



Waterford Age Friendly Strategy

2023-2028





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Introduction

On behalf of Waterford City and County Council and the Waterford Age Friendly Alliance, I am pleased to launch this Age Friendly City and County Strategy 2023-2028. This second strategy document is a new and ambitious plan to improve the lives and well being of older people in Waterford City and County.

In delivering this strategy, the Waterford Age Friendly Alliance will ensure that the City and County continues to have an age-friendly approach to policies, programmes, services and infrastructure relating to the physical and the social environment, enabling older people to live in security, good health and continue to participate in society in a meaningful way.



This strategy was based on consultation with older people and people with an interest in issues that affect older people and this will continue to ensure that change happens in the most inclusive way possible.

The changing demographics in society caused by an increase in life expectancy present an opportunity for us all to work more creatively to improve the delivery of services and support for older people. The National Age Friendly Cities and Counties Programme, spearheaded at Government level, highlights the commitment of organisations across Ireland to work with the community for change.

I wish to commend all members of the Waterford City and County Age Friendly Alliance and all who contributed to the consultation meetings that have taken place across the City and County for embracing the collaborative approach to establishing this strategy and their commitment to ensuring that no sector of the community is left behind when it comes to the delivery of services. I ask all involved in the development of this strategy to bring the visions and goals outlined to life and make a whole-hearted commitment to the values we have signed up to.

Michael Walsh,

Chief Executive, Waterford City and County Council Chairperson, Waterford Age Friendly Alliance

List of Acronyms & Abbreviations

A&E Accident and Emergency **AFI** Age Friendly Ireland

AFCCP Age Friendly Cities and Counties Programme

AIRO All-Island Research Observatory
ATM Automated Teller Machine

BE Bus Éireann

CCTV Closed Circuit Television
CSO Central Statistics Office

CES Community Employment Scheme
EQLS European Quality of Life Survey
GAA Gaelic Athletic Association

GP General PractitionerGPS Global Positioning System

HaPAI Healthy and Positive Ageing Initiative

HSE Health Service Executive

IBEC Irish Business and Employers Confederation

IT Information Technology

ICA Irish Countrywomen's Association

IFA Irish Farmers' Association
LEO Local Enterprise Office

LGBTI Lesbian, Gay, Bisexual, Transgender, Intersex

LECP Local Economic and Community Plan

LLW Local Link Waterford

NDA National Disability AuthorityNGO Non-Governmental Organisation

NMCIS North Munster Citizen Information Service

OPC Older People's Council

PPN Public Participation Network

RSS Rural Social Scheme

SETU South-East Technological University
SILC Survey on Incomes and Living Conditions

SFA Small Firms Association

TILDA The Irish Longitudinal Study on Ageing

WAFA Waterford Age Friendly AllianceWAFP Waterford Age Friendly Programme

WAP Waterford Area Partnership

WCCC Waterford City and County Council

WICOP Waterford Integrated Care for Older People

WLP Waterford LEADER Partnership
 WOPC Waterford Older People's Council
 WSP Waterford Sports Partnership
 WHO World Health Organisation

WWETB Waterford and Wexford Education and Training Board



Background

active ageing.

Positive ageing has been defined as "an individual, community, public and private sector approach to ageing that aims to maintain and improve the physical, emotional and mental wellbeing of older people. It extends beyond the health and community service sectors, as the wellbeing of older people is affected by many different factors including socio-economic status, family and broader social interactions, employment, housing and transport. Social attitudes and perceptions of ageing can also strongly influence the wellbeing of older people, whether through direct discrimination or through negative attitudes and images." (Office of an Ageing Australia, cited in the PAPAI Initiative)

The World Health Organization's (WHO) Global Network of Age Friendly Cities and Communities, to which Ireland is affiliated, was established in 2010 to connect cities, communities and organisations worldwide with the common vision of making their community a great place in which to grow old. As a response to global population ageing and rapid urbanisation, it focuses on action at the local level that fosters the full participation of older people in community life and promotes healthy and

Age Friendly Ireland is a shared service of local government hosted by Meath County Council. The shared services manage the national Age Friendly Programme, which is affiliated to the World Health Organization's Age Friendly Cities and Communities Network. The national programme is operated through a team-based framework of 31 local Age Friendly Programmes hosted by local government. The National Age Friendly Shared Service supports cities, counties, towns, villages and rural communities across Ireland, helping them to prepare for the rapid ageing of our population by paying increased attention to the environmental, economic and social factors that influence the health and well-being of older adults.



Established in January 2014 as an intermediary organisation — one that supports the provision of services by another organisation rather than providing direct services itself — Age Friendly Ireland coordinates the national Age Friendly Cities and Counties Programme. The Programme brings together, supports and provides technical guidance to the 31 local-authority-led, multi-agency Age Friendly City and County Programmes in every local authority area.

Age Friendly Ireland provides the links between the National Positive Ageing Strategy and the Global Age Friendly Cities Guide that was published by the World Health Organization in 2007. The Age Friendly Cities and Counties Programme represents the formal localisation, in Ireland, of this defined global programme.

The WHO programme involves a multi-agency approach to age-related planning and service provision. Applying this methodology consistently throughout the country, Age Friendly Ireland helps cities and counties to be more inclusive of older people by addressing their expressed concerns. Age Friendly Programmes work to provide walkable streets, suitable housing and transportation options, access to key services and opportunities for older people to participate in community activities. In doing so, they help to equip communities to become great places, and even lifelong homes, for people of all ages.

Local Age Friendly Programmes are informed by a positive ageing perspective and seek to enhance and improve the lives of older people across the country by giving them a voice in the decision-making processes that affect their ability to live full and active lives. In Waterford, older people are represented by Waterford Older People's Council (WOPC). Initiatives focus on areas such as housing, health, transport, caregiving, community engagement, volunteering, social inclusion and combatting isolation among older citizens. The organisations affiliated with the Waterford Age Friendly Alliance (WAFA) are set out in Appendix Two.

Each local Age Friendly Programme operates with the same basic structure, which relies on an active Older People's Council and an Age Friendly Alliance to provide coordination. Some support is provided by the Local Authority. In Waterford, an Age Friendly Programme Manager role has been provided via a part-time position to which a portion of the time of an administrator is allocated. Similarly, a technician with the Housing Department has been assigned the role of Age Friendly Housing Technical Advisor, while an Inter-departmental Steering Group on Age Friendly Matters has been created to coordinate the work of the Local Authority in this area.

The local Age Friendly Alliance is a high-level cross-sector group chaired by the Chief Executive of the Local Authority (or an independent chair). The member agencies of the local Age Friendly Alliance form a strategic partnership to develop and oversee the Age Friendly Strategy. Members include the Local Authority, the Health Service Executive, the Education and Training Board, An Garda Síochána, the Chamber of Commerce, the third-level education sector and other relevant stakeholders. including, in some cases, an elected member who represents a Strategic Policy Committee of the Local Authority.



The Older People's Council is a representative group of older people established by the Local Authority as part of the local Age Friendly Programme. The Older People's Council is a two-tier structure with an elected Executive Committee and a wide membership base. Older People's Councils identify priority areas of need and have an advocacy role through which they raise issues of importance to older people. They also influence the decision-making process of the local Age Friendly Programme and participate in national-level structures. The key purpose of the Older People's Council is to provide the authentic voice of older people and represent the diversity that exists among the county's ageing population. Older People's Council representatives are key collaborators and stakeholders who co-design the actions and objectives of the Age Friendly Strategy.





