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Celebrating the GMOPN: Where are we now and where are we going?

Greater Manchester Older People's Network (GMOPN) Event Report

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CELEBRATING THE GREATER MANCHESTER OLDER PEOPLE'S NETWORK
Where are we now and where are we going?

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Executive Summary

The Greater Manchester Older People's Network (GMOPN) is a group of older people and organisations that support them, working in Greater Manchester to make sure that older people's voices are heard on issues that matter to them. In January 2019 we held a celebration event, "Where are we now and where are we going", to look at what the GMOPN had already achieved and to ask network members where they thought the Network should focus in the future. The Network discussed previous GMOPN reports on health, housing and transport, and provided insight and ideas that would guide the network with future work in these areas. They also suggested more general areas of focus and campaigning principles that would help ensure that the network achieved its goals in making Greater Manchester the best place it can be for older people to live.

The GMOPN has an important role as a bridge and connector between older people, groups and organisations and strategic partners. It has created strong links with the Greater Manchester Combined Authority (GMCA) and other strategic partners but needs to continue to build on these links and to create other partnerships to ensure that we are a voice for change in Greater Manchester. It is also important that we continue to balance the wider Greater Manchester focus with work happening at a more local level and to develop links with smaller groups in local areas to ensure we are a representative voice for the whole of GM.

[1]The Greater Manchester Spatial Framework is Greater Manchester's Plan for Homes, Jobs, and the Environment. The plan is about providing the right homes, in the right places, for people across the city region. It's about creating jobs and improving infrastructure.

Section I: About the event

On the 8th of January 2019 the Greater Manchester Older People's Network held a celebration event where we heard from speakers about what the network has achieved in the last year and the progress that has been made on a broad range of issues across Greater Manchester. The event was developed in consultation with network members through event planning groups, who met regularly before the event to determine the themes, scope and shape of the event.

Presentations centred on the themes of health, transport and housing, which were the themes for previous GMOPN events and reports. The presentations were delivered by:

Liz Jones, Macc – who presented the GMOPN's recent Health and Social Care report 'The NHS at 70: Time for age-friendly Health and Social Care System'. https://www.youtube.com/watch?v=3ByKSk8btkM&list=PLWMgtSLNNsUkoSB-9EaKtduh1KARyzJM9&index=8&t=0s

Wendy Cocks, Care & Repair, who provided an update on housing and outlined what had happened since the GMOPN's housing report , launched in 2017 https://www.youtube.com/watch?v=tBr2CuPitpw&list=PLWMgtSLNNsUkoSB-9EaKtduh1KARyzJM9&index=9&t=0s

James Baldwin, Transport for Greater Manchester – who discussed the topic of age -friendly transport and the progress that had been made in 2018. https://www.youtube.com/watch?v=ZXiWUyO76Yo&list=PLWMgtSLNNsUkoSB-9EaKtduh1KARyzJM9&index=7&t=5s

We also watched a performance from the Silver Circus who demonstrated circus skills and gave the event a real celebratory feel.

A panel discussion was held in the afternoon where panellists responded to questions devised by participants. https://www.youtube.com/watch?v=D8zUDuulEgY&list=PLWMgtSLNNsUkoSB-9EaKtduh1KARyzJM9&index=10&t=0s

Section II: Workshop and Findings

In the afternoon, we held a workshop on the theme of the future of the network. This was preceded by a presentation by Pascale Robinson from The Campaign for Better Buses. During the workshop we split participants into three subject groups – housing, transport and health. We asked participants to review the recommendations of the health, transport and housing reports and look at how we should focus our work in the future to make sure that we remain in tune with what is happening across Greater Manchester.

We asked participants to consider three questions based around the recommendations:

Q1. What work or campaigns are taking place that link with the recommendations and what organisations should GMOPN link with?

Q2. What recommendations would it be most realistic and useful for us to campaign on.

Q3. Where are there significant blocks to taking these recommendations forward?

We also asked participants to comment on the following question which would help direct the GMOPN's future work in other areas.

What other areas should GMOPN be having big conversations about?

This report details the responses provided by participants to these questions.


'WE WANT TO LIVE INDEPENDENTLY AND WITH DIGNITY IN OUR OWN HOMES FOR AS LONG AS WE WISH.'
WE NEED HOMES THAT ARE WARM, SAFE AND IN GOOD REPAIR AND SOMETIMES NEED HELP TO ACHIEVE THIS.
• We need access to free, independent and impartial advice about all our housing options across all tenures.
• We need access to handyperson and home improvement agencies to enable us to maintain our homes.
• We need easy access for all to adaptations, including new technologies.
WE NEED NEIGHBOURHOODS THAT ARE DESIGNED TO BE INCLUSIVE & ENABLE US TO REMAIN ACTIVE MEMBERS OF OUR COMMUNITIES.
• The needs of an ageing population addressed in main documents and strategies.
• Health professionals trained to offer a housing assessment as an integral part of the integration of housing, health and social care systems.
• Closer links between health and housing so that our health and independence is maintained
NEW HOUSING SHOULD BE BUILT TO MINIMUM LIFETIME HOMES STANDARD TO ENABLE THEM TO BE HOMES FOR LIFE.
• More imaginative housing options for older people to meet the range of diverse needs in later life.
• Housing specifically for older people available in localities so people can maintain social and family connections.
OLDER PEOPLE ARE EXPERTS BY EXPERIENCE, SO WANT TO BE INVOLVED IN THE PLANNING, DEVELOPMENT AND DELIVERY OF HOUSING, SERVICES AND STRATEGIES FOR LATER LIFE
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Housing

What work or campaigns are taking place that link with the housing recommendations? What organisations should GMOPN link with?

In relation to housing, participants suggested that we needed to influence on various different levels and pointed to both GM and more local organisations and campaigns in order to achieve our objectives. One question was how to ensure that any work done on a GM level was then reflected on the local authority level and in local policies.

Participants noted that the GMOPN already has good links with the GM Ageing Hub and the GM Combined Authority. Representatives from GMCA confirmed that they are open to lobbying and are able to influence themselves so it was agreed that it is important that the GMOPN continues to build on this relationship.

Participants mentioned the Greater Manchester Spatial Framework, . Greater Manchester's Plan for Homes, Jobs, and the Environment. The plan is about providing the right homes, in the right places, for people across the city region. It's about creating jobs and improving infrastructure. It was felt to be important that older people and the GMOPN commented on and responded to the Spatial Framework. It was also mentioned that it would be good to have a presentation on the Spatial Framework in order that it was better understood. Participants mentioned the "Space in common" project, part of Jam and Justice https://jamandjustice-rjc.org/space-common https://www.demsoc.org/projects/space-in-common/ and suggested that this would be a good link for the GMOPN.

Members mentioned Greater Manchester Housing Action http://www.gmhousingaction.com/. Members felt that it would be positive to link with GM Housing Action in order to improve our capacity to make change to policy and strategy. Members mentioned that GM Housing Action had been trying to influence Manchester Labour Party's Housing Manifesto.
According to GMHA, their mission is to strengthen the housing movement in Greater Manchester. They aim to do this by:

- Empowering and educating people across the city-region on housing issues, providing information and collectively developing the skills to bring about progressive change.
- Facilitating greater citizen input into housing policy and creating channels for grassroots to speak to power.
- Coordinating a network of actors in the housing movement to create maximum political impact through strategic interventions.

This links clearly with the GMOPN manifesto that states that older people want to be involved in the planning, development and delivery of housing, services and strategies for later life.

Members also suggested that we should link with GM Housing Providers and Manchester Housing Provider Partnership.

Some participants mentioned “Housing Strategy Writing Groups”, which were seen as a good opportunity to influence.

On a local level, members suggested that we needed to influence local housing strategy through finding local older people groups and lending our support to them.

Participants mentioned local action and campaigns such as Save Rybank Fields in Chorlton where local residents were objecting to a proposed development of 60 x 4 bedroom executive houses on the grounds that it was the wrong sort of housing, had poor access and would result in loss of greenbelt.

It was felt that it was important to stay aware of development plans across GM to ensure that new housing was age-friendly. Participants also suggested that the network should focus on the principle of ‘All Age Housing’ and should continue to campaign on this. Participants also mentioned that it was important to have a ‘whole systems approach’ and suggested that the GMOPN continued to take an interest in place-based approaches.

Carbon emissions and air quality was an important environmental issue that participants suggested should be considered alongside housing, highlighting that infrastructure needed to be planned for within new developments. This should also include local or on site facilities in relation to health such as GPs.

Participants highlighted the need to link up with other areas, such as health, emphasising the importance of partnership working and not taking housing in isolated. The links that the GMOPN have with the GM Health and Social Care Partnership need to be kept live. Local homecare was considered to be an important feature.

Participants also highlighted the need for handy person services and suggested that we should continue to campaign to ensure that adaptations were available for all people across Greater Manchester.

Which recommendations would be most useful for network to campaign on?

Participants thought it particularly useful for us to ensure that older people were involved in the consultation on the Spatial Framework, potentially through “Space in Common”. This linked clearly with the recommendation that neighbourhoods should be “designed to be inclusive and enable us to remain active members of our communities”

They also suggested that the recommendation around older people being involved in planning, development and delivery was paramount and would support the achievement of some of the other recommendations.

Where are there significant blocks to taking these recommendations forward?

Participants talked about the impact of BREXIT and how this made everything insecure. They suggested that this would have an impact on development but it was unclear what and how. People suggested that there was not enough regulation in relation to development and some participants felt that developers were left to their own devices too much, building for profit rather than what is age-friendly.

In terms of links between health and housing, people suggested that although there was a lot of talk about this, the reality was often different. In some cases, people were working in silos with specific funding streams and limitations placed upon them. Hospital discharge in particular was still a major problem in some places. Nevertheless, participants did note that in some GM areas things were beginning to progress, with health workers flagging up housing issues through clear channels. Some participants noted that data sharing was sometimes a problem, particularly in relation to the General Data Protection Regulation (GDPR).

In relation to advice, participants noted that in many cases advice was only available to specific customers or tenants. They noted that funding was being cut in general for housing providers and services therefore being reduced. They also expressed that owner-occupiers and people renting privately often got less support.

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Recommendations for Age Friendly Health and Social Care

Encourage healthy lifestyles

GPs need to encourage healthy lifestyles to combat isolation, poor diet and lack of exercise. Strategies should focus on social prescribing and signposting to local groups or services via GPs or GP navigators, with particular emphasis on social activities, exercise, learning and involving volunteers to support people to engage.

Focus on the good

Good news and positive stories about older people need to be shared with media outlets to increase positive language and promote a view of older people as valued members of society, encouraging a focus on health and wellbeing rather than illness.

Encourage consideration around key infrastructure

Work with local councils and key organisations, such as Transport for Greater Manchester, needs to be undertaken to encourage consideration around key infrastructure e.g. timings on pedestrian crossings, public transport access and more/better seating in public places.

Encourage intergenerational activities

Intergenerational activity should be encouraged to promote better communities and support, such as older people volunteering in schools, and school children volunteering in the community or care homes.

Develop a support network

Healthcare workers should be available to help older people understand medical letters, appointments and medication. This could be a support network led by their local GP surgery or pharmacist.

Develop services to meet older people's needs

Systemic changes are needed to develop services to meet older people's needs i.e. taking services to older people rather than them travelling to services, and better appointment times for older people.

Encourage learning from best practice

Strategy and policy should always encourage learning from best practice in other areas to ensure that Greater Manchester keeps up with the best examples in the country and internationally.

Discuss ease of access to GPs

Local clinical commissioning groups (CCGs) need to engage in discussions around ensuring ease of access to GPs for older people. This would limit the possibility of individuals 'falling through the gaps' in services.

Ensure home-care is valued as a career

Strategies need to ensure home-care is valued as a career, both financially and other types of rewards and recognition, in order to improve care for older people at home.

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Health

What work or campaigns are taking place that link with health recommendations? What organisations should GMOPN link with?

Participants suggested that the public needed to be educated on all the points in the recommendations and that the network should continue to share them recommendations widely.

For future work, participants noted that it was important to link with both GM and national health campaigns. The NHS 10 Year Plan was seen as an important strategic document that the GMOPN should respond to in some way.

Participants talked about the voluntary, community and social enterprise (VCSE) sector and expressed how important this was to maintaining health and wellbeing amongst older people. They felt that the GMOPN needed to maintain links with VCSE projects.

Participants also noted that health and wellbeing was a holistic concept and should include the social aspect. With this in mind, people joining the GMOPN was a way to improve health and wellbeing in itself.

Participants noted that the GMOPN could have a role as a bridge and a connector as well as a disseminator of ideas. It could link up with community connectors and link workers and should prioritise the communication of its recommendations.

People felt that good news and positive stories about older people were relatively rare in media coverage. The VCSE sector was noted to be good at sharing these stories (one example noted was the organisation Cyril Flint Befrienders which shared testimonials from volunteers). Participants also suggested that it would be useful to link with the private sector (such as Millercare and Home Instead) explaining that these organisations often have positive stories of individuals that can be shared.

Participants identified good practice in health and social care taking place across GM which they considered should be replicated in different areas. This included:

- multi-agency hubs, which were working effectively in some boroughs – participants commented that these should be available in every borough or locality
- Some GP's (one example from Rochdale) offered drop in appointments which supported access for all
- Social Prescribing was already happening successfully in some areas such as Manchester and Bolton
- Older people Staying well team in Bury, funded through Bury Council and the NHS
- Hulme and Moss side residents conducted asset-mapping and took to GP – so they had an idea of what is happening
- Wellman clinic – send out 'hello' letters to invite people to appointments
- Woodside Medical in Middleton– implemented earlier opening times and stopped early morning queuing for appointments
- Some GPs have partnered with Buzz and other similar services to carry out health checks for patients

Participants mentioned a number of different projects and organisations across Greater Manchester that they thought the GMOPN should link with, including many supported by Ambition for Ageing. Some of these projects were those more directly connected with health and mental health, such as:

- AFA Wigan – holding three health events per year as well as social groups
- Speak Easy Bury - a charity working with people with Aphasia
- the MS Therapy Centre in Wigan - which has a fully equipped gym for MS sufferers and those with other neurological problems such as strokes
- Bury hospice – counselling walks – open to all
- Wigan's Inspiring Health lifestyles - supporting people to lose weight (A paid for service but at a low cost so accessible - run through the local authority)
- Death Cafes (a group directed discussion of death) in some areas such as Bury
- The Arena in Middleton – offers rehabilitation, also swimming for people with Alzheimer's and their carers
- BEATS - an exercise referral scheme in Bury for people with a recurring illness or medical condition who would benefit from a personal exercise programme

Other projects identified were more to do with general wellbeing or avoiding social isolation, such as:

- Skylight Circus, Silver Circus receives funding from CCG in Rochdale – participants liked that this focused positively on what older people *can* do
- Walking football in Rochdale – an opportunity to meet others which was aimed at men
- Woodies (Bury) – woodwork for men
- Brandlesholme Community Centre in Bury – various groups
- Exercise equipment for adults in the park at Close Park in Radcliffe (Request from friends of Close Park implemented by Council)
- Measured mile markers and free park run
- Friendly faces – for socially isolated people
- Out and About @The Powerhouse Manchester – wanted people coming in and running fun activities eg.. knit and natter/ 'Bitch and stitch'
- Birch Friends relaxation session/stress management
- Walking clubs
- Moss Side – monthly soup club – to bring community together
- Community choirs – participants suggested these were an indirect way of achieving 5 ways to wellbeing
- Fairshare– volunteering could building self-esteem and confidence (35 % Fairshare volunteers over 60))
- Lunch clubs – one contradiction noted was that food served was not necessarily healthy but that they were important for bringing people together
- Computer skills clubs could be good for socialising

Many intergenerational projects and organisations across Greater Manchester were mentioned, including:

- Goodgym, in Stockport, where runners run to socially isolated older people's houses and chat to them/help them with jobs etc.
- Those where school children go into older people's homes
- A shared chicken coup
- A choir in Moss Side bringing together an older people's group and youth club
- Manchester Cares
- Cyril Flint Befrienders

Participants talked about the House of Lords Select Committee on Intergenerational Fairness that was attended by some GMOPN members last year and suggested that this could be built upon through further work. One suggestion was for one of the GMOPN events to be intergenerational and to include younger as well as older people, bringing in universities and schools and connecting with some of the intergenerational projects previously identified.

Participants mentioned transport in relation to maintaining health and wellbeing and suggested that it was fundamental that this was not left out of health and wellbeing conversations. An example was given of the Moss Side leisure centre mini bus which could take people to leisure centres.

In relation to valuing homecare it was suggested that the GMOPN could be involved in improving this by bringing people receiving homecare, providers and the Health and Social Care Partnership together to talk. This could be an idea for a future meeting or event.

Which recommendations would be most useful for the network to campaign on?

Participants were particularly keen to focus on intergenerational work, which they considered should be a priority for future work.

Assessibility of GPs was seen as fundamental – it was noted that walk-in centres were not always suitable, particularly for older people. GPs were also seen as a priority as a way to promote activities to people, through social prescribing. However, it was felt that the availability and quality of information about activities needed to be improved so that GPs could prescribe them.

A further priority was around sharing positive stories about older people. Participants noted that we needed to challenge negative images of older people in health and wellbeing based publications such as through the “No more wrinkly hands” campaign. Further to this, the GMOPN should share stories themselves to try to change public opinion about older people.

Where are there significant blocks to taking these recommendations forward?

There was a feeling amongst participants that the NHS is not always good at listening to patients and a question over whether they would listen to the GMOPN. It was noted that due to the sheer amount of challenges faced by the NHS it could be difficult to get people to listen.

In relation to GPs, participants noted that GPs functioned like individual businesses and could be very difficult to influence. Participants pointed out that if GPs don't have their own patient group, it could be difficult for the GMOPN to get their views to them. Issues within inner city areas were different to those in rural areas so a localised approach would be needed.

NHS funding constraints were an important consideration – participants specifically pointed to the long waiting lists and noted that equipment is stockpiled and not used again even though people are waiting.

Although participants felt that quality of services should be consistent across Greater Manchester it was noted that sometimes it was a "postcode lottery" for health and social care services as well as for VSCE organisations and projects.

Participants discussed possible tensions between the statutory sector and voluntary sector in terms of their priorities, goals, targets and desired outcomes. The need for good partnership working was emphasised.

With regard to intergenerational work participants noted that there was a lot of red tape to get into or take children out of schools and that this could prevent activities taking place.

There could also be issues with social prescribing – sometimes GPs don't know what's happening in local areas. Participants discussed the lack of central information resources, although they noted some examples of good practice such as the Trafford Directory and Place Cal. Also, there were fewer activities in some areas due to funding cuts or lack of investment in the voluntary sector, meaning there was less to prescribe to.

In relation to valuing home-care as a career, participants noted that there was a long way to go as currently care was not thought of a profession. It was a demanding job with no incentives. Further to this, participants also noted that carers were not always well-trained and mentioned that it would be good to support the training of carers in nutrition and cooking quick healthy meals as well as ensuring they were well informed of what's available socially in the area.

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Recommendations for Age Friendly Transport

Map transport service options at all levels

Transport service options for older people need to be mapped at GM, local and neighbourhood levels. Populations not well served by public transport should be identified and assessed for potential social isolation and bespoke solutions planned and executed.

Carry out equality impact assessment when services are changed

When transport services are cut or changed, an equalities impact assessment should be carried out, looking specifically at how older people would be affected. For example, if and when the bus service is reregulated this should be done in consultation with older people to ensure that it becomes as age friendly as possible.

Invest in community transport

Smaller bespoke bus services should be considered, encouraging social links as well as meeting transportation needs. Investment in community transport should be included as a strategic aim across GM.

Design services according to age-friendly principles

Transport services need to be designed according to age-friendly principles and consider the range of potential challenges for older people. Older people's services need to be designed to take account of transport needs and provide integrated solutions where required.

Support access to digital services

Older people should be offered training and support to access digital services which could make their travel easier and more economical.

Better publicise information on service options

Information on service options should be better publicised and offered in a variety of accessible formats. This information needs to be given at relevant times when an older person's needs may be changing, such as at the point of surrendering a driver's license or meeting with a sensory assessment team. At the same time a wider education campaign should raise public awareness of the potential needs of older passengers, particularly regarding 'invisible' disabilities.

Include more information on transport maps

Transport maps should include more, and accessible, information such as proximity to hospitals and health centres, public toilets and seating areas which would support journey planning.

Empower older people to influence change

Action should be taken to empower older people to voice concerns and to influence change. Opportunities need to be established and supported to ensure that older people can be involved in design, planning and decision making. Clearer mechanisms need to be developed, with designated officers to support people to resolve their transport issues.

Include volunteer drive schemes in GM strategy

Volunteer car lift schemes should be included in overall GM strategy with proper support and training offered around insurance.
(Note - this should not be seen as any kind of alternative to an efficient and effective community transport system)

Develop an agreed standard for awareness training

Provider and authorities should work in partnership with the GMOPN to develop an agreed standard for awareness training. Training should be provided for all drivers and transport providers, including taxi drivers. Existing good practice should be identified and clearly publicised to encourage providers and individual drivers to prioritise age-friendly standards

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Transport

What work or campaigns are taking place that link with transport recommendations? What organisations should GMOPN link with?

Network members considered that transport intersected with so many issues for older people that it was particularly important that it was maintained as a priority for the work of the GMOPN.

A report has been produced by Greater Manchester Ccombined Aauthority (GMCA) and Transport for Greater Manchester about transport for older people which will help provide the evidence for the network to base future campaigns. Participants noted some good practice and campaigns that were taking place nationally, across Greater Manchester and more locally that they felt the GMOPN should link with. These included,

- The Jo Cox Foundation's campaign on loneliness incorporated the idea of transport as a barrier that could exacerbate social isolation
- 'Take control of transport' campaign' (GM Mayor)
- Better Buses campaign - many participants said that they were impressed with this campaign and felt that the GMOPN should continue to support this
- Volunteer car left lift schemes - these tend to be in better-off areas and participants noted that the volume was going down
- Dementia friends – provides training resources to encourage transport staff to understand needs of passengers with Dementia
- Training to access digital and online services was available in some areas but "scattergun"
- Consultation with older people was happening in some cases, empowering older people to voice concerns, although participants questioned whether this was joined up or effective.
- The "Take a seat" – campaign around seating and creating age-friendly communities
- GM minimum standards for GM Taxi Drivers (regulated system) – planned and will involve public consultation and campaign
- Awareness training, for transport providers, taxis etc. is planned – the GMOPN would like to be involved in developing this.
- Taxi charter (course for drivers to raise awareness – some training has been developed in Levenshulme
- Miles of smiles – community transport scheme

However, it was noted that this work was often sporadic and not consistent across Greater Manchester. Much more work would be needed to make sure that there was consistency for older people in all areas.

There was a suggestion that bus passes should incorporate some kind of awareness message such as “please be patient” encouraging drivers to allow people time to sit down etc.

It was suggested that the GMOPN should link with various support groups e.g. “friends of …groups” as well as public transport groups.

Which recommendations would be most useful for network to campaign on?

Participants considered it was particularly important that older people were empowered to be involved, to voice concerns and influence. People noted that this needed to be properly resourced.

Various participants mentioned that awareness training should be a priority for the network and noted that this would help highlight that issues that affect ‘older people’ matter to everyone. This was both in relation to taxis and other modes of transport. It was also felt that the development of charters and getting people to sign up to these would be a good campaign for the future.

It was felt that the network should connect with the ‘take control of transport’ campaign. A further priority was to continue to support The Better Buses Campaign

Participants also felt that we should prioritise campaigning for better Ring and Ride and community transport services and noted that this was a priority for the mayor, Andy Burnham.

Where are there significant blocks to taking these recommendations forward?

Various blocks were identified. These included money, legislation, lack of will and lack of awareness by politicians, planners and senior people. It was felt that large businesses such as bus companies were unlikely to listen and that we needed more power to challenge and necessitate engagement.

It was also noted that funding was not always available for the particular priorities as identified for older people. It was noted that smaller bespoke bus services and community transport, such as Ring and Ride and Local Link were still experiencing cuts which was likely to have negative effects on services and mean further limitations.

In relation to some VCSE services, for example, volunteer lift schemes, a lack of volunteers was highlighted as a barrier to maintaining and growing these services.

With regard to mapping transport services, participants questioned who this would be done by and where resources would come from.

In relation to information being better publicised and offered in a variety of accessible formats, it was noted that alternative options were needed for those not online to get news. This is in addition to training and support being offered to access digital services.

It was noted that there was a lack of representation of older people in positions of authority. It was felt that older people were undervalued when it came to consultation and participation and that there was a lack of feedback following consultation when this did take place. Further to this, people identified that where campaigning groups of older people existed these were sometimes not organised enough.

Participants also identified that language sometimes alienated people, particularly when jargon was used. In relation to the GMOPN recommendations some people said that they did not know what an equalities impact assessment was. They also expressed uncertainty about the term 'age-friendly' and said that they did not feel this would be meaningful to the general public.

General Findings

Following their discussion of the recommendations we asked participants to think more generally about the network and how we should focus in the future. We asked them to think about what areas the GMOPN should be having 'big conversations' about, and to think of possible themes for future events and discussions.

What other areas should GMOPN be having big conversations about ?

Participants suggested that the following areas would be good to focus on in the future:

- Access to learning/activities
- Work – older workers, getting back into work/retraining
- Support for community and voluntary sector
- Meeting the housing needs of diverse communities
- Community Assets
- What makes a neighbourhood? Neighbourhoods – connecting
- Intergenerational
- Social isolation
- Education about ageing – intergenerational
- Inequalities
- Volunteering
- Environment
- Air quality – clean air
- Personal safety/confidence.
- Social Care
- Technology and digital services– usage/cost -Online banking, shopping etc. (How to teach older people to get online, where to get help from, planning for future digital advancements)
- Scams and junk mail
- How can we better plan for and manage the transitions to retirement – retirement as a new beginning/ Living later life to the full – post retirement
- Ways to help older people remain (and feel) valued members of society and their community
- Transport for health specifically (e.g. Bus stops outside of GP practices and hospitals, transport to get to and from health appointments)
- Creating Stronger partnerships – connecting groups areas and ideas

Participants also made the general point that the GMOPN should be more proactive, linking with user, patient and "friends of …" groups. They suggested that where possible the GMOPN should make sure it was involved from the start with campaigns and consultations to ensure that older people's issues were always high on the agenda.

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Recommendations for campaigning and development

Build on current relationships

The GMOPN should build on its current relationship with the Ageing Hub and Greater Manchester Combined Authority (GMCA) to make sure we continue to be aware of strategic priorities and can be involved in future work.

Promote recommendations through social media

The GMOPN should continue to promote recommendations from reports on health, transport and housing through Twitter and other social Media to improve public awareness of the issues.

Focus on intergenerational issues

The GMOPN should focus on intergenerational issues in the future and look to hold an intergenerational event.

Support partnership working

The GMOPN should continue to prioritise supporting partnership working and the involvement of older people in all areas across Greater Manchester in recognition of our role as bridge and connector.

Future housing work

Future housing work should include a focus on "All Age Housing". The GMOPN should respond to the Spatial Framework. We should also develop links with GM Housing Action, GM Housing Providers and Manchester Housing Provider Partnership.

Commence working groups

The GMOPN should commence working groups on housing, health, and transport to help progress the recommendations of our reports and link with relevant campaigns, groups, organisations and future work in Greater Manchester.

Future health work

Future health work should include focus on hospital discharge and accessibility of GPs. The GMOPN should engage with the health priorities identified in 10 year plan.

Continue to focus on the good

The GMOPN should share positive stories about older people through our newsletter and Twitter feed to promote positive images of older people. We should also prioritise challenging negative portrayals and the use of ageist language or stereotyped images.

Future transport work

Future transport work should include a focus on age-friendly training for transport providers and the development and dissemination of charters for different modes of transport

Use inclusive/accessible language

The GMOPN should provide a positive example by avoiding jargon and using inclusive and accessible language in all reports and communications.

Balance focus between current and emerging priorities

The GMOPN should balance its focus on the key areas of health, housing and transport (which continue to be high priorities for older people) with work in other areas that emerge as new priorities.

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