



University of
Salford
MANCHESTER



DEVELOPING AGE-FRIENDLY COMMUNITIES IN AN EMERGENT POST-PANDEMIC WORLD

Phase 1

Stakeholder Focus Group Report

MAY 2023



Report Authors

Dr. Eve Blezard (University of Salford)

Prof. Andrew Clark (University of Salford)

Prof. Anya Ahmed (Manchester Metropolitan University)

Author for Correspondence

Prof. Andrew Clark

School of Health and Society

University of Salford

Salford

M5 4WT

Email a.clark@salford.ac.uk



Remarkable research
for healthy ageing

THE DUNHILL MEDICAL TRUST

Contents

Acknowledgements	2
Glossary.....	2
1. Introduction.....	3
1.2 Research Design, Data Collection and Analysis	5
1.3 Ethics.....	5
2. Reflections on the Post-Pandemic Legacy	6
2.1 Looking Back.....	6
2.2 Section Summary	14
3. Establishing Legacies: Moving through Covid-19	16
3.1 Understanding Post-pandemic Challenges	16
3.2 Exploring Post-pandemic Opportunities.....	20
3.3 Section Summary	26
4. Developing Strategic Responses.....	28
4.1. Addressing Continuing Challenges	28
4.2 Moving Forward Together	30
4.3 Section Summary	33
5. Conclusion.....	35
6. Key Takeaways	37

Acknowledgements

The project team would like to extend thanks to the service providers and organisations who took the time to speak about their experiences. Particular thanks go to Inspiring Communities Together, the Age Friendly Salford Team and the Project's Advisory Board for supporting the work. The project team would also like to thank the Dunhill Medical Trust for funding the work as part of its Building and Developing Suitable and Sustainable Living Environments and Communities for an Ageing Population.

Glossary

The following terms are used within the report:

1. **Pre-pandemic** – References the time period prior to March 2020.
2. **Lockdown** – Refers to periods of legal restrictions put in place by the UK Government to reduce interaction and slow the spread of the virus. These periods are identified as late March to June 2020, the four weeks from 5 November 2020 and the final lockdown period of January to March 2021.
3. **Post-Pandemic** - This refers to the period after July 2021 when all lockdown restrictions were lifted, but in the context of this report is used to refer to ongoing or current circumstances. The use of this term should not be taken to imply that the authors consider Covid-19 to be over.
4. **Service Provider** – Individuals or organisations who manage, oversee or deliver activities with or for older people.

1. Introduction

This report details interim findings from the 'Developing age-friendly communities in an emergent post-pandemic world' research project. The work is funded by The Dunhill Medical Trust and is being completed by a partnership led by the University of Salford with Inspiring Communities Together and Manchester Metropolitan University.

The work investigates the legacy impact of the Covid-19 pandemic on older people's social connections and aims to develop evidence-based recommendations on how older people can continue to be supported in place. Across the UK, older people are reported to have been disproportionately negatively affected by the disease and restrictions imposed to limit its risks¹. Such impacts include reduced physical activity and, potentially, heightened isolation. However, we do not yet know the full impact of the pandemic on how older people are able to remain socially connected in the places where they live, nor do we understand how age-friendly initiatives can encourage and support older people's social (re)connections over the coming years. In response to this, the project addresses the following questions:

- How have older people made connections within and around their environments during the pandemic, and what can we learn from this as we move out of it?
- What has the impact of Covid-19 been on older people and their living environments, and how can the development and adaption of new and existing support activities help age-friendly places to succeed?
- How have activities for older people changed, and might these continue to adapt post-Covid-19?

The work is being completed across the five following phases:

- Phase 1: Focus groups with individuals from organisations that support older people or develop policies to support them.
- Phase 2: Interviews with older people to gather new insight into their experiences of accessing and engaging with remote support and engagement activities.

¹ Office for National Statistics (2020) Coronavirus and the social impacts on older people in Great Britain
Coronavirus and the social impacts on older people in Great Britain: 3 April to 10 May 2020. Available online at:
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/ageing/articles/coronavirusandthesocialimpactsonolderpeopleingreatbritain/3aprilto10may2020>

- Phase 3: Completing an audit of age-friendly locations, services and businesses
- Phase 4: Engaging in a series of ‘Conversations about Ageing’, led by older people, based on the findings from Phases 1, 2 and 3
- Phase 5: Developing recommendations and informing others of the findings and recommendations of the project.

The project began with a preliminary Phase 0, which included participatory design and community mapping to develop relationships prior to commencing Phase 1. Although the work is being undertaken in the City of Salford in northwest England, it is expected that the findings will find meaning and resonance nationally and internationally.

1.1 Aims of Phase One

- To investigate how organisations have developed activities relating to age-friendly initiatives online; identify aspects of good local practice; and explore challenges and barriers to providing activity at a distance
- To identify individuals and groups of older people who may have experienced (unexpected) benefits of online delivery and identify individuals and groups who may have been (unintentionally) placed at risk of heightened marginalisation
- To gather data on and analyse how older people have experienced requesting, accessing and participating in online support and engagement activities
- To consider the opportunities and challenges of maintaining some aspects of remote support and engagement activities as part of the age-friendly initiatives post Covid-19.

This report presents the findings from Phase 1, which comprised a series of focus groups and interviews with key community stakeholders, groups, and service providers. These were organisations from across the City of Salford that either support older people, provide community services that include older people or develop policies that support older people.

The report presents the findings through the following main sections:

- Reflections on the post-pandemic legacy
- Understanding Challenges
- Exploring Opportunities
- Developing Strategic Responses

1.2 Research Design, Data Collection and Analysis

The data were collected through nine focus groups and two interviews with 37 individuals representing 11 service providers that support older people or develop policies to support them. Provision included housing, neighbourhood management, health and social care, emergency services, crisis support, and other more general support drawn from the public and voluntary sectors.

Two focus groups were held face-to-face, seven were delivered online, and one interview was held online, the second face-to-face. Online sessions were favoured as they enabled various individuals from differing locations to participate easily whilst also minimising risks of Covid-19 transmission.

Within the sessions, the discussions were guided by four sets of questions exploring service delivery during and post-pandemic, broadly covering the following topics:

- 1. Moving activity to a distance delivery**
- 2. Challenges of service delivery**
- 3. Locations of service delivery**
- 4. The future of service delivery**

Participants were recruited through existing networks from the Age-Friendly Salford Team and previous collaborative community development and research projects in Salford. Participatory Planning work in Phase 0 identified additional service providers, including a comprehensive mapping exercise of current age-friendly provision across the City.

The data were analysed using thematic content analysis and text coding based on a framework built around the research aims and focus.

1.3 Ethics

Ethical approval was granted by the University of Salford School of Health & Society Research and Enterprise Ethics Panel (Ref. 4679). To preserve anonymity, the report does not use the real names of individuals or service providers involved in the focus groups and interviews.