Age Friendly Alliance Members:

HSE, Transport, Older People's Council representatives, An Garda Siochana, University Partnerships, Education and Training Board, Voluntary Organisations

National Advisory Group:

3 x Local Authority Chief Lrecutives, 4 x Assistant Secretaries, HSE National Director, Assistant Commissioner, CFO Chambers Ireland

The first Age Friendly Strategy for Waterford City and County was launched in 2017 and covered the period between 2017 and 2022. As this strategy was coming to the end of its lifetime, and in line with national guidelines which sought to ensure that each Local Authority had a new strategy in place for the post-2022 period, the Alliance decided, in 2021, to appoint external facilitators to assist in the preparation of the strategy for 2023–2028. A brief was developed and approved by the Alliance and, following an open tendering process conducted through eTenders, Community Engagement Partners (CEP), with the assistance of Tom Dowling and Ellenora Lynch, were appointed to carry out this work.

The appointed company's approach was very much focused on facilitation. CEP worked with a broad range of stakeholders to capture ideas, opinions and wishes; practical suggestions about what could and should be done; and insights into barriers. The work was guided by a Steering Group of the Age Friendly Alliance, which made an important contribution.

This strategy represents the outcome of that process.

Methodology

The Alliance devoted time and resources to ensure that older people's views were sought from individuals, older people's organisations and those providing essential supports. It was also agreed that the final strategy would focus on actions which would be prioritised through consultations, realistically achievable and capable of being implemented locally. Actions which were important but could not be delivered locally were not ignored, but they were included in a separate category of representation-based actions. Waterford Age Friendly Alliance (WAFA) will make representations at a national level on relevant issues identified by older people to inform policy and influence the allocation of resources required from Government to provide older people with a high quality of life.

The methodology involved a range of steps:

- 1. A review of key literature was carried out in order to identify some national and international perspectives on the factors that lead to a high quality of life for older people. A full literature review was judged to be neither necessary nor feasible, as the body of reports and research in this area is quite substantial. However, the review that was carried out was thorough and it identified some key points that were used to inform the shape of the final strategy.
- 2. A demographic analysis and projection was carried out to determine the number of older people in the county, now and in future years, with the numbers likely to experience dementia noted in different age categories.
- **3.** A review was carried out of the WHO Guidelines on Age Friendly Cities and Communities, and these were taken into account in identifying the areas on which to concentrate in this strategy.
- 4. A review of the current strategy was carried out in association with the Age Friendly Programme Coordinator of the City and County Council, and a decision was made on which actions should be carried forward into the new strategy, either unchanged or in an amended form, and which should not.
- **5.** A number of meetings were held with the Older People's Council to gather its members' views, and a number of the Council's documents were also reviewed.
- **6.** A series of meetings were held with the nine Waterford Age Friendly Thematic Sub-Groups, which had been central to the implementation of the previous strategy.
- **7.** A series of four coffee mornings with older people were organised throughout the city and county in order to gather the experiences and views of older people in an informal setting where discussion could take place.
- **8.** A survey was carried out with individual older people in order to gather their views on what was important to them in relation to the quality of their lives.
- **9.** A survey was carried out with organisations that work with older people to gather their views. 10. A number of meetings were held with personnel from key national and regional organisations in order to benefit from their perspectives.
- **11.** A number of presentations were made to the Waterford Age Friendly Alliance in order to ensure that its members were happy with progress.

Using all of the information and insights gathered from these processes, a number of key high-level goals were identified, together with objectives and indicators of achievement (Key Performance Indicators). Potential actions were also identified, and these have informed the Year One Action Plan, which is incorporated in this strategy as Appendix One.

During the course of the data-gathering process, it became clear that some of the actions that were needed in relation to major factors affecting older people could only be delivered at national level and they were therefore not suitable for inclusion in a locally focused strategy. However, in order not to lose these perspectives or ignore their importance, it was decided that they should be included as advocacy or representation-based actions: the importance of these matters to the achievement of a high quality of life for the older people of Waterford would be communicated to the appropriate national structures so as to influence actions and resource allocation.

Approaches to implementation and monitoring were also developed, and these are included in the strategy.

In identifying key areas of focus, particular attention was paid to national and international literature on age friendliness, the previous strategy and the survey outcomes. Other data, such as that derived from the coffee mornings and consultations with the Thematic Sub-Groups, was used to identify detailed actions and to confirm the key areas of focus to ensure that nothing of significance was being missed.





Summary of Key Findings

This part of the report presents summary findings arising from the various elements of the methodology. Details of these findings are contained in the appendices to this report.

Literature Review

There now exists very extensive literature regarding older people, their needs and the policies and practice of positive ageing. It was decided that a sample of this literature should be reviewed to examine the policy, knowledge and experience frameworks that should inform this strategy.

The following documents were amongst those reviewed:

- National Positive Ageing Strategy (Department of Health, 2013)
- Respect & Social Inclusion Age Friendly Themes: Combatting Ageism (HSE, 2018)
- Health and Positive Ageing Initiative Preliminary Report (HSE, 2018)
- Waterford Integrated Care for Older People (HSE, 2022)
- Ageing and Public Health An Overview of Key Statistics in Ireland and Northern Ireland (Department of Health, 2022)
- Responding to the Support & Care Needs of our Older Population: Shaping an Agenda for Future Action (SAGE, 2016)
- Housing for Older People: Future Perspectives (Age Friendly Ireland, 2016)
- Housing Choices for Older People in Ireland: Time for Action (ALONE, 2018)
- Agency and Ageing in Place in Rural Ireland (O'Sullivan, S., et al., 2022)
- Creating Age Friendly Environments in Europe: A Tool for Local Policymakers and Planners (WHO, 2016)

The volume of reports, research and public opinion on the needs of older people is very sizeable and can be overwhelming. This body of information is informed by different perspectives and motivations, and so it is not always straightforward to identify key thematic areas common to some or all of these sources of data. This review focussed on the small volume of the available literature which was deemed to be of most relevance to the Age Friendly Waterford Strategic Plan, and it included useful contextual information, as well as best practice documents.

Forecasts clearly show that the percentage of older people within our population is increasing, and some of them will need quite significant supports (e.g. people living with dementia). It is a foregone conclusion that society needs to respond to this change; however, it can be difficult to prioritise a future challenge when there are so many fires to fight at the present time.

The WHO's approach to creating age friendly environments, as set out in its Global Age Friendly Cities Guide, focuses on three key areas consisting of municipal services, physical environment and social environment. These, in turn, contain eight domains – outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, and community support and health services. This categorisation is useful, as it helps to guard against assumptions that the needs of older people are dominated solely by the built environment around them, and housing in particular. Understanding the social needs of older people in their day-to-day lives is also integral to ensuring that their quality of life remains high. These considerations were taken into account when the Goals, Objectives and Strategic Actions outlined here were being developed, and they are well reflected in the Goals and Objectives set out for year one (see pp. 26—37). In addition, the WHO framework was used to proof

the plan's Goals, Objectives and Strategic Actions to ensure that all of the important issues set out in that framework were taken into account.

In considering the WHO framework, it was noted that, while some issues are important to older people, they also have relevance across all of society. However, the actions in this strategy focus on those areas which are specific to older people.

Ageism is encountered by many older people, and much of the literature emphasises the importance of adequate and effective engagement – the voices of older people must be sought and taken into account when decisions are made that may affect their lives.

As highlighted throughout the consultation and review processes, housing is a key issue for older people. The "continuum of housing" is a useful concept to embrace, as it articulates so clearly and concisely the general trajectory of housing requirements as people age. The housing needs of people do change as they grow older and as their health and associated care needs become more extensive; however, this is not unexpected, and it could be addressed through adequate engagement, forethought and planning.

Our cities, towns, villages and communities need to consider how they will continue to meet the needs of their residents as demographics change and the percentage of older people within their populations increases. The importance of Universal Design principles was noted across many documents, and its inclusion within the Waterford City and County Development Plan is welcome, offering opportunities to improve our built environment and shared spaces.

Three of the four key local policies and programme documents relevant to this strategy that were examined during its preparation are, themselves, currently under review. These are the Local Economic and Community Plan, the Local Development Strategy and the Social Inclusion Community Activation Programme. The reviews provide Age Friendly Waterford with an excellent opportunity to engage with these programmes and with how they can also support older people. Whilst key decisions around these programmes may be made at national level, the ways in which they are implemented are usually decided at local level, ideally in consultation with the people their activities aim to support.



Key Findings

Some key findings from the literature review, set out below, have been used to inform this strategy's Goals, Objectives and Actions.

1. There are four national positive ageing goals identified in the National Positive Ageing Strategy, 2013:

National Goal 1 - Remove barriers to participation and provide more opportunities for the continued involvement of people as they age in all aspects of cultural, economic and social life in their communities, according to their needs, preferences and capacities.

National Goal 2 – Support people as they age to maintain, improve or manage their physical and mental health and well-being.

National Goal 3 – Enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.

National Goal 4 - Support and use research about people as they age to better inform policy responses to population ageing in Ireland.

- Cross-cutting objectives which are to be reflected in all actions involve:
- Combatting ageism
- Improving information provision
- 2. Many older people have life-limiting health or disability conditions that impact significantly on their quality of life.
- **3.** Older people experience exclusion and ageism either conscious or unconscious in a variety of ways.
- 4. Older people require a greater number of specific interventions to ensure that they can continue to have a high quality of life into their older years. The population of Ireland, in common with all other European countries, is rapidly ageing, due to a combination of lower birth rates and increased life expectancy. As a result, the scale and range of the interventions required will increase significantly. It is important that provision is made for the older age groups in our communities at present and also that we plan for the major increases in provision required in the future.
- **5.** Some of the principal requirements for a high quality of life for older people are:
 - · Well-designed and maintained outdoor spaces and buildings
 - Accessible transportation
 - Appropriate accommodation
 - Opportunities for social participation
 - Experience of respect and social inclusion
 - Opportunities for civic participation
 - Opportunities for employment
 - Appropriate methods of communication
 - Availability of accessible information
 - Provision of adequate and appropriate community and health services
- **6.** Interventions at both national level and local level are required and identified in this strategy. Demographic and Other Data

Through the Central Statistics Office, relevant data is available at city/county level, at regional level and at national level. Some analysis of census data helps to indicate both the overall situation of Waterford City and County with regard to matters that have an impact on older people and how those matters are distributed geographically. However, given that the last census for which detailed data is available was undertaken in 2016 and census data from 2022 will be available within the next six months, it was decided that only a basic analysis of the 2016 data should be carried out. Data from the 2022 census will be used as part of the implementation process to identify priority areas for interventions and actions, for example.

Overall, the data which was analysed indicated that:

- 1. There is going to be a rapid increase in the percentage of older people in the population of Waterford City and County over the next 20 years, with those aged 65+ increasing from 23% of the total population in 2021 to 36% in 2041.
- 2. The percentage of the Waterford City and County population in older age groups is slightly higher than the national average, and therefore the expectations of both outcomes and needs in Waterford should be not less than those identified at a national level. In this regard, it was estimated by the CSO in 2020 that 33% of the males and 34% of the females in Waterford were aged over 50, with corresponding national figures of 31% and 32%.
- 3. These population changes will produce increasing needs, particularly in the areas of housing and other accommodation; care for those with dementia; and health services of all kinds, including primary care, day care, hospital in-patient care and long-term residential care.
- 4. The demand for other services will also increase if policy objectives are to be achieved. These services will include home help (both housekeeping and personal), ancillary health services and suitable public transport.
- **5.** Poverty risk indices have been rising for older people, but they are still significantly lower than those for the population as a whole.
- 6. Particular consideration needs to be given to older people in marginalised groups, as their life expectancy tends to be lower. For example, the Survey of Incomes and Living Conditions (SILC) suggested that, while 33.8% of White Irish were aged 50+, this fell to 11.3% for Travellers, 7.0% for Black and Black Irish and 9.2% for Asian and Asian Irish. This may, of course, be explained by patterns of in-migration giving rise to a different age mix in some ethnic groups, but further work is needed in this area.
- 7. In a study carried out by the CSO in 2021 to assess the relative impact of the COVID pandemic and the social measures taken in response, it was shown that these impacts were variable for older people. In general, they had suffered less emotionally than younger people, though they were more concerned now about retaining their social ties. From the point of view of financial impact, those over 70 tended to be less impacted than the rest of the population, but those between 55 and 69 were impacted only slightly less than the rest of the population.



Other data from a recently published Health Statistics Report was also reviewed, but this data tended to confirm the findings and observations discussed above.

Survey of Older People

An online and hard-copy survey of older people was also carried out. The main points emerging from the survey were as follows:

- 1. Overall the level of response and respondents' demographic profile ensured that views were gathered from people who came from a variety of age groups, were in different household arrangements, were located in both urban and rural locations and had different occupational circumstances.
- **2.** A broad range of factors were considered to be important to achieving a high quality of life for older people. However, amongst the most important were:
 - Easy access to GP services
 - · Regular contact with friends and family
 - Access to housing suitable to individual needs
 - Accessible public transport
 - Safe and negotiable public spaces
 - Home care
 - Feeling valued and respected
 - Efficient and affordable home heating
 - · Easy access to non-GP primary care services, and
 - Easily accessible and relevant information
- 3. There seems to be substantial variation in the perception of how well these various needs are catered for in Waterford City and County. In relation to many of the factors, the numbers who indicate that they are very well or well provided for are similar to those who say they are poorly or very poorly provided for. This suggests that there is a significant "point in time" element associated with the experience of older people with regard to these issues, and that specific circumstances at a particular moment can vary widely from place to place.
- 4. Access to information is regularly noted as an important factor in providing a high quality of life for older people. When asked about their sources of information, respondents indicated that radio, internet and word of mouth were the sources most used, with the latter being significantly the most important.
- 5. Awareness of organisations with an Age Friendly mandate was quite mixed, and this suggests that there is some work to be done in promoting these organisations. When asked to name other organisations with an Age Friendly component, people mentioned a very broad range of organisations, and this suggests that there are many gateway organisations available to be used to gather and spread information.
- **6.** The most important challenges to a high quality of life which were recorded were finance/cost of living, isolation/loneliness, access to health services, and anxiety and health status. The first of these was by far the most mentioned.
- 7. The actions which would contribute to an improved quality of life were identified as:
 - Improved health services
 - Age-suitable activities
 - Cost of living support
 - Improvements in transport-related matters
 - Less use of technology as a medium of communication, and
 - Safety/security



Survey of Age Friendly Organisations

An online survey of Age Friendly Organisations was also carried out. The main points which emerged from this survey were as follows:

- There is a mix of organisations in the area, with some serving the whole of the city and county, but a considerable number operate in specific geographic areas only.
- The respondent organisations addressed a wide range of issues, with isolation, physical health, mental health, poverty, addiction and anti-social behaviour being those mentioned most often.
- 3. Most respondent organisations stated that they took the needs of older people into account all of the time or most of the time. The methods they used included consulting with older people, interacting with individual older people to address their needs, taking account of the physical needs of older people in the design of facilities, making specific presentations to older people and creating safe spaces for older people to express their needs.
- The specific needs of older people addressed by the organisations were wide-ranging, with isolation, age discrimination, lack of involvement, physical and mental health and recreation amongst those mentioned most often.
- The factors most affecting the quality of life of older people include easy access to GP services, regular contact with friends and family, access to suitable housing, accessible public transport, consideration by event organisers of the needs of older people, home care, feeling valued and respected, efficient and affordable home heating, easy access to non-GP primary care services, good quality food and nutrition, and easily accessible and relevant information. There were many other factors mentioned and almost all were given some level of importance.
- There was very wide variation in the perception of how well the various factors mentioned are provided for in Waterford. Overall, however, responses suggested that improvement in provision was required across the board. A substantial number of the responses indicated that the provision was neither good nor poor, and many also indicated that the provision varies a lot. The responses suggest that there are few areas where intervention is not needed.
- 7. The following areas were identified for action, and are listed in order of their number of mentions:
 - Transport
 - Public safety
 - Health-related areas
 - Housing
 - Information
 - Social participation

Other areas were also mentioned but with less frequency.

Coffee Morning Consultations

An effort was made to arrange area-based workshops with older people before summer 2022, but these proved relatively unsuccessful, and the numbers attending were very low. Following consultation with the Steering Group, it was decided to recast these events as coffee mornings at which older people could share their views and experiences and suggest areas where action was most needed.

These events proved significantly more successful, and the revised model had an overall attendance of well over 100 people at four different locations in Waterford City, Tramore, Dungarvan and Lismore. Those who attended were extremely active and expressive participants. A very rich body of insight, experience and opinion was gathered, much of it very detailed.

The information from these coffee mornings was used to proof the plan's Goals, Objectives and Strategic Actions to ensure that no major theme was being ignored. It was also used to identify some specific actions which might be taken, and these have been included in the strategic actions below.

The information from these sessions will be collated in a separate document which can be used to assist in the implementation of the strategy, as much of the information is very detailed and experience-based.

Overall, what was remarkable was that, at a strategic level, the issues emerging from the coffee mornings were very consistent with those which had already been identified in various reports, policies

and strategies and in the other consultation processes used. They also reflected, however, variations in the experiences of individual participants regarding specific issues and the extent to which the quality of the lived experience of individual older people is a critical factor in creating an age friendly city and county.

Review of Existing Strategy

A review of the existing strategy was also carried out in consultation with the Age Friendly Programme Manager. Actions to be continued and included in the new strategy were identified, as were those to be



discontinued and those to be continued but in a modified form. This assessment is reflected in the strategy's proposed Goals, Objectives, Strategic Actions and KPIs.

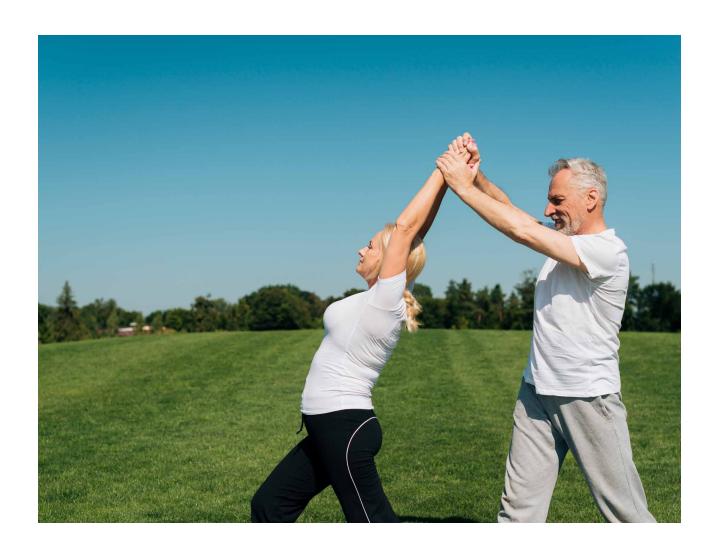
In deciding on the actions to discontinue, the primary consideration was whether or not they were appropriate to the Age Friendly Strategy or whether they were actions that should be delivered through some other mechanism. Occasionally, an action on which no progress had been made and on which it was unlikely that progress would be made in the future was eliminated. It was noted that considerable progress had been made on many actions, however, and this progress is also reflected in the new strategy.

Meetings with Thematic Sub-Groups

Meetings were also held with each of the Thematic Sub-Groups that had been established under the existing strategy to focus on:

- Respect and social inclusion
- Social participation
- Civic participation and employment
- Home environment
- Health/active living
- Transportation
- Built and natural environment
- Safer communities
- Communication and information

These meetings were extremely useful, as these sub-groups had acted as the implementation mechanism for the previous strategy and they were in a position to provide insights into the many challenges involved in implementation. Their insights were taken into account in the process of identifying and shaping objectives and strategic actions under the new strategy.





Goals, Areas of Focus, Actions, Indicators & Responsible Bodies

On the basis of the various sources of information outlined above, and taking into account the feedback from the coffee-morning consultations, the review of the previous strategy and the outcomes from the Thematic Sub-Group meetings, an initial set of goals, objectives, actions, indicators and responsible bodies was drawn up. They seek to address in one way or another all of the key issues identified.

Goals: These are the high-level outcomes which are being sought for key issues that affect the lives of older people. They seek to establish how things would be with regard to each matter if it were in a satisfactory state.

Areas of Focus: These are somewhat more detailed than the goals, and they identify the areas that need to be focused on if the goals are to be achieved. It is difficult to go directly from goals to actions, and objectives linked to areas of focus help to bridge that gap.

Actions: These are the things that need to be done. They will be set out in an annual action plan which will be published. The first year's action plan is incorporated in this strategy.

Indicators: Indicators are included for each objective. The indicators suggest the factors that would be affected in a positive way if the actions being taken were effective. Indicators are not targets, and so they are not recorded numerically or defined by time limits. It is anticipated that targets will be included in the action plans which, as outlined below, will be prepared by the Implementation Sub-Groups.

Goals

Taking account of the focuses and issues arising from the literature review, the previous strategy and the various consultation processes, a number of goals for positive ageing in Waterford were identified.

It is important to note that, for many of these goals to be reached, action will be required at both national and local levels. While this strategy is focused on those actions which can be realistically delivered at local level, it also incorporates a representational element in respect of actions which can only be taken at national level, but which are, nevertheless, fundamental to the creation of a high quality of life for older people in Waterford City and County.

These goals should, therefore, be read in this context and it should be noted that many goals can only be delivered through a mix of national and local actions.

Goal 1.

Information will be provided in ways that are easily accessible to older people, and their needs will be considered when systems and programmes of communication and information dissemination are being put in place.

Information is recognised as an important aspect of inclusion for older people and the issue came up regularly in local consultations. How and where information is provided are crucial considerations.

Goal 2.

Accommodation appropriate to the individual needs of each older person will be available within their own communities, in line with the overarching aim that people should be in a position to remain living independently in their own homes for as long as possible.

The question of accommodation and people being able to live independently in their own homes is a regular theme in all relevant policy statements.

Goal 3. Older people will be, and feel, safe and secure in their homes, within the public realm and in public open spaces, both urban and rural.

Older people being and feeling secure in their homes and as they move around their environments is another regular theme.

Goal 4. Older people will have the opportunity to easily participate in and contribute to a broad range of social, recreational and civic activities, including those targeted at older people specifically and those open to the community at large.

This addresses one of the key areas of participation, as well as, in a tangential way, the issue of ageism.

Social, personal, commercial, medical and community services sufficient to enable older people to live independently and participate in community life to the greatest extent possible will be available at locations and in ways that reflect the specific needs of older people.

This addresses a broad range of considerations that arise in all policies, including the critical issue of health and access to health services.

Goal 6. Social and recreational facilities, particularly those which are public or publicly funded, will have regard to the specific needs of older people in the course of their design and construction.

This addresses a practical aspect of participation, as facilities need to be able to accommodate older people if participation is not to be compromised.

Goal 7. Accessible transport facilities will be available in both urban and rural areas at the times required to enable older people to attend events and access services.

Transport is consistently referred to as a critical element of efforts to combat isolation and facilitate participation.

Goal 8. Employment opportunities will be available for those older people who wish to continue in employment and different opportunities for entering retirement will be provided.

Employment and retirement issues also arise regularly, and addressing them is key to combatting ageism. It is proposed that combatting ageism be addressed by actions that tackle its specific causes but also by actions at a more general level across all areas of society.

Goal 9. Older people will have the resources necessary to be able to live an independent life, where their basic needs can be met and where they do not live in want or the fear of want.

This addresses the issues of poverty and deprivation, which have so many knockon effects. While data suggests that older people may experience consistent poverty

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somewhat less than other age groups, recent cost-of-living increases and energy costs are impacting on areas that are critical to the quality of life of older people.

Goal 10.

Older people will have clear opportunities to contribute to climate action and to have their voices on climate change heard.

This issue is not referenced regularly in national or international policy on ageing, but it reflects concerns arising from local consultations, and it is also the most pressing national and global policy issue of our day. Older people have a stake in the future of the planet and have roles as stewards of the environment on behalf of future generations, and so they should have an opportunity to make their unique contributions to the discourse on the issue.

Goal 11.

Ageism will be eliminated from public, commercial and community life.

While many of the actions set out above will contribute to delivering on this goal, it is also appropriate to include combatting ageism as a distinct goal in order to highlight the potential impact of ageism and promote efforts to help combat it. in a targeted way.

Goal 12.

A programme of ongoing research and data-gathering will be in place to inform actions and to monitor and evaluate their impacts.

While data-gathering is included in actions under other goals, it is also considered that the generation of good data is critical to properly target action to benefit older people in Waterford City and County. At present, the available data is weak and not sufficiently broken down to sub-county level, and some of the data which is available is not shared.

Areas of Focus and KPIs

Appendix One sets out the Year One Action Plan arising from the strategy. That Action Plan contains the strategy's Goals, Areas of Focus and KPIs, as well as the actions that are planned to commence in Year One and the implementing body or bodies for each action.



Actions at National Level

During the course of consultations, a number of matters were identified as being important that cannot, in the main, be addressed at local level. Many of these are well-known issues, but it was nevertheless decided that they should be brought to the attention of the principal state bodies responsible for the areas in question. The following is a list of those actions and the goals with which they are associated.

Goal 2. That accommodation appropriate to the individual needs of each older person would be available within their own communities, in line with the overarching aim that people should be in a position to remain living independently in their own homes for as long as possible.

- Specifically include the housing needs of older people in the Housing Needs Analysis of each Local Authority (with respect, in particular, to housing type and location), and advocate for the modification of the current national model to include this focus.
- Request a review of the process and timescale involved in securing house adaptation grants for older people and improve/refine them where possible.
- Make representations to the Department of Health (DoH) and the Health Service Executive (HSE) regarding the scale and location of long-stay nursing home care within easy access of all communities, rural and urban.
- Make representations to the DoH and the HSE regarding provision for nursing home care for those with dementia and similar conditions.
- Make representations to the HSE and DoH with regard to the nature of homecare being provided.
- Make representations to Government that, for those who wish it, incentives be developed and made available, for people to rightsize their accommodation.

Goal 5 That social, personal, commercial, medical and community services sufficient to enable older people to live independently and participate in community life to the greatest extent possible would be available at locations and in ways that reflect the specific needs of older people.

- Make representations to the HSE and DoH regarding the nature and extent of homecare provided.
- Make representations to the HSE and DoH regarding the critical importance of access to GPs and primary healthcare services necessary to the well-being of older people.
- Make representations to the HSE and DoH in relation to the critical importance of access to specialised health services that support the well-being of older people.

Goal 7. That accessible transport facilities would be available in both urban and rural areas at the times required to enable older people to attend events and access services.

• Make representations to the National Transport Authority (NTA), Transport Infrastructure Ireland (TII) and the Department of Transport (DoT) to allow the provision of new bus stops at a local level, even if this has to be subject to approval at national level.

- Make representations to encourage Irish Rail to enhance its response to those who illegally occupy booked seats and refuse to move, as this behaviour is particularly problematic for older people.
- Make representations to encourage Irish Rail to review the timings of trains to Dublin from Waterford and their appropriateness in the context of hospital appointments.

Goal 8. That employment opportunities be available for those older people who wish to continue in employment and that different opportunities for entering retirement be provided.

• Make representations to relevant Government departments regarding the negative implications that taking up voluntary or paid work of any kind have for carers and the payment of allowances to them.

Goal 9. That older people would have the resources necessary to be able to live an independent life where their basic needs can be met and where they do not live in want or the fear of want.

- Make representations to the Department of Social Protection (DSP), in particular about maintaining the purchasing power of older people, especially in periods of significant inflation.
- Make representations to the DSP about ensuring that the costs of energy, food, accommodation and transport in particular do not become excessive (especially in times of inflation) and that messaging regarding planned supports be provided as early as possible and with certainty.
- Make representations to the DSP, DoH and Department of the Environment, Climate and Communications (DECC) in particular about the provision of free broadband to older people and especially to those in receipt of the non-contributory old-age-pension.



Implementation

While the development and adoption of this strategy is a major exercise involving many stakeholders, its implementation is critical. Ultimately, unless serious efforts are made to carry out the actions and address the areas of concern set out in this strategy, the exercise will have been fruitless. The commitment of all stakeholders to its implementation is a critical first step. Since the adoption and implementation of the strategy is part of Government policy, it is reasonable to expect that all local and state agencies would demonstrate that commitment. This is not to say that every action identified will be implemented or every outcome achieved, but that sincere and consistent efforts will be made to those ends.

Successful implementation of a strategy or action plan relies on a mixture of structure, process and commitment. The commitment element has been referred to above. The following framework is proposed with regard to structure and process.

Structures and Processes

The key structural elements involved in implementation are:

- The Local Authority
- The Age Friendly Programme Manager
- The Age Friendly Alliance
- · Implementation Sub-Groups, and
- The Older People's Council

Reference to some key processes is included both in the descriptions of the structures and as a separate item.

The Local Authority

The Local Authority is specifically identified as part of the implementation structure of the Age Friendly Strategy. Local Authorities provide the leadership for the Age Friendly Programme nationally and locally – they provide the Age Friendly Programme Manager, and the Chief Executive chairs the Age Friendly Alliance. In addition, many of the services and activities that impact on the quality of life of older people lie within the remit of, or are heavily impacted on by, the activities of the Local Authority. The Local Authority plays a key leadership role, and so it also has a vital role to play in the implementation of the strategy and in motivating the commitment and contribution of other key stakeholders.

One of the factors critical to ensuring commitment by all stakeholders to the implementation of the strategy is the involvement of staff or volunteers who have levels of authority sufficient to ensure that implementation decisions can be made positively and quickly. They should also be in a position to ensure that the culture of their organisation is such that addressing the needs of older people is known by all to be a matter of high priority.

In Waterford City and County Council, a new cross-departmental team of high-ranking officials has been established under the leadership of the Chief Executive. This team will facilitate effective implementation by the Local Authority of the actions assigned to it in this strategy.

The commitment of the Council in this area has also been demonstrated by the appointment of an Age Friendly Housing Specialist, who will review all housing proposals to maximise the use of Age Friendly design principles reflected in the Universal Design approach.

The Age Friendly Programme Manager

This title is used to refer to the staff member in the Local Authority who is assigned the responsibility, amongst others, of coordinating the age friendly functions of the city and county and of servicing the Age Friendly Alliance. This is a very important role. In order for any strategy or plan of action to be implemented, the availability of a position that has the facilitation of its implementation as a key function is critical. In this context, as the importance of responding to the current and future needs of Ireland's ageing population increases and as the scope of that response expands, it will be important that adequate resources are provided to perform this function.

It is also anticipated that, within each of the key stakeholder organisations, a person of some seniority is assigned the role of Age Friendly Liaison, that this person sits on the Alliance and that their contact details are shared amongst the relevant implementing partners.

The Age Friendly Alliance

Age Friendly Ireland describes the Age Friendly Alliance as "a high-level cross-sector group, often chaired by the local authority Chief Executive, whose member agencies form an overarching strategic partnership." The Age Friendly Alliance is a critical part of the governance of the Age Friendly Programme. As noted above, its role is strategic rather than operational. As a strategic body it can be expected to set the direction for the Age Friendly Programme, decide on priorities, review progress and decide on responses where progress is not being achieved. It will also be responsible for setting



up the sub-structures through which the more operational parts of the strategy will be carried out. However, one of the critical parts of the work of the Alliance, over and above its strategic and operational responsibilities, is the sharing of insights and issues between stakeholders, so that the learning from the Alliance's discussions can be brought back to the various stakeholder organisations for action. It is therefore important that the representatives of stakeholder organisations who sit on the Alliance have enough seniority to be able to speak on behalf of their organisation and ensure that the wishes of the Alliance are understood as being of high importance by the stakeholder organisation. In addition, it is important that all key stakeholders, and particularly those with an implementation role are represented on the Alliance. To that end, the Alliance will review its member bodies as a matter of priority. Amongst the bodies identified in this strategy that may have a significant contribution to make are Active Retirement, the Waterford Volunteer Centre and the South-East Technological University, but others will also be considered.

Implementation Sub-Groups

Under the last strategy, nine Thematic Sub-Groups were established to pursue the implementation of different groups of actions set out in the strategy. This principle of the Alliance acting as the strategic body and Sub-Groups acting as operational sub-committees is appropriate, and it will be continued under the current strategy. However, a number of matters will be modified or clarified:

- The Sub-Groups will be linked more closely to specific actions or action areas under the strategy and will, therefore, be likely to change somewhat as each Action Plan is adopted.
- The Sub-Groups will have written terms of reference which will include a protocol as to how they will operate and how their meetings should be convened and run.
- The Sub-Groups will continue to have the capacity to include representatives of stakeholders not represented on the Alliance.
- The Sub-Groups will prepare rolling annual or bi-annual plans with targets, for approval by the Alliance and on the basis of priorities set by the Alliance.
- The Sub-Groups will report to the Alliance against the KPIs and targets set out in their plans.
- Sub-Group meetings will receive written reports which will detail progress towards plan implementation and any difficulties being experienced.
- The Older People's Council will continue to be represented on each Sub-Group, acting as a link between those whose needs the Age Friendly Programme seeks to meet and those carrying out the actions.

These measures will link the operational part of the strategy to the strategic outcomes, strengthen the oversight role of the Alliance and give clear direction and purpose to the Sub-Groups.

Which Sub-Groups to establish is a matter for the Alliance, but it is suggested that the goals set out in this strategy could be used as the basis on which such groups are established.

The Older People's Council

While it does have some operational role and, indeed, has carried out some notable actions in the past, the Older People's Council is included here in recognition of its function as the representative body of older people in Waterford. In that context, it forms a crucial part of the governance structure, as it provides the link between older people and both the strategic and operational functions of

the Age Friendly Programme. In Waterford, as experienced during the preparation of this strategy, the Older People's Council is active and engaged. One matter to be considered, however, is how to increase its profile and the understanding of what it does. From the responses to the survey of older people which was carried out as part of the preparation of the plan, it appears that there is room for enhancement in both of these areas, though the difficulties this will involve are not underestimated. A number of the actions included in the strategy have the potential to be of benefit to these efforts.

National and Regional Structures

It is acknowledged that there are national and regional structures for the Age Friendly Programme, and it is expected that the Alliance, WOPC and the Age Friendly Programme Manager will continue to engage with and participate in those structures. It is not considered that these structures need to be discussed in detail within this plan.

Approach to Implementation

It is understood that collaborative actions will be part of the approach of Age Friendly strategies and this understanding sets an appropriate expectation. However, experience suggests that, in general, when strategies or action plans identify a number of bodies responsible for the implementation of an action, there may be a limited likelihood of such an action taking place. The approach adopted in this strategy is that, in the vast majority of cases, one body is assigned the responsibility for implementing an action. It is then expected that the responsible body should be able to seek assistance from other stakeholders, as it considers necessary, in the expectation that any such request will receive a positive response. In order for this approach to work, it needs to be included as part of the model adopted by the Alliance and communicated in writing to each of the stakeholder bodies. The approach means that, even if a stakeholder does not have responsibility for an action, it is not absolved from participation on request. Experience suggests that, where a body responsible for a collaborative approach is able to seek the assistance it requires, a greater number of successful outcomes are achieved than where a plan or strategy is prescriptive about those that must be involved.



Commencing the Implementation

This is a five-year strategy. It is understood that not all matters can be addressed at the same time, and so one of the first implementation tasks is prioritisation. This is something that will be reflected in the Annual Action Plans prepared by the Alliance. The Year One Action Plan has been decided and is incorporated as Appendix One in this document.

In deciding what to prioritise, the following principles were applied:

- 1. Those matters which were considered to be of greatest urgency and importance were given priority.
- 2. Some one-off actions which can be completed without undue difficulty were also prioritised. This applies, in particular, to the advocacy or representation-based actions which are included.
- 3. Actions which it may take the full length of the strategy to complete, or that will be of indefinite duration, were considered for early commencement, though not all of these will be ready to commence in Year One.
- **4.** Where a particular body or role is charged with implementing a considerable number of actions, regard was given to the capacity of that organisation.
- **5.** Some actions were prioritised across all goals.
- **6.** Precursor actions (those which need to be completed before other actions can be commenced), were also considered for prioritisation, though, again, not all of these could be commenced in Year One.
- **7.** Actions which are already in hand and partly completed were prioritised, unless there were good reasons not to do so.

The prioritised actions are identified in the Action Plan. They will be remitted to an implementation group that will develop implementation plans which will identify the tasks required. These plans will then be presented to the Alliance for approval.

Monitoring, Evaluation and Review

Monitoring, evaluation and review are critical to the successful implementation of any plan or programme. Monitoring refers to the measurement of pre-determined indicators, evaluation refers to the assessment of the implications of the data produced by the monitoring and review refers to the consideration of changes to the plan or programme that are suggested by the monitoring and evaluation processes.

These processes can take place at a number of levels:

- The monitoring of inputs or actions
- The monitoring of outputs or achievements
- The monitoring of outcomes or impacts (this refers to the extent to which actions, policies and programmes are effective in achieving the changes intended)

Targets and Indicators

Monitoring of the strategy's implementation will be supported by setting targets and indicators. Targets designate precise quantitative achievements, while indicators are proxy measures of the

extent to which goals or objectives are being met. Some suggested indicators are set out above, and it is anticipated that targets will be identified by the Sub-Group Action Plans.

There are many types of targets and indicators, but two of the most important in this context are "end-state targets and indicators" and "trend targets and indicators". "End-state" refers to the final desired situation it is wished to achieve; "trend" refers to the direction of change and the speed at which progress is expected to be made in achieving the end-state.

It will be noted that indicators have been suggested for objectives and not for each individual action. Since indicators are proxy measures of achievement, care has been taken to ensure that there is a clear rationale as to why the measure is being used, and confidence in it is a good proxy for the objective involved. The mere availability of data will not be used as the basis for deciding on its suitability. Input, output, impact and process indicators should all be considered for inclusion.

Evaluation of targets and indicators

The monitoring of targets and indicators refers to the actual measurement of what is taking place; the evaluation involves judgement regarding the changes that are occurring and which the monitoring captures. The strategy and action plans will have certain expectations, as well as objectives and timeframes for their achievement. Not all targets and timescales will be met. The evaluation part of the process involves the making of a judgement as to whether progress is satisfactory, even if targets have not been met, or whether a significant response is required to bring about an improved performance.

Review of the Strategy

The strategy should be reviewed on a regular, though not unduly frequent, basis. There will be a different timeframe for measuring inputs, outputs and outcomes. This is partly due to the time that needs to be permitted to elapse between actions and outcomes and partly due to the availability of the different types of data for monitoring and evaluation.

The review process will take into account the evaluation referred to above, and, if significant change is required, the review process will be the mechanism through which such changes are made to the strategy.

Responsible bodies

It is envisaged that monitoring will be carried out by the Implementation Sub-Groups, while the evaluation and review processes will be the responsibility of the Alliance. However, all stakeholders will need to be involved in the monitoring aspect of the strategy, as it will be the responsibility of each stakeholder to report on their achievements in the context of the actions for which they are responsible.

Year One Waterford Age Friendly Strategy Action Plan			
Goals and Areas of Focus	KPIs	Responsible Body	
Goal 1. That information would be provided in ways that are easily accessible to older people and that their needs would be considered when systems and programmes of communication and information dissemination are being put in place WHO Domain(s): 7 Communication and Information	Develop set of guidelines	WAFP/WOPC/NMCIS	
That accessible systems would be in place for the provision to older people of information necessary for them to complete a service request or task and to encourage them to participate in social or community activity	Protocol developed¹ Number using the service	WAFP/WOPC/NMCIS/ WAP	
Develop and implement a programme that targets to older people information about the services and supports available through the Citizen Information Service, including the publication of a weekly Know your Rights column in the press	Number of weekly col- umns printed	NMCIS	
Continue the publication and dissemination of the PPN newsletter, including content/a section dedicated to the information needs of older people	Number of newsletters issued	PPN	
That dedicated older person information slots delivered at an appropriate pace on broadcast media would be in place	Number of information slots Number of minutes Number of listeners		
Engage with local broadcast media to secure the provision of a regular spot for information targeted at older people and establish how such information would be presented	Number of media slots secured	WAFP/WOPC	
That age-appropriate practical training in the use of digital technologies, to enable greater accessibility, would be more widely available in the city and county	Number of courses Number of participants	Waterford Libraries/ WAFP/WOPC	
Provide training – such as the Hi-digital programme – to older people, which will enable them to access digital services more readily	Number of participants involved in training	WCCC Library Service	
That there would be access to assistance to aid older people in completing application forms and other submissions, whether online or otherwise	Number of locations at which assistance available Number providing assistance Number availing of assistance	WAFP	
Continue and expand the provision of assistance in locations such as libraries to older people in order to enable them to complete applications and other tasks online	Number of locations where assistance in place	WCCC – Library Service	
That gatekeeper organisations (those organisations which are in direct contact with clients – older people and their families in this case), and particularly the PPN, would be assisted to disseminate information in an age-appropriate way and that there would be greater use of social media, especially WhatsApp and Facebook, as means of distributing information	Number of items of information disseminated Number of media posts Number of media posts	PPN/WCCC/WAFP	
Develop and implement a system by which gatekeeper organisations deliver important information to older people through a variety of means, including snowball techniques, whereby information is passed on to an initial set of contacts who are asked to pass the information on to others and so on	System created	WAFP	

Year One Waterford Age Friendly Strategy Action Plan			
Goals and Areas of Focus	KPIs	Responsible Body	
Maintain the Digital Inclusion Partnership to include WAP, ETB, WLP, HSE, WCCC, Waterford Library Service and private providers to combat digital exclusion for older people and to provide training, support and guidance	Number of older people supported	WAFP	
That the role of the Age Friendly Strategy and its achievements would be communicated more widely, particularly to older people	Level of awareness in the community of the WAFA, WAFS and WOPC	WAFP	
Develop a promotion programme for the strategy and the WAFA to promote their importance and achievements to all but particularly to older people	Promotion programme developed	WAFP	
That the profile of Age Friendly organisations would be raised amongst older people and their families	Level of awareness in community organisations of the WAFA, WAFS and WOPC Level of awareness of Age Friendly organisations		
Continue to promote Positive Ageing Week and International Older Persons Day		WOPC	

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 2. Accommodation appropriate to the individual needs of each older person will be available within their own communities, in line with the overarching aim that people should be in a position to remain living independently in their own homes for as long as possible. WHO Domain(s): 3 Housing		
That an appropriate range of house types would be available to meet the needs of older people	Number of older people on the housing list Number of older people living unwillingly in isolated housing Number of older people wishing to move to alternative accommodation Number of house adaptation grants issued and availed of Number of older people in assisted living spaces and number of applicants	WCCC Housing
Include the housing needs of older people specifically in the Housing Needs Analysis of the Local Authority with respect, in particular, to housing type and location, and advocate for the modification of the current national model to include this	Housing needs analysis modified	WCCC Housing
Promote and empower the role of the newly appointed Housing Age Friendly Champion in the Local Authority and develop proactive and promotional, as well as reactive, roles for this position	Role expanded	WCCC Housing
That the process for accessing assistance for the adaptation of existing houses would be as Age Friendly and streamlined as possible	Number of older people living in in long-stay ac- commodation in their own communities Number of applications Number of grants	WCCC Housing/AFHH
Review the process and timescale involved in getting house adaptation grants for older people and improve/refine where possible	Process reviewed	WCCC Housing/WAFP/ Age Friendly Homes Officer
Bring together a group of organisations to develop an action plan to expand the current care and repair service beyond its current area of service	Programme expanded	WAFP
That for those who wish to avail of it, help with rightsizing would be available	Number availing of such a service Number of moves initiated	WCCC Housing

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 3. That older people would be, and feel, safe and secure in their homes and within the public realm and public open spaces, urban and rural		
WHO Domain(s): 1 Outdoor Spaces and Buildings		
That the role of the Gardaí in providing a sense of security to older people would be recognised and enhanced	Number of older house- holds visited by Gardaí Reported sense of security among older people	AGS
Continue and expand direct Garda engagement with older people regarding home security	Number of engagements carried out	AGS
Continue and expand Garda attendance at community events to promote security for older people in accordance with a scheme to be determined between the WAFA, AGS and the PPN	Number of events attend- ed	AGS
Review, continue and develop the Garda radio programme on crime and consider a special element for older people	Number of programmes presented	AGS
That a collaborative approach to dealing with elder abuse would be put in place and operating	Number of incidences of elder abuse identified and addressed	CSP/AGS
That footpath and walkway design and maintenance would have regard to the needs of older people and that walkways would be kept free of obstruction	Number of audits carried out Extent of actions arising from the audits Number of new toilets to which access is possible	WAFP/WCCC
Establish and implement a programme of walkability audits and action plans based on their outcomes	Number of audits con- ducted	WAFP/WCCC
Develop an action plan for increased access to toilet facilities for older people. In particular, engage with those who currently provide and manage toilet facilities to identify the circumstances and mechanisms through which such access could be provided	Number of facilities ac- cessible	WCCC/WAFP
Develop a living history project to capture the memories and cultural knowledge of older people and share it with younger members of the community	Project developed	WCCC – Library Service/ WOPC
Engage with those providing localised services relevant to older people, such as ALONE and Active Retirement, to encourage continued expansion of those services in a coordinated way	Number of services engaged with	WAFP plus various

