Response ID ANON-8H41-QXDP-2

Submitted to A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections Submitted on 2018-04-30 14:58:09

Key questions for everyone

1 What needs to change in your community to reduce social isolation and loneliness and increase the range and quality of social connections?

Input your answer here:: N/A

2 Who is key at local level in driving this change, and what do you want to see them doing more (or less) of?

Input answer here:: N/A

3 What does Government need to do nationally to better empower communities and create the conditions to allow social connections to flourish?

Input answer here:: N/A

Do you want to answer any of the detailed questions?

Detailed questions

4 Do you agree or disagree with our definitions of (i) social isolation and (ii) loneliness? Please provide comments, particularly if you disagree.

Input answer here::

5 Do you agree with the evidence sources we are drawing from? Are there other evidence sources you think we should be using?

Input answer here::

6 Are there examples of best practice outside Scotland (either elsewhere in the UK or overseas) focused on tackling social isolation and loneliness that you think we should be looking at?

Input answer here::

7 Are you aware of any good practice in a local community to build social connections that you want to tell us about?

Input answer here::

8 How can we all work together challenge stigma around social isolation and loneliness, and raise awareness of it as an issue? Are there examples of people doing this well that you're aware of?

Input answer here::

9 Using the Carnegie UK Trust's report as a starting point, what more should we be doing to promote kindness as a route to reducing social isolation and loneliness?

Input answer here::

10 How can we ensure that those who experience both poverty and social isolation receive the right support?

Input answer here::

11 What do we need to be doing more of (or less of) to ensure that we tackle social isolation and loneliness for the specific life stages and groups mentioned above?

Input answer here::

12 How can health services play their part in better reducing social isolation and loneliness?

Input answer here::

RCN Scotland recognises the potentially negative impact of social isolation and loneliness on people's overall health and wellbeing and as such, we are pleased

to see the strategy frame these as public health issues. There are many positive actions within this strategy and the RCN is particularly pleased to see that engaging with, and enabling communities is recognised as a priority. We know that having the right support available in communities can make a big difference to people's overall health and wellbeing. In line with this, we belive the stategy could go further in recognising the valuable role of community health and social care teams. The expertise and knowledge of community nursing teams should be incorporated into any local planning as these teams have a valuable understanding of the populations and communities they work in and are well placed to understand particular local needs and nuances.

Nursing staff work in almost every stage and setting of care, and as such they have an important role across a wide range of public health interventions. Nurses are well placed to offer advice and information to individuals on how to remain socially engaged and to support people to overcome health barriers to achieving the level of social engagement they desire. The strategy commits to ensuring that no one is "excluded from participating in society for any reason" - for some people this will mean delivering the right health interventions by the right person, at the right time and in the right place. For example, in order to help avoid periods of transient loneliness which may occur as a result of a change in someone's health, it is important that the right care and support is available to help people to recover and / or manage their health so that they are supported to maintain and /or build social connections. Nursing staff can often reach people who may not engage with other services and have a key role in reducing health inequalities including those related to social isolation and loneliness.

As the strategy recognises, significant life events such as becoming a parent can be associated with experiences of social isolation and loneliness. Nurses working in community settings are likely to be among the first professionals to work with people experiencing significant life events including nurses who work in health visiting, family nurse partnerships, and palliative care as well as specialist nurses who work with people experiencing life-changing diagnoses. Additionally the strategy notes that many carers can experience loneliness. For some carers health and social care professionals can be an important connection to the outside world and it is of vital importance that these professionals have the right time and resources to support not only people using services but also their families. Community nurses can by well placed to signpost families to where they can access additional support including opportunities for socialising and building connections within their community. With the right resources, community nursing teams are well placed to offer people in communities. However, although nursing teams have the skills to deliver this kind of support and care, their capacity must also be considered. According to latest ISD figures, as at 31 December 2017 vacancy rates among health visitors were 7.6% and district nursing had a vacancy rate of 4.7%.