2. Reflections on the Post-Pandemic Legacy

This section explores the impact of the pandemic on services and support for older people. It seeks to understand the key shifts and challenges, particularly during the pandemic. While the project itself focuses on activities, experiences and requirements in the later and current phases of the Covid-19 pandemic, experiences during the core period of the pandemic – what was termed ‘lockdown’ in the UK - inevitably impacted, and continue to affect, service delivery, as well as staff and service providers. A precursor to the current study documented some of this impact². It is clear that service providers continued to be impacted by the challenges of delivering support during the UK's core lockdown periods, evidenced by their references to this time to contextualise current practices.³

2.1 Looking Back

2.1.1 Shifts in Sites and Modes of Delivery

Service providers highlighted that the closure of key spaces and buildings greatly impacted how services operated. Some services had to be suspended, and subsequently closed, whilst others were greatly reduced or adopted new delivery modes. These decisions were typical organisational responses to managing the “risks” around covid, complying with Public Health England’s advice and UK Government law and regulations:

“We stopped doing activities, we closed the communal spaces. Because we had to adhere to the guidelines, obviously we weren’t promoting any social activities.” (Service Provider 1)

Service providers reported that their delivery mode moved towards more emergency and relief provision in key lockdown periods. This mirrors changes in the operation of

² Clark, A. J., Kelly, S., Chesterton, L., & Ahmed, A. (2021). Does local still matter? An evaluation of the importance of geographical locality for the delivery of remote support for older people in Salford during the Covid-19 pandemic-summary report. Available online at <https://usir.salford.ac.uk/id/eprint/61319>

³ The first lockdown period began on 26th March 2020 until 24th June 2020, the second was a four week period beginning 5th November and the third period began on 5th January 2021 with a tiered ease of restrictions that concluded on 17th May 2021 (see Institute for Government [2021]: Time of UK coronavirus lockdowns, March 2020 to March 2021. Available online at; <https://www.instituteforgovernment.org.uk/sites/default/files/timeline-lockdown-web.pdf>

many organisations across the UK more broadly⁴ as part of wider pandemic responses shifted to support local communities. In Salford, much of this activity was co-ordinated through ‘resilience forums’ that brought providers together to rapidly address issues:

“And the focus of those resilience forums really were around public health messages, outreach and engagement activities, making sure support was being delivered to vulnerable people - whether that be CVS [Community and Voluntary Services] delivering food parcels, support services to people that might not be able to leave the house or might have been vulnerable.” (Service Provider 2)

Modes of interaction with older people shifted with a dramatic reduction in face-to-face, home-based and community activities and services. It is important to note that this interaction with providers has not returned to pre-pandemic levels for reasons that we consider later in the report. Service providers reflected on the sharp decline in engagement, particularly in the earlier stages of the pandemic and when any lockdown restrictions were in place due to the limitations on social interaction and public spaces:

“Yes, our major provider of rooms just closed basically, so we depended on one provider for rooms for about 20-odd activities, which is the majority of our activities, and they just closed down. So, we had to immediately think about how we would run those activities, if at all, online.” (Service Provider 3)

Service providers had to develop alternative delivery modes through remote and socially distanced options, some of which continue. This mainly involved increasing digital and telephony solutions alongside doorstep delivery and visiting, but also challenged providers to think differently about their primary modes of delivery to enable engagement:

“So, then we could set up a group online because people were desperate; they needed contact with others. So, we started delivering Zoom group sessions online because, before that, everything had been face-to-face.” (Service

⁴ Greer, V., Canham, S. L., Hong, A., Agutter, J., Garcia Zambrana, I., & Van Natter, J. M. (2023). Aging in place through the COVID-19 pandemic: perspectives from aging service providers. *Journal of Applied Gerontology*. Available online at <https://doi.org/10.1177/07334648231159375>

Provider 4)

2.1.2 Challenges in Service Transitions

Despite the ability to implement rapid and diverse solutions in response to lockdown restrictions, service providers reflected on the challenges of service transitions. They highlighted that some adapted and new delivery modes are not always suitable for all older people because of digital and social exclusion issues. This reflects wider ongoing concerns about reducing socialisation and adequate support levels.⁵ For service providers with a strong physical community presence, the transition to remote delivery was particularly complex and challenging:

“I'd say there's only certain aspects that we can do remotely or agile. Compliance checks, physical checks, going into tenants' properties. There's only I'd say a small percentage of the role that we can do in a remote way.”
(Service Provider 1)

Many of the challenges in the transition to remote delivery stemmed from the difficulties of online reach and the digital exclusion of older people, particularly those more vulnerable. Significant digital upskilling was sometimes required for community members, volunteers, and some staff members. Furthermore, for some service providers, often, a digital mode of delivery was viewed as unsuitable:

“That we deliver is mostly a face-to-face service, so the key thing we deliver are the...our demographic is in the main single people. There are couples who are in the organisation, but without making a big thing of it, a lot of our...lots of the people who join us are recently bereaved or recently retired and are lonely because they miss that work base or that relationship base, so it's a face-to-face thing. And I'm not sure that a web-based or an online service would cut the mustard with people like that.” (Service Provider 3)

⁵ Gaertner, B., Fuchs, J., Möhler, R., Meyer, G., & Scheidt-Nave, C. (2021). Older people at the beginning of the COVID-19 pandemic: A scoping review. *Journal of Health Monitoring*, 6(Suppl 4), 2. Available online at <https://doi.org/10.25646/2F7857>

Additional challenges were experienced with the delivery of home-based services where remote or digital options were not logistically possible⁶:

“If you’re doing shopping and cleaning for people in Salford then that’s not something you can do remotely, is it? You can’t clean somebody’s house remotely.” (Service Provider 4)

The pandemic created significant barriers to delivering services in home-based settings, and it was found that digital and remote modes were inevitably not always appropriate or possible. Additionally, it was reported that some older people reduced face-to-face contact to minimise their risk of infection, leading to a decrease in overall client interaction:

“I think, as well, that particularly maybe the elderly didn’t report things as much because they were concerned about going to houses; I think there was more done over the phone, rather than face-to-face.” (Service Provider 5)

Tackling barriers in face-to-face service delivery prompted recognition of the value of home-based, local, and face-to-face services for older people. Some service providers raised concerns regarding the possible adverse impact on older people’s health and well-being due to reduced levels of support and engagement:

“So, I think again, the older people, perhaps would have been too scared to attend hospital when really, they should have done, as much as they were probably unable to contact the police because they haven’t got the same kind of ability to use a mobile or report something online or felt too in fear. So, I would imagine there was a lot of stuff that just went under the radar really but the same with people’s health, just around that, either that lack of ability or probably more around the fear and wanting to isolate.” (Service Provider 5)

Service providers also recognised that the pandemic had exacerbated, rather than

⁶ Tur-Sinai, A., Bentur, N., Fabbietti, P., & Lamura, G. (2021). Impact of the outbreak of the COVID-19 pandemic on formal and informal care of community-dwelling older adults: Cross-national clustering of empirical evidence from 23 countries. *Sustainability*, 13(13), 7277. Available online at <https://doi.org/10.3390/su13137277>

created, social isolation and hardship among older people:

“We’ve always had difficult cases and some horrible things that have come out in the wash as part of our work. But COVID just put a magnifying glass on. You know, the people had been using Morrison’s Cafe to survive because that’s how they got food in their social circle, and that got cut off.” (Service Provider 6)

The heightened levels of social isolation exemplify the challenging contexts in which services supported older people during the pandemic and also highlight the wider socio-economic gaps that can create barriers to age-friendly provision⁷. Service providers' experiences also highlight the personal and emotional impact on staff during key lockdown periods.

2.1.3 Impact on Working and Volunteering Conditions

Service providers looked back to key lockdown periods to make sense of the enduring impact on their working conditions. Much of this is centred around the shift to increased digital and agile working, demand levels, and the emotional impact of the pandemic.

In line with the wider population, service providers saw a rapid and sharp increase in remote and home working, often new to many.⁸ They also echoed the wider issues felt nationwide around the challenges and frustrations of digital connectivity and reliability when working from home. This was particularly the case earlier in the pandemic when new software and hardware were adapted for more front-facing staff with limited digital experience⁹. The suitability of working from home was discussed alongside the wider personal and emotional impacts caused:

⁷ Greer, V., Canham, S. L., Hong, A., Agutter, J., Garcia Zambrana, I., & Van Natter, J. M. (2023). Aging in place through the COVID-19 pandemic: perspectives from aging service providers. *Journal of Applied Gerontology*. Available online at <https://doi.org/10.1177/07334648231159375>

⁸ Less than 3% of people in the UK worked solely from home pre-pandemic, but this had increased to over 30% by April 2020 (Institute for Social and Economic Research (2020): Understanding Society: COVID-19 Study, 2020. Available Online at, <http://doi.org/10.5255/UKDA-SN-8644-6>

⁹ Parry, J., Young, Z., Bevan, S., Veliziotis, M., Baruch, Y., Beigi, M., Bajorek, Z., Salter, E. and Tochia, C., (2021). Working from home under COVID-19 lockdown: Transitions and tensions. Available online at https://eprints.soton.ac.uk/446405/1/Work_After_Lockdown_Insight_report_Jan_2021_1_.pdf

“We had a lot of Zoom fatigue. A lot of our team members went through that sort of phase, because we did have a hybrid model before, then we were all online, and we were absolutely exhausted looking at a screen. And the emotions of people as well were heightened. So, we were taking all that on as well, and we were exhausted.” (Service Provider 4)

“I think it was the being there day-to-day because we were short of staff ourselves, we had staff who weren't in work, staff who were isolating, staff who were home schooling. I think there was very few who was a constant throughout the pandemic, through one thing and another. So, I think we really struggled.”(Service Provider 1)

As with many other organisations during the height of the pandemic¹⁰, service providers found that new and different ways of working, coupled with demand for diverse channels of communication led to an increased workload, some of which was associated with expanded digital streams of interaction:

“I think along the way, technology taking over, we are losing that a little bit and because Teams has made meetings so easy, the demand on us for meetings is a lot more. So, my meetings have probably quadrupled because of COVID. So, I don't think we ask ourselves anymore, do we actually need this meeting, we just do it because it's easy, because we're on [Microsoft]Teams.” (Service Provider 5)

When looking back on lockdown, many used emotive language to explain their experience and its enduring impact. Service providers' use of terms such as "struggled", "emotional", "challenge", and "scary" reflects the extent of the impact experienced on working and personal conditions. For some, the discussion within the

¹⁰ Madero Gómez, S., Ortiz Mendoza, O. E., Ramírez, J., & Olivas-Luján, M. R. (2020). Stress and myths related to the COVID-19 pandemic's effects on remote work. Management Research: Journal of the Iberoamerican Academy of Management, 18(4), 401-420. Available online at <https://doi.org/10.1108/MRJAM-06-2020-1065>

focus groups prompted a realisation of the challenges that they had faced during that period:

“Because we’ve all got used to it now, haven’t we, two and a half years on but it really was quite scary living it at the time.” (Service Provider 6)

As mentioned in the previous section, service providers reflected that key lockdown periods sharply brought into focus social inequalities and deprivation in the City. For some staff, this meant they were exposed to crises and emergencies that could be emotionally complex to process:

“And I think what was really interesting was a lot of staff who weren’t from, what you call, frontline traditionally, were being asked to deliver food parcels whether it was to schools or for older people. And I think one of the challenges for me as the manager was the emotional challenges for staff.” (Service Provider 6)

2.1.4 Stronger Working Relationships

Whilst service providers reflected on the many challenges that working throughout the pandemic created, they also discussed the positive impact on their working relationships. The ongoing impact of those relationships is explored in more detail later in the report; here, it is important to consider where this originated to help understand what this means for working partnerships post-pandemic.

In line with global pandemic responses, service providers referenced the need to work with a wider range of partners, particularly in delivering crisis and humanitarian responses¹¹. This was described as an "all hands-on deck" approach bringing service providers together under "one big team". In addition, it was reported that the solidarity of living and working through a crisis led to more empathic interactions. This was felt to have the possibility to create more positive and stronger working relationships, potentially leading to more effective partnerships:

“And the opportunities were that yeah, very much that we were such a close-

¹¹ Pendergrast, C. (2021). “There was no ‘that’s not my job’”: New York Area Agencies on Aging approaches to supporting older adults during the COVID-19 pandemic. *Journal of Applied Gerontology*, 40(11), 1425-1436. Available online at <https://doi.org/10.1177/0733464821991026>

knit partnership that we were able to really support our communities closely and the communication was a positive for us all.” (Service Provider 2)

Post-pandemic, service providers also reported personal benefits from improved work-life balance, primarily due to home and agile working. In addition, some reported reduced travel time, increased effectiveness and improved technology and digital capacities.

Furthermore, some people have found revealing their 'human' side easier, and caring responsibilities and home situations are more readily discussed and considered:

“There's been that shift in consciousness, or whatever, that I find people are more warming to each other, caring.” (Service Provider 4)

The 'shift' towards more empathetic interactions indicates that the pandemic resulted in more caring and understanding relationships in the workplace. Many reported stronger relationships between colleagues and clients developed through the shared experiences of the pandemic:

“Because we were in a normal house, and we had the doorbell going and dogs barking and kids there and things. So, I think they saw us as well as just a normal person. And what we saw as well is more carers asking how we were, which had never been before. But I think that was the trust and the bond as well, that was going on at that time, that people were really concerned for each other more so than what they would have been.” (Service Provider 4)

Therefore, it seems that lockdown periods led to opportunities that have enabled service providers to strengthen working relationships post-pandemic. Service providers reflected that as they had come together to deliver humanitarian responses, they maximised the opportunity to forge closer relationships as they navigated the crisis, creating “camaraderie” through adversity:

“You almost felt as though, you know, we were all in the same boat and we were all serving the same...you know, we were all trying to do our best for the residents of Salford so there was a bit of camaraderie, I suppose that came out

of it as well which I'm happy to say has continued.” (Service Provider 8)

The need for a wide-scale response across the City brought multiple partners together in a more positive and diverse “network”. These partnerships may not have occurred to the same degree outside of pandemic conditions, with increased volunteering and connections with local businesses, community groups and organisations. As well as developing personal relationships, this then increased understanding of different groups and services and their challenges, often resulting in greater appreciation and mutual respect:

“I think it really strengthens...not strengthens...well yes, strengthened the existing partnerships that we already had, that were already in place, but I think that's certainly brought us closer together as a city.” (Service Provider 7)

The benefits of increased joined-up working that helped foster new working partnerships and strengthen existing ones are explored further in the discussion of legacies.

2.2 Section Summary

This section summarises the key changes and continuities arising from service providers' reflections on working through a pandemic and explores the ongoing legacies of this period.