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 4. That older people would have the opportunity to easily participate in and contribute to a broad range of social, recreational and civic activities, including those targeted at older people specifically and those open to the community at large WHO Domain(s): 5, 6 Respect and Social Inclusion and Civic Participation and Employment		
That isolation and loneliness would be addressed through positive actions to promote participation and engagement	Number of older people using the various services	WOPC/WAFP
Continue the rollout and development of the Age Friendly Business Recognition Programme	Number of businesses participating	WAFP/LEO/Chambers
That all important sports grounds and similar facilities would be Age Friendly	Number of sports grounds participating	
Identify key sports and recreation facilities to be improved from an Age Friendly perspective	Number of facilities identified	WAFP/WSP
Engage with the owners and operators to carry out audits of these facilities from an Age Friendly perspective	Number of audits undertaken	WAFP/WSP
That volunteer roles suitable for older people would be identified and availed of	Number of volunteer roles identified and advertised Number of volunteer roles filled by older people	
Develop guidelines in respect of volunteer roles that would suit older people	Guidelines developed	WVC/WAFP

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 5. That social, personal, commercial, medical and community services sufficient to enable older people to live independently and participate in community life to the greatest extent possible would be available at locations and in ways that reflect the specific needs of older people WHO Domain(s): 6, 8 Civic Participation and Employment Community Support and Health Services		
That timely and convenient access to medical services including GP services, specialised services and homecare services would be available to all older people	Number of GPs in the city and county by area Average appointment delay Satisfaction with GP service	WAFP/WICOP/HSE
Promote and disseminate the model of Social Prescribing that has been developed in Waterford	Promotion programme developed	WAFP
Provide health-literate information sessions and leaflets on health and nutrition	Number of information sessions provided	WCCC – Healthy Waterford/LCDC
Continue the successful cooperation between existing day centres to help them work together and jointly market their services	Number of cooperation meetings undertaken	WAFP/WOPC
Continue engagement between the WAFA/WOPC and Sláintecare, Waterford Integrated Care for Older People and Age Friendly Hospitals to continue to progress positive outcomes for older people, particularly through the establishment and use of consultative groups representative of the local people being served	Number of consultative groups formed	HSE/WOPC/WICOP
That convenient and affordable transport to services would be available to older people, that mobile services would be provided where necessary and that online services would be provided where appropriate	Percentage of older people able to access services without difficulty	LLW/WAFP/BE
That opportunities would exist in all communities for older people to engage in physical activity appropriate to their age and circumstances	Number of programmes and events Availability of equipment at suitable locations	WSP/WAFP
Review the availability of resources to facilitate physical activity by older people in each community	Review completed	WSP
That older people would be encouraged to participate in decision-making and policy-making bodies as representatives of the community and voluntary sector	Number of older people participating Whether linkage group established Number attending linkage group meetings	WAFP/WSP
Establish an Older Persons Linkage Group within the PPN for organisations involved with older people	Linkage group created	PPN/WOPC

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 6. That social and recreational facilities, and particularly those that are public or publicly funded, would have regard to the specific needs of older people in the course of their design and construction WHO Domain(s): 1, 4 Outdoor Spaces and Buildings and Social Participation		
That design criteria for Age Friendly buildings would be disseminated and used	Whether handbook developed Number to whom it is disseminated References to it in design briefs	WAFP

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 7. That accessible transport facilities would be available in both urban and rural areas at the times required to enable older people to attend events and access services WHO Domain(s): 2 Transportation That there would be dedicated transport schedules to meet the travel patterns of older people		
That a robust system of public transport to medical appointments would be in place	Whether transport schedules re developedNumber of older people using the scheduled services Number and distribution of new bus stops	LLW/WAFP
Examine the possibility of the provision of some public transport schedules to specifically meet the needs of older people	Number of new services provided	LLW and BE
That more bus stops and shelters would be in place	Number and location of new bus stops and shelters	LLW/WAFP
Develop a programme of new bus stops at key locations		WAFP/LLW
That the availability of Age Friendly Parking would be widespread, that parking for the disabled would be adequate and well located and that provision would be made for parking by those delivering services to older people	Percentage of required disabled parking spaces that have been provided Number of car parks with Age Friendly spaces Number of Age Friendly spaces	WAFP/WCCC
Promote the provision of Age Friendly parking in all car parks	Number of new Age Friendly parking spaces	WAFP/WCCC
Review the availability of parking for those providing services to older people and make provision for such parking by relaxing rules or providing reserved parking as appropriate	Review undertaken	WCCC/AGS/WAFP
That a shared transport information portal including Bus Éireann, Local Link, Irish Rail and private transport companies would be in place delivering real-time information	Whether portal established Number of participating organisations Level of accuracy Numbers using it	

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 8. That employment opportunities be available for those older people who wish to continue in employment and that different opportunities for entering retirement be provided WHO Domain(s): 6 Civic Participation and Employment		
That appropriate employment opportunities would be identified, made available and promoted	Number of employers participating Number of Age Friendly jobs advertised Numbers reporting age- discrimination Number of older people employed	WAFP
Engage with employer organisations to review barriers to employment for older people and develop or access and disseminate best practice guidelines on this issue	Review of barriers undertaken	WAFP/IBEC/ISME/ SFA/LEO

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 9. That older people would have the resources necessary to be able to live an independent life where their basic needs can be met and where they do not live in want or the fear of want WHO Domain(s): All Outdoor Spaces and Buildings, Transportation, Housing, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Communication and Information	Number of new Age Friendly parking spaces	WAFP/WCCC
Community Support and Health Services		
Organise Benefits Check events for older people at venues throughout the city and county	number of benefit checks complete	NMCIS/WOPC

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 10. That older people would have clear opportunities to contribute to climate action and to have their voices on climate change heard WHO Domain(s): 4 Social Participation		
That structures would be in place to facilitate the voices of older people being heard regarding a variety of climate action issues	Whether sub-group established Number of submissions made Response to submissions Number of retrofits in older people's homes Number of businesses participating	WAFP
Establish a climate action Sub-Group of the WOPC to pursue climate action issues relevant to older people, such as unnecessary packaging, lack of availability of smaller units of grocery items, lack of availability of smaller servings in catering establishments and similar	Subgroup formed	WOPC
Develop a targeted promotional campaign for energy improvement grants and examine ways of providing finance for older people to facilitate retrofitting	Promotional campaign developed	WOPC/WCCC/WAFP

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 11: That ageism would be eliminated from public, commercial and community life WHO Domain(s): All Outdoor Spaces and Buildings, Transportation, Housing, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Communication and Information, Community Support and Health Services		
Develop a programme which highlights the dangers and impact of ageism and ways of addressing it	Programme developed	WAP/WOPC/WAFP

Year One Waterford Age Friendly Strategy Action Plan		
Goals and Areas of Focus	KPIs	Responsible Body
Goal 12: That a programme of ongoing research and data-gathering is put in place to inform actions and to monitor and evaluate their impacts WHO Domain(s): All Outdoor Spaces and Buildings, Transportation, Housing, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Communication and Information		
Develop a programme of research data-gathering in collaboration with SETU, the PPN and other relevant organisations	Programme developed	WAFP/SETU

Appendix One – Organisations affiliated with the Waterford Age Friendly Alliance

Waterford City and County Council

Waterford Older People's Council

Waterford Wexford Education and Training Board

Waterford Local Link

An Garda Síochána

Health Service Executive

Respond! Housing Approved Housing Body

Waterford Sports Partnership

Waterford Chamber of Commerce

St Bridget's Family Resource Centre

Dungarvan Care of the Aged

Citizens Information Centre Waterford

Library Service Waterford