier Connects. March 2013, seven providers had been identified (Red Cross, Napier Hearing Association, Napier Alzheimers Association).			Recorded on plan	





these organisations to map Masonic Trust (see item what services they provide and how the organisations below for more details) -M arranged to meet with Alzheimers Association representatives of each of XX March: Information Daycare of the elderly Advice Bureau Napier makes use of volunteers XX February: Napier XX March: All Saints Hearing Association 6 March: Red Cross XX March: Citizens XX March: Napier Activities continued 7 March: Napier 8 March: Napier for Disabilities Taradale

Bay Seafarers Welfare

XX March: Hawkes

XX March: Diabetes

Society

Hawkes Bay







Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Encouraging older volunteers	The Volunteering Hawkes Bay website has information posted about Napier Connects		Record on communications plan		
Hawkes Bay	Volunteering Hawkes Bay have offered Napier Connects a page on their website (see separate item below for more				
Promoting Napier Connects	15 February 2013, Ron Rowe met with editor of Napier Mail about including items about Napier Connects				Provided Napier Mail with a list of Napier SGC business partners that they can approach about advertising











Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Encouraging older volunteers Masonic Trust	In February 2013, LM met with the Napier District Masonic Trust about Napier Connects. They have agreed to include in their next newsletter an item calling for more volunteers for the Rotary Reader Programme. Contact details also given to Masonic Trust to see if volunteers would be part of the newspaper phone recording activities that 800 people per week access		Record on communications plan		The residents of Masonic villages all receive the newsletter. As at 11 March 2013, six residents expressed interest in volunteering, however, they needed to have transport to and from the school, which none of them have. Supports the information from Survey with Tait Drive Lunch group—transport one of the barriers for older people volunteering. SK talk about this example with the World Café connectors on 13 March meeting.
Promoting Age Concern Expo	Age Concern Napier held a "Retirement Living, Retirement Planning Expo on 21 May 2013. Napier Connects will have a presence at the Expo	Survey undertaken. Report completed. Suggestions made on how to better target socially isolated older people to engage in social services included direct promotions through health services and having more easily accessible and affordable transport	Record as activity promoting Napier Connects		Napier Connects was promoted at Age Concern and RSA stands and via survey. The Hawke's Bay Regional Council will include an item about the expo in the newsletter that accompanies the next rate bill.











Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Engaging with older people at risk of social isolation Total Mobility Assessment extension	Age Concern Napier have developed a quick questionnaire to accompany the Total Mobility Assessment. The questionnaire will ask about the individual's involvement with current activities and be provided with information about the services and activities that are available. The two-week trial run from 4 – 18 March 2013. Seven assessments were done in this period. Other agencies expressed interest in the trial.	A follow-up interview around one month after the initial assessment will be undertaken (Lois) to see if their social connectedness has improved. Results of 2-week trial 4 people joined Age Concern 2 people considering opportunities 1 was terminally ill. The trial confirmed to Age Concern Napier that their informal approach of providing information about opportunities to participate and volunteer do have positive effect on increasing older people social connectedness. They have no plans to continue with the formalised tool, but will continue with their informal approach.			Loss of mobility has been identified as a risk factor for social isolation. If this approach is useful in improving people's social connectedness it could be promoted to other service providers who undertake Total Mobility Assessments. Hawkes Bay Regional Council have agreed to the pilot (as funders of the Total Mobility)





Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Collaboration between service providers Joint Age Concern / Taradale Seniors lunch	From 15 March 2013, Age Concern Napier and the Taradale Seniors group will run a fortnightly joint luncheon and games afternoon				One of the aims of Napier Connects is to increase collaboration between service providers
Increased participation in service providers activities Age Concern membership	Age Concern Napier are monitoring their membership as one measure of gauging the increase in participation and social connectedness	Feb 2012 – 7 new members Mar 2012 – 4 new members Feb 2013 – 14 new members Mar 2013 – 17 new members April 2013 – 8 new members			Financial members









Initiative	Activities	Evaluation- see Results Based Accountability Framework	Link with communication plan?	Link to the community connection framework?	Additional information / Notes /
Promoting Neighbours Day – Marewa	On 23 March 2013, to celebrate Neighbours Day, a small gathering will took place in Marewa to promote connected neighbourhoods. A small campaign promoting this event will appear in the Courier. The Napier Connects logo appears on the information publicising the event	Will get this from Neighbourhood support	Record as activity promoting Napier Connects		
Promoting Napier Connects Webpage	In development – to be up and running by end of May 2013	Monitor the number of visitors to the page	Record as activity promoting Napier Connects		
Engaging older people at risk of social isolation Taradale Neighbourhood Support – SC	In April / May 2013, SC conducted a small survey with older people in a Neighbourhood Support Group. This survey sought to find out about their involvement in activities and their willingness to be involved in other community activities	31 residents surveyed. SK completed survey report. Results provided to Steering Group for information and given to SK for his follow up.	Record as activity promoting Napier Connects		An agreement between Napier Connects and SC was developed. SC will follow-up with people who indicated they wanted to become more involved in their community (5 out of 31).
Inspiring volunteers to take the lead	Project in development				RR and RL to progress











Communication Plan

needs of each stage of the Napier Connects n response to the different communication Activities under this Plan will be developed Project. Each communication activity will

- Who the intended audience is
- What Media form will be used
- The key messages to be delivered
- The desired result
- Who will be responsible
- The time frame to complete each action
- Outcome of each communication activity.

Background of the Napier **Connects Project**

become more engaged with their Napier Connects is a project that provides and projects that aim to encourage older an umbrella for community-led activities solation that some of them experience. community; while addressing the social

Development and the Department of Internal A steering group was set up after Minister to reduce social isolation of older people Io Goodhew asked the Ministry of Social Affairs to work together to look at ways through volunteering.

Current steering group members are:

- Napier Age Concern
- **Grey Power**
- Volunteering Hawke's Bay
- Te Kupenga Hauora-Ahuriri
- **Napier RSA**
- Napier City Council
- Ministry of Social Development
- Senior Services
- Department of Internal Affairs

Messages and Goals Key Communication

Napier Connects aims to encourage older engaged with their community by getting people who are either socially isolated or at risk of becoming so, to become more

their social connectedness and participation. The involved in a wide range of activities to enhance project will achieve this goal by

- their families and the wider community of staying active in a wide range of activities Promoting the benefits to older people,
 - older people make in their community, Promoting the valuable contribution neighbourhoods and families
- what existing services and supports can be Working with the community to identify enhanced
- Working with the community to identify new initiatives that support the goal
- impact that social connectedness has on Raising awareness about the positive older people's health and wellbeing
- Raising awareness about the benefits of volunteering and the range of activities that this includes
- Developing a framework/model that can mprove the social connectedness and be adapted by other communities to participation of older people.















Communication Activities and Outcomes

Name of Activity Audience to receive the communicat	Audience to receive the communication	Media to be used	Key messages delivered	Desired result	Who will be responsible for doing communication?	Time frame for actions	Outcome
Activities tracker	Steering Group Electronic members to use spreadsheet and circulate to key stakeholders		Capturing and reporting on progress of activities and projects under the Napier Connects umbrella	Central point of storage for Napier Connect activities To assist in final report and to identify increased connectedness of older people in Napier	VW to update all Ongoing with Steering Group monthly upda to provide information	Ongoing with April updat monthly updates completed	April updates completed





Name of Activity Audience to receive the communicat	Audience to receive the communication	Media to be used	Key messages delivered	Desired result	Who will be responsible for doing communication?	Time frame for actions	Outcome
Community newspaper promotion	General public	Napier Mail newspaper	Provide a high level profile of the Napier Connect Project Promotion of 2 activities that have been	Public promotion of Napier Connect project	RR: Meet with Napier Mail about best way of promoting Napier Connect and cost of	Feb 2013	Meeting completed. Waiting on Editor to decide how Napier Mail will promote this project
			undertaken under Napier Connect Promote CAB/VHB & NCC website		vw: Provide MSD Super Gold Card information	Feb 2013	No response from Napier Mail as of April 22 2013
					NC: Provide 2 good news stories and photos	When requested by Napier Mail	







Name of Activity Audience to receive the communicat	Audience to receive the communication	Media to be used	Key messages delivered	Desired result	Who will be responsible for doing communication?	Time frame for actions	Outcome
Elderly Service Provider survey and invitation to participate	Service agencies working with older people	Email	Provide a high level profile of the Napier Connect Project Invite people to participate in survey being undertaken by CIP Opportunity to: attract new members and/or volunteers promote services delivered collaborate with others	Response from service agencies to: Participate in survey Become involved in Napier Connects activities	SP Contact point to gather EOI from groups to be involved LL / SP Meetings and survey	Feb 2013 SP gave list to Lois March 2013	58 Napier service providers emailed invite. 7 responded LL has contacted and talked to all. Refer Activity Tracker
Follow up meeting of World Café participants	World Café participants	Email /letter	Invitation to engage in meetings / discussions to further identify ways to connect older people	Response from participants to be involved in further meetings Agreement to start one activity	SP Host meetings and provide initial facilitation of meetings	March 2013 to hold meeting Dates to be planned for follow up activities	Meeting held 12/3/2013 For activities Refer Activity Tracker









Name of Activity Audience to receive the communicat	Audience to receive the communication	Media to be used	Key messages delivered	Desired result	Who will be responsible for doing communication?	Time frame for actions	Outcome
Utilising VHB website	World Café participants	Email /letter	Invitation to engage in meetings / discussions to further identify ways to connect older people	Response from SP participants to Host meetings be involved in and provide further meetings initial facilitation Agreement to of meetings start one activity	SP Host meetings and provide initial facilitation of meetings	March 2013 to hold meeting Dates to be planned for follow up activities	Meeting held 12/3/2013 For activities Refer Activity Tracker
Utilising VHB website	General public and targeting volunteers	Volunteering HB website	Napier Connect Project Success stories Photos Information to reduce social isolation	Napier Connect page on VHB website is accessed by the public	N N C	Draft page for Steering Group approval by 22 April 2013.	Tracking of number of hits on website page
NZ Neighbourhood Days 23-24 March 2012 "KNOCK, KNOCK"	NCC driven initiative targeting 2 streets in Marewa	Personal contact by Major Barbara Arnott & Minister Tremain			O Z		





Name of Activity Audience to receive the communicat	Audience to receive the communication	Media to be used	Key messages delivered	Desired result	Who will be responsible for doing communication?	Time frame for actions	Outcome
Promoting Napier Connect at the RETIREMENT LIVING RETIREMENT PLANNING EXPO 21 May 2013 at Napier War Memorial Centre	Elderly members Survey of the public questionnair who attend expo with prize of lunch for 2 at RSA for filling it out	Survey questionnaire with prize of lunch for 2 at RSA for filling it out	Promote: Napier Connects: CAB – use services VHB – volunteer to assist services	Napier Connect is known by the public who attend the expo	д	Surveys completed 21 May 2013 Survey collated 31 May 2013	
CAB to become involved in Napier Connect	Jenny Pearce, Manager CAB	Face-to-face meeting and email	CAB invited to be on Napier Connect Steering Group Opportunity to promote services of CAB to wider audience	CAB promoted with Napier Connect at wider community meetings and events	S X	CAB attended Steering Group meeting March 2013.	CAB has offered support and is a Steering Group member of Napier Connect





Consultation Plan

Consultation over a cuppa

The proposed consultation is two-fold. Firstly, we want to find out from a range of people (particularly our primary target group) what they think about the issue, what is already available and what is needed at each stage of engagement. Consultation is also a really good opportunity to promote the project, seek support and encourage wider involvement.

We want to find out:

- What is already going on in the community that can contribute to increasing engagement for older people in Napier
- What would work to improve engagement in each of the phases (project ideas / concepts)
- Are there people and/or organisations that would like to be part of or lead projects that contribute to increasing engagement

We want to encourage:

- Greater awareness of the issue and the project itself
- People and/or organisations to support the project
- People and/or organisations to get involved in any way they can be it at an individual neighbourly level or through leading a project
- The promotion of ageing as an opportunity giving a positive perception of older people in our community







A Part 1



Methodology Stage	1. In Home	2. Services	3. Community Contributor/ Participator	4. Community Connector
$1.$ Intervention review *	Review	existing research – local, nati	Review existing research – local, national and international – Interventions	entions
2. Workshop*	Community	Works y organisations (including cluk	Workshop Hui Community organisations (including clubs, church groups), Government agencies	t agencies
3. Survey*		As wide a	As wide as possible	
4. Focus groups	Visitors • Accredited visitors • DHB social workers / Options	Users Providers	Contributors (e.g. volunteers)	Connectors (e.g. networkers)
5. Interviews				
Outcomes desired	Ideas for enhancing existing mechanisms e.g. localised resource for visitors	Ways to maximise existing services Reduce barriers to participation Identify gaps	Good ways to promote volunteering to target group Reduce barriers to participation Ideas on how to get people to start things themselves (e.g. education groups, social groups) - ?busy bees	Ideas on how to get people to start things themselves – sharing talents and skills that address a community need. Who is around, how could they help?

^{*}The Community Intern could complete the research, present this at the hui they have organised and design, complete and analyse the survey. They could also support the hui, the focus groups and interviews. However, we need the community to take a lead in the consultation – particularly led by steering group members.







Napier Connects Project Timeline

					2012	2								2013			
ACTIVITY	Mar	pril	May	June	/ /	Aug	Sept (Oct	Nov	Dec	Jan	Feb	Mar	April	Мау	June	July
Minister Goodhew selects Napier for Elderly Social Isolation Project. Initial key stakeholders identified																	
Napier stakeholder steering group meetings held																	
Successful application made from Age Concern & MSD for an Intern under DIA Community Internship Funding. Intern undertakes surveys, promotions etc																	
Tracking of activities that "connect" under this project																	
Project named: NAPIER CONNECTS. Logos developed. Community connectors identified		 	 														
Literature reviews and existing elderly projects reference. Napier elderly services and clubs collated	 	 	 											 	 		
Planning begins for World Café event. Project plan developed. Participants invited																	
Minister opens World Café event. Evaluation, feedback obtained																	
Communication Plan developed and updated																	
Review Framework developed																	
World Café participants meet to discuss "Where to from here?"		 	 							1 1							
Toolbox developed to provide project resources and assist other towns to promote this initiative																	

^{*}The community Intern could complete the research, present this at the hui they have organised and design, complete and analyse the survey. They could also support the hui, the focus groups and interviews. However, we need the community to take a lead in the consultation – particularly led by steering group members.









Napier Connects - World Café Workshop Project Plan

Project:	Napier Connects- World Café		Links to:	
Туре:	Event		Stage:	Stage no. of Total stages
Project Sponsor:	Napier Connects Steering Group	Project Manager:		
Project Team		Parent Organisation:		
Members:	World Café working group:			
	SK		DIA	
	JL		MSD	
	NO		NCC	
	RR		ΕI	
Prepared By:	NC Date Prepared: 5 November 2012	Approved By:		
Completed By:	Date Completed:	Approved By:		

Status

Current

Superseded Suspended

Complete





Project Objectives:

- Identify and engage Napier's Community Connectors
- Socialise Napier Connects with the Connectors
- Collate information on what is already going on (formal and informal)
- Identify gaps
- Generate solutions / ideas to address gaps or improve what is already happening
- Encourage connectors to drive their own projects (in the longer term)

Outputs:

- World Café Event
- Collation of feedback
- Distribution list of Community Connectors
- Summary of feedback to Community Connectors

Small group facilitators briefed well

Project Constraints/Risks:

Risk	Mitigation / Action
Low turnout (volunteer day etc)	Scheduled for afternoon to allow for volunteer activities happening in the morning (as per VolHB advice). Follow up invitation with a phone call
Wariness from invitees	VW to confirm with Steering Group people who rsvp.
	During week of 19 November 2012 each Steering Group member follow up with a phone all those people they nominated who have not rsvp.
	Final list of attendees to be completed 23 November 2012
Low participation on the day	Programme contains variety with different levels of participation needed











S	Milestones	Tasks	Officer Responsible	Due Date	Date Comp.
.i	Invitations	A. Invitation list compiled B. Invitation drafted C. Invitations sent D. Follow up phone calls E. RSVPs received F. Invitation list confirmed- NC advised for catering purposes	VW Working Group VW to advise group	5 November 7 November 9 November 19-23 November 23 November	Complete Complete 9 November 2012
5.	Venue and Catering	A. Venue booked B. Equipment booked C. Catering booked D. Wait staff booked	U U	Completed 16 November 19 November 19 November	Completed
ĸ.	Programme	A. Content compiled see below B. Feedback received from Steering Group C. Programme finalised D. Evaluation forms compiled		Working Group Steering Group Working Group NC	5 November 14 November 19 November 16 November
4	On the Day	A. Venue set up 12:30pm See Programme for details		Steering Group	5 December
.5	Collation of feedback Collation of evaluation forms	A. Summary of prioritised actions B. Summary report of Table evaluations		SK SK	21 December 21 December







Napier Connects - World Café Workshop Programme

ltem	Who	Time allocation
Welcome and karakia	Kaumatua (NC to arrange)	5 mins Total 5min
 Introduction What's the issue? What's the issue? Why are you here? Programme for today and housekeeping Warm-up- Introduce your neighbour Spend 5 mins to find out about the person sitting next to you so you can introduce them to the group: e.g. Name, organisations / projects they are part of, something interesting- what are they proud of, passionate about etc, what they want out of today 	Minister VW VW Mayor (NC to arrange) NC May need a role for Minister JR (DIA)	5 min 5 min 5min 2min Total 20min Total 30min
Napier Connects- detail Matrix	N.C	5min





		:
ltem	Who	Time allocation
Exercise:		
World Café topics: For each section of the matrix (4) e.g. from the least	JL	
connected to the Community Connectors (sheets will be preformatted):		
 What is going on now 		10 min
 What are the opportunities 		10min
How do we get there	RR	10min
Any ideas or topic outside of focus of the session are to be noted and		
placed on park board		
Voting:		10min
Each person to vote on the top three ideas for 'how we get there' -		
everyone has three votes		Total: 40min
Exercise sum-up	JL	5min
Table Evaluations		
Hand out given to participants in packs to record any further comments and send back to Sandy by email/post.	JL	10 min
What next?		
Feedback provided	L? (MSD)	5 min
 Drill into more depth with different phases of connectedness e.g. 		
individuals, groups, providers etc		
 Initiate more projects 		
Close	Total Time	2 hours





Jobs

What	Who
Organise resources e.g. paper, felts, stickers, etc	NC
Instructions for facilitators	SK- COMPLETED and given to facilitators
Run sheet (detailed programme for Steering group)	Working Group
Seating Plan	Working Group
Participant packs	NC
Notes for Lindsay	Tr
Welcome Desk	RR & R
Small Group Facilitators: JL SK NC SP Note: we may need more facilitators depending on the RSVPs	Café helpers (X3)
Roaming facilitator/timekeeper: RR Parking Board Warden: RR	Photographer / VIP Support: MB













World Café Project - Workshop Summary & Facilitator Sheets

Key Themes

- Promote positive stories
- Education opportunities
- Intergenerational opportunities
- Focus on neighbourhoods (neighbourhoood connectors)
- Use existing resources etc use existing databases etc to get information out or provide services (e.g. MSD database)
- Keep it simple, keep it fun and social
- Reduce barriers to attend services (transport, money, awareness)
- Use senior skills / experience
- Personal approaches needed
- Ask target groups what they want
- Ensure cultural appropriateness

Attached are the facilitator sheets

Project in General

Barriers

Getting too isolated – how do we do it? Culture- important

Personal health- energy

Elasticity

Not enough fun

Privacy issue is a barrier

Engaging people – despite all overtures

Language/cultural differences

Overload of information

Previous bad experience

Personal safety – fear of going out

Mobility

Money – financial freedom

Common accountability – communication between government agencies

Listening but NOT responding appropriately

Keys to success

Tenacity*

Motivation

Promoting success stories**

Enthusiasm of workers/supporters*

Keeping it simple*

Listening to people's needs and responding appropriately

Options – assessment process to identify high needs

Peer encouragement

Keeping people interested – one on one support

Education early on re-engagement – school, middle adulthood.**

Information sharing

Neighbourhood connector – people know where to go next

Using young people to make the connection

Remember – the partner/family – those caring for someone for so long*

Don't reinvent the wheel

Coordinate and collaborate

Involve people in the solution. Tap into experience, skills and wisdom*











More awareness of International Day of Older Person 1st October.

Celebration of successes

Recognising volunteers*

Encouraging community spirit/connection'

What else could be done?

Community gardens/connect with youth**

Community cooking

Younger ones can teach the older ones technology eg. Texts, ipads Text like a teen (Age Concern)

Feed into existing

Talk to schools

- reading recovery/listening
- Respect and responsibility
- Life skills
- Budgeting
- Adopt a school

Street parties

Adopt a Grandparent**

Simple tasks to meet the needs of the individual

Don't overwork the volunteers

Use the expertise/support services in the retirement villages – Mentors to the lonely/ friendship

Kaumatua programmes

Pacific Island

Neighbourhood parties/street parties

Supporting the carer when partner in RCS. Could be any age. Lack of confidence. Could link with the Rest Homes. Similar to 'Kids Club' children of dementia patients

Carers Air internet connection – map with regions (Carers NZ Alliance)

Taking wheelchair-bound people out for walks link with mobility taxis.

Adopt an animal or take them for walks**

Options re-think Home Help give the clients the option of what they want to use the money for.

Skill development to be in the workforce

Guidelines about keeping vourself safe for those not in 'official' schemes.

Low Engagement

What is going on?

Home Support

Meals on Wheels

Property Maintenance

Neighbours - Neighbourhood Support

Businesses – Hairdressing

Community Newspapers

Cold calling/sellers – clothing trucks

Insecurity/fear of crime – targeted (phone)

Taxis, Driving Miss Daisy Transport

Volunteer Visitors – Drivers (bus)

Family

Church

GP's

Hospice/District Nurses/Carers

Ahuriri Kahui Parakeka – provide transport – take to service

What else could be done?

Exercise programme in the home 1:3/4

Funding something for someone to do

Belly full – we need bakers

Being asked to help – not to be helped

MSD Database - with sign off (privacy)**** Community police sharing and linking**

Tailored support – diverse opportunities not just for older people*











Multi messages/communication in one visit. Are the services right

Fathers/Mums – make role models

Send info in MSD letter – after death of spouse

Neighbourhood Support – get people out for Neighbours Day****

What about Family Support (after care at home over long period of time)

More face to face service – opportunities to interact

Intergenerational – sharing knowledge – EIT mentoring/schools mentoring.*

'Mens Shed' – young and old together

Develop a byline e.g. 'We Can'

Eat and enjoy

Transport for 'buddies' more informal social groups/meals*

Encourage – creating interest groups e.g. craft/book clubs/church/coaching/open sporting opportunities/fun opportunities

Profile positive press – Senior Role Models 'out and about' DAnnevirke

What's on 'seniors page' about community. Options to participate – Have a voice other than text/email etc/

Attends Services

What is going on?

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Elderly	Groups	Individuals	Services/club
Sports	Trips (national)	 	Day care
Recreation eg tai chi	Local – bus	 	Education courses

What else could be done?

More opportunities to stay 'actively' learning/AE****

Education

Skills development to remain in workforce longer

Affordability of service

Gold card travel to connect better

Ability to easily 'search' what is on offer

Raise awareness of what is on offer

Being able to use modern technology e.g.

facebook/twitter

Social interaction online – versus social in person interaction – different

Is enough use made of 'free' local newspaper

Recreational directory

More 'personal' invites

'health' seminars for senior citizens

Partnership with funders

Targeting people – use volunteers/ Neighbourhood Support – chat to all over 65yrs old

AVS - Age Concern

Check what 'gaps' in serves there are

Neighbourhood Support 'Street by Street' people living alone (53% of population in Napier are not involved)**

Capacity of groups to be able to meet a

Where is the 'fun' in people getting together! Anyone who looks lonely

Connecting Elderly skills knowledge to youth****











What is the next level?

Ask social isolated 'what they need'

Existing members have a 'bring a friend day'

'Pooling' information to a focus point.

Start small – survey age groups*

Test area = X section of community – define boundary*

Ask what they want – phone/person*

Community Contributor

What is going on?

Taradale All Saints hosing Xmas Day lunch (100)

Sport HB Older Adult Programme. Tai chi recreation and prevention of falls*

Neighbourhood Watch wanting more groups sm groups supporting themselves.***

Chinese Assn just held a Senior Citizen lunch 82 attendees

Multi cultural Assn Diwali Festival (Indian) 2500 attended

Having a Chinese corner during Art Deco -Chinese Embassy involved

SHB Walking Groups – promoted by coordinators (self lead)

Neighbourhood Watch holds street BBQs

Sommerset become a group member and be involved (personalised visit)

Enliven tried a programme connecting a student

Big Brother/Little Sisters

Text like a Teen (Age concern)

RSA Hospital visits

What else could be done?

Funding to deliver programmes*

Transport to those programmes***

Anglican Church looking at what else they can be involved in

Continue free internet training for Senior Citizens

After school programmes YMCA – Rotary reading

Grandparents looking after children – neighbours looking after young children*

Publicise what's going on

Home Help – hours cut need help with shopping*

Awareness of support agencies that are available (centralised list)***

Contact Youth Services/Agencies

Night schools – need stimulation as well as connection**

List of older peoples skills (skills bank)**

Men's shed

Community Connectors

What is going on?

Senior net

St John's calling carers

Kiwi Seniors

Community Patrols

Grey Power (social functions)

Service Provision Age Concern Napier

- Meals
- Exercise
- Outings
- Social fellowship
- Go out to the community
- Hairdressing











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Foodbank

Volunteering Hawke's Bay

Neighbourhood Support (formal/informal)

Victim Support

Safe Homes

Church/faith based organisations

U3A??

Walking groups

Reading/Gardening recreation activities

Organisation Days Out eg Foundation for the Blind/Enliven

What else could be done?

Ensure personal contact with older people who may be socially isolated **

Followers have to become initiators*

Community gardens

Culturally appropriate responses****

Gap fillers – learning from Christchurch community. Get together impromptu

Street Festival BBQ*

Good Neighbour 'working bee' or 'hand man help'*

Other links with recreation through Sport HB

Kai in the Bay and Iron Maori

Link Young and Older people*****

Resource for people who come into contact with older people so they know where to go to get help for the older people

Cooking demonstrations*

Settlement Support – Not just for 'new' people. People moving after disasters or from other places.

Link Hospital and Home/community

More effective use of Rotary Pathways

Parking Space

Funding contracts creates barriers

Val and Sarah. Grief and loss

Barriers – mentors at risk

Connecting elderly skills to youth. School and after school

Lack of adult education

Council of social services? We had one once.

Will the result of today be another group formed?

Overload of information to seniors. Written material

Mobility – embarrassment. How is ok?

Guidelines for safety for individuals to go to homes

WINZ waiting time. Waster older energy waiting time. Face to face service local.

Red tape. It takes too long to get involved

Social media does not mean being connected.

Local media highlighting local community activities and people

Free health seminar. (see Tony or Dr Oz)







Napier Connects - World Café Workshop Participant Information summary

16 January 2013

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Information from the Napier Connects World Café

Thanks to all those who attended our session in December 2012, it was great to see so many of you there. The feedback from you was overwhelmingly positive!

The session certainly resulted in lots of information and ideas. Attached is the information that was produced from the group work.

What next?

- 1. Some of the ideas can be picked up by the organisations in the Steering Group as part of their work
- 2. The key themes strengthen some of the work already being done
- 3. You or the organisation you work with could implement any of the ideas. If you need any support with this, just let us know.

How you can help

- a. Become more involved in Napier Connects- contact us
- b. Stay in touch- stay on the distribution list to get updates
- c. Share your ideas if you have any more ideas, let us know
- d. Help the people you know connect with others

Warm regards

The Napier Connects Steering Group

NC (Napier City Council), MB (Grey Power), RR (Napier RSA), RL (Volunteering Hawke's Bay), SP (Age Concern), SK (Department of Internal Affairs), JL (Ministry of Social Development), TH (member to be confirmed) - contact emails attached.













Napier Connects - World Café Workshop Feedback Form

Yes	No No	
11		
Not at all	u feel you participated? A little bit Average Fully	
1111		
What is the ma	n thing you will take away from the session?	
: !		
What improven	ents could be made for future sessions?	
,		
What do you th	ink of the Napier Connects concept?	
r 1	get more involved in the Napier Connects programme?	
Yes	No	
If yes, please gi	ve us your contact details:	
Name	Telephone	
Email		
	The value for a various for a sile and a	
	Thanks for your feedback	

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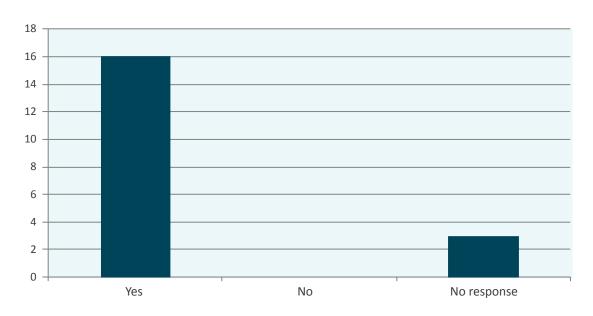
Napier Connects - World Café Workshop Feedback Report

A total of 19 responses were received.

Below are the collated feedback comments.

1. Was the session worthwhile for you?

There were a total of 16 responses to this question with 100% saving yes.



2. What is the main thing you will take away from the session?

Comments:

- Need to link elderly with youth
- Understanding of other organisations input into community
- Ideas and enthusiasm of attendees
- Individuals, groups very willing to help people
- Need for sharing and coordination
- Opportunities for social connectedness. Support from Napier community.
- Very positive. Realising what is already happening.

- Importance of connecting and collaboration
- Different ideas
- Keenness of participants obvious
- Better use of neighbourhood supporting individuals i.e. neighbours being inclusive
- Whänau connections are forever
- A very positive feeling. We are exposed to so much negativity via media so to be in a room of such caring people is motivating and uplifting













- A broader knowledge of what is out there and what could be out there
- Positive thoughts for our ageing population
- Understanding
- Opportunities to support/work with isolated citizens
- The need to bridge the gap between old and young
- Importance of a good neighbourhood support organisation.

3. What improvements could be made for future sessions?

Comments:

- None- well run
- Very good session- nothing to add
- Similar style of event
- More engagement with Maori groups
- Identify areas for trial to access what can work
- Was run well. Good time management and organisation
- Unsure
- Good benchmark
- Questions were all quite similar and repetitive
- Noisy venue- some repetition in form filling
- Good as is
- Advertise over Radio Kahungunu
- Not many- well done
- All went well. Cappuccino would have been good LOL
- More time for discussion in workshops.

4. What do you think of the Napier Connects concept?

Comments:

- Great ideas and discussions x 4
- Excellent x 2
- Good idea x 2
- Promising- needs driving and direction
- Worth developing further. Could build on what is working now and make it better.
- Good concept which will hopefully generate some future outcomes and positive results
- Important topic/concept- results will tell
- Fine, but don't add another level of volunteers
- Need vision, strategic objectives, values system
- Anything that encourages ALL members of the community to engage can only be positive
- Great ideas but who is going to convene these ideas
- Want to be fully involved. This is dear to my heart. Don't want to see it falter.
- Hope a working group and outcomes start happening soon. Happy to support.
- A usefully group but beware of dissipation of effectiveness of existing groups by forming another group







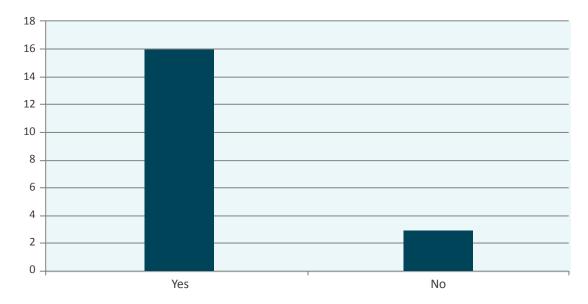






5. Do you want to get more involved in the Napier Connects programme?

A total of 16 from the 19 World Café participants would like to get more involved in the Napier Connects programme.



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World Café Project Not For Profit Community Organisations Survey

Services provided:
·
What would work in your organisation to improve engagement:
<u></u>
Volunteers
Age of recruitment
,
<u> </u>
Volunteer Roles offered
Da you have a Valuntaar Managament Plan in place for valuntaars
Do you have a Volunteer Management Plan in place for volunteers
What planning for the future have you in place for your Volunteer Programme
; · · · · · · · · · · · · · · · · · · ·







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Review Framework

Population Measure

Napier's older people engage in their community

% of people undertaking regular volunteer work (over 65 28.2% / whole pop 25.3%)

% of people using social service group (over 65 14.3% / whole pop 16.6%)

% of people reporting an improved quality of life (over 65 32.4% / whole pop50%)



Napier Connects increases the community infrastructure to provide a range of opportunities for older people to be better connected



Performance Measures

- 1. Interagency steering group
- 2. Projects facilitated
- 3. Flow on projects
- 4. Communication strategy

How well?

Participation levels (survey / evidence of participation)



Project review / evaluation



Project review / evaluation



Project review / evaluation of actions

Is Anyone Better Off?

Changes in skills / behaviour / attitude / opinion

Shown through success stories, infrastructure created (new or improved opportunities to engage), project reviews / evaluations

Lessons Learnt

Produce a Napier Connects Toolkit















Project Review / Evaluation

Each project will use a method of review / evaluation appropriate to its size, cost and nature. Examples include surveys, feedback, focus groups etc. However, each project review / evaluation should include the following aspects:

What was done?

Goals, target audience, reason for the project, methodology

How well did we do it? (Reach / numbers)

• e.g. number of people involved, unexpected outcomes, budget results, participant satisfaction

Is anyone better off? (what changes were produced)

• e.g. reduction in duplication, increased collaboration (shared projects, new partnerships, organisations working together), increase in opportunities available, increase in knowledge about issue / needs etc.

Lessons learnt

- What worked well, what didn't?
- Should the activity continue?
- What should be changed (who/what/where/when/how)













Napier Connects Community Internship Workplan

Update March 2013

	Pr	Project Status March 2013		
Action	Description	Progress To Date	Status	Key Dates, Milestones & Things to Follow Up on.
Objective 1: Hold work with a wide range of ol	shops and/or focus groups with the key der people to identify the existing servi	Objective 1: Hold workshops and/or focus groups with the key community groups and service providers who have built up excellent relationships with a wide range of older people to identify the existing services that could be enhanced to increase social connectedness.	rs who have l social connec	ouilt up excellent relationships tedness.
1. 1 Hold workshops with key community groups	1. 1 Hold workshops With key community older people to find out what services and programmes they want	Action delivered. Established a set of questions to become part of a survey to establish what Community activity they are involved with, what prevents them being active in their community, what services they want. Meet with Tait Drive lunch group and completed a survey with 86% of the attendees on the day completing the survey. Survey.	Completed	Completed Survey completed 28/01/2013.









1.2 Hold workshops	Hold workshops to consult with	Action delivered.	Completed	Completed Discussion held 20/02/2013.
with key community groups	older people to find out what services and programmes they want	Meet with the over 65 group at Te Kupenga Hauroa Ahuriri. An informal discussion held about what activities they are involved with and what programmes they want.		As a result of discussion it was established that this group was in need of a bus or van to take them to activities. This has become an action of the Steering Committee.
1.3 Hold workshops with key community groups	Hold workshops to consult with older people to find out what services and programmes they want.	Action delivered. Meet with Masonic Trust Knightsbridge Self care residents social group. An informal discussion held about what activities they are involved with and what programmes they want. Action delivered	Completed	Discussion held 12/03/2013. This meeting resulted in the group agreeing to meet with a wider group from the "World Café" to see if the two groups can establish or work collaboratively.
		Meet with All saint's Mens shed group to observe how they operate.		





Groups meet with:	a. All Saints Taradale	b. Citizen Advise Napier	c. Napier District Masonic Trust	d. Information for Disabilities	e. HB Seafares Welfare Society	f. NZ Red Cross	g. Alzheimers	h. Napier Hearing Assn.	i. Napier Day for the Elderly	j. Diabetes HB	k. Taradale Senior Citizens	I. Napier Senior Citz	The outcome of these meetings has resulted in	some organisations working	Concern Napier to deliver services and activities.
Ongoing															
Obtained the list of Not for Profit	service providers to the elderly from	DIA, who had sent out invitations to	Connects	Made contact with all organisations on list that had accepted invitations	and made appointments to meet with them one on one.										
Hold workshops to identify the	existing services that could be	connectedness													
1.4 Hold workshops	with key community	service providers													





Objective 2: Identify how older people ca	Objective 2: Identify the key community connectors among the older Napier population and facilitate meetings with them to determine how older people can be encouraged to volunteer and/or begin their own projects to enhance social connectedness.	; the older Napier population and facili oegin their own projects to enhance so	litate meeting ocial connecte	s with them to determine dness.
2.1 Hold meetings		Action Completed	Completed	Key Connectors meet with:
with key community connectors.	connectors, one on one, to determine how older peop be encouraged to voluntee	Brain stormed with Age Concern Community Social Worker to establish these connectors.		RL— AVS and Elder Abuse & Neglect Prevention Service. 05/02/2013
	begin their own projects to enflance social connectedness.	Rung each connector and invited to meet with intern and in some cases		RW – Summerset Mens shed Co-ordinator.
		Age Concern Community Social Worker also attended.		World Café Member
				PL – NCC Community
				Advisor.
				21/03/2013
				MB – Community Support Worker
				20/02/2013
				LH- World Café Member, Age Concern Committee member
				15/01/2013
				RR – DHB Nutrition Chairperson
				05/02/2013
				AR – TeKeupunga Haora Ahuriri
				26/03/
2.2			Ongoing	
2.3			Completed	







2.5 2.6 2.7 2.8 2.9 2.9 2.9 2.9 2.9 2.9 2.9 2.9 2.9 2.9					
2.5 2.6 2.7 2.9 Objective 3: Hold workshops and for focus groups with AVS volunteers to establish their view on with AVS volunteers to establish their view on with AVS volunteers and invited expanded and how to support older people develop their own solutions. 3.2 Hold meeting with DHB social workers to establish their view on with DHB social workers to establish their view on with DHB social workers to establish their view on with DHB social workers to establish their view on workers. 3.2 Hold meeting with DHB social workers to establish their view on workers. 3.2 Hold meeting with DHB social workers to establish their view on workers. 3.2 Hold meeting with DHB social workers to establish their view on workers. 3.2 Hold meeting with DHB social workers are stablished with DHB social workers. 4.4 In meeting with DHB social workers are stablished with DHB social workers. 5.5 Workers to establish their view on workers. 5.6 Workers to establish their view on workers. 6. Workers to establish their view on workers. 7. Workers to establish their view on workers. 8. Workers to establish their workers are established with DHB social workers. 8. Workers to establish their workers are established with DHB social workers.	2.4			On track	
2.9 Objective 3: Hold workshops and/or focus groups with AVS volunteers with AVS volunteers are people develop their own solutions. 3.2 Hold meeting with G Workers to establish their view on who is workers. Objective 3: Hold workshops and/or focus groups with Age Concern Accredited Visitor Services (Action completed and how to support older people develop their own solutions. S.2 Hold meeting with DHB social workers to establish their view on workers. Obtained names of volunteers from Action completed on in collaboration with Age Concern who is most at risk, what services could be expanded and how to support older people develop their workers. Orould be expanded and how to support older people develop their worker workers. Orould be expanded and how to support older people develop their worker.	2.5			Completed	
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Objective 3: Hold workshops and/or focus groups with Austral out their views of who is most at risk, what services could be expanded and how to support older workers. 3.1 Hold meeting with DHB social workers. With AVS volunteers of who is most at risk, what services could be expanded and how to support older workers. S.2 Hold meeting with DHB social workers to establish their view on workers. S.2 Hold meeting with DHB social workers to establish their view on workers. S.2 Hold meeting with DHB social workers to establish their view on workers. S.3 Hold meeting with DHB social workers and invited to meeting. S.4 Hold meeting with DHB social workers are are an enting workers to establish their view on workers. S.4 Hold meeting with DHB social workers and invited to meeting. S.5 Hold meeting with DHB social workers are are are an enting workers to establish their view on was established with DHB social workers. S.5 Hold meeting with DHB social workers and invited to meeting. S.6 Concern Volunteers and invited to meeting. S.7 Hold meeting with DHB social workers are are an enting to meeting. S.8 Hold meeting with DHB social workers are are an enting to meeting. S.8 Hold meeting with DHB social workers. S.9 Hold meeting workers workers workers.	2.7			Completed	
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	3.1 Hold meeting with AVS volunteers 3.2 Hold meeting with DHB social workers.	Held meeting with 6 AVS volunteers to establish their view on who is most at risk, what services could be expanded and how to support older people develop their own solutions. Held meeting with DHB social workers to establish their view on who is most at risk, what services could be expanded and how to support older people develop their own solutions.	Action completed Obtained names of volunteers from Age Concern Volunteer Data base. Rung all AVS volunteers and invited to meeting. Action completed In collaboration with Age Concern Community Social Worker a meeting was established with DHB social worker.	Completed	Meeting held 31/01/2013 The outcome of this meeting established that most at risk were older people without transport, no family support, finances, health/mobility. AVS visits have increased from 20 a month to 50 visits. Social Isolation Targeted at all visits. Meeting held 05/02/2013. The outcome of this meeting resulted in Options HB agreeing to complete a quick survey used by Age Concern Napier at to establish/ask questions of clients when completing home visits around the clients Social Community Activity.







3.3		Completed	
3.4		On track	
3.5		Completed	
Objective 4: Meet and	Objective 4: Meet and report back to the Napier Connects Steering Group on the findings of the workshops with various groups	orkshops with various groups	
4.1 Report to Napier Connects Steering on findings of workshops	4.1 Report to Napier Have reported back verbally Connects Steering and provided written survey/ on findings of questionnaire results to steering committee at monthly meetings.	On track	
4.2		On track	
4.3			
4.4		On track	
4.5		On track	











Safer Napier Project **Evaluation Guidelines**

Are we making a difference?

² New Zealand Positive Ageing Strategy, 2001













¹ Summit on Combating Loneliness, 2012



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Introduction

International Safe Communities (ISC) accreditation requires evaluation measures to assess programmes, processes and effects of change. Safer Napier is using the Results Based Accountability (RBA) framework to achieve this¹. Safer Napier will monitor and report annually on a set of broad community wide indicators. To complement this we also need to report on the individual projects, programmes and initiatives that contribute to the Safer Napier objectives;

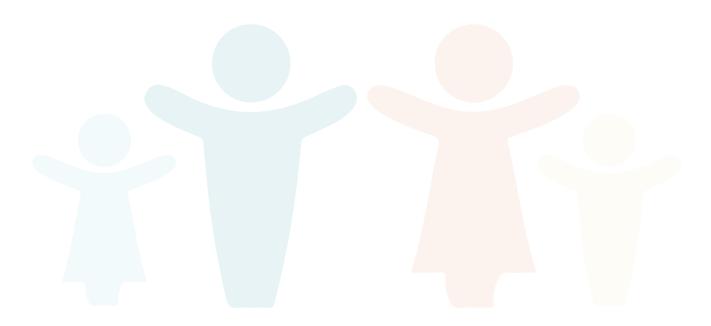
- People in Napier feel safe (Crime Prevention)
- People are injury free in Napier (Injury prevention)
- Napier roads are safe for all who use them (Road safety)
- People in Napier know how to keep themselves safe (Community resilience)
- Everyone works together to improve community safety in Napier (Collaboration and a coordinated approach)

We know project evaluations can be challenging so here are some tips and tools to help you evaluate your Safer Napier project, programme or initiative. The information you provide becomes part of the annual report and the collective effort to actively addressing community safety in Napier.

Please share your evaluations with the Safer Napier Coordinator Liz Lambert

Email: lizbell3@hotmail.com Napier City Council Post:

Private Bag 6010 Napier 4142



1 For more information on RBA see www.resultsaccountability.com or contact the Safer Napier Coordinator.















Planning for evaluations

Please note this section is based on Preventing injuries in your community A Start-to-finish guide for your injury prevention project, ACC (free copies of this publication can be ordered from www.acc.co.nz)

Safer Napier projects, programmes and initiatives are about improving safety, health and well-being in Napier. Evaluations allow you to measure how effective the project, programme or initiative has been in achieving its goals and objectives. Evaluations can be done when your project, programme or initiative is complete or still underway if it is a long-term project.

Your evaluation plan

An evaluation plan can be a statement.

For example, "Our project goal is to reduce theft from cars in Napier. We are doing it because we have done some research and identified an issue. When we have completed our project, we will evaluate it to show what we have achieved and whether we reduced theft from cars in Napier."

If you have a number of project objectives, for each objective ask:

- 1. What is the situation now how do we know there is a problem? (This is your initial data or information that can be used as a benchmark)
- 2. How will we measure the impact our project has had?

Quick evaluation checklist

- Project goals
- Performance measures
- Evaluation methods
- Who will do the evaluation?
- Who needs to be involved?
- Evaluation answers:
 - How much did we do?
 - How well did we do it?
 - Is anyone better off?







The challenges of evaluation

If your project, programme or initiative goals are very broad, it can be difficult to measure your success once it is complete.

For example, a project might aim to reduce head-on car crashes by increasing people's awareness of the risks of crossing the centre line and therefore change the way people behave. However, a person's driving behaviour is related to many different things, such as their driving skills, road conditions, how slowly a truck in front is travelling or even the fact there is a police car at the side of the road. Although you might be able to get direct data on the number of crashes before and after this project, it would be difficult to be certain that the awareness project alone achieved (or didn't achieve) the result.

You can acknowledge this in your evaluation and try and use additional evaluation techniques to demonstrate the impact of your project, programme or initiative.

For example, ask a group of drivers (focus group) 'did you see the billboard on the side of the road and if so did it increase your awareness of the risk of crossing the centre line?'

Both pieces of information are useful and help tell the story.

An evaluation plan should be decided when the goals and objectives are being developed. This will help ensure the project, programme or initiative is realistic in what it can achieve and how that achievement can be measured.

Tip: Having people not involved in delivery of your project, programme or initiatives facilitate focus groups and interviews adds to an objective result

Results Based Accountability - talk to action

As part of the RBA framework here are seven performance accountability questions that your project team might find useful to ask themselves (in order) during or after a project, programme or initiative.

- 1. Who are our customers?
- 2. How can we measure if our customers are better off?
- 3. How can we measure if we are delivering services well?
- 4. How are we doing on the most important of these measures?
- 5. Who are the partners that have a role to play in doing better?
- 6. What works to do better, including no-cost and low-cost ideas?
- 7. What do we propose to do?







Evaluation techniques

Once you know what you want to measure the next question is how. Here are some methods you might consider. Please note this is not a complete list and there is no universally correct approach. A project, resource, awareness campaign or event will use different techniques.

What you do will depend on the size of your project and the resources available. Please remember the scale of the evaluation should be proportionate to the project e.g. A small project would have a brief evaluation.

Collecting benchmark information

You will have already done this when you were thinking about your project goal and objectives. It could include:

- Research on websites or in articles
- Observing or surveying unsafe behaviour
- Interviewing people in the community to find out about the problem
- Setting up groups of people (focus groups) to discuss the issues.

RBA looks at baselines. What the measures show about where we have been and where we're heading. It is therefore useful if we have past data. Baseline data has a historical part that tells where we have been, and a forecast part that shows where we are heading if we don't do something differently. Success should be measured based on the predicted trend of the base line, can we turn the curve?

Measuring your success

The techniques can be the same as those used for collecting your benchmark information. It's a matter of comparing the before and after results.

In addition there are also other techniques listed below. When possible remember to include hard data (quantitative / numbers) and soft data (qualitative / words). Combining numbers and stories is the most powerful way to report progress. The stories illustrate what the numbers mean and put a human face to the statistics.

Quantitative techniques

Direct measurement	Comparing the baseline data to now
Statistical information	There is a lot of statistical information that can be used.
	For example,
	 Your own statistical data collected during the project
	 New Zealand Police Statistics are available through Statistics New Zealand- allowing you to gather detailed crime information about your local area for the last 10 years.







	 Interactive New Zealand Injury Statistics are available through the National Injury Query System (NIQS) – a simple free online injury query system which allows you to produce numbers and rates of injuries in New Zealand and Territorial Local Authorities (Council boundaries) based on your parameters of interest, such as years, age groups, geographic area, cause, or intent. https://blogs.otago. ac.nz/ipru/statistics
	There are many agencies that are part of Safer Napier and they may also be able to help with statistical information. Please contact the Safer Napier Coordinator for more details.
Number of resources developed, customers helped, numbers attending etc.	This helps answer- how much have you done.
Budget Reconciliation	There are many ways to do a survey, including; postal, telephone, online or at destination points. Data can then be coded to produce quantitative data.
	For example, in 2011 81% of survey respondents said they are now physically active for 30 minutes a minimum of three times a week after receiving a Green Prescription (GRx).
Quick survey	To give you a quick estimate of what impact your project, programme or initiative is having you could ask a question at a meeting and get people to put their hands up. This can be useful during a project, programme or initiative.
	For example, at an Age Concern meeting of approximately 70 people 60% raised their hand for- who have used the Home Safety Flipchart? This let the project team know the resource was being used and a more in depth survey can be done later.
Comparing to the whole of New Zealand, other areas, standards or similar programs	For example, in an evaluation of the Firewise Intervention Programme (FAIP) for 2011 the evaluation included that the average amount of residential property damage in Napier dropped by 20% and is the lowest in the country.
Control group research	Create two groups with comparable characteristics. Provide treatment to one, deny treatment to the other and then see if there is a difference. Please note it is not always possible to have a control group.
Observations and visual	Has anything changed?
survey	For example, in 2011 as part of work with the Crash Reduction Study / Road Safety Action Plan, improvements have been made to the physical road network in two identified 'problem areas'.







One-on-one interviews	These can be structured, semi structured or unstructured with key participants and stakeholders. You want to be asking questions so you can answer;
	How well did we do it?
	Is anyone better off?
	Is there any way we could improve?
Survey / Questionnaires	There are many ways to do a survey, including; postal, telephone, online or at destination points. It is good to use both closed and open ended questions (how or why questions). You will therefore get quantitative and qualitative data.
Customer satisfaction survey	When you can't think of any other way to determine if your customers are better off, ask them.
	For example,
	 Were you treated with respect in the waiting room? (a how well did we do it? measure – did we treat you well)
	 Has your child's behavior improved since we started working with you? (an Is anyone better off? measure – did we help you with your problems)
	Please note low response rates or customers bias can distort your results. If this is the case you should mention this so the reader is aware.
Focus Groups	The focus group technique involves facilitating a small group discussion between selected individuals on a particular topic. It is good to include representatives from your target audience in the focus group.
Photovoice	Getting people to tell their story through taking photos. This is very visual and a good prompt for discussion. For example, get participant to take a photo(s) of something that represents how the project or service impacted on them and get them to describe it to you.
Art, skits or performance	Reflecting on the impact of the project through art and performance. This can be a fun and interactive way to get kids involved.

Tip: It is good to use percentages to make comparisons

As part of your evaluation you may also want to consider who should be involved including stakeholders and your target audience. Also who conducts the evaluation, having a person not involved in delivery of the project, programme or initiative facilitate focus groups and interviews adds to an objective result. For large projects that have had a large budget you may consider getting someone external to do the evaluation. As a guide your evaluation could cost up to 10% of your total budget.





Evaluation template

Below are key things a Safer Napier project, programme or initiative evaluation should include. Please note this is based on RBA and Trying Hard Is Not Good Enough: How to Produce Measureable Improvements for Customers and Communities' by Mark Friedman.

What did we do? Title and narrative description Include: Goal and objective(s) (the agreed activities – what differences did we intend to make) Target audience Reason for project (rationale / need) • Project partners (team members, volunteers and acknowledgement sponsors) Project methodology (overview of what you did) How well did we do it? **Reach / Numbers** Here is where you look at the quantity and quality (effort and effect). You may include; • Number of programmes implemented, clients seen, brochures produced etc Number of people involved • Unexpected outcomes or mitigating factors

Is anyone better off?

Effects of the project. What changes did we produce?

• Was it within budget and on time (if relevant)

This could include change in;

 Skills/ knowledge (For example, percentage of participants achieving) NCEA level 1 or 2)

• Customer satisfaction if applicable (did we treat the customer well?).

- Attitudes / opinions (For example, percentage of participants who believed the service helped them)
- Behaviour or circumstance (For example, change in number of family violence call outs for families involved in the project (Operation Bliss)

Lessons Learnt

Information that can inform the development of future programmes or improve ongoing ones.

- What worked well, what didn't (strengths and weaknesses)
- Should the project be continued?
- What would make it better?
- Who else should be involved?
- Any recommendations (if anything else remains to be done, include) actions and who will be responsible for doing them)









Appendix: some examples

Here are some examples for how much did we do?, how well did we do it? and is anyone better off?

Examples from Mark Friedman's book Trying Hard Is Not Good Enough: How to Produce Measureable Improvements for Customers and Communities'.

Drug and alcohol treatment program		
How much did you do?	Number of people treated	
How well did we do it?	Percentage of staff with advanced training or certification	
Is anyone better off?	Percentage of your clients who are off of alcohol and drugs – at program exit, and 12 months later if you can get the data.	

Health Plan or Practice	
How much did you do?	Number of patients treated and hours of treatment
	Average time in waiting room, and the retention rates of nursing and clerical staff
,	Number and rate of incidents of preventable disease. These are for the people in the health plan or practice, not the whole community.

Fire Department	
How much did we do?	Number of responses to an alarm
How well did we do it?	Average response time
Is anyone better off?	Number and rate of fire deaths and injuries in your catchment area , and property damage from the fire in total and as a percentage of assessed property values.

'The absence of a bottom line is what makes public and non-profit management so difficult. The answer to this dilemma can be found in – is anyone better off? 'Is anyone better off?' measures are equivalent of profit for government and non-profit agencies.'

Mark Friedman





Examples from the Safer Napier Annual Report 2011

Home Fire Safety Checks	;
How much did you do?	Over a six month period Napier firefighters visited 420 individual homes of people at risk.
How well did we do it?	Firefighters punctual and all trained in Home Fire Safety Checks.
Is anyone better off?	Over a 12 month period the average amount of residential property damage in Napier has dropped by 20% and is the lowest in the country.

Hawke's Bay Road Safet	y Expo 2011
How much did you do?	Approximately 2,000 Year 11 students attended from the Hawkes Bay region. Approximately 20 community members attended the parent/community evening session.
How well did we do it?	The event run to time and was very professionally organized. The crash scenes, live demonstrations, presentations, interactive exhibits and workbook resources were of high standard and memorable to students and their families.
Is anyone better off?	A logic model was prepared and comprehensive evaluation undertaken (pre and post event) and the following outcomes were noted –
	 Increased awareness of services available
	 Increased organisational partnership
	 Consistent messaging communicated during Expo and reinforced in workbook resource
	 Expo was perceived as a credible and valuable experience by schools.
	Increased awareness of consequences of drink-driving and of risks of sharing a vehicle with an alcohol impaired driver.

Closed Circuit Television (CCTV)	
How much did you do?	14 cameras operating 24/7 in Napier.
How well did we do it?	Real time monitoring occurring at the peak hours of 9pm-4am Thursday to Saturday.
,	76 incidents were identified and 25 arrests were made that were directly attributed to the cameras.