When it comes to reducing stigma, having professionals who are able to speak openly and confidently can help encourage people to feel safe to speak about their feelings. Community nursing teams are well placed to have, what can sometimes be, difficult conversations and to support people to express their concerns. It is essential that the right training is in place so that the health professionals having these conversations are able to build good relationships with the people they are supporting. All nursing teams should have access to the right training and ongoing CPD, with backfill as appropriate, to ensure they are able to deliver the most effective support at all times.

13 How can we ensure that the social care sector contributes to tackling social isolation and loneliness?

Input answer here::

14 What more can we do to encourage people to get involved in local groups that promote physical activity?

Input answer here::

15 How can we better equip people with the skills to establish and nurture strong and positive social connections?

Input answer here::

16 How can we better ensure that our services that support children and young people are better able to identify where someone may be socially isolated, and capable of offering the right support?

Input answer here::

17 How can the third sector and social enterprise play a stronger role in helping to tackle social isolation and loneliness in communities?

Input answer here::

18 What more can the Scottish Government do to promote volunteering and help remove barriers to volunteering, particular for those who may be isolated?

Input answer here::

19 How can employers and business play their part in reducing social isolation and loneliness?

Input answer here::

20 What are the barriers presented by the lived environment in terms of socially connecting? How can these be addressed?

Input answer here::

21 How can cultural services and agencies play their part in reducing social isolation and loneliness?

Input answer here::

22 How can transport services play their part in reducing social isolation and loneliness?

Input answer here::

23 How best can we ensure that people have both access to digital technology and the ability to use it?

Input answer here::

Any other comments

24 Taking into account answers to questions elsewhere, is there anything else we should be doing that doesn't fall into any of these categories?

Input answer here::

25 Do you agree with the framework we have created to measure our progress in tackling social isolation and loneliness?

Input answer here::

26 Is there anything missing from this framework that you think is important for us to consider?

Input answer here::

The RCN believes that in order to truly tackle social isolation and loneliness, it must be understood that these are experiences which can happen to anyone and occur at all levels of society. While the strategy is very good at taking account of many vulnerable groups, the RCN was surprised by the lack of mention of care homes. Older people who have moved into a new residential environment may be at risk of experiencing social isolation and loneliness since away from their familiar environment, family and friends. The strategy should take account of this important life event and consider what resources and support could help care homes ensure that their residents feel socially connected and enabled.

The section of the strategy which speaks about physical health focuses exclusively on falls and this feels short of the mark – physical health concerns could apply to anyone of any age who has sustained an injury or who lives with a disability, long term condition or life limiting disease. The discussion on physical activity is also limited and excludes those who may have mobility problems or indeed those who may live in remote and rural areas. Those living outside of towns and cities may not have convenient access to social clubs or recreation activities. At certain times of year harsh weather conditions may also impede people's access to community engagement. The strategy should take account of these specific challenges and include actions for supporting these communities.

Further discussion of parity of esteem between mental and physical health would be welcome within this strategy as it is a central commitment of the Scottish Government's Mental Health Strategy 2017 - 2027. Parity of esteem should extend to "equally high aspirations for service users: recognising service users as equal partners in their own healthcare and emphasising expectations of good health and a good life." Parity of esteem is also a key priority area for the RCN across the UK and we are carrying out work, with practitioners and service users, looking at the contribution that nursing can make in delivering parity of esteem between physical and mental health.

While this strategy quite rightly recognises that technology is a double edged sword, it is highly important that the negative aspects of online life do not mean that the positive aspects of being digitally enabled are not fully exploited. RCN Scotland would be interested to know how this strategy aligns with other Scottish Government work such as Digital Health and Care Strategy as well as the Suicide Prevention Action Plan.

About you

What is your name?

Name: Theresa Fyffe

What is your email address?

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Are you responding as an individual or an organisation?

Organisation

What is your organisation?

Organisation: Royal College of Nursing

Are you responding on behalf of a community discussion that has taken place?

No

If you used our facilitation guide, please upload the Event Registration form here.

Upload: No file was uploaded

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

Publish response only (without name)

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Yes

Evaluation

Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)

Matrix 1 - How satisfied were you with this consultation?:

Please enter comments here .:

Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:

Please enter comments here .: