qcoss

Social Isolation:
Best practice guide for service delivery
2023

About QCOSS

We are QCOSS (Queensland Council of Social Service), Queensland's peak body for the social service sector. Our vision is to achieve equality, opportunity and wellbeing for every person, in every community.

We believe that every person in Queensland – regardless of where they come from, who they pray to, their gender, who they love, how or where they live – deserves to live a life of equality, opportunity and wellbeing.

We are a conduit for change. We bring people together to help solve the big social issues faced by people in Queensland, building strength in numbers to amplify our voice.

We're committed to self-determination and opportunity for Aboriginal and Torres Strait Islander people.

QCOSS is part of the national network of Councils of Social Service, lending support and gaining essential insight to national and other state issues. QCOSS is supported by the vice-regal patronage of Her Excellency the Honourable Dr Jeannette Young AC PSM, Governor of Queensland.

Join us to mobilise a force for equality, opportunity and wellbeing.
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QCOSS acknowledges Aboriginal and Torres Strait Islander people as the original inhabitants of Australia and recognises these unique cultures as part of the cultural heritage of all Australians. We pay respect to the Elders of this land; past and present.

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■ About this Practice Guide

What is the purpose of this Practice Guide?

The Queensland Government invests in a range of Seniors Social Isolation Services located across the state. The funding supports local solutions that suit the needs of vulnerable First Nations people aged 50 years and over and non-Indigenous people aged 60 years and over experiencing or at risk of experiencing social isolation.

This Practice Guide will assist funded Seniors Social Isolation Services (and other seniors' organisations) to improve service delivery by providing best practice guidelines for delivering social isolation prevention activities for older Queenslanders. It will also help workers achieve the best possible outcomes for service users by being able to identify the need for other service linkages.

Who is this Practice Guide for?

Funded Seniors Social Isolation Services are delivered by a broad range of organisations that provide opportunities for older people in their communities to connect.

There are also many community clubs and organisations providing similar programs of activities for older people that do not receive funding through the Queensland Government funded Seniors Social Isolation Program. All of these organisations have a role to play in supporting older Queenslanders to prevent and overcome social isolation and loneliness and may find this Practice Guide to be a helpful tool.

How was this Practice Guide developed?

The development of this Practice Guide was informed by consultation with funded Seniors Social Isolation Services, other services that provide activities for older people, and older people who access programs across Queensland. Information was gathered through workshops, interviews, and a survey.

Glossary of terms

Service user:
Throughout the Practice Guide the term 'service user' is used to refer to individuals that access services and supports. Sometimes an organisation will use other terms to refer to people that access services, including 'clients', 'customers', 'consumers' or 'members'.

Organisation:
The term 'organisation' is used throughout the Practice Guide to refer to services that provide support or activities to older people. Sometimes other terms such as 'service provider', 'community organisation', or 'service' are used.

About social isolation and loneliness

What is social isolation?

Social isolation is a complex issue affecting a high number of older people in Queensland and putting them at risk of serious mental and physical health conditions, as well as elder abuse.

Some studies have found that there are two age groups that are more at risk of experiencing social isolation and loneliness: young adults between 18 to 25 years of age, and adults over 65 years.[6]

The report *State of the Older Nation 2021* found that 23 per cent of Australians aged 50 years and over had felt lonely at least some of the time in the past few weeks.[3] Social isolation and loneliness is a growing public health concern that needs to be addressed, as it can have a detrimental impact on the health and wellbeing of individuals.[2]

Social isolation is defined as the state of having minimal contact with others, often reflecting an individual's small network of relationships.[2] It is an objective measure characterised by an absence or limitation in the number of social interactions with others.[5]

Loneliness is the state of distress or discomfort that results when an individual perceives a gap between their desire for social connection and their actual experiences of it.[5]

Social isolation and loneliness are distinct but related concepts. While in some cases loneliness may be an emotional reaction to social isolation, individuals who are socially isolated may not feel lonely and, by contrast, individuals who are socially connected may feel lonely.[1] The level of loneliness a person feels may also depend on their own social expectations and their culture's expectations of relationships.[7]

Identifying social isolation and loneliness

Older people are especially vulnerable to social isolation and loneliness due to the social, economic, and health changes that come with ageing. These changes often result in a decline in the quality and quantity of their social relationships.[3]

There are many risk factors that can make an older person more vulnerable to experiencing social isolation and loneliness. Risk factors can include:

- living alone
- not feeling safe enough to access the community
- the absence of supportive relationships or having difficult/unfulfilling relationships with others
- transitions or disruptive life events such as bereavement, retirement, moving to a different residence, relationship breakdowns, or becoming a primary carer

- living in a rural, regional or remote area with limited access to community engagement opportunities, supports, services, and amenities
- limited availability of public transportation or ways of getting around
- cognitive impairments such as learning disabilities and dementia
- limited personal finances, as this often limits what an individual can engage in socially
- lack of access to digital technology.[1]

Psychosocial impairments can also make people vulnerable to social isolation and loneliness. Older people who experience mental health concerns such as depression or anxiety are more likely to withdraw socially from others. Reciprocally, social isolation and loneliness can also lead to an individual experiencing poorer mental health.[1] Due to the negative thought patterns and altered behaviours associated with depression, an individual experiencing depressive symptoms may view their existing relationships and social supports as inadequate. Older adults with clinical depression or generalised anxiety tend to report higher levels of loneliness, unrelated to the levels of support they receive or the size of their social network.[1] Older adults may also find it harder to maintain social connections if they experience reduced self-confidence associated with ageing.[8]

Another risk factor includes physical health issues or disability. Older people who have physical health issues such as heart disease, stroke, cancer, or physical disability are more likely to experience social isolation and loneliness, as these conditions may limit their ability to socialise. Sensory impairments and hearing loss also increase the risk of social isolation. The relationship is also bi-directional in that individuals who are socially isolated and lonely are more at risk of adverse health outcomes.[2]

In Australia, those more likely to feel lonely were people who:

- identified as Aboriginal or Torres Strait Islander (50 per cent)[3]
- identified as LGBTQIA+ (23 per cent)[3]
- identified as from a culturally and linguistically diverse background due to language and communication barriers and fewer long-standing social ties in community.[1]

What are the impacts?

Due to social, economic, and health changes that can occur in later life, older people tend to be more susceptible to the adverse consequences of loneliness and isolation.[1] Research has found that individuals who are socially isolated or lonely are at increased risk of earlier mortality.[9]

Older adults who experience loneliness and social isolation are also at increased risk of:

- cardiovascular disease
- stroke
- cognitive decline
- dementia
- depression
- anxiety
- suicidal ideation
- suicide.[1]

Social isolation has also been linked to damaging health behaviours including smoking, physical inactivity, and poor sleep.[5] There is also concern that chronic loneliness and social isolation can affect an individual's ability to connect with others in a positive way and engage in activities that may eventually decrease feelings of loneliness.[10]

Overall, social isolation is associated with poor health outcomes and decreased feelings of wellbeing.[10] Conversely, social connectedness and more frequent social contact is associated with higher life satisfaction.[5] This highlights that programs and services aimed at addressing social isolation and loneliness have the potential to positively impact an older person's health and wellbeing.

How are social isolation and loneliness linked to elder abuse?

Elder abuse is a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. Abuse can be physical, sexual, psychological, financial, social or neglect.[11]

Older adults who are socially isolated are more likely to experience abuse and, because they have limited access to social support, there are fewer opportunities for the abuse to be detected and reported by others.[12]

"Older adults who are socially isolated are more likely to experience abuse"

A US study that analysed data from 5,777 respondents aged 60 years and older found that one in 10 respondents reported emotional, physical, or sexual mistreatment, or potential neglect in the past year.[13] Low social support significantly increased the risk of all forms of abuse.[13] The study found that social support was central to the good health and wellbeing of older adults. It also found that a high level of social support reduced the negative impacts of elder abuse and helped prevent future abuse.[13]

Similarly, the Australian Government's *National Elder Abuse Prevalence Study* surveyed a sample of 7,000 people aged 65 and over who live in the community. Across the abuse subtypes (financial abuse, physical abuse, sexual abuse, psychological/emotional abuse and neglect), it was found that older adults with a lower sense of social support were more likely to report experiencing elder abuse.[14]

These studies highlight that social interaction with others, and connection with community resources and programs not only improve quality of life in older adults, but also lower the risk of elder abuse.[6]
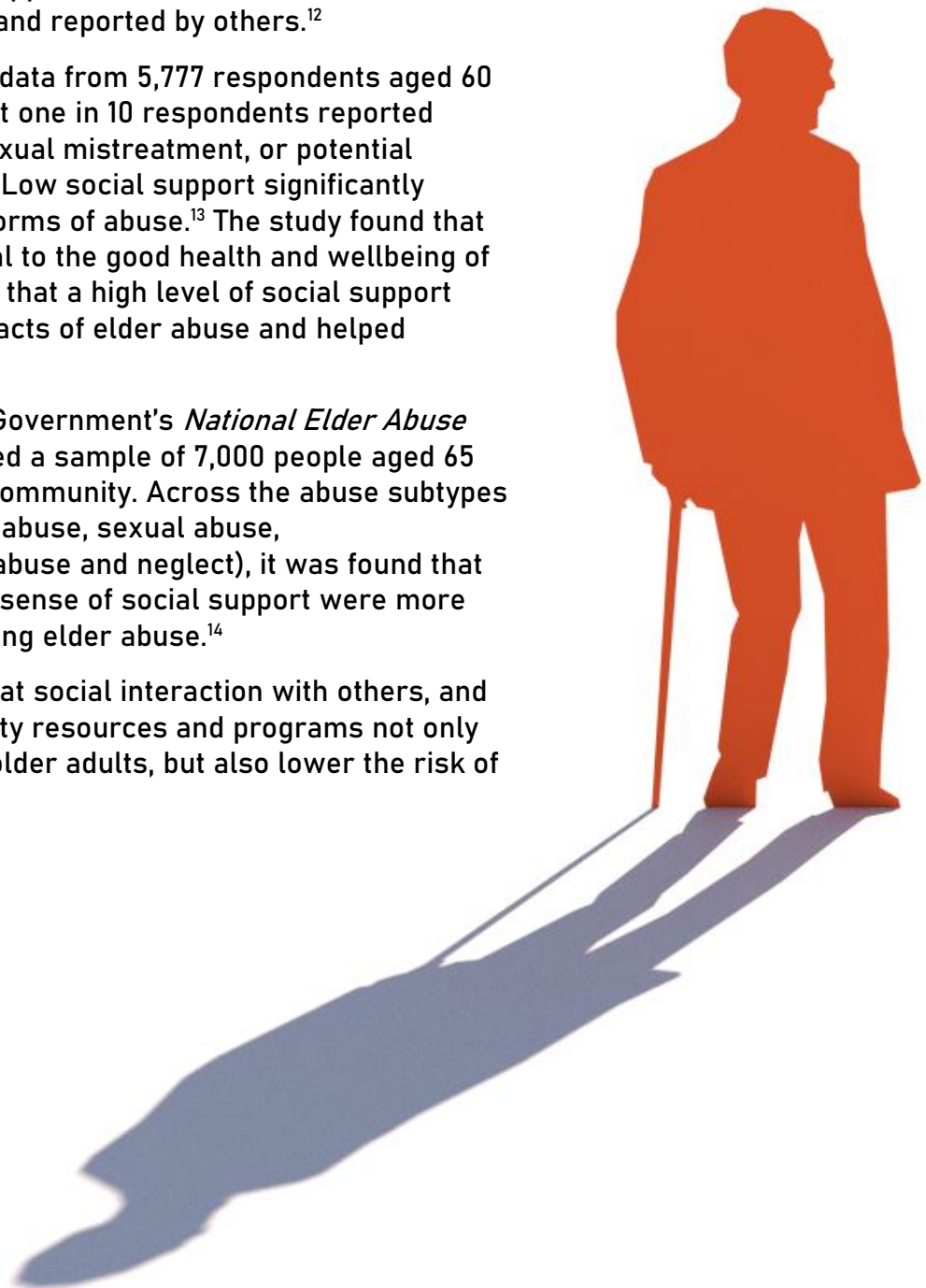
What is social prescribing and how can it address social isolation?

Social prescribing is a means of enabling health professionals (such as GPs, nurses, allied health professionals etc.) to refer people to a range of local, non-clinical community services.[15] It recognises that there are a range of social, economic, and environmental factors that impact people's health and wellbeing, and these factors can sometimes be why people present to healthcare services.[15]

Evidence shows that populations that are most likely to benefit from social prescribing include[16]:

- people living with chronic conditions
- people who experience social isolation and loneliness
- people who experience mental health issues
- people who are vulnerable, for example due to their age or financial situation.

Given that many older people can experience some of the issues noted above, they are likely to benefit substantially from social prescribing.

Social prescribing can address issues that contribute to poor health, such as:

- social isolation
- unstable housing
- financial difficulties
- mental health issues
- relationship difficulties.

Examples of non-medical community support that people could be referred to through a social prescribing model may include:

- adult education programs or volunteering activities
- support with daily activities or to access the community
- financial counselling
- housing support
- healthy living programs such as exercise classes or cooking classes
- community gardening projects
- social groups
- mental health support and support groups.

Social prescribing schemes have traditionally developed in the United Kingdom but have since been implemented in many different countries around the world. In 2019, the United Kingdom's National Health Service (NHS) Long-Term Plan formally incorporated social prescribing into the NHS and introduced an NHS model of social prescribing as a key component of its personalised care model.[17] Evidence suggests that the economic and therapeutic effectiveness of social prescribing is increasing.[18] Social prescribing programs have proven to deliver improved outcomes for individuals in relation to loneliness, social isolation, wellbeing, connectedness, and relief to health systems by reducing unnecessary demand on medical and health services.[3] However, social prescribing may not achieve its full potential unless funding is available for community organisations to continue to provide services and make and maintain their links with health services.[19]

On 27 May 2021, the Parliamentary Inquiry into social isolation and loneliness in Queensland was announced and the findings were tabled by the Community Support and Services Committee on 6 December 2021. The Parliamentary Inquiry considered the drivers and impacts of, and effective responses to, social isolation and loneliness in Queensland communities. A range of community organisations and stakeholders contributed to the committee's public hearings and site visits throughout the inquiry.

A significant number of submitters to the Parliamentary Inquiry into social isolation and loneliness supported the introduction of social prescribing in Queensland. During its inquiry, the committee heard of the positive results observed from the application of the social prescribing model in other jurisdictions.

There are many different models of social prescribing that are used nationally and internationally. However, generally social prescribing schemes involve three components:

1. A healthcare professional or community organisation refers an individual to a link worker (also known as a community connector, community navigator etc.).
2. The individual and link worker engage in consultations to co-design a non-clinical 'social prescription' or 'case management plan' to improve their health and wellbeing.
3. The individual is supported to connect with local groups and community organisations to engage in activities or access support that will meet their individual needs and goals.[15]

In Queensland, there are rising numbers of social prescribing programs in the community, located at and utilising neighbourhood and community centres. The Parliamentary Inquiry into social isolation and loneliness highlighted examples of social prescribing programs in Queensland, including the Ways to Wellness program provided by the Mt Gravatt Community Centre. Ways to Wellness operates using the three social prescribing components noted above. General medical practices, outpatient clinics, allied health professionals, community organisations, and other agencies who recognise that a person is experiencing social isolation and loneliness, can directly refer the person to a link worker through the Ways to Wellness program[20]. The link worker will work with the person to create a case management plan that includes the person's goals and needs, and will link the person with organisations, sources of support, and interest groups in the community, whilst also addressing any barriers to participation[20]. The link worker supports the person to connect with these organisations and groups by introducing the person to the organisation or group, and attending with the person until they are comfortable to go by themselves.[20]

The important role played by neighbourhood and community centres was highlighted in the inquiry, as centres facilitate involvement in both centre-based activities, as well as broader community participation. They play a linkage role to support individuals to navigate the broader service system, access key supports and find meaningful opportunities for volunteering, mutual support and social connection. Even though formal social prescribing models do not exist in all regions in Queensland, organisations such as neighbourhood and community centres play a vital linkage and referral role in their communities.

! The next part of this document provides practical guidance for workers and volunteers who deliver social isolation prevention programs or activities for older people.

◼ Supporting people

How to talk to people about their wellbeing

If you have noticed changes in someone who is accessing your service, or if you are concerned about their wellbeing, it is important to have a conversation about what might be happening for them.

Many people may be reluctant to directly raise feelings of loneliness or other issues they are experiencing, so being familiar with the symptoms of social isolation and risk factors that lead to decreased wellbeing is important.

By building a trusting relationship with the person from the beginning, you will be better equipped to notice changes in their wellbeing. If trust has been established, the person will also feel more comfortable to engage in a conversation with you about their wellbeing.

Before having a conversation there are a few things to keep in mind:

1. Find the right time. Hold the conversation in a quiet space where you're unlikely to be interrupted or overheard.

2. Consider having the conversation while doing an activity. Some people may feel more comfortable talking while doing something else, such as going for a walk or doing an activity together.

Phrases for starting a conversation about wellbeing:

- "I've noticed lately that you…"

    This is a helpful phrase for respectfully introducing concerns that you have observed.

- "I know that you are going through….so I just wanted to check in with you and see if there's anything I can do to support you."

    If you are aware that a person has experienced a life event or is going through a period of change, this is a good way to check in with them and see how they are coping.

Remember that some people may not be ready to talk about their wellbeing, or they may not want or be willing to accept support. You may need to have an ongoing conversation with them, regularly check in, continue to build trust, and offer support.

The following points provide a range of tips to support having a conversation about wellbeing:

- Use active listening skills and try to listen without judging or reacting. Actively listen by:
  - giving the person your full attention
  - using body posture that is relaxed, and does not signal disinterest
  - observing the person's non-verbal communication, and the emotion behind their words
  - summarising what they have said or how they are feeling and repeating it back to them, to check that you have heard them and understood correctly. For example, "it sounds like you're saying…"
  - maintaining appropriate eye contact
  - nodding and giving positive prompts such as "I'm hearing you" or "that sounds really difficult"
  - asking open-ended questions to encourage the person to express themselves so you can understand more clearly
  - asking for clarification if they say something that you don't understand. For example, "what do you mean when you say…"
  - giving the person time and space to think, question and express their point of view. Silence allows people to reflect and process information.[4]

- Use language that is easy to understand and, if you are sharing information with the person, check from time to time that they have understood.

- Find out what support networks the person has in place.

- Use a strengths-based approach, where the focus is on what the person can do, rather than what they cannot do.[4]

- Use encouraging words and provide support options/suggestions for assistance to the person so they have a choice in how they can address their concerns.[4]

- Some people may be reluctant to accept supports or services as they want to stay independent. Talk to them about how services and supports can help them stay independent for longer.

- Some people may not know what services and supports are available in their community. You can utilise online tools such as 'My Community Directory' or 'Ask Izzy' to find what might be available and share this information with them.

Some organisations will administer an annual short questionnaire as a way of tracking outcomes and to update a service user's goals and requests. Even if this is done annually, it is also important to engage your service users in frequent casual conversations about how they are finding activities and whether they need any further support or information. You could do this while having one-on-one conversations with your service users, or you could engage the group in a conversation about how they are finding activities.

How to understand an older person's needs

When someone attends your service for the first time, it can be helpful to gather information about the person so that you can ensure you are best meeting their needs. This is usually referred to as an 'intake process.' You may also need to assess the needs of your existing service users from time to time as well, particularly if you notice a change in their situation which may require a referral to another service.

The initial intake conversation you have with a person should not be scripted. It would ideally feel like a casual conversation between the worker and the person. This is also an important opportunity to talk to the person more about the activities and supports your organisation delivers. The way an intake is completed will be different for each organisation depending on the type of service they provide. For some organisations the intake process might be a conversation with the person about their hobbies or interests. In other organisations the intake process might be a more detailed conversation delving into why the person has come to the service, and what their support needs are.

Some organisations may allow people to try activities a few times to see how they find it, before completing an intake with them.

If you need to collect sensitive information from the person during the intake conversation, you should ask for their consent prior to doing so. It is important that your service users understand how their information will be used, whether their information will be shared, and who it will be shared with.

If you have a funding contract with Queensland Government, it is important to read the terms and conditions relating to Privacy and Confidentiality, obtaining informed and written consent, protection of personal information, and recordkeeping requirements. Service providers should be mindful of privacy laws. For example, a service provider should only collect someone's personal information that is reasonably necessary for their work.

It is important to store your service users' personal information in a secure and safe location that cannot be accessed by others.

During the intake process, you can collect information about the person in a range of ways. Some examples include:

- having a casual conversation

  If you have a casual conversation with the person, it is a good idea to take notes as you will need to gather their personal information and contact details, as well as any other important information they may have raised.
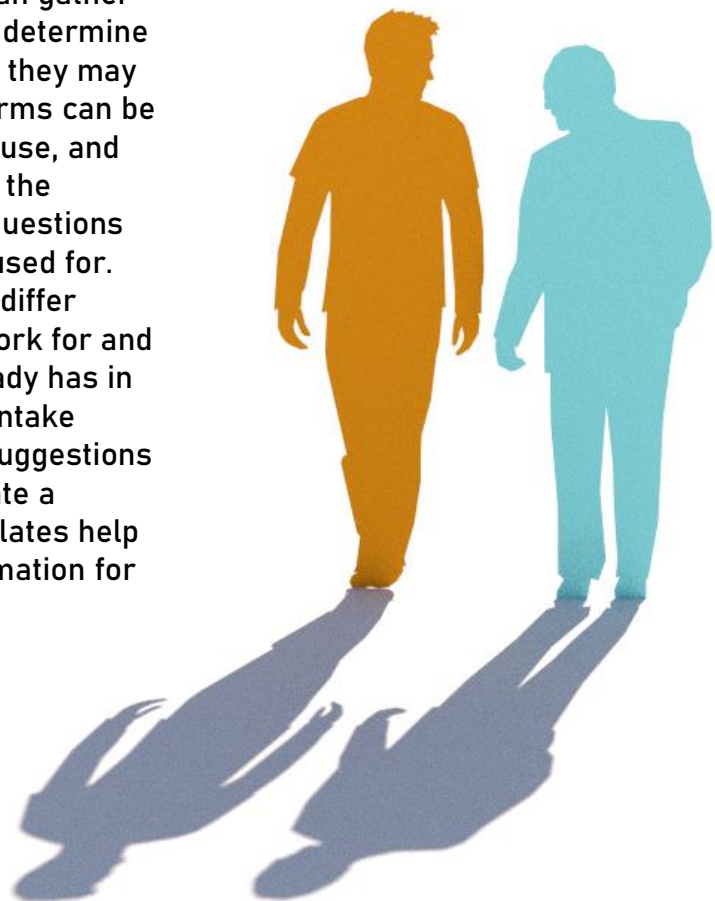
- asking the person to complete a membership form

  If you ask the person to complete a membership form, it is important that this is accompanied by a conversation. Having a conversation with the person will help you understand what has motivated them to attend your service, and what they are most interested in. Keep in mind that some people may not be able to complete a form. For example, if they experience issues with literacy or they may speak limited English.

- going through a structured intake form with the person

  Structured intake forms are a more formalised way of completing an intake. They help organisations collect consistent information about people that access their service. Structured intake forms provide a template of information and questions that the worker can go through and complete while having a conversation with the person. Often structured intake forms are used when an organisation needs to collect information that is more comprehensive than basic demographic information. For example, information about a person's support networks, health issues, and other needs. Organisations who provide case management services will often use a structured intake form so that they can gather the necessary information needed to determine what a person's goals are and where they may require support. Structured intake forms can be a helpful tool for all organisations to use, and organisations can tailor the length of the structured intake form and types of questions asked to suit the purpose it is being used for. The way you collect information may differ depending on the organisation you work for and what process your organisation already has in place. If you don't have a structured intake process in place, you could use the suggestions outlined in the following table to create a template for your organisation. Templates help you collect consistent data and information for all people accessing the service.

Demographic information	- Name - Date of birth/age - Gender - Address - Phone number - Main language they speak at home - Whether they identify as - Aboriginal and/or Torres Strait Islander; or - Culturally and linguistically diverse - Next of kin or trusted alternative contact
Interests and preferences	- What motivated the person to approach your service and what they are hoping to get out of your service. - What the person would like to address/receive support with. - Find out about the person's life and what they have enjoyed doing in the past. By doing this, you will be able to match them with suitable activities, or potentially look at starting up a new activity.
Support networks	Finding out the following information will help you determine whether the person may benefit from referrals to other supports/services: - What does their support network look like? Do they have family or friends they keep in touch with? - What services do they access? Do they receive any daily living or social support? - Do they live alone or with other/s? - How do they get around the community?
Health and other needs	Finding out the following information will help to determine the types of activities that may be suitable for the person: - Accessibility requirements - Whether they have conditions/impairments to be aware of - Whether they have any cultural/spiritual/social/environmental or health needs. For example, if the person has a physical condition and is interested in attending an exercise class, you may need to let the instructor know so that exercises can be tailored to suit them. Another example could be someone with a hearing impairment preferring to engage in smaller groups/activities.

How to work with an interpreter

You may need to engage an interpreter for important conversations when the person:

- requests it

- speaks English as a second language

- is difficult to understand

- responds only in a limited way

- relies on family and friends to interpret

- wishes to communicate in their preferred language

- cannot respond to questions in English.

The factsheet Assessing the need for an interpreter from the Centre for Culture, Ethnicity and Health will provide you with further information.

The Translating and Interpreting Service (TIS National) is an interpreting service provided by the Department of Home Affairs for people who do not speak English and for agencies and businesses that need to communicate with their non-English speaking service users (About TIS National | Translating and Interpreting Service (TIS National)).

You can find out about charges and free services here – Charges and free services | Translating and Interpreting Service (TIS National)

Working with people who are deaf or hearing impaired

The National Relay Service allows people who are Deaf, hard of hearing and/or have a speech impairment to make and receive phone calls.

Find out more about the National Relay Service here – About the National Relay Service (NRS) | Access Hub
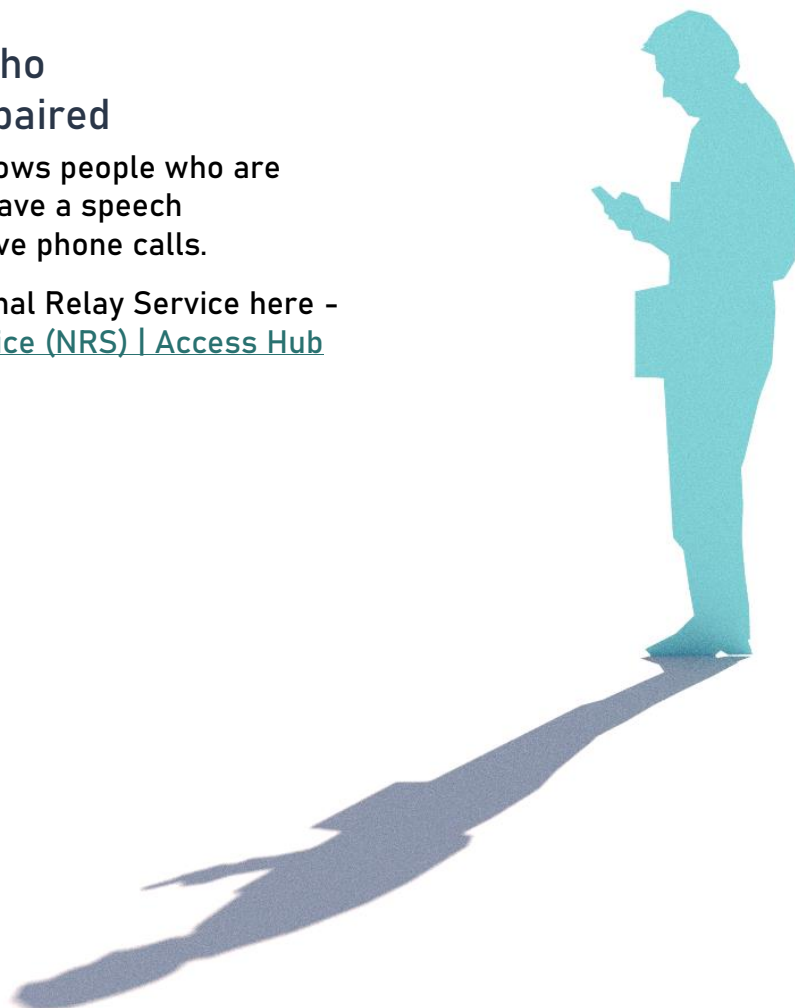
■ Delivering services

What activities could be delivered?

Organisations and community groups across Queensland are delivering a wide range of activities that aim to reduce social isolation and improve the wellbeing of older people. The table below provides examples of activities that best meet the needs of older Queenslanders.

If you deliver activities to older people in your community, or are planning to, you may want to consider providing activities from a few of the categories below. By offering a diverse range of activities, you may be able to attract more people to your service.

Physical health and wellbeing	Exercise groups or classes, such as: - yoga - chair yoga (chair yoga may be better suited to service users with injuries or mobility limitations) - Tai Chi - Pilates - dancing - walking - Zumba - pool-based fitness activities (for example: hydrotherapy, aqua aerobics etc.) Consider low-impact options to cater for service users who may have mobility limitations.
Tech savvy activities	Helping older people learn to use devices such as phones or computers can increase their connectedness. Examples include:

	One-on-one support	Where a person meets with a worker/volunteer for support with a technology related issue they have identified.
	'Bring your own device' group session	A group activity where service users bring their device and the worker/volunteer goes around the room and assists people individually with their device. This approach provides an opportunity for peer support. It also provides the opportunity for group members to socialise with others.
	Structured classes	Each class is a structured learning experience where the facilitator focusses on a different topic each session (for example: how to set up an email, how to send a text message)

It is important to understand your target group and what approach may work best for them. For example, structured classes may not always be appropriate, as each person that accesses your service is likely to have unique support needs when it comes to learning how to use technology. Some people may also learn better when they are provided with one-on-one support.

Information sessions / discussion groups	Hosting information sessions where you invite other services to speak about their service or a particular topic is a great way to build the knowledge of your service users. Incorporating the information session into a social event, such as a luncheon, may entice more of your service users to attend. It can also help to spark a conversation amongst older people on particular topics. There are a range of organisations that offer community education on specific topics.

Some of the many topic areas that are relevant for older people include:

- coping with grief and loss (including what services are available to older people)
- elder abuse prevention
- accessing the Australian Government *My Aged Care* portal
- services available through Centrelink (Services Australia)
- safety
- Queensland Government services including Seniors Cards and concessions
- advance care planning and emergency planning
- nutrition.

See if your guest speaker can stay for a short time after the information session so that your service users have the opportunity to speak with them individually.

Besides increasing knowledge, the other benefit of an information session is that it may lead to your service users accepting a referral to another service/organisation. Some people may only feel comfortable accessing a service when a personal connection is made with a worker.

Social programs	Group social activities such as:
	- bus trips - movie days - lunch outings or picnics - celebration of significant days or events (for example, Queensland Seniors Month, religious holidays such as Ramadan or Christmas etc.) - bowls or ten pin bowling - games (for example, bingo, bridge, trivia, mahjong etc.) - shopping bus (drop-offs and pick-ups into town for people to individually attend appointments, shopping etc.) - art and craft (for example, mosaics, sewing, crocheting etc.) - gardening - music activities (for example, music therapy, drumming group, choir etc.) - concerts (for example, getting local music groups or schools involved in delivering a concert for your service users) - interest groups (for example, mentoring youth, barbecues, teaching others certain skills, fundraising activities such as Australia's biggest morning tea etc.) - support groups (for example, dementia support group) - men's group - women's group - book clubs. Sometimes, it's also good to keep things simple. Your service users might want a space where they can connect and talk to others over food. You could also consider having a space where a few activities are happening at the same time (for example, board games), and people have the option to get involved in an activity or just have a conversation with others.

Intergenerational programs	Intergenerational programs involve activities or programs that bring together people from different generations. Intergenerational programs can help to reduce loneliness and isolation in older people and give them a sense of purpose. Such programs help to bridge the gap between younger and older generations. If you're interested in starting an intergenerational program, contact local schools, kindergartens, or other services that work with youth to discuss a partnership. Examples of intergenerational programs happening throughout Queensland include: - mixed Tai Chi group for older women and mums and bubs - Elder Olympics (a day of games and activities for older people and primary school students) - visiting kindergartens - visiting schools to teach children about the 'olden days' - school holiday art and craft program for primary school children led by older people.
Volunteering	Volunteering can be a great way for your service users to share their skills and life experiences with others. You could partner with local community organisations or businesses to link your service users with volunteering opportunities. Examples include: - mentoring – this is similar to the intergenerational programs noted above. Some schools will have opportunities for mature people to mentor youth - disability groups - neighbourhood and community centres - aged care – supporting older people in aged care facilities by visiting - local charities and hospitals - regional councils – Community Engagement Officers at councils may be aware of local volunteering opportunities on offer. There are also thousands of volunteer opportunities listed on the Volunteering Queensland website. Volunteering Queensland is the state peak body for volunteering in Queensland and is dedicated to advancing and promoting volunteering. Visit their website here - Volunteering Queensland – Volunteering Queensland (volunteeringqld.org.au)

Online activities	Providing options for online activities can be an effective way of engaging older people who may be socially isolated and unable to access social connection programs in person. In particular, online activities could complement face to face service delivery in areas where distance is a barrier and in-person gatherings are less frequent. Having this option could also be helpful for older people who may be unwell or have an injury that prevents them from attending the regular social gathering in person. Examples of ways you can engage older people in online activities include:

- cup of tea and casual chat via an online platform such as Zoom
- facilitated online games (for example, you could host a regular online trivia game or quiz)
- online talk show (for example, you could have a guest speaker link in via Zoom to speak about a topic of interest, and allow your service users to participate in a Q&A).

If an older person you work with is not able to attend in-person events, and does not have the resources to link into an online activity, connecting with them via phone on a regular basis can help them to feel more socially connected. Some organisations also utilise a peer support approach, where the person's friends/peers from the group visit them during times where they are not able to attend the activity in person.

Delivering services online can come with challenges particularly around digital literacy. Older Australians aged 65+ are the least digitally included age group according to the Australia Digital Inclusion Index (ADI).[21]

Be Connected

Be Connected is an Australian government initiative committed to increasing the confidence, skills and online safety of older Australians. It can help with:

- learning the basics of technology and getting online
- banking and shopping online
- accessing government services
- safely using social media to stay connected with family and community.

Be Connected also offers in-person help and support for older Australians to engage with digital technology. To find help locally, you can use the Be Connected Partner map.
Find help locally | Be Connected (beconnectednetwork.org.au)

If an older person does not have a device, you could look at linking them in with a local library or neighbourhood centre with public computers.

What to consider when planning activities?

When planning activities, it is important to consider the following:

1. Ensure activities suit the region. Not all activities listed above will be appropriate for every region. Pay attention to local needs and wants, and leverage the passion and expertise of local people, as some may be interested in running activities.

2. Provide a variety of activities. People have diverse interests, so by providing a variety of activities it will help to attract more people to your service.

3. Listen to what your service users want. It is important to regularly ask your service users what they want to see in the program. You could either find out what they are interested in when they initially approach your service, through regular surveys or by engaging your group in periodic conversations about what activities they would like to see.

4. Cost. The cost of activities can be a significant barrier for people who may wish to attend your service. While you may need to charge a co-contribution fee for some activities, try and keep these costs as low as possible. Also consider having some free activities available.

5. Provide meals/refreshments. This can entice more people to come along to the activity.

6. Transport. Lack of transport can be a significant barrier to accessing services. If your service is unable to provide transport, ask the following questions:

   a. Are your service users able to access community transport? To find out their eligibility and to connect with a service provider, you should contact *My Aged Care*.

   b. Are there members of your program that might be willing to transport other members who live near them?

   c. Are there other organisations in your community who have a bus that might be willing to share it with your organisation on days they don't require it?

7. The diverse needs of your service users. You can find more information on this in the next section ('How to create an inclusive service').

8. Risk assessments. Conduct risk assessments of the environments in which you hold activities to ensure the safety of your service users. For example, ensure that the environment – including the bathroom – is accessible and has no trip hazards, that the lighting is adequate, that there is an evacuation plan in place and that a carpark is available etc. It is also important to ensure that you have public liability insurance. Public liability insurance will cover an organisation or business for financial losses relating to property damage or personal injury suffered by others as a result of the organisation's activities. If you receive funding from the Queensland Government, having the relevant liability insurance is part of the funding contract terms and conditions.

9. Attendance/sign in sheet. Asking participants to sign in for each activity is important, not only for safety and insurance purposes, but so you can accurately report on attendance rates and help track the popularity of each activity.

10. The importance of building relationships. Developing collaborations and building relationships in your local community with other organisations, businesses, and councils is essential. If other organisations and businesses support what you are trying to achieve, they may be able to offer support to your organisation in various ways, such as by sponsoring an event, or by providing a venue at a low or no cost.

How to create an inclusive service

Diversity refers to the characteristics that make individuals different from one another. These may include:

- Age
- Gender
- Sexuality
- Physical or intellectual ability
- Faith
- Cultural background

- Language
- Family responsibilities
- Particular lived experiences, such as being financially or socially disadvantaged or experiencing homelessness.

"There is no 'one-size-fits-all' approach to diversity and inclusion; each person who accesses your service will have unique needs and wants."

It is important to be aware that older people have diverse characteristics and life experiences, so ensuring your service is safe and inclusive for all older people is important.

There is no 'one-size-fits-all' approach to diversity and inclusion; each person who accesses your service will have unique needs and wants. Never assume anything about your service users. By taking the time to meet with them and develop a relationship based on mutual trust and respect, you can find out both their challenges and strengths. Listening to and building rapport with each person who accesses your service is key to making them feel comfortable and welcome.

Below are some tips on fostering an inclusive space that celebrates diversity:

1. Talk to your service users about the lived experience of diverse groups. Holding information sessions on various topics is a good way to build acceptance and understanding of diverse groups and experiences. For example, you could invite an LGBTQIA+ advocacy organisation along to an event as a guest speaker.

2. Set a 'Code of Conduct' for group activities. It can be helpful to co-design a 'code of conduct' with groups to make sure that everyone is on the same page when it comes to creating a safe and respectful environment. The 'code of conduct' does not need to be lengthy. Examples of what you might include in it are: 'one person speaks at a time', 'listen to and respect other people's points of view' or 'use respectful language when talking to others.'

3. Give your service users the option to bring a support person along to activities. Some people may feel more comfortable attending an activity if they can bring someone. This could be their support worker, a family member or friend.

4. Provide service users with simple, understandable information. This extends to your promotional materials as well. Keep the language you use simple.

5. Explore flexible methods of service delivery. You may have to tailor or adapt processes to meet the emerging needs of consumers. Again, listen to your service users about what they want and need. Examples include:

   a. If possible, create a range of different sized groups (large and small), as some service users may not feel comfortable engaging in large groups.

   b. Having a women's group and men's group in addition to mixed gender activities, as some people may not feel safe/comfortable in mixed gender groups.

   c. Visiting someone in their home or keeping in touch with them via phone calls if they are socially isolated, but not ready to engage in a group activity.

6. Identify opportunities to link with community groups or other organisations that specialise in working with a certain diverse cohort. For example, you could work with local cultural groups to run a monthly cultural café where service users can learn about a different culture and explore food from that culture. Connecting with locals to help design and run events is important.

7. Consider ways to link service users with local community groups that they might be interested in.[22] You might offer a space onsite for a local group to meet, or you could partner with a local group/organisation and run a joint event every now and then.

8. Plan activities throughout the year that celebrate different forms of diversity.[22] For example, you could plan a celebration for Harmony Day, NAIDOC Week, Mardi Gras, International celebratory days, or International Day of People with Disability. This will show your service users that their diversity is identified and celebrated.

9. Advertise your service to show that you're inclusive. Examples of this include having symbols such as the rainbow flag, and Aboriginal and Torres Strait Islander flags on brochures. You could also have a statement on your brochures and website about your organisation's diversity and inclusion stance.

Definitions: Cultural awareness and safety

You may have heard the terms 'cultural awareness' or 'cultural safety' before.

Cultural awareness involves being sensitive to the similarities and differences between cultures when communicating or interacting with members of other cultural groups.[23]

Cultural safety refers to an environment that is safe for all people. It involves creating a space that embraces the differences between people and allows for a shared experience of respect, acknowledgement, and understanding.[23]

Working with older Aboriginal and Torres Strait Islander peoples

Aboriginal and Torres Strait Islander cultures are rich in community knowledge, wisdom of Elders, and spiritual and cultural practices and protocols.[24] Connection to family and connection to country are at the heart of all Aboriginal and Torres Strait Islander culture, and Elders play an important role in their communities and families.[24] Elders are highly respected senior members of their communities, and are recognised for their wisdom, cultural knowledge, and community care and service.[25] Elders preserve and protect stories, heritage, cultural teachings, and the experiences of Aboriginal and Torres Strait Islander peoples.[25]

European colonisation had a devastating impact on Aboriginal and Torres Strait Islander communities and culture. For Aboriginal and Torres Strait Islander people, colonisation meant that they were evicted from their traditional territories and forced to relocate to reserves and missions.[26] They were also subjected to violence, epidemic disease, and denied their customs and traditions.[26]

Aboriginal and Torres Strait Islander people continue to be impacted by intergenerational trauma and disadvantage as a result of colonisation.[26] This is why it is important for organisations to utilise a trauma-informed approach when working with Aboriginal and Torres Strait Islander peoples. Despite the past and present impacts of colonisation, Aboriginal and Torres Strait Islander people continue to strengthen and grow with the resurgence of language, cultural knowledge, and traditions.[27]

On 16 August 2022 the Queensland Government, Aboriginal and Torres Strait Islander and non-Indigenous Queenslanders signed Queensland's Path to Treaty Commitment. The Commitment is a collective pledge to hear the truth of our State's history, and to work together to be ready to make negotiating treaties possible. The Queensland Government has also committed to the targets set out in the national Closing the Gap Framework. This Practice Guide will help to achieve positive outcomes relating to target one ('Everyone enjoys long and healthy lives',) and target 14 ('People enjoy high levels of social and emotional wellbeing').

It is important that we understand and recognise the history, heritage and resilience of Aboriginal and Torres Strait Islander people, because it is an important step towards reconciliation. Reconciliation aims to achieve equality, equity and the building of relationships between Aboriginal and Torres Strait Islander people and non-Indigenous Australians.

It is important to be aware of the lasting impacts of history, and the role we can play in improving the cultural safety of our services to ensure they are as welcoming and inclusive as possible.

Engaging with Aboriginal and Torres Strait Islander people in a culturally safe way

Demonstrating cultural awareness and offering cultural safety within a service for Aboriginal and Torres Strait Islander people is a key to effective engagement.

There is significant diversity among Aboriginal and Torres Strait Islander peoples. It is important to acknowledge the traditional owners of the land your service is located on. Details on how you can acknowledge traditional owners at events is included below.

The Culturally Informed Trauma Integrated Healing Approach (CITIHA) Framework is a model that is rooted in an understanding of the impact of trauma, and emphasises physical, psychological and emotional safety for both service users and staff. The Framework outlines a variety of principles and tips for engaging with Aboriginal and Torres Strait Islander people. Some tips which may be helpful to keep in mind to ensure your service is culturally safe include:

- creating a calm and respectful physical and emotional environment
- making people feel welcome to your service by providing tours, staff introductions, and introductions to other service users. Provide full information about your service and be responsive and respectful of the person's needs
- understanding trauma and its impact on individuals, families and communal groups. This is critical to avoid misunderstandings between staff and service users that can re-traumatise service users and cause them to disengage from a program
- ensure cultural competency for example by offering opportunities for service users to engage in cultural rituals, speak in their first language and by offering specific foods
- listening
- involve service users in the design of programs and activities.

The Victorian Government Department of Health has developed an Aboriginal and Torres Strait Islander cultural safety framework. Part two of the framework is the cultural safety continuum reflective tool, which includes individual and organisational reflective questions designed to support continuous practice improvements in cultural safety. The tool also includes a variety of actions you could look at implementing to improve the level of cultural safety in your organisation.

Some of the actions that may be useful to consider implementing into your organisation include:

- identify and build relationships with Aboriginal and Torres Strait Islander organisations
- develop a mechanism for regularly listening to service user feedback
- increase the Aboriginal and Torres Strait Islander voice by creating opportunities for input into new programs and activities
- embed and enhance cultural safety practices across organisational practice, such as acknowledgement of country
- allow time and a space for cultural learning to occur.

While not all actions outlined in the reflective tool may be relevant for your organisation, identifying a few achievable ways you can make your service safe for Aboriginal and Torres Strait Islander peoples is a positive step forward.

Incorporating a cultural practice such as Yarning Circles into your program or activities can help to make the space culturally safe for everyone, and it offers the opportunity to revisit traditional Aboriginal and Torres Strait Islander cultural practices of coming together, sharing and strengthening relationships.[28] When undertaken in a culturally appropriate manner, Yarning Circles are suitable for all people to utilise.[28] Aboriginal and Torres Strait Islander peoples have been using Yarning Circles for thousands of years as a way of learning from a collective group, building respectful relationships, and to preserve and pass on cultural knowledge.[28] These circles provide a safe, respectful, and collaborative space for people to speak without judgment. Yarning Circles are used as a meeting place for both Aboriginal and Torres Strait Islander and non-Indigenous communities to come together.[29] Yarning Circles could be a good practice to incorporate if you would like your service users to engage in discussion on a particular topic. For example, to spark a conversation on a topic that a guest speaker presented on, or to gather their ideas about future activities they would like to see in the program.

Yarning Circles can take a number of formats but the following guidelines generally apply when initiating a Yarning Circle[30]:

1. Sit in a circle.
2. Invite service users to introduce themselves and share something about themselves.
3. Introduce the purpose of the Yarning Circle or the focus questions to discuss.
4. Encourage service users to take turns to talk to promote reciprocal sharing and learning.
5. Resolve any actions or issues identified by the Yarning Circle, or agree to follow up in future Yarning Circles.[30]

The University of Newcastle, Australia has developed Yarning Kits Cultural Guidance which provides an overview of a Yarning Circle, and how to conduct it in a culturally appropriate manner.

Acknowledgement of Country and Welcome to Country

Incorporating an Acknowledgement of Country or Welcome to Country into social gatherings and events is a culturally appropriate way to show respect for Aboriginal and Torres Strait Islander peoples as the Traditional Owners of the land and will contribute to the cultural inclusivity and safety of the event you are hosting. By incorporating an Acknowledgement of Country or Welcome to Country into your social gatherings and events you will demonstrate that your organisation appreciates the rich heritage and cultural significance that underpins the Country we live and work in.

A Welcome to Country is delivered by Traditional Owners, or Aboriginal and Torres Strait Islander peoples who have been given permission from Traditional Owners, to welcome visitors to their Country.

An Acknowledgement of Country is an opportunity for anyone to show respect for Traditional Owners or Custodians and the continuing connection of Aboriginal and Torres Strait Islander peoples to Country.

You can learn more about a Welcome to Country and Acknowledgement of Country on the Reconciliation Australia website. If you are unsure whose Country you are on, the Australian Institute of Aboriginal and Torres Strait Islander Studies has some suggestions on how you can find this out.

Working with people from a culturally and linguistically diverse (CALD) background

According to the 2021 Australian Bureau of Statistics (ABS) Census, just over 7 million people in Australia were born overseas, representing 27.6% of the population.[31] You may already have people that access your service who are from a culturally and linguistically diverse (CALD) background, so it is important to consider what else you could be doing to ensure your service is culturally safe for all service users.

The Centre for Cultural Diversity in Ageing has a range of Culturally Inclusive Aged Care Practice Guides which set out key considerations, actions and resources that can support organisations who work with older people to deliver inclusive services to people from culturally and linguistically diverse backgrounds. The practice guide on 'leisure and lifestyle' may be helpful for organisations who provide social connection activities. The 'leisure and lifestyle practice guide' highlights some key considerations such as:

- ensuring that service users are able to communicate their preferences in their preferred language
- facilitating family and community involvement in activities where appropriate
- asking service users and/or their families which festivals and special days they would like to celebrate, and how they would like to observe these occasions
- asking service users and their families or support personnel to determine what is needed to facilitate their involvement in recreational activities.

Diversicare is a division of the Ethnic Communities Council of Queensland, and have a range of resources to equip organisations to deliver culturally appropriate care. Diversicare's 'Little Book of Cultural Tips' aims to assist all staff involved in the community, aged care and health industries in the provision of culturally appropriate support and care, by increasing their awareness in areas where cultural sensitivities may exist, and wherever possible providing some tips and information sources.

Chapter 2 of the 'Little Book of Cultural Tips' is focussed on effective communication with service users, and outlines the following strategies to improve communication:

- prepare and plan before meeting with the person (for example, read up about the person's culture prior to meeting with them, and if language is an issue, be sure to arrange an interpreter)
- when meeting with the person:
  - explain what you are doing
  - speak clearly in a normal tone of voice
  - provide information in an easy-to-follow sequence
  - make use of short open questions
  - be aware of your pitch, how loud or softly you are speaking, and the speed at which you talk
  - ensure a private setting without noise or distraction
  - avoid pressures or internal feelings causing distractions (for example, thinking about an upcoming appointment)
- be receptive to the results of your communication by:
  - practicing active listening with an open mind
  - observing gestures, facial expressions and body language
  - asking the person about things you are unsure of (they are the experts in their own lives and cultures)
  - being patient and empathetic
  - ensuring you do not complete sentences for the other person
- build trust as a strong foundation for future communication by:
  - respecting differences and working together
  - choosing humour carefully
  - being aware of confidentiality
  - avoiding making assumptions, judgmental comments and stereotyping
  - remembering that observation is the key to communication.

Diversicare has also published a range of cultural profiles which support organisations in delivering culturally appropriate care. The profiles provide an overview of various cultures.

The Centre for Cultural Diversity in Ageing also has a range of multilingual resources to help with communication including bilingual phrase cards, communication cards, and interpreter cards.

■ Promoting your service

Marketing your service in a variety of ways will help build positive awareness of your organisation and the work you do. It will also help to reach people who may be interested in accessing your service.

Some of the different methods you can use to market your organisation include:

Online
Online platforms can be a cost-effective way to advertise your program, including:

- a website outlining your service and the activities you offer
- social media (Facebook in particular has been identified as effective as services can be promoted on community groups)
- list your service on My Community Directory
- list your service on Ask Izzy.

Local media
Linking in with local community radio stations and local newspapers to advertise your program can extend your organisation's reach to a wider audience.

Posters or flyers
Posters or flyers can be easy to design and distribute. You should include the following information on them:

- your organisation name/logo
- a brief description of your service/the activities you offer
- the location of the venue
- your organisation's contact details or website.

You could deliver the posters/flyers to services and retailers. There also may be community noticeboards at the local supermarket, library, neighbourhood or community centre, GP waiting room or post office where you can display your poster/flyer. You could also place flyers in people's letterboxes in your local area.

Newsletters
Many services use newsletters as a way of sharing regular information to stay connected to their members, but also as a way of letting others know about their service. You could deliver your newsletters to organisations in your local area including medical and allied health practices. You could include the following in your newsletter:

- information about your organisation, including the program of activities
- upcoming community events
- phone numbers and details about other local services
- other content that may be of interest and keep people engaged, such as recipes, puzzles, trivia questions etc.
- other important information (for example, preparing for disasters).

Information stalls at community events
Having an information stall at community events or local markets is another good way of promoting your organisation, as it may help you reach community members that are not yet linked with other services. Some not-for-profit services use local markets as both a way of promoting the service and also as a fundraising opportunity.

Active outreach
Some organisations have tried doorknocking in their local community as a way of letting older people know about their service. While this approach can be time-consuming, it can be successful in reaching older people who you may not be able to reach through other means.

Some older people find it difficult to leave their home due to multiple barriers, which may include physical or mental health issues. As a result of feeling socially isolated, they may not feel comfortable enough to reach out to services. Having a conversation on their doorstep can help to create a personal connection and make them aware of the supports your organisation provides. You could talk to them about what they enjoy about living in their neighbourhood, whether they feel connected with the wider community, as well as what some of the challenges they are facing are.

You could also visit organisations in your local area and talk to them about your service. This can help to increase the visibility of your organisation particularly if you are in a rural or remote area. Connecting with aged care providers is a good starting point, as they may be providing support to older people that would benefit from what your service offers. Other organisations that you could visit to let them know about your service include:

- neighbourhood or community centres
- community organisations who provide support to older people
- medical centres
- allied health practices (for example, physiotherapy clinics, hearing clinics etc.)
- pharmacies
- local hospital or health services
- Rotary Clubs, Lions Clubs and RSL (the Returned and Services League) sub-branches.
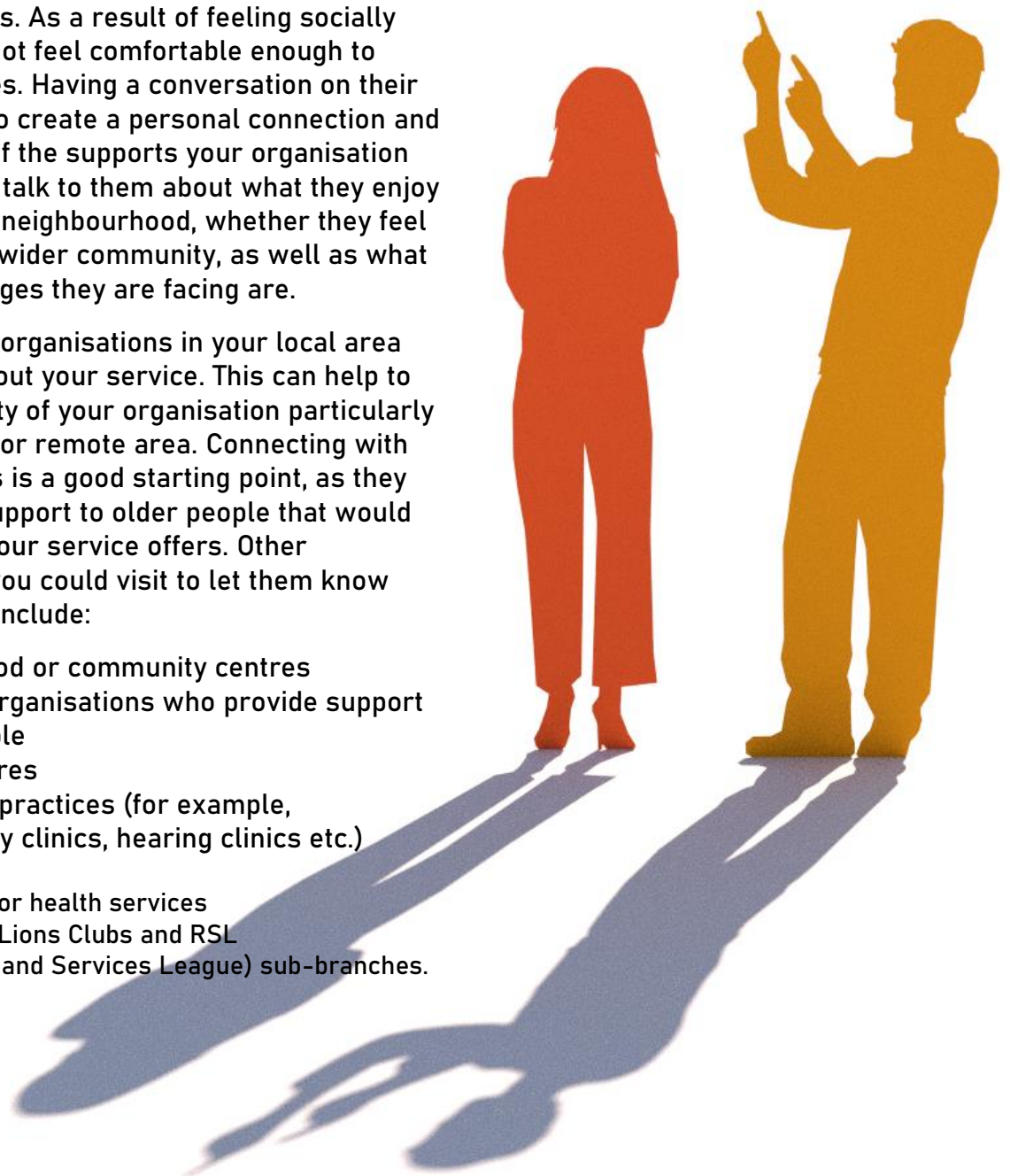
Connecting with the peak body for older people
If you want to make your voice heard by government on issues relating to older people, engaging with a peak organisation/body can help to do this.

A peak organisation is a non-government organisation that represents the interests of a specific community or sector. Their membership consists of other organisations of allied interests. Peak bodies offer a strong voice for the specific sector, through undertaking peak roles which include:

- research and policy development
- providing advice to government and their sector
- advocacy and representation to government and other decision makers
- information sharing within their sector and to the community
- sector consultation and coordination within their sector
- sector capacity building to enable better service delivery.

"If you want to make your voice heard by government on issues relating to older people, engaging with a peak organisation/body can help to do this."

Council on the Ageing (COTA) is a peak body representing the interests and views of older Australians. COTA advocates, informs and influences both federal, state and local government, the business sector and the general community to deliver better outcomes for people aged 50 and over. There is a COTA in each state and territory. COTA is invited to sit on a wide range of forums, committees, consumer advisory groups and research bodies which have the power to bring about change. Members represented by COTA have opportunities to directly contribute to the identification of issues and the development of policy.

Learn more about COTA Queensland here – Homepage – COTA QLD.

■ Making referrals

How to make a referral?

A referral is the process of connecting someone to other information or another service that will support them to meet their individual needs. All referrals should be made in consultation with the person, and with their informed consent. Informed consent means that the person agrees to the referral with a full understanding of:

- why the referral is being made
- what the service they are being referred to will provide them
- alternative services available.

If there are a variety of services to choose from, it can be helpful to present the person with a range of referral options and let them decide what services they want to use. Referrals are much more likely to be effective if the person is involved in deciding what service is most appropriate for them. When it comes to referring people to other organisations or services, there are a few different ways to do this. The three different types of referrals are known as[32]:

	Definition	Follow up
1. Information provision	Providing the person with verbal or written information (such as a brochure) about other services and encouraging the person to contact the service or organisation independently. While warm or facilitated referrals are generally more effective, some people may prefer to receive information about services.	If you provide someone with information about a service, it is a good idea to check with the person at a later time if they have made contact with the service. If they haven't, explore the reasons why. If the person is experiencing barriers with contacting the service, they may benefit from a warm or facilitated referral.
2. Warm referral	Contacting the organisation with the person. Examples of a warm referral include: - Completing a referral form with the person - Phoning the organisation with the person to make introductions and share information.	Ways to follow up on warm referrals include contacting the organisation to see if your referral has been accepted, and what their plan is for engaging with the person. It is important to obtain consent from the person to contact the organisation. You should also check in with the person from time to time to find out if they are receiving the required support from the organisation they were referred to.

| 3. Facilitated referral | The worker provides relevant information to another organisation, makes arrangements for the person to attend, and/or attends the organisation with the person for the initial appointment. An example of a facilitated referral may involve providing the organisation with comprehensive information about the person you are referring, so that the person does not have to repeat their story. You may then attend the initial appointment with the person at the organisation's location or invite the worker to meet you and the person at your service, to assist the person in building rapport with the new organisation. | Even though you may have attended the initial appointment with the person, it is important to keep in contact with both the organisation and the person to see how things are going and whether it is the right service for them. Once again, make sure that the person provides consent for you to keep in touch with the organisation you have referred them to. |

The type of referral you make will depend on the person you are working with, taking into consideration their needs and their preferences. It is generally more effective, and useful for the person, if the service provides either a warm or facilitated referral, rather than simply giving the person a contact number or brochure.

A facilitated referral is considered best practice as it:

- increases the chance that the person will engage with the organisation, as they have already been introduced to the organisation by the referrer
- facilitates the development of trust between the person and the organisation they have been referred to
- reduces barriers to the person engaging with a service or organisation (for example, social anxiety, lack of confidence or motivation, transport issues etc.)
- can help ensure that all organisations engaging with the person are 'on the same page' and not duplicating supports.

However, it is important to ask the person what type of referral they would like, as some people may prefer to contact the service directly themselves.

Before making a referral, it can be helpful to contact the service you are intending to refer to, to make sure that it is an appropriate referral, and to find out about waiting times and if there are any costs involved.

If your service offers group activities, it can be helpful to use the group for peer support. If two people are experiencing similar issues, you could offer to connect the people (providing both provide consent to do so). Peer support is a valuable way of increasing a person's social connection, and also enabling them to connect with someone who has similar lived experience.

Finding appropriate services

There are several tools that you can use to find out what services are available in your local area. The Seniors Enquiry Line will provide information to you over the phone, whereas My Community Directory and Ask Izzy are online service directories where you can search for services in specific locations.

Seniors Enquiry Line

Seniors Enquiry Line is a free, state-wide information and referral service funded by the Queensland Government. This program provides support and information to Queensland seniors, their families, friends and carers. Callers will be connected to a real person to answer any questions around topics such as:

- concessions
- consumer issues
- financial services
- health
- home help
- housing options
- legal services
- scams
- social and leisure activities
- technology
- transport.

Phone: 1300 135 500

seniorsenquiryline.com.au

My Community Directory

My Community Directory lists organisations that provide services that are free or subsidised to the public in thousands of locations across Australia. These services are aligned into various Community Directories.

You can use My Community Directory to find community services and events in your local community.

My Community Directory

Ask Izzy

Ask Izzy is a website that connects people in need with housing, a meal, financial help, family violence support, counselling and much more. Ask Izzy is used by service providers, government agencies, and corporate hardship teams across Australia to help service users find support.

Ask Izzy

Aboriginal Community Controlled Health Organisations (ACCHOs)

Creating a connection with the local Aboriginal Community Controlled Health Organisation (ACCHO) is important, as they offer a culturally safe service for Aboriginal and Torres Strait Islander people. An ACCHO is a primary health care service initiated and operated by the local Aboriginal community to deliver holistic, comprehensive, and culturally appropriate health care to the local community. ACCHOs provide flexible and responsive services that are tailored to the needs of local Aboriginal and Torres Strait Islander communities. In line with their holistic health approach, ACCHOs support the social, emotional, physical and cultural wellbeing of Aboriginal and Torres Strait Islander peoples.

The National Aboriginal Community Controlled Health Organisation (NACCHO) is the national peak body representing 145 ACCHOs across the country. You can find your nearest ACCHO with the NACCHO members and affiliates map.

Neighbourhood and community centres

Linking in with the local neighbourhood or community centre is important as they are often a key hub in the community. Neighbourhood and community centres provide tangible support and assistance to local communities, particularly people and groups who face hardship and vulnerability. Neighbourhood and community centres across Queensland offer a diverse range of programs and activities.

In the 'about social isolation and loneliness' section the concept of 'social prescribing' was discussed. Social prescribing is a way of linking people with supports in their community, via a Link Worker. Neighbourhood and community centres, and particularly centres with a Community Connect worker, often play this linkage role. Community Connect workers are based in 30 Neighbourhood Centres across Queensland to support individuals and families with complex needs. This service helps link people to community and specialist support services, through referrals and tailored support. You can find where Community Connect workers are available here. Neighbourhood and community centres have in-depth knowledge of local people, networks, resources, and challenges. If the service the person requires is not able to be provided by your local neighbourhood and community centre, the centre will be able to refer the person to the right service.

Your role in the referral process would be to:

1. Recognise when a referral to the neighbourhood and community centre might be beneficial for the person. For example, in situations where you might not be aware of a clear referral pathway for them, or if the person has complex needs.
2. Provide the person with a facilitated referral to the neighbourhood or community centre. This will involve you providing relevant information to the neighbourhood or community centre and introducing the person to a worker at the centre. Having an existing relationship with your local neighbourhood and community centre will help you do this.
3. Regularly check in with the person to find out if their concerns are being addressed through the referral.

Below is an example of when a referral to a Neighbourhood and Community Centre may be beneficial:

A person mentions that they are struggling to pay their bills. You have a chat with them to find out what is going on for them so that you can refer them to an appropriate service, and learn that their income support payments have stopped. By referring the person to the local neighbourhood and community centre they may be able to address the situation more comprehensively by providing or linking the person with:

- emergency relief such as food vouchers or hampers
- support to contact Services Australia and complete any required paperwork to reinstate income support payments
- support to apply for various concessions and rebates to reduce their household bills
- financial counselling.

Building a relationship with your local neighbourhood or community centre and making them aware of your program is also important, as they may come across people that could benefit from what you offer. You can find many Neighbourhood and Community Centres here.

Care finder program

The care finder program provides support for vulnerable older people to interact with My Aged Care, access aged care services and access other relevant supports in the community. Care finders play a linkage role in the aged care system.

Their role is to:

- help people understand and access aged care and connect with other relevant supports in their community
- target people who have one or more reasons for requiring intensive support to interact with My Aged Care and access aged care services and other relevant community supports.

Some older Australians need extra support to navigate the aged care system and use My Aged Care channels because of:

- communication and language barriers
- difficulty processing complicated information
- reluctance to engage with a need for support
- reluctance to engage with government services

Care finders support people who don't have family, friends, a carer or a representative they are comfortable receiving help from and who is willing and able to help them access aged care services and supports.

A list of care finder organisations is available on the My Aged Care website.

Services in regional, rural or remote areas

Health services

Local health services, such as GP practices in rural, regional and remote areas can be a useful point of contact to find out what services and supports your service users may be eligible for, and how to link in with these.

Local councils

Local councils have an important role in supporting the economic, social and environmental wellbeing of their communities. Many councils in rural, regional and remote areas would be familiar with the various organisations and services that exist in their community, which makes them a good contact point to find out what services and supports are available in your locality. Some local councils in rural, regional and remote areas may even be involved in delivering various supports and services, such as community hubs. The Queensland Local Government Directory provides contact details and locality maps for Queensland's 77 local governments.

Building referral networks

As you get to know your service users, it is highly likely that you might identify unmet needs or areas where they require further support. Given that you have built rapport with your service users, they may approach you for guidance on what services they can access to address various issues.

Having knowledge of the services in your local community, and developing relationships with those services, is vital to ensure that your service users have an effective pathway to the supports they require. Working with other organisations, either through informal networks or formal partnerships can provide:

- access to additional resources or lower costs through sharing resources
- improved service coordination across agencies, with better pathways or referral systems for service users
- a holistic approach to meeting service users' needs, with better and more efficient access to the range of services required
- organisational knowledge
- access to up-to-date information.

Ways to build your relationships with other services and referral networks include:

1. Attending interagency or network meetings. Interagencies or networks are a collection of services who come together regularly to share information, updates, and issues. They are a great way to keep up-to-date with the services and programs available in your region. There are interagencies/networks that are more general for all community organisations in a region, but in some regions there may be a dedicated aged care/seniors network. These networks might be facilitated by your local council or an organisation in your area. Interagency or network meetings often provide the opportunity for a guest speaker to talk about their service or a particular issue. Being a guest speaker every now and then at these meetings is a good way to promote your service.

2. Connecting with the local council. In rural, regional and remote areas in particular, the local council may be able to connect you with other services in the community. They may also be aware of opportunities or events that can help you build relationships with other services.

3. Seniors Expos. Seniors Expos are held in different areas throughout Queensland. At these expos, community organisations and government departments come together to provide information to older people and showcase programs on offer. These expos also provide an opportunity for organisations to become familiar with what is available for older people. Find out more about Queensland Government Seniors Expos here.

4. Visiting services in your local community. Let them know what your service provides and find out about their service. Making a connection with workers from different services will strengthen your referral networks and also benefit your service users, as you may be able to personally introduce your service users to the worker during the referral process. Other organisations may also have channels where they can promote your service.

As you come across different services in your community and become familiar with what they do, it can be helpful to keep these details in one handy place so you can refer back when needed.

■ Reporting service activities

Services that receive funding from the Queensland Government to provide social isolation programs for seniors are required, as part of their service agreement, to provide reports that indicate how the funding is being utilised. Within each reporting period, services are expected to report on a number of areas which include the following, noting that the specific requirements may change from time to time:

- outputs, for example, the number of hours provided during the reporting period and number of service users who received a service during the reporting period;
- demographics, for example, the number of service users identifying as Aboriginal and/or Torres Strait Islander or culturally and linguistically diverse backgrounds, age and gender;
- outcomes, for example, the number of service users with improved social connectedness; and
- other, for example, upload a case study report.

Services are expected to maintain up-to-date information on the current service system and supporting services and empower older people to utilise the information and referrals offered.

Organisations may also be required to report on assisted referrals and follow-ups made. Records of any needs identification processes must be kept as these are useful for determining the service user's needs and risk factors and ensure that any advice provided is personalised and tailored to their situation, support needs and support goals. Recording and reporting on these needs enable the successful linking of service users to services identified as suitable for their needs.

Further information about reporting requirements for services funded by Queensland Government are available at (Investment specifications - Department of Child Safety, Seniors and Disability Services (dcssds.qld.gov.au)).

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