

# The Publication of the Greater London Forum for Older People

# SENIOR LONDON

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## GREATER LONDON FORUM FOR OLDER PEOPLE

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Dear Members and Supporters

Welcome to the autumn edition of GLF Newsletter. This is our third digital edition. However, should you know of any of your forum members who are unable to access the digital format please let Zara Ghods know. She will post a few copies.

We are still in the grip of Covid 19. The second lockdown should be over by 2<sup>nd</sup> December, but there is no guarantee that this lockdown would not be extended. The Coronavirus has made life for older Londoners more difficult. we are unable to see GPs face to face, Transport for London has not lifted travel restrictions before 9 am for Freedom Pass users or suspension of 60+ Oyster Cards. In the meantime, the Government has abolished Public Health England and put in its place a National Institute, the remit of which is unknown.

We have written to all Clinical Commissioning Groups covering London describing the problems that older Londoners face as a result of the loss of face-to-face consultations with GPs. We have reminded them that telephone consultation does not allow people an opportunity to explain the causes of their illness nor does it allow GPs to find out other inherent physical or mental issues affecting their patients. I will let you know of the replies received from the CCGs.

The GLF is working with other organisations such as Age UK London and Positive Ageing in London to demand restoration of use of the Freedom Pass before 9 am and 60+ Oyster Cards. We have written to the Mayor of London who is ultimately responsible for Transport for London and the Secretary of State for Transport showing that London has the largest number of poorer older people in the country. They are being adversely affected by the current situation. In the coming Mayoral election in May 2021 we would be challenging all candidates about their plans for the Freedom Pass and the 60+ Oyster Card.

Stay safe stay well      Asoke Dutta, GLF Chair

## Why change Public Health?

*by Monty Meth MBE, President, Enfield over 50s Forum*

The coronavirus pandemic, still causing such havoc in the lives of millions of people, has highlighted the valuable role of public health as never before. Never a day has gone by without public health being top of the news agenda.

Until Covid-19 came into our lives, few of us, I guess, knew that Public Health England (PHE) was responsible for the control of infectious diseases such as the coronavirus. But it is also responsible for much, much, more than virus testing and tracing.

Since 2013 every local council has had a public health unit with a ring-fenced budget set by the government. And this is where the muddle and confusion begins. Because the money for public health in the London Boroughs and everywhere else comes not from Public Health England, but from the Department of Health and Social Care (DoHSC). Not surprisingly, with the financial pressures to keep the NHS afloat, the DoHSC has starved Public Health of funding, making it the Cinderella of the health service. The PHE budget has been cut by at least 14% over the last six years. So to hear, at this critical time, that Public Health England{PHE} is to be abolished and replaced by the fanciful entitled National Institute for Health Protection, without any clear policy direction for improving public health in the localities, must rank as one of the most bizarre government decisions were seen in a long time.

Have you ever heard of a new organisation being set up without a named leader with clear areas of responsibility? Yet this so-called National Institute has been launched with an interim head charged solely with sorting out the coronavirus testing and tracing debacle.

With the former chief executive of PHE being fired last August, we still do not know who will be installed as the permanent chief executive of this new National Institute. The 5,500 PHE staff are in limbo not knowing whether it will be mandated to tackle all the tasks currently in the public health portfolio- such as cutting obesity, smoking and alcohol abuse; tackling mental and sexual health problems and reducing health inequalities.

We have to wait until next March at the earliest for answers. Only then will we learn how independent and autonomous this new National Institute will be and whether it will have full control of an adequate budget - or will it remain a mere puppet within Matt Hancock's DoHSC?

The 2021/22 funding allocation for Public Health in the London Boroughs will be crucial in our battle to improve healthy life expectancy. We need a government commitment to end the outdated and discriminatory formula which has relegated Enfield to a 50 per head allocation this year for public health, compared with Haringey 70, Camden Islington 108, Westminster and Kensington and Chelsea 135.

Two leading health charities say that the government must make a clear and urgent commitment to restoring 1 billion of cuts to the public health grant which enables local authorities to deliver vital preventative services that protect and improve health.

The Health Foundation and The King Fund say that government cannot continue to put off decisions on public health funding and must signal its intention to restoring cuts and ensuring there are no further reductions in funding.



*Continue...*

The two organisations say that cuts to the public health grant made since 2015/16 are having a major impact on local services such as sexual health clinics, stop smoking support and children health visitors which play a key role in improving and maintaining the population health.

They also argue that cuts to the grant undermine the ability of local authority Directors of Public Health to influence wider public services that affect people health including housing and transport. They say that failing to act now would be a false economy, placing further pressure on the NHS and wider public services.

So let press our MPs to get the answers from Ministers. We need to know who will be appointed to run the new National Institute for Health Protection; how independent will it be; what are its terms of reference and will its budget be protected

## Now more than ever – **get your free flu jab** – protect yourself and those around you

Age UK London are running a campaign to encourage all adults over the age of 65 as well as people of any age with a long-term health condition to take up the offer of their **free flu vaccine**.

With Covid-19 and the flu virus both in circulation, we know that it is important, now more than ever, for as many eligible people as possible to get their free flu jab in order to protect themselves and those around them.

It is important to know that it takes up to two weeks for the flu vaccine to fully protect you from the flu virus once you have had the jab, so get your appointment organised now to get your free flu vaccine either at your GP surgery or your local Pharmacy.

Did you know that Londoners over 65 have the lowest uptake of the flu vaccine across the whole country? The World Health Organisation recommends that 75% of adults aged 65 and over should have the flu vaccine but sadly, some London boroughs barely reached a 50% take up during the previous flu season!

If you are interested in supporting the campaign then please get in touch with Age UK London by emailing Sharon at Age UK London on [stynan@ageuklondon.org.uk](mailto:stynan@ageuklondon.org.uk) and we can supply you with our helpful resources that can be shared with contacts, colleagues and friends:

1. **FLU INFORMATION TOOLKIT** containing plenty of hints and tips and information on the flu vaccine as well as popular mythbusters
2. **A3 SIZE POSTERS:** get in touch and we will send posters out to you

You can also look at our website that has lots of information and resources: [www.ageuklondon.org.uk](http://www.ageuklondon.org.uk)

Now, more than  
ever.

Get your free flu jab.

Protect yourself and  
those around you.



It can take up to 2  
weeks for the flu  
vaccine to work -  
get vaccinated as  
soon as you can.



## Fighting to save Travel Concessions

*by John McGeachy, Senior Campaigns Officer, Age UK London*

Before breakfast on Sunday 1<sup>st</sup> November we learnt that the new funding deal for Transport for London (TfL) did not include cuts or additional restrictions on older Londoners' travel concessions (primarily the Older Persons' Freedom Pass and the 60+ Oyster card). The previous 48-hours had been a time of anxious waiting.

Affordable travel can transform lives. This may sound a little overblown but I've listened to so many people share their experiences that I really believe it to be true. This 'win' is good news and down to thousands of older campaigners that raised their voices in a way

that I don't think some had foreseen. It's always important to recognize good news, but one reason why we celebrated was because much worse was expected.

By the end of the working week, behind-the-scenes updates had led us to believe that there would be additional restrictions and possibly the scrapping altogether of the 60+ Oyster card!

I've counted over 40 different activities since we began campaigning, including local Forums writing to their MPs; but it's hard to argue that the one with most impact was the nearly 50,000 people that wrote to the Secretary of State in just seven days.

Of course, judging 'how good' news is or isn't is subjective and rooted in a wider context. Firstly, whilst this is a significant victory for older Londoners, it is not the end of the fight to protect travel concessions. In just six months (weeks before the Mayoral elections in May 2021) a new funding deal will be negotiated. TfL will be under even more pressure to cut concessions. Secondly, the campaign began as a campaign against the pre-9am weekday suspension of concessions on the TfL network. Unfortunately lifting this suspension has not yet been achieved. This is really disappointing because we know so many people have to travel before 9am, not because they want to but because they have to. Only the first five weeks of the new funding deal will be covered by the new national lockdown and fares are set to increase in January.

I've heard from some people who believe that the 60+ Oyster card is overly generous. Whilst it is true that some 60+ Oyster card users could afford full fares many thousands cannot. The number of older Londoners needing to apply for out of work support has more than doubled in the past seven months and one in three older workers made redundant fear they may never work again.

Those in work in their 60s are proportionally more likely to work part-time because of caring responsibilities or health conditions. Some jobs are well paid but many are not. Living in a city with some of the highest living costs in the world could mean that having to pay as much as an additional £50 per week on fares will drive more in to poverty.

Scratch the surface of most campaigns and you'll find a range of complicated issues. Whilst the battle to save concessions is far from over I want to say a huge **Thank You to all those that have been involved so far. Please do email me at [jmcgeachy@ageuklondon.org.uk](mailto:jmcgeachy@ageuklondon.org.uk) if you would like to get involved.**



## **Changes to GP Services **AFTER** Covid**

### **GLF campaign to keep face-to-face GP consultation without first phone/online assessment**

#### **We sent this letter to the following:**

North London Clinical Commissioning Groups  
North West London Clinical Commissioning Groups  
North East London Clinical Commissioning Groups  
South West London Clinical Commissioning Groups  
South East London Clinical Commissioning Groups  
32 Clinical Commissioning Groups in the London region

The Greater London Forum for Older People (GLF) is the umbrella body for Forums in 32 boroughs and the City of London. Our aim is to ensure that older people are actively involved in shaping the services that they use, and that they have a say on decisions about the health and care services available to them.

We are writing to you regarding concerns raised by older people regarding the future changes to GP services after Covid. We carried out a survey in 32 London boroughs and the City of London with older people to determine whether there were concerns over the changes to GP services after the Pandemic.

Having consulted with our Forums the overall majority response was in support of face-to-face consultation with a doctor without a phone assessment first.

The GLF is asking that face-to-face consultation without phone assessments be incorporated in the future changes to GP services. We feel that to measure best practice through consultation would be the right approach. The GLF should be part of the consultation to determine the future of GP services.

The required procedure under Covid is for assessment to take place before a face-to-face can be confirmed with your GP. However, there are real challenges with telephone and online communication when disability issues prohibit clear understanding, such as hard of hearing, language difficulties, on occasion being able to clarify health issues coherently and dementia among other issues. It is essential that older people continue to utilize general practice for both routine and emergency care of their physical and mental health.

While various technologies used are a welcome addition, it is questionable whether it is as effective for providing clinical care as a face-to-face consultation. The most important part of general practice for older people requires relationships, and it is more difficult to develop it remotely.

We welcome your comments and support. If you require further information please contact us.

This letter will be on our website and so will your reply once received.

## Forum Stories

### *Highlighting Forums supporting older Londoners*

#### **Bexley Pensioners Forum**

*by Terry Murphy, Chair*

When I retired I joined the Bexley Borough Pensioners Forum and after the first meeting I was asked if I would like to join of which I did and after one year I was asked if I would take on the roll of Chairman, and after thinking about it I agreed to do it for one year and fifteen years later I am still carrying out the same duties of which I enjoy doing.

We hold our meetings in the civic centre, we have four meeting per year and in between meeting we send out a news letter to our members and during the summer months we have outings once or twice a month which our members enjoy, some times on a boat trip, or a coach trip, visit a museum, cream teas, and Christmas Dinner, and our three hundred sixty odd members can take there pick which outing or outings they prefer.

I spend a great deal of time campaigning with all kinds of local transport which takes up quite a lot of my time but again I enjoy it, we succeeded in getting the 96 bus route into and out of Darent valley Hospital, we also saved the R11 to carry on going from Queen Mary's Hospital to Orpington Hospital which gos direct from Hospital to hospital, and

now we campaigning for two other routes which London Transport is going to stop short of there destination, route number 428 and 492 it's a campaign which is on going, I am also a trustee for Bexley Accessible Transport of which I've been doing for around seven years now.

#### **Kensington and Chelsea over 50s Forum**

*by Stewart Katz, Chair*

We are blessed to have the full support of our council and Bi-Borough commissioners, enabling us to hold a wide range of activities across the borough. Our events and workshops focus on self-care, prevention and eliminating loneliness. We hold three annual conferences in Kensington Town Hall which are well attended.

One of our aims has been to develop strong relationships and this we do well, working closely with the private sector, Police, LFB, CCGs, 42 GP practices, 40 pharmacies and 548 organisations.

We represent the voice of older residents in Kensington and Chelsea a responsibility we take very seriously. We have successfully campaigned to improve services for older people through policy development, and direct contact with lead Cabinet Members.

Our volunteers have been supporting our members and the wider community during the start of Lockdown in March and still continuing to do exceptional work.



## London Councils support Meals on Wheels!

*The Greater London Forum for Older People is a co-signatory to a letter with the GLA, civil society organisations, businesses, social enterprises and academia, all of which are united around our commitment to the health and wellbeing of older people across London. The letter will be sent to each London Council regarding their 2021/22 budget setting process to urge Councils to ensure that vital food services for older people are protected, enhanced, or put in place.*



Even before the pandemic, it was estimated that more than 1.3 million people over the age of 65 were malnourished or at risk of malnutrition, with over 90% of these living in the community. Malnutrition makes people more susceptible to physical and mental ill-health, extends hospital stays and makes re-admission more likely – malnutrition accounts for nearly £20bn of health and social care spending in England. Compounding this, the Covid-19 pandemic has made it difficult for many people to access good food daily, not least older people and disabled people, who were already at high risk of malnutrition.

Whilst there are a number of ways to support older and disabled people to access good food daily – like investing in lunch clubs and day centres or good care-home and hospital food – having a robust meals on wheels service locally is a vital cornerstone to tackling the issue.

Meals on wheels services provide multiple benefits to individuals and communities in numerous ways as they:

- **Are more than just a meal:** through welfare checks, daily social contact, and complimentary services including active ageing advice and classes, and 'scam-busting' support, meals on wheels services act as vital lifeline to people who are at risk of isolation are medically vulnerable, or are unable to cook for themselves or leave their homes. These services drastically improve quality of life and in so act as a preventative service that mitigates against risk.
- **Are a preventative and cost-saving service in the long-term:** by keeping older people, medically vulnerable people and others at risk of malnutrition or isolation healthy and connected, these services are cost-saving overall. They reduce numbers of GP visits, emergency hospital visits for falls or ill-health, and increase the number of years that older residents will retain independence in their homes. The majority of health and social care services are provided for the highest needs of the most frail and medically vulnerable. Conversely if preventative support such as meals on wheels can be accessed early enough, the need for more costly interventions can be reduced significantly.
- **Increase community resilience to times of crisis:** Meals on wheels services can be 'scaled up' to meet increased need for instance when weather is bad during the winter and it is harder for older people to leave their homes safely. Indeed during the initial Covid-19 lockdown many services saw substantial spikes in demand with many scaling up rapidly to meet this. During crisis these services can thus keep older residents safe, connected and nourished when they are at increased risk of isolation and malnutrition.
- **Can create good jobs for local communities:** With proper investment, these services create good jobs and in particular for people most at risk of unemployment as a result of the pandemic, as many delivery staff are people previously employed in service sector jobs.

Despite all of this, meals on wheels services have been cut in many areas in recent years - according to the National Association of Care Catering meals on wheels service across the country have reduced by at least 42% and in London less than 10 boroughs provide or fund the service. Now more than ever we must support older and disabled people to be able to stay healthy, safe and nourished in their own homes.

*Continue...*

We urge you to review the council's spending on food for older and disabled people in your area, and in particular to ensure that funding for meals on wheels services is made available. Across the country, numerous community groups have started providing meal delivery services for those in need during the initial lockdown. But to be sustainable, these groups need financial backing as well as support to integrate with adult social care so that they can access regular and appropriate referrals. Indeed, robust referral systems are as vital as financial support, and the council has a vital role to play in ensuring this holistic and integrated approach is made possible.

We urge you to ensure that your council:

1. **Protects, reintroduces or enhances a local meals on wheels service.**
2. **Promotes a 'more than meal' approach** where services include welfare checks, links to other support, and a lifeline of regular contact.
3. **Champions innovative and strategic approaches** that recognise the long-term benefits and cost-savings of meals on wheels for older people, for communities, and for the public purse.

**Support robust and well integrated referral routes for meals on wheels services**, that automatically link this service as a referral option for caseworkers on hospital discharge teams and in adult social care

## Useful Information

### Vitamin D

Vitamin D deficiency can lead to a disease called rickets. A lack of minerals in the bone means they can become too soft and bend, particularly the bones of the legs and pelvis. In adults, long-term vitamin D deficiency also makes bones soft, but instead of bending, the bones of the legs, pelvis and lower back will ache, and break easily.

Because vitamin D is involved in so many things in our bodies, there are also lots of other symptoms of deficiency. Tiredness and fatigue, low mood and getting more colds and flu can also be indicators that vitamin D levels are too low.

If you are concerned that you may be suffering from low vitamin D, make sure you eat plenty of oily fish and eggs. If you do not like these foods, vitamin D food supplements are widely available.

### Fake Paypal

There have been 21,349 Action Fraud reports featuring fake PayPal phishing emails recorded between January to September 2020, with a total reported loss of £7,891,077.

Online marketplace sellers have received a fake email that appears to be from PayPal, stating that the fraudster has made a payment for an item. A follow up email requests the shipping tracking order reference, prompting the seller to dispatch the item. The fraudster relies on the seller not verifying that the payment has been received in their PayPal account, before shipping the item leaving the seller at a loss.

The reporting to Action Fraud does not suggest that PayPal are implicated or complicit in any fraud, either directly or indirectly; the use of a popular brand may be exploited by fraudsters to commit fraud.