Appendix 2 Reducing Social Isolation Case Studies

Case study LW Mar 18 Mrs H (13337)

1.ABOUT THE PERSON

Mrs H is now 70 and is retired. She lives alone in DBC supported housing, having moved from London last summer to be nearer her only son so he could support her more easily. However, this meant that she is removed from all her friends. She is registered as partially sighted. She suffers from depression which affects her inclination to engage in social events and to try new things.

2. WHAT WAS THE SITUATION

I met Mrs H when she came along to a Tea and Chat event in her scheme lounge. The following month I knocked for her when she hadn't turned up – she said she was feeling unwell with a bad stomach – she thought this was because she couldn't cook any proper food – as she had no oven, she was only able to heat up ready meals in the microwave. I thought I could help with applying for a grant for a table top cooker (no space in the kitchenette for a full size cooker), but things were not that simple as I was concerned that a wall cupboard over the worktop may be a hazard to any cooker underneath. Eventually her SHO referred her to HCC and her kitchen was inspected.

3. WHAT DID AGE UK DACORUM DO TO MAKE A DIFFERENCE?

I applied for a grant for a table top cooker for her before Christmas – unfortunately, due to funding issues we are still waiting for a decision. Similarly there has been no movement yet on kitchen adaptations. Throughout this time I have been in contact with Mrs H and been encouraging her to attend the "blind club" and local coffee mornings.

4. WHAT OUTCOMES WERE ACHIEVED?

Our involvement with Mrs H is ongoing – at least until the decision is reached on the grant for the cooker – as she now also has support from HertsHelp and I referred her to Herts Vision Loss. Due to the difficulty in getting her to attend a club, she is on the waiting list for one of our befrienders.

5. QUOTES/FEEDBACK

"I'm ever do grateful for all you do for me. You're really helpful". "Sometimes I am feeling all alone then I hear from you and I know how nice and helpful you all are". "When I call the office

Help Notes

- 1. Please say a little about the person. If an older person –what is their age? Do they live alone? How is their general wellbeing? Do they have family/friends nearby? If a volunteer – what is their background? Are they a student? Working? Retired?
- 2. Describe how the person came to be involved in the project or service you are writing about. If an older person what challenge or issue were they facing and how was this affecting their life? If a volunteer why did they want to become involved?
- 3. Describe what action Age UK Dacorum / the volunteer took to help. About the service/project.
- 4. What was the outcome of the service/project for the older person? If writing about a volunteer how has becoming involved in volunteering changed their life?
- 5. Please provide a direct quote from the older person or volunteer in this case study. What did they say about the service, and

and talk to Anne she is really nice to me". "I just didn't know what to do about my broken MonoMouse (text magnifier)" "I really miss cooking in my oven but I just can't afford to buy a new one".

the difference this has made to them?

1.ABOUT THE PERSON

Mrs C was a widowed lady of 74 when she moved into a supported housing bungalow in Hemel Hempstead, having downsized from a house in a neighboring town. She lives alone with her dog; having no family close by and her friends were left behind in her previous area.

2. WHAT WAS THE SITUATION

Mrs C contacted us to ask about attending an active living club but could only leave her dog alone for a maximum of 4 hours and the day of the nearest club was not convenient for her, so our information officer suggested that she try a T&C Club. She noted that Mrs C was chatty but not confident about going by herself, might need a bit of encouragement. She was happy to walk but didn't know the area very well. Luckily she know where I meant when I explained how to get to her nearest venue.

3. WHAT DID AGE UK DACORUM DO TO MAKE A DIFFERENCE?

She didn't attend the next event despite me leaving a message, then there was a while before the next scheduled event due to various reasons but I persevered with calling her and encouraging her to come along.

She eventually attended and was made to feel welcome at hthe supported housing scheme. She has continued to attend regularly.

4. WHAT OUTCOMES WERE ACHIEVED?

The tenants at this scheme(which is physically closer to Mrs C's home than the base for her SHO so she can walk to it) are aa particularly active group and invited Mrs C to join in with their other self-organized activities. This has opened up a whole new local friendship group to her with regular easily accessible social activities, leading to her settling in and feeling at home in her new environment.

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- 5. Please provide a direct quote from the older person or volunteer in this case study. What did they say about the service, and the difference this has made to them?

5. QUOTES/FEEDBACK	
Mrs C said she was pleased to have made new local friends as her neighbours were out at work all day and she had been feeling lonely since moving but now can look forward to having company on a regular basis.	

Case study LW 10269 Mr JH

1.ABOUT THE PERSON

Mr H is a retired gentleman, then aged 83, who lived on his own in the same 3 bedroomed semi that he moved into in 1953 when it was new. He originally moved in with his parents and has never moved out or married so was all alone since his dad died in the 90s. He is not in touch with his nephew (closest surviving family). He also has no landline or mobile phone and kept in touch only by sporadic letter with an old army friend who lives in Wales. Nothing much was known about his home life to start with as he referred himself to his local Active Living Club and walked there each week. He is a diabetic and also has heart problems along with long term chronic pain and infection in his left leg.

2. WHAT WAS THE SITUATION

Mr H was taken ill at the club and when he was taken home by the staff member it was apparent when entering his home that he was not coping well or looking after himself properly. The house was in a very dirty, mouse-infested, cluttered and unhealthy state. We have since discovered that he had not let DBC carry out any improvements or maintenance to the property for many years and evidently had not done any housework or tidying himself. There were clear signs of a hoarding disorder. The club Co Coordinator was helping in his own time but there was simply too much to be done, so I took Mr H on as a Living well client.

3. WHAT DID AGE UK DACORUM DO TO MAKE A DIFFERENCE?

We were able to get Mr H the immediate medical help he needed to help him with his conditions and liaise with DBC to get him into respite care following his discharge from hospital. Then we have helped with arranging community meals, a change of GP Surgery, assistance in managing his bank account, and eventually introducing a cleaner / homehelp for when his level of care package was reduced.

4. WHAT OUTCOMES WERE ACHIEVED?

Our involvement with Mr H is ongoing. We worked with DBC to get him rehoused in the Supported Housing Scheme of his choice. We also helped him to de-clutter and supported him

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with re-locating his possessions, getting new items as required, packing and moving and unpacking. We take him to his various medical appointments, and we are slowly helping him to sort out his complicated financial and personal affairs.	made to them?
5. QUOTES/FEEDBACK	
"I didn't realise how much I had let myself go. I didn't know where to turn. Until AUKD helped me I had no one to ask for help"	