Providers recognised that the implementation of lockdown had reduced services and activities delivered in community venues, some of which have not returned to pre-pandemic delivery levels. While service providers had reflected on their rapid adaptability to expand their remote and digital offers, this was acknowledged to be challenging. A primary concern that continues post-pandemic is the suitability of these options in supporting older people. Service providers expressed concerns about the enduring impact of reduced engagement on social isolation. However, after initial challenges, there were positive accounts of using digital and remote engagement methods to enable older people to maintain their existing interactions and connections.

The pandemic highlighted the issues connected with socio-economic inequalities across the City. It was found that some temporary shifts towards more hardship relief and humanitarian work initially brought in during key lockdown periods were retained post-pandemic. Although this period made social isolation and deprivation more visible, such issues were identified as concerns which pre-existed the pandemic and endured afterwards. This meant that service providers have continued to work in partnership on initiatives such as food poverty, initially brought in as a Covid-19 response but have been extended to address the impact of the cost-of-living crisis.

It was acknowledged that lockdown was a challenging and often emotional time and that reflecting on the impact during that period could be valuable in how service providers processed rapid change during that time and subsequently. Despite such challenges, service providers also felt that there were many enduring benefits, primarily how they had been brought together. It was felt that the need to deliver collaborative responses had brought partners together, which was now evident through stronger and more effective working relationships.

Service providers' reflections of lockdown periods highlight the importance of incorporating the lived experience of service providers in age-friendly practice¹². Because this phase focused on the post-pandemic period, it was clear that the legacy of lockdown periods remains strong and is shaping current understanding of age-friendly provision.

The report now focuses on the enduring challenges and opportunities facing service providers, enabling an understanding of post-pandemic service delivery.

¹² Weil, J., Karlin, N. J., & Monroe, K. (2022). Developing a conceptual model with policy implications to better support healthcare providers working with older adults during a pandemic: an interpretive descriptive qualitative study. *Journal of Applied Gerontology*. Available online at <https://doi.org/10.1177/07334648221143603>

3. Establishing Legacies: Moving through Covid-19

This section identifies the opportunities and challenges service providers face post-lockdown. It explores what the ongoing impact on services and older people might look like.

3.1 Understanding Post-pandemic Challenges

3.1.1 Decline in Interaction and Engagement

Several services report a decrease in face-to-face socialisation post-pandemic and a continued reduced take-up of community activities¹³, particularly those delivered primarily indoors:

“We don’t see the numbers quite as...you know, it’s harder to get the numbers than it was pre-COVID, and I think some people have got out of the habit of going out.” (Service Provider 9)

Although lockdown restrictions have been lifted, the risk of infection from Covid endures, the impact of which meant reduced social contact for older people, even at times an inclination to maintain isolation¹⁴:

“When we did open things back up, either people were too scared still because they’d shielded for so long and managed to keep themselves safe that they didn’t want to come” (Service Provider 1)

It was also interpreted by some that some older people who had been key community connectors or volunteers pre-pandemic had either “lost their independence” or replaced those activities with other pursuits. This has then resulted not just in an overall decline in interaction but also a reduction in volunteers, affecting community groups and activities:

¹³Mak, H. W., Wang, D., & Stone, A. A. (2022). Momentary social interactions and affect in later life varied across the early stages of the COVID-19 pandemic. PLoS One, 17(4). Available online at <https://doi.org/10.1371/journal.pone.0267790>

¹⁴Hoffman, G. J., Webster, N. J., & Bynum, J. P. (2020). A framework for aging-friendly services and supports in the age of COVID-19. Journal of Aging & Social Policy, 32(4-5), 450-459. Available online at <https://doi.org/10.1080/08959420.2020.1771239>

“I know a couple of [volunteers] during the pandemic found new hobbies. So, I have at least three [volunteers] who used to be very active in communal areas that took up walking and activities like that during the pandemic and have never returned. They’re just quite happy with the new life that they’ve found and the new hobbies.” (Service Provider 1)

The shifts in access to public and community spaces continue to impact social interaction for older people and between service providers, contributing to research highlighting the importance of social connections in the post-pandemic workplace¹⁵. Whilst post-pandemic many service providers reported improved levels of collaboration and partnership working, certain shifts towards remote working have rendered some services disconnected:

“And even not to be nasty about (provider), but we’ve not seen their community development workers since COVID well, and I don’t if that’s across or whether it’s because of COVID... we not seen any (provider) workers at the community groups.” (Service Provider 10)

This disconnect was felt to contribute to breakdowns in previously joined-up service delivery, highlighting the complexities of service providers delivering older people’s services amidst agile and remote working¹⁶:

“Yeah. I think there’s not enough catchments for all the mental health...you know, for the more specific needs. And it just all ends up coming to supported and we’re not always...it’s not always the best fit for the tenant, you know, or we can’t give the correct support because it’s not the support what they need.” (Service Provider 1)

¹⁵ Parry, J., Young, Z., Bevan, S., Veliziotis, M., Baruch, Y., Beigi, M., Bajorek, Z., Salter, E. and Tochia, C. (2021) Working from Home under COVID-19 lockdown: Transitions and tensions, Work after Lockdown. Available at https://eprints.soton.ac.uk/446405/1/Work_After_Lockdown_Insight_report_Jan_2021_1_.pdf

¹⁶ Tur-Sinai, A., Bentur, N., Fabbietti, P., & Lamura, G. (2021). Impact of the outbreak of the COVID-19 pandemic on formal and informal care of community-dwelling older adults: Cross-national clustering of empirical evidence from 23 countries. Sustainability, 13(13), 7277. Available online at <https://doi.org/10.3390/su13137277>

Most service providers recognised that a return to post-pandemic' normality' was impossible despite strong desires to reclaim spaces and remake social connections. Service providers reflected on the immediate, long term and permanent shifts and changes to their delivery and working methods as they came through the pandemic. It was acknowledged that service providers and older people were now in a changed environment, as Covid-19 had altered the City:

“I think to some degree, probably if we think about it more carefully, there will be certain elements of this that really set us back, organisationally, in terms of service delivery.” (Service Provider 5)

Many service providers reported that post-lockdown, a reduction in face-to-face interaction, loss of key community spaces and risk management characterised their operation. It was also felt that the continued use of digital platforms further reduced interactions. Some service providers felt that long periods without adequate interaction with older community members had not only reduced their engagement but could have negatively impacted health and well-being outcomes:

“And I think some people, also on a negative aspect, I think it kind of heightened issues they already had, you know, mental health issues or maybe early onset dementia, things like that.” (Service Provider 1)

3.1.2 Post-pandemic Socio-economic Exclusion

Service providers had found challenges in returning to 'normal' service levels post-pandemic as many of the issues raised by Covid endured through the cost-of-living crisis. This was particularly so for hardship, crisis, and food poverty work, with some temporary projects established to address demand in the pandemic needing to continue:

“Need has grown considerably, and there’s that stream of work around food work and hardship work that we didn’t do before that I don’t think is going to go away.” (Service Provider 9)

There were concerns about older people who were isolated or presently not engaging

with services or community groups, which makes it difficult to appraise the full impact of wider inequalities:

“Something we’ve identified as to how to reach those that don’t attend because I do think those [who] attend groups, they attend everything, and they look after each other.” (Service Provider 10)

3.1.3 Demand and Working Arrangements

A continued level of demand stemming from the cost-of-living crisis also needs to be considered within the context of flexible and home working. For some, the increased workload during an emergency pandemic seemed to have endured into post-lockdown working life. Some service providers reported continued high levels of demand and workload alongside the difficulties of switching off when working from home:

“But we’re so accessible and we’re a public service, that they feel like they can contact us, which is absolutely fine but with that, our demand quadruples and we’re sat there behind our desk rather than out being visible.” (Service Provider 5)

It was also felt that home working while dealing with increased demand presented challenges to ensure that team members could remain supported and connected:

It’s not the same as it you’re still stuck in your house, you’re still the same 4 walls and you’re just like yeah, you’re not having that human contact are you really?” (Service Provider 2)

This reflects other research findings on the continued challenges of working life following Covid-19.¹⁷ It also highlights the importance of being clear about how a rapidly evolving landscape of post-pandemic age-friendly services impacts how

¹⁷ Parry, J., Young, Z., Bevan, S., Veliziotis, M., Baruch, Y., Beigi, M., Bajorek, Z., Salter, E. and Tochia, C. (2021) Working from Home under COVID-19 lockdown: Transitions and tensions, Work after Lockdown. Available at https://eprints.soton.ac.uk/446405/1/Work_After_Lockdown_Insight_report_Jan_2021_1_.pdf

workers navigate a new hybrid working environment.¹⁸

3.2 Exploring Post-pandemic Opportunities

3.2.1 Adaptability and Efficiency

Many service providers noted that being adaptable and flexible was part of their response to how services were delivered during the pandemic. Many of the rapid shifts required during key lockdown periods demonstrated adaptability, and post-pandemic service providers have sought to build on this:

“Yeah. I think, again, I've mentioned the flexible working and then being able to spend more time putting that time back into the service that might have not been used as effectively previously with travel time. I think if the service is a lot more efficient now. I think, I think we were probably missing a trick previously. You don't have to physically be sat somewhere to deliver a service.” (Service Provider 2)

The move to remote working often resulted in large-scale logistical and operational changes to enable agile working and introduce new technology. Several service providers felt that Covid-19 had prompted more extensive developments in remote working and improved technology that would not have occurred without pandemic conditions:

“So, within 72 hours, Salford built a customer relationship management system and set up a telephone service called the Spirit of Salford, which you may have heard of.” (Service Provider 7)

3.2.2 Innovation, Creativity, and Flexibility

Several providers reported that re-thinking how services are delivered also prompted them to think more creatively and flexibly than before. This shift has fostered more

¹⁸ Weil, J., Karlin, N. J., & Monroe, K. (2022). Developing a conceptual model with policy implications to better support healthcare providers working with older adults during a pandemic: an interpretive descriptive qualitative study. *Journal of Applied Gerontology*. Available online at <https://doi.org/10.1177/07334648221143603>

innovative and responsive solutions to delivering activities and services to older people:

“It enables us or gives us the freedom to be able to not always just be behind the desk at headquarters and quite isolated from the districts and some of the other branches. So, in essence, it enables us to actually go out in the field, so to speak, a bit more and that, I mean for my role, that’s really important anyway. It just gives you that flexibility that perhaps we didn’t have beforehand.” (Service Provider 5)

The need to find rapid solutions during the pandemic fostered more innovative and flexible working environments. Service providers reported more permissive working methods that enabled them to 'experiment'. Increases in creativity and flexibility have enabled service providers to diversify and expand their service offers:

“So, I think, yeah, we will recognise that sometimes you've just got to be flexible to the work, whatever is needed in the service and just offer what's appropriate for that meeting, that forum, that intervention. So yeah, I think that's it really.” (Service Provider 2)

This new way of working has been empowering, positive and motivating for many and, in some instances, has continued to bring service providers and older people closer together. Here the findings highlight the importance of community-based networks and collaborative approaches in age-friendly provision¹⁹. This evidences how service providers perceived how different community stakeholders came together to enable co-creation and collaborative service delivery:

“It was permissive to experiment, you know. Like, literally, I'd turn round to our chief, and I can go, right, I'm going to try this; it might not work, but we're going to have to try it. And she would be like, knock yourself out.”(Service Provider 6)

¹⁹ Stephens, C., & Breheny, M. (2022). Diverse experiences among older adults in Aotearoa/New Zealand during COVID-19 lockdown: A qualitative study. *Australasian Journal on Ageing*, 41(1). Available online at <https://doi.org/10.1111/ajag.12995>

On a personal level for many staff, the ability to develop community-facing responses provided them with a positive purpose and focus during the challenges posed by lockdown that they are now building on post-pandemic. For some smaller organisations, this has enabled them to grow and develop a stronger presence post-pandemic. This growth was prompted by an ability to provide flexible and responsive solutions in key lockdown periods that have since become ongoing service provision:

“There were things the government could do, and there were things that the city council could do, but in terms of on the ground, making sure people had, were well served, and that things opened as soon as possible, I believe it was the hyper-local groups who achieved that.” (Service Provider 9)

Increased opportunities for flexibility and creativity also opened up the possibilities for different ways to connect. Service providers have reported that those initial connections have now evolved into new working relationships, some of which have contributed to more diverse service delivery:

“And some of the things we’ve implemented during lockdown, some of the things we’ve implemented are new activities, we will continue with those...lots of things that just came out of a need really to regenerate our organisation because it had run down a bit during lockdown I think.” (Service Provider 3)

Service providers also felt strongly that the pandemic legacy increased their capacity to address digital exclusion with older people, evidenced through ongoing projects and funding directed to support more older people to improve their digital skills. Not being able to access services and connect socially was key in motivating older people to engage digitally:

“So, we did see an influx of people coming through. And that was a great benefit, and it was really, really good to support more and more people online. And we did as a consequence of that, we set up some groups, a music group, a disco, lots of groups, that we would never have thought of doing that before. So that was really a benefit.” (Service Provider 4)

Service providers have therefore enabled older people to continue to find positive ways to integrate technology into their lives and use digital means to stay socially connected. As well as working to reduce social isolation, it was also felt that service providers improved their digital reach and engagement with more older people in different ways facilitating new and different connections:

“They have online classes now and face-to-face, which I think suits people who don’t want that group environment.” (Service Provider 10)

This demonstrates the role and value of remote, hybrid and digital connectivity for older people, particularly when other forms of connection are lost or significantly reduced.²⁰

3.2.3 Collaborative Working

For several service providers, one of the most notable legacies is the positive development of strengthened relationships and increased partnership working. Some service providers have an increased appreciation for partner organisations, which has sparked ideas of how service providers can continue working together more effectively and more supportively:

“It was a blessing in disguise in one way, COVID. It was very serious and upsetting in another. But the recovery has felt good.” (Service Provider 4)

Many service providers have placed importance on these improved relationships and expanded partnerships beyond lockdown periods. The co-ordinated responses yielded from collaborative approaches have proved positive and effective that have continued post-pandemic. It has also contributed to improved mutual understanding between service providers, prompting a genuine motivation to improve partnerships:

²⁰ Kennedy-Behr, A., Rosso, E., McMullen-Roach, S., Berndt, A., Hauschild, A., Bakewell, H., Boshoff, K., Antonello, D., Jeizan, B., & Murray, C. M. (2021). Intergenerational virtual program: Promoting meaningful connections across the lifespan during the COVID-19 pandemic. *Frontiers in Public Health*, *9*, 768778. Available online at <https://doi.org/10.3389/fpubh.2021.768778>; Łuszczynska, M., & Formosa, M. (Eds.) (2021). *Ageing and Covid-19: Making Sense of a Disrupted World*. Taylor & Francis; Ungar, R., Wu, L., MacLeod, S., Tkatch, R., Huang, J., Kraemer, S., Schaeffer, J. and Yeh, C (2022). The impact of COVID-19 on older adults: Results from an annual survey. *Geriatric Nursing*, *44*, 131-136. Available online at <https://doi.org/10.1016%2Fj.gerinurse.2022.01.010>

“I think one of the benefits it’s brought is, it’s because some of the offices are not fully utilised now and people are migrating much more to that hybrid way of working but a locality way of working as well. So, we see a lot more partners now, a lot of different services come and utilise the gateways because one of the things that we did was set up ‘my workspaces’ in each of the gateways²¹, so drop-down spaces for anybody to be able to come and use, really.” (Service Provider 7)

3.2.4 Discovering New Spaces and Solutions

Agile, remote and home working models have continued post-pandemic, with service providers reporting increased efficiency and home-life balance. Hybrid approaches are now also providing more accountable and inclusive ways of working:

“Whereas now there's options. So, people can choose, do they want to access stuff via online or do they want face-to-face, and I think we've got a healthy balance of both. I think that's one of the key things for us. And for those that we support.” (Service Provider 4)

During lockdown, service providers had to find socially distanced venues to deliver activities and to ensure safety; this led to increased use of green and outside spaces. Whilst these spaces were initially utilised as alternatives, they have prompted a re-discovery of the value of local outside spaces with continued use post-lockdown:

“...it’s what you say about people living in their area for a long time, it was that thing of actually, like, if they hadn’t been to their local park for a while, or maybe they’ve had a not so good experience in the park, you know.... encourage people, that thing of having a reason to go out every week. Encourage people to go and they soon start, even if it’s somewhere they’ve lived their whole lives.” (Service Provider 6)

Delivering more outdoor activities in diverse spaces have continued post-pandemic.

²¹ The term ‘gateway’ refers to Community Gateways, which are ‘one-stop shops’ run by Salford City Council that deliver a wide range of community services and facilities.

This aligns with wider research that suggests the ongoing use and importance of age-friendly green and outdoor spaces²². Service providers reported that both staff delivering services and older people enjoy these spaces:

“Just the sheer joy of some of the people that have never been to some of these spaces that are literally down the road from them...They’d no idea they were there and suddenly it’s, this is wonderful.” (Service Provider 6)

Many newly created activities continue, particularly concerning older people’s reclaiming of new and different age-friendly spaces, a notable example being the ‘Walk and Talk’ and online ‘Brew and Chat’ activities delivered by Age-Friendly Salford. Community activities outdoors and in public places continue post-pandemic, increasing physical activity and engagement with green space. This led to a re-discovery and renewed value of local outdoor space, which stimulated increased use of such places through organised activities:

“I was about to say that I think you did some green space work before COVID, didn’t you, well, it seems to me that it’s much more developed post-COVID because it started...that was the only thing you could do in that time and the value’s grown, and more people participate.” (Service Provider 6)

Although introduced as a replacement, temporary service, service providers and client groups recognised the value in engaging with outdoor space, which has not only continued post-pandemic but has resulted in increased participation.

Alongside physical sites, digital connectivity also opened up new possibilities and spaces for older people; this provided a safe and often easier way to contact peers and service providers. The pandemic has provided the opportunity, motivation and need to better equip older community members with digital equipment and skills to interact online. For some older people, this has significantly expanded their use of

²² DeLange Martinez, P., Nakayama, C., & Young, H. M. (2020). Age-friendly cities during a global pandemic. *Journal of gerontological nursing*, 46(12), 7-13. Available online at <https://doi.org/10.3928/00989134-20201106-02>
Lang, L., Lewis, C., Yarker, S., Hammond, M., & Phillipson, C. (2022). Growing Older in Collyhurst: How can social infrastructure be used to support an Age-Friendly Victoria North. Manchester Institute for Collaborative Research on Ageing (MICRA). Available online at <https://e-space.mmu.ac.uk/629223/>

technology, which continues post-pandemic enabling a more diverse range of social connections:

“So, that’s another massive positive, it’s created friendships that these people would have probably never met.” (Service Provider 6)

The pandemic also created an opportunity to refocus and reprioritise for some service providers. This appears to have evolved into a renewed emphasis on closer neighbourhood working, which will be explored further in the following section. The positive impact that service providers have reported on working relationships seems to have been prompted by a sense of camaraderie and solidarity. The flattening of working hierarchies continues post-lockdown and has evolved into an increased and ongoing appetite for joined-up service provision moving forward.

3.3 Section Summary

The way service providers quickly shifted and varied their delivery modes demonstrated adaptability, often exceeding pre-pandemic capabilities and resources. Additionally, flexible working practices encouraged more creative and responsive solutions fostering cultures of empowerment and equality. This has resulted in new delivery modes, enabling the discovery or reclaiming of age-friendly spaces with increased digital reach and the use of outdoor and green spaces. This has evolved into activities and connections that have grown and developed post-pandemic.

Working through challenging times created camaraderie and opportunities for joint working, resulting in more positive and stronger working relationships. Post-pandemic, this has evolved into effective and beneficial partnerships. Community partners, service providers and older people were brought together, resulting in more effective co-design and collaborative working, demonstrating the importance and resilience of community networks and organisations. Service providers have reciprocal respect for partner organisations, and several networks, meetings, and alliances now continue post-pandemic.

Several service providers reported retaining hybrid and agile working to deliver more effective services and support staff in managing an improved work-life balance.

Developments in agile working, digital connectivity, and partnership approaches have improved efficiency, flexibility and inclusivity. However, some service providers reported that new and adapted delivery modes had intensified demand and workload without increased capacity. This is also exacerbated by the current cost-of-living crisis's continuing demands and challenges.

It was felt that several older people have benefited from digital upskilling and have made new and more diverse connections online, some of which continue post-lockdown. However, it was felt that digital delivery modes were not always suitable for all older people raising concerns about heightened exclusion for those less able, or willing, to enter online and digital spaces.

Many service providers felt that the pandemic had highlighted key issues for older people, particularly digital exclusion, social isolation and hardship, some of which have continued into the cost-of-living crisis. This was combined with providers reporting reductions and changes in engagement and socialisation, raising concerns about the impact on social infrastructure and informal support networks post-pandemic. Therefore, the next section will explore the emerging and continuing challenges and opportunities and the provider's responses to them.

4. Developing Strategic Responses

This section explores service providers' strategic responses and plans for ongoing and future service delivery.

4.1. Addressing Continuing Challenges

4.1.1. Adjusting to Lost Connections and Spaces

Service providers reported that they had seen evidence of older people shifting priorities and changing routines. As part of this, a reduction in volunteering was noted, leading to some service providers adopting or taking on previous activities that would not have continued post-pandemic due to decreased levels of volunteering:

“They were then due to open up and because they've been off for so long. Bearing in mind these volunteers are all 60 plus themselves - had got the lives back on a Wednesday and but we're really concerned about the group because we realised that there was a need for it and didn't just wanna walk away. They wanted to hand it over” (Service Provider 10)

Service providers also reported concerns that declined interaction was incorporated into new routines that saw degrees of social withdrawal and sometimes even a decline in personal independence. This contributes to wider debates regarding the legacy impacts on social interaction and loneliness for older people²³ and remains a continued focus for many service providers moving forward.

Whilst a shift to modified activities, outdoor and digital spaces offered a continued strategic response, it was acknowledged that this would not appeal to or reach all older people. There were concerns about the implications of this reduced interaction for the well-being of some who may have become at greater risk of social isolation.

²³ Stuart, A., Katz, D., Stevenson, C., Gooch, D., Harkin, L., Bennasar, M., Sanderson, L., Liddle, J., Bennaceur, A., Levine, M. & Mehta, V., (2022). Loneliness in older people and COVID-19: applying the social identity approach to digital intervention design. *Computers in Human Behavior Reports*, p.100179. Available online at <https://doi.org/10.1016/j.chbr.2022.100179>

4.1.2 Recognising Ongoing Pressures on Demand

Although many service providers could report continued efficiencies in new remote working patterns, there were concerns about the longer-term impacts of agile working. Continuing challenges in face-to-face engagement, how to remotely support and develop staff, and increased levels of demand and expectation raised concerns about the long-term implications on service quality and the overall impact on colleagues and communities:

*“We are expected to do a lot more work now, at the same time, but with less capacity, with less people. So, there is more and more expected of you, I don’t know if that was tricky through COVID, and it’s just now become the norm”
(Service Provider 5)*

Several providers report ongoing increased demand, expanded modes of working and the continuation of what had been devised to be temporary solutions to pandemic-specific challenges.

One notable pressure is the ‘cost of living crisis’. Service providers reported ongoing hardship and food poverty issues, coupled with continued high levels of demand that perhaps had been expected to wane post-pandemic. It was anticipated that the coordinated approach reflected in a network of joined-up partners that could facilitate a range of providers would continue to be required:

“It was the small groups, the groups that can turn on a sixpence. They haven’t got some levels of bureaucracy before they can make a change. Those are the groups that were able to just go out and do things... And what worries me is, I think there’s a desire in some ways to forget that. Everything’s back [as it was], we’re all competing for money again, and I think some of the bigger groups are quite happy to push out the smaller groups. But we need that network, if we are going to make sure communities are supported in good times and bad times. And the bad times do not appear to be over.” (Service Provider 9)

The ongoing concerns around cost-of-living, hardship and social isolation highlight how many pre-existing inequalities were exacerbated or revealed during the

pandemic²⁴. Rather than locate explanations for isolation and exclusion now being witnessed at the door of lockdown strategies, the pandemic highlighted existing inequalities and vulnerabilities among the city's older population. While there is no doubting the levels of commitment shown by providers to continue to support older people, a number expressed concern about their capacity to sustain the rate of work without significant investment in additional resources.

4.2 Moving Forward Together

4.2.1 Challenging Assumptions

The pandemic legacy has enabled service providers to reflect on their assumptions about how older people can and choose to access services and spaces. This has resulted in some challenges around ageism, demonstrating adaptability, resilience and flexibility in how older people have navigated through and beyond the pandemic. The diverse ways in which older people in Salford have engaged with service providers have challenged ageist tropes and pushed service providers to re-think their service offers:

“It surprised me, some of the things, some of the perceptions we have about older people, like, they only ever use cash, they won't pay anything by card. Well, that was nonsense.” (Service Provider 6)

Therefore, the findings challenge some stereotypes around the vulnerability, frailty and dependence of older people²⁵. However, vulnerabilities remain and providers continue to strike a balance between acting on ageist assumptions and acknowledging the impact of various risks that face those in later life.²⁶

²⁴ Morrow-Howell, N., Galucia, N., & Swinford, E. (2020). Recovering from the COVID-19 pandemic: a focus on older adults. *Journal of aging & social policy*, 32(4-5), 526-535. Available online at <https://doi.org/10.1080/08959420.2020.1759758>

²⁵ Fuller, H. R., & Huseth-Zosel, A. (2021). Lessons in resilience: initial coping among older adults during the COVID-19 pandemic. *The Gerontologist*, 61(1), 114-125. Available online at <https://pubmed.ncbi.nlm.nih.gov/33136144>.

²⁶ Pachana, N. A., & Wuthrich, V. M. (2021). Social inclusion and isolation: research for the post-COVID era and beyond. *Clinical Gerontologist*, 44(4), 355-358. Available online at <https://www.tandfonline.com/doi/full/10.1080/07317115.2021.1934283>

4.2.2 Collaboration

A renewed focus on collaborative working and joined-up thinking has resulted in the development of several new initiatives, such as the 'Spirit of Salford' helpline. This multi-agency helpline offers a referral service initially developed as a temporary pandemic response. Its impact and the continued demand for the service have seen it continue post-pandemic. The Spirit of Salford initiative has evolved into a new 'Better Off' Team that seeks to replicate that partnership approach to providing support and crisis resolution.²⁷ Bringing together different service providers to operate holistic referral services has enhanced support and reduced duplication of effort and activity. It has enabled service providers to understand the different ways to work alongside each other and witness first-hand the benefits of improved partnership working. In this way, the data and analysis support other research that has shown that the collaborative nature of age-friendly approaches enabled effective pandemic responses²⁸ and that collective approaches now need to continue to be embedded to consolidate networks between older people, community groups and agencies²⁹.

Collaboration has also involved more active participation from older people themselves. Some have made huge contributions through volunteering and community involvement, often leading community groups and activities. Increased levels of community participation contributed to stronger working relationships that have helped increase empowerment, voice, and influence:

"...older people have actually become not a victim, but actually empowered to take some control and, actually, be part of this journey with us. So, you know, a lot of the work, the co-designing work that we've done, we probably would never have done that if we hadn't had the pandemic" (Service Provider 6)

²⁷ Salford City Council (2020) Year Three Progress Report 2019/20 No one Left Behind: Tackling Poverty in Salford. Available online at: <https://sccdemocracy.salford.gov.uk/documents/s21854/10%20Tackling%20Poverty%20Strategy%20Year%203%20Progress.pdf>

²⁸ Dabelko-Schoeny, H., White, K., Sheldon, M., Park, C., Happel, C., & Purvis, T. (2022). Age-friendly communities during the time of COVID-19: a model for rapid community response. *Journal of Aging & Social Policy*, 34(2), 275-292. Available online at <https://doi.org/10.1080/08959420.2022.2049576>

²⁹ Greenfield, E. A., & Buffel, T. (2022). Age-friendly cities and communities: Research to strengthen policy and practice. *Journal of Aging & Social Policy*, 34(2), 161-174. Available online at <https://doi.org/10.1080/08959420.2022.2049573>

4.2.3. Building Back Local

As the report has demonstrated, the findings from Phase One have outlined the importance of local space with increased engagement with outdoor and green spaces, often connected to improved well-being and health outcomes³⁰.

The legacy of lockdown periods has prompted a re-discovery and new definition of how local neighbourhoods were consumed, demonstrating the importance of local environments in developing age-friendly communities³¹.

This renewed focus on the local was not simply derived from accounts of how older people accessed space; the increase in diverse activities has prompted a more strategic shift towards the local neighbourhood. This has been realised with renewed value placed on face-to-face engagement and partners harnessing a locality approach. How service providers came together to deliver effective and joined-up responses during the pandemic has also significantly contributed to this:

“What has come to the fore, which I found really valuable, is the walkabout, the kind of walk and talk around the neighbourhood. Out in the open, seeing the issues, really valuable, really useful meetings. They always have been, but I think even more so now. It’s just great to get out to see an issue, to meet a resident and really just talk through the concerns. A lot of the issues are environmentally focused that we pick up, highways issues, so people have really valued those as well.” (Service Provider 2)

Service providers have used the context of the pandemic to continue to strengthen neighbourhood level working. Meetings, networks and projects built on prioritising local demands appear to continue to improve the delivery of services and support for older people:

“What you organically seem to see growing is people who work in that area, whether that be PCSOs (Police Community Support Officers), whether it’s housing officers, whether it’s council tax, benefits officers, you can see that

³⁰ Bustamante, G., Guzman, V., Kobayashi, L. C., & Finlay, J. (2022). Mental health and well-being in times of COVID-19: A mixed-methods study of the role of neighbourhood parks, outdoor spaces, and nature among US older adults. *Health & Place*, 76, 102813. Available online at <https://doi.org/10.1016/j.healthplace.2022.102813>

³¹ Tavares, L. M., & Marinho, A. (2021). Leisure and COVID-19: Reflections on Brazilian older adults who frequent urban public parks. *World Leisure Journal*, 63(3), 229-243. Available online at <https://doi.org/10.1080/16078055.2021.1957010>

locality neighbourhood working organically growing because people are maybe working from home, coming into the gateways to do a visit, going and doing their visits and then are finishing up back at home again. So, I think that's a benefit in terms of bringing local services to neighbourhoods so people can access them locally. And I think we're seeing a lot more of that and I think that will continue to get better and better." (Service Provider 7)

Other research has identified the benefits of collaborative, community-driven approaches to age-friendly provision³². The activities identified here add to this evidence-base.

4.3 Section Summary

Service providers have made significant gains in developing new and more diverse age-friendly spaces, many of which continue to be embraced post-pandemic. In particular, service providers are committed to tackling social isolation, digital exclusion and health and well-being outcomes.

It is acknowledged that the pandemic has adversely impacted social and service interaction with older people. Service providers are now working to address these issues, with several providers having plans for their proposed engagement and service delivery strategies for their work with older people. The reduction of face-to-face contact and access to key community spaces created time and space for service providers to re-evaluate and emerge from the pandemic with a renewed focus on neighbourhood working, and locality-based approaches.

This section has explored several effective working methods developed during the pandemic, which will now be expanded and taken forward. Many of these build upon the more effective partnerships that have evolved post-pandemic. A renewed focus on collaborative, locality-based approaches has been developed from those stronger working relationships. A key part of this was developments made to co-design and

³² Hoffman, G. J., Webster, N. J., & Bynum, J. P. (2020). A framework for aging-friendly services and supports in the age of COVID-19. *Journal of aging & social policy*, 32(4-5), 450-459. Available online at <https://doi.org/10.1080/08959420.2020.1771239>; Marston, H. R., Shore, L., & White, P. J. (2020). How does a (smart) age-friendly ecosystem look in a post-pandemic society?. *International Journal of environmental research and public health*, 17(21), 8276. Available online at <https://doi.org/10.3390/ijerph17218276>

collaboration with a wider range of community stakeholders and older people. This has resulted in a continued improved engagement with the community in age-friendly provision.

5. Conclusion

I think that was something that came out of COVID. I think it gave...I know it did us as a service; it gave us an opportunity to reassess everything... We reassessed what it is that we do and why we do it and prioritise which bits are the most important.” (Service Provider 4)

Moving through and beyond the pandemic has prompted service providers to significantly improve their ability to expand and develop their service offers to older people. Service providers have significantly improved their technology and adaptability in agile and remote working, bringing ongoing benefits in terms of connectivity and effectiveness.

Working through pandemic conditions resulted in more 'human' and empathetic interactions. It has also emphasised social connection, care, and interaction, which appear to have strengthened relationships and increased autonomy amongst organisations and older people. This has prompted improved mutual respect and understanding, resulting in more inclusive and supportive responses to community services. Several examples of effective ways of working developed during the pandemic are being developed and continued.

Developing new delivery modes enabled the discovery or reclaiming of age-friendly spaces. This includes a post-pandemic legacy in improvements to tackling digital exclusion through inclusive digital spaces for older people. It has also improved how local green and outdoor spaces are utilised and perceived, encouraging more outdoor and physical activity.

Despite many opportunities for positive change over the last few years, service providers face challenges post-pandemic. Agile working and the convergence of pandemic conditions with the current cost of living concerns have seen heightened demand levels over a prolonged period. It is also widely acknowledged that exclusion and isolation remain concerns for older people. For all the hard work and effort reported here that deserves to be celebrated, the pandemic leaves a legacy of reduced social and service interaction with some older people.

There are clear areas of strategic focus for service providers moving forward with a commitment to tackle social isolation, digital exclusion and health and well-being outcomes. Many service providers have implemented plans or built upon the work started during the pandemic. Furthermore, improvements made to co-design and collaboration continue with a commitment to improved engagement with the community in age-friendly provision.

6. Key Takeaways

6.1 Lessons Learnt

- The way service providers quickly shifted and varied their delivery modes demonstrated adaptability, often exceeding pre-pandemic expectations of capabilities and resources.
- New activities and delivery modes have evolved in response to pandemic conditions, often utilising outdoor and digital spaces.
- New delivery modes were not always suitable for all older people raising concerns about reduced engagement and adequate support levels.
- The pandemic highlighted key issues for older people, particularly digital exclusion, social isolation and hardship, some of which have continued into the cost-of-living crisis.
- While it is tempting to explicitly link the public health and legal responses to the pandemic in the form of lockdowns to the heightening of the vulnerability of older people, it is important to recognise that the pandemic magnified existing risk factors and inequalities.

6.2 Key Challenges

- The cost-of-living crisis following so quickly from the pandemic has exacerbated social exclusion, vulnerability and hardship for older people.
- Digital shifts, reductions in community provision and fear around infection have reduced engagement with older people across various services.
- Some service providers reported that new and adapted delivery modes had increased their demand and workload without an increase in capacity.

6.3 Key Opportunities

- Service providers have a newfound mutual respect and appreciation for partner organisations, and several networks, meetings, and alliances now continue post-pandemic.
- Improvements in agile working, digital connectivity, and partnership approaches have increased effectiveness and offered more flexibility and inclusivity.
- Service providers feel they have made significant gains in developing new and more diverse age-friendly spaces, many of which continue to be embraced post-pandemic.
- Several examples of effective working methods developed during the pandemic will now be expanded and taken forward, many of which build upon the strong partnerships forged over the last two years.
- There is a commitment from service providers to work collaboratively to address key priority issues around social isolation, digital exclusion and health and well-being outcomes.