



AFI Public Forums: 21st – 25th November 2016

This quarter's Age Friendly Island Public Forums were focused on 3 things:

- Developing Age Friendly Surgeries work that was started at the forums back in February;
- Reviewing the previous year, giving an update on what the forums have achieved over the last year;
- Setting the priorities for the coming year.

The next meetings will be held on the following dates:

Tuesday 28th February 2017

Riverside Centre, Newport Quay – 4.30pm to 6.30pm

Thursday 23rd February 2017

West Wight Sports Centre, 10am to 12pm (as part of The Really Useful Café)

Friday 3rd March 2017

Aspire (Community Hall), Dover Street, Ryde, 2pm to 4pm

Please also be aware that due to very low turn out at the Ventnor Public Forum's over the last few quarters we will be cancelling these meetings and looking for new ways to hold the Age Friendly Forums in that area.

1. Age Friendly Surgeries:

Back in February the Public Forums worked with Tower House surgery to pull together a framework that sets out how a GP surgery can best serve its older patients. That framework is now a recognised guidance tool for surgeries across the Island. Thanks to the award of a small amount of money from the



Department of Health, this work is now being made into a short film with a complementary toolkit (a 'how-to' guide) that surgeries across the country can use to come up with their own strategies to become 'Age Friendly'.

We received some very helpful feedback from the Public Forums on things that should be included in the toolkit. For example, guidance to surgeries on advertising the ways in which patients can be involved in feeding into the running of surgeries.

We also discussed the benefits of including patients in the process of making a GP surgery age friendly. The following suggestions will be included in the toolkit to encourage surgeries nationwide to make sure the experiences of their older patients are at the heart of any changes they make.

- It is important to have a safe arena to voice significant issues without being seen as a 'trouble maker'
- It shows appreciation for people
- The right people, who know how to work with older people and understand how to support vulnerable people, need to be trained to do this
- It makes you feel that you are important enough to talk to
- It shows a positive attitude towards your patients
- It would be counter-productive not to have older people involved
- If things are easier for the patient it's easier for the surgery; for example when patients struggle, more time is needed to support them.

2. Year 1 Review:

Now that the Public Forums have been running for a year, it was a good opportunity to see what differences they have made and to think about what we should focus on next.

The following are the results of the questions asked at the Public Forums.



Q: What do you enjoy about the forums/what has worked?

- Discussions in small groups.
- Meetings are results driven.
- Interactive sessions.
- Managed expectations.
- Range of organisations attending.
- Everyone is encouraged to express their opinions.

Q: What can we do differently/what has not worked?

- Smaller rooms that are better for acoustics
- Communication errors - Ensure that information is correctly advertised, and getting the message across clearly on what the forums are about.
- Increase advertising
- Improve numbers of people attending
- Broaden the topics; more on transport for example, to include the ferries.

Q: What is the most helpful way to advertise?

- The majority of responses were advertising in the Isle of Wight County Press.

We will endeavour to keep putting adverts into the paper while exploring new options, in line with helpful suggestions at the meetings.

Q: How do you prefer to receive information about the Public Forums?

Most people prefer to receive an email reminder and feedback report. We will continue to send paper copies to those who do not use email. Reminders by post will not be sent due to budget constraints but the feedback reports that are sent by post will always include the dates of the next meetings.



3. Priorities for next year:

To date we have mainly focused on health care and transport, as requested from the first Public Forum meeting.

Q: With a view to addressing issues around employment and housing in February 2017, what else is important to address in the next coming year?

- a. Outdoor spaces and buildings
 - Wheelchair accessibility
 - Island roads and contractors
 - Waste collection
- b. Social participation
- c. Employment
- d. Wider transport issues



Age Friendly Island will take this feedback into close consideration and hope to engage key organisations in these areas in the coming year.

Off the back of the Public Forums we have been invited to talk at different groups. We are interested in exploring whether it would be best to piggy-back onto existing groups in the future.

Q: Do you think that joining with existing relevant groups is the best way forward or do you prefer having a separate meeting to come to (as we do now)?

Majority of people gave positive feedback to joining existing groups. It was felt this might mean more people would attend the meetings. Also suggested was rather than piggy-backing onto meetings, we could invite



representatives from existing groups to a Public Forum having discussed the questions prior to the meeting.

4. My Life a Full Life update:

At each of the Public Forum meetings a couple of questions were raised in relation to My Life a Full (MLaFL) Life to which we have received some feedback:

- An enquiry was received about who is responsible for unaccompanied care home residents on visits to the hospital –PALS (Patient Advice and Liaison Services) was contacted but without more detail it's difficult to answer this query.
In a large number of cases care home residents are accompanied to hospital by someone from the residential care home. If they are not accompanied then it usually means they are able to look after themselves. A question was raised about being offered water at a visit to the hospital. It would depend on where the lady in question was taken. For example if at the eye clinic for day surgery they probably would not have given her any water because of the surgical procedures involved.
- At Newport there was a discussion about a new Crisis Café which is coming out of the Health and Care redesign. We have been assured that the comments about the crisis café have been passed on to the Operations Lead and duly noted. These comments will also be kept in mind by Communications Support for MLaFL as the communications around this initiative are developed.