

Lewisham Safe and Independent Living (SAIL) Connections
Impact Report

July 2016- March 2017

Introduction

I am pleased to introduce the Lewisham Safe and Independent Living (S.A.I.L.) Connections Impact Report for 2016/17.

The beauty of SAIL is that it's a simple but highly effective mechanism which supports health, happiness and wellbeing in our community. SAIL Connections builds on our strong local partnerships between voluntary, community and the statutory sectors to deliver a personalised and preventative approach.

Lewisham's vision for a sustainable and accessible health and care system is one in which people are better supported to maintain and improve their physical and mental wellbeing, to live independently and access high quality care when needed. SAIL is an excellent example of how this works in practice.

Grace's story on page 8 shows how using a simple checklist and improved coordination helped Grace with practical support like a smoke detector, advice from an Occupational Therapist and friendship through a home visiting service. This type of help supports Grace and many other people like her to remain safe and independent at home.

The SAIL Connections Checklist is quick and easy to use and since the formal launch in February 2017 it has been embraced by local stakeholders, with over 50 different organisations using it and a quarter of referrals coming from GP Practices. The enthusiastic response and steady increase in referrals tells us that it has local value and can assist health professionals access a range of non-clinical interventions to support patients' wellbeing.

Thanks to the dedication, hard work and commitment of the SAIL Connections Team and the support from all our SAIL Partners, Lewisham Sail Connections has achieved a smooth launch and a successful first year.

"Simple can be harder than complex: You have to work hard to get your thinking clean to make it simple. But it's worth it in the end because once you get there, you can move mountains." — <u>Steve Jobs</u>

Fiona Kirkman - Prevention and Early Action Lead - Lewisham Whole System Model of Care

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Project Overview

Lewisham SAIL Connections, hosted by Age UK Lewisham and Southwark and funded through the Better Care Fund, is an established social prescribing scheme for vulnerable older people.

Age UK Lewisham and Southwark first established the SAIL model in Southwark in July 2013 where the project has proved a highly effective preventative service enabling quicker referrals between sectors.

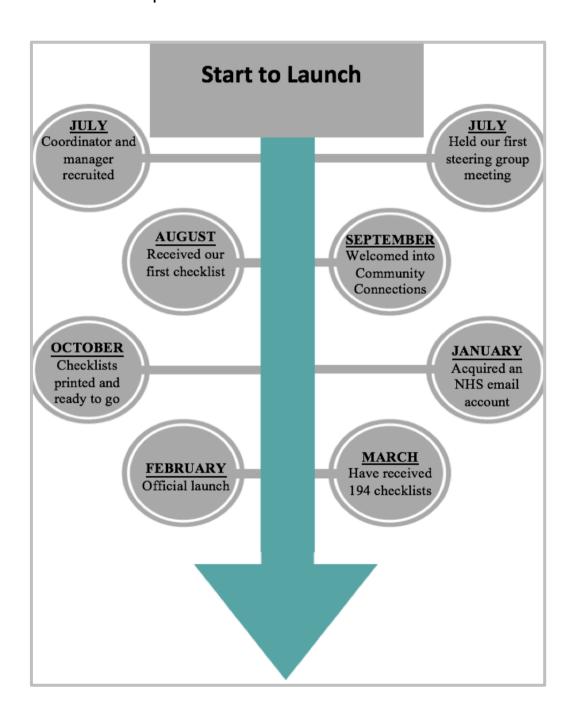
SAIL Connections is designed to enable improved coordination of referrals for vulnerable older people and encourage a holistic approach to care.

This is achieved through a single referral checklist, which facilitates a pathway to a range of services supporting safe and independent living. The checklist can be completed by any professional or by the older person directly and is returned to Age UK Lewisham and Southwark. Our Project Coordinator then contacts the older person and manages the onward referrals to our partners.

The Coordinator provides a single point of contact and support for the older person while they access multiple different services. Each of the requested partner projects start to work in the older person within 6 weeks, but often much more quickly.

Milestones so far

Lewisham SAIL Connections has been funded on an 18 month Pilot from July 2016. SAIL Connections is a partnership project which Age UK Lewisham and Southwark have developed and coordinate.



The Partnership

Lewisham SAIL Connections is a partnership response. The older person doesn't have to retell their story again and again but can access all the support they need in one go.



The SAIL Checklist

supporting lewisham residents over 60	INFE togeth	Stones End Centre 11 Scove her London S	
lame:	DOB:	Gender:	
ddress:	-	Postcode:	
ented (Council) Rented (Private) Housing Associ	iation Owned	Ethnicity:	
elephone: GP Sur	gery:		
ease tick the services you would like and return checkl	list to: sailconnection	ns@ageuklands org uk	
HEALTH AND WELLBEING	iist to. suitconnection	ns@ugcukiunus.org.uk	
Nould you like a pendant alarm to keep you safe and secu	ure? Linkline Telecare	Service	
Nould you like to talk to someone about Telecare equipm ndependent in your home for longer? Linkline Telecare Se		could help you stay	
Have you had a fall or a near miss in the last year that has NOT b	een investigated or trea	ated? Lewisham Falls Services	
Do you have dementia, or do you care for someone with demer support available? MindCare	ntia and would like to s	peak to someone about	
Are you blind, partially sighted, or do you have a specific vi	sual impairment? Blin	ndAid	
Have you lost weight recently without meaning to or are yeferred to a dietician? Lewisham Primary Care Dietetics S		usual and have NOT been	
Do you smoke? If so would you like to stop? Stop Smok	ing Service	_	
Has your drinking or drug use increased slowly over the years, alcohol or drugs to unwind/relax? - would you like to talk to s			
Do you care for someone, or does someone care for you on an unp or mental illness? Would you like to talk to someone about suppo			
Would you like to talk to someone about social activitie groups, exercise classes, lunch clubs, help with using the	es including: volunteer e internet? Communit	ring, befriending, social y Connections	
LIVING CONDITIONS			
s your home cold? Would you like in-home advice about k available for heating and insulation? Warm Homes Health		energy and funding	
Do you have any difficulties using the bath/toilet/kitchen fac out of your home, or using stairs? If yes, please specify your Occupational Therapy			
Do you have an odd job around the home that you nee	d help with? Lewish	am Handyperson	
Are you worried about the condition/repair/maintenand	ce of your home? Ad	lvice Lewisham	
SAFETY, SECURITY AND INCOME			
Would you like advice from your Local Police Team regard recent incident of crime or anti-social behaviour in your a			
Have you ever been concerned about services or goods your door? Crime Enforcement and Regulation Service	ou have bought	AIL Connections	supports
Have you sent money to anyone who contacted you by phon- unexpectedly, and that money or gift never materialised? Cr	e or mail są		
Do you have a working smoke alarm? Would you like a free	e Home	🛮 🦶 Improved h	nealth and
Would you need help leaving your home in the event of a		wellbeing	
Are you having trouble paying your bills or would you like all the income that you are entitled to? Advice Lewisham		WellbeiligDecreased	icolotion
Visited by:	rom:		
-	elep	🖊 Financial in	clusion
IMPORTANT: This must be read to the client: "In signin being shared with partner organisations in accordance Please tick here if completing by phone to demonstrate	with	# Improved h	nome securit
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Signed (client/representative):		♣ Improved o	ruality of

Grace's Story

Grace is 76, she lives in a housing association and is partially sighted. She was referred to Lewisham SAIL Connections after meeting some of our Southwark Team at the Healthy Living Centre.

After a chat with the coordinator we referred her to:

- London Fire Brigade

- Occupational Therapy

- Blindaid

- Linkline

Blindaid paired Grace with a Home Visitor. The Home Visitor regularly visits Grace, he says they normally have a cup of tea and chat and it feels like he's visiting a friend.

Grace has been offered a Clinical Assessment for her Occupational Therapy needs. Her Home Visitor from Blindaid was also able to help her with her OT needs, measuring her bath and supporting her with some forms.

The London Fire Brigade also paid Grace a visit. They installed a Smoke Detector and gave her some advice about protection, detection and escape

Linkline gave Grace a call to explain a bit more about pendant alarms but for the moment Grace now feels she will be okay without.



Referral Data

By the end of March 2017 Lewisham SAIL Connections had received **194** referrals from over **50** different organisations including GP surgeries, Adult Social Care, the Police, Fire Brigade, NHS teams from three different hospitals and various voluntary sector and community groups.

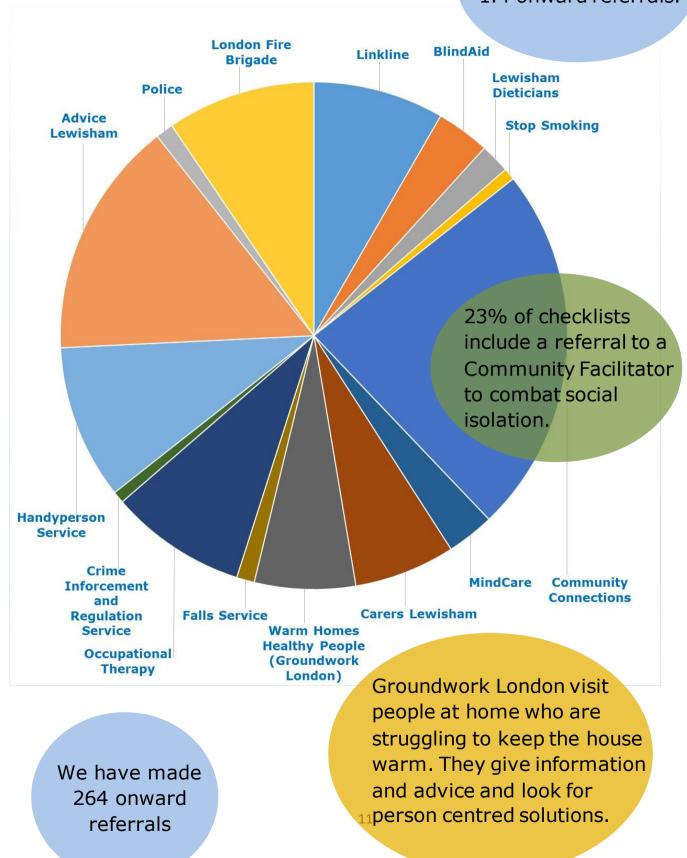
Lewisham SAIL Connections supports older people (60+) living in Lewisham. It is designed as a preventative service aiming to enable older people to maintain their independence longer through early intervention and supporting people to access the most suitable services easily. Referrals have been received from every ward in Lewisham and we can see that these match the overall demographics for the borough.

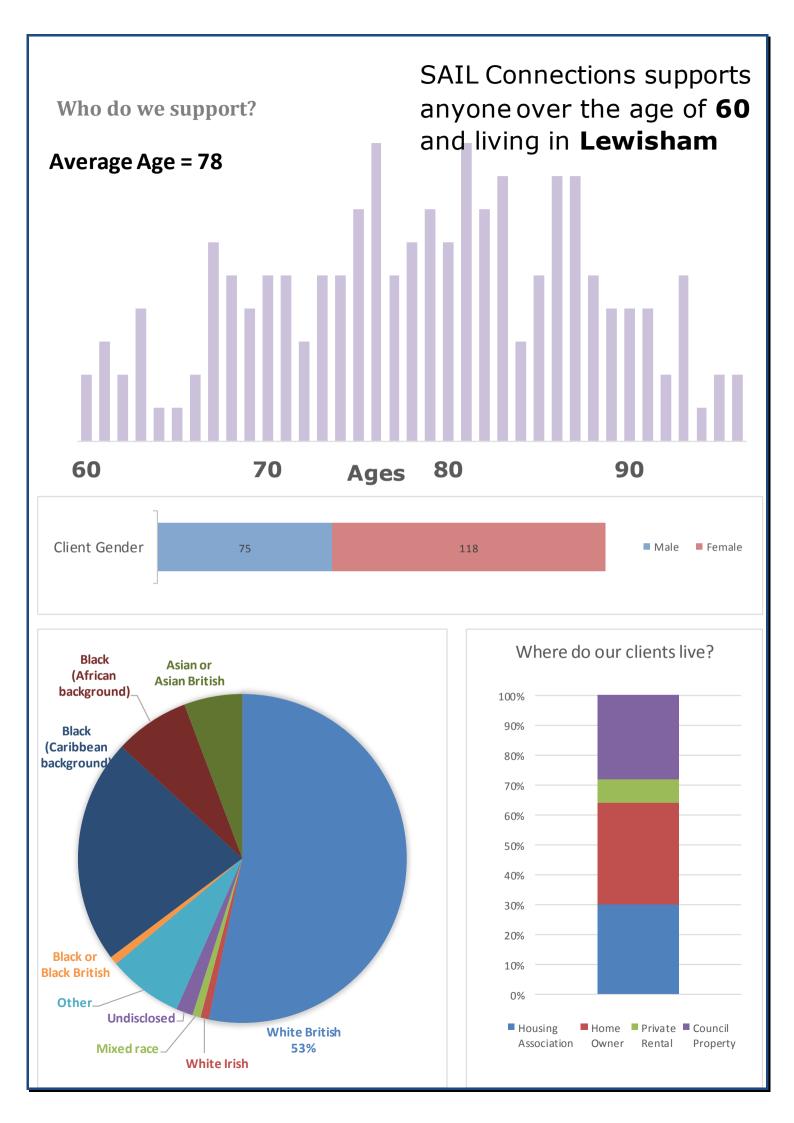
Lewisham SAIL Connections aims to support vulnerable older people. The average age of our service users so far is 78 but extends up-to 98 years old. The service has also received a handful of referrals for people who are not quite 60 but suitable for support from the services in the SAIL partnership. We will always do everything we can to help people access the services required even if they don't fit perfectly onto the checklist.

Where SAIL Referrals come from ■GP ■Hospital 45 ■ Other NHS Services ■ Adult Social Care ■Housing/ care ■Self/ family ■Voluntary sector ■Other A quarter of SAIL referrals are from **GP** surgeries 35 31 28 24 A 2 week pilot helped ensure a smooth pathway from day one. 12 9 8 September October November December March AugustJanuary February

Where are we referring?

Each SAIL Checklist generates on average 1.4 onward referrals.





Health and Wellbeing

Early intervention and prevention is fundamental to enabling older people to manage their health and remain independent.

The checklist provides access to: pendant alarms, community dieticians, the Stop Smoking and alcohol and substance misuse services, falls prevention and support, support for dementia, visual impairments and support for carers.

Falls prevention

It is estimated that around one third of people over 65 will fall at least one during the period of a year. This has a profound effect on the health and wellbeing of the older population.

SAIL Connections has been working with the Lewisham Adult Therapy Team and University Hospital Lewisham's Falls Clinic to support older people who have had a fall or near miss.

We are excited for the launch of the Lewisham Community Falls Service and have worked closely with the team to provide a pathway to community physiotherapy and exercise classes. This link will facilitate earlier intervention and better falls prevention.

SAIL for people with dementia

Mrs B has dementia and is cared for by her son. He was having difficulty by her son. He was having difficulty helping his mum in and out of the bath and they were looking for some day time activities for Mr.s B.

SAIL Connections referred Mrs. B to Mindcare. Because of their specialist knowledge about dementia so it was best for them to coordinate Mrs. B.s referral.

Mindcare conducted an assessment and found that Mrs B's needs were such that attendance at one of the local community groups would not be appropriate, so a referral was made to adult social care for an assessment for a day centre place and an OT assessment for bathing equipment.

Mrs B was referred to Age UK's 1&A service who helped her claim higher rate attendence allowance and council tax reduction, easing financial pressure.

Adult social care provided bathing equipment and agreed to send in a carer to help bath Mrs B twice a week. A day centre placement was offered one day a week but unfortunately they were unable to provide transport so MindCare submitted an application to VSL on behalf of the family.

Mindcare also gave Mrs. B.'s son information about Carers Lewisham and about Linkline so they could take up this support if they chose to in the future.

Social Isolation and Mental Wellbeing



Lewisham SAIL Connections works closely alongside Community Connections - a project aimed at decreasing isolation and improving mental wellbeing of vulnerable adults by helping people access community based groups and activities including social activities, lunch clubs, befriending, exercise classes, community learning.

Sally's Story

Sally was registered blind about a year ago and is still adjusting to her new circumstances. She has been feeling very isolated and depressed and hasn't been going out much.

A Community Facilitator visited Sally at home and suggested she tries a music group called 'Feel the Noise' that is for individuals with visual impairments. Sally also needed transport to enable her to attend the group and so she was referred to Access Lewisham. The scheme has allowed Sally to attend the group with ease each week.

In addition, a laptop was secured for Sally using BlindAid's welfare rights service. The laptop gives Sally further independence as it enable her to access her emails and surf the net with the use of appropriate software.

Sally said her mood has vastly improved and she is feeling much happier, as she has something to look forward to every week.

Living Conditions

The SAIL Connections checklist provides access to Occupational Therapy assessments for home aids and adaptations and to services providing information and advice around home maintenance and keeping warm.

Security, Fire Safety and Financial Inclusion

The checklist provides access to free Home Fire Safety Visits and support from the local police in crime prevention and home security. It also provides access to Information and Advice Services for benefits checks, support with housing issues and more.

Greg's Story

Greg has a number of medical problems including problems with mobility and he was really struggling to manage daily living alone. When we first met Greg his income was £155.60 per week, he was living alone and financial hardship was making it even harder and harder to cope.

Our 1&A worker supported Greg to contact his GP and gain medical evidence for his difficulties. As soon as the letter from the GP had been received we visited him at home and completed an application form for attendance allowance. A few weeks later Greg was awarded the higher rate of attendance allowance. As he lives on his own he also gained a disability premium to be included in with his pension credit. This nearly doubled Greg's weekly income and means that he is able to continue to manage his health and live independently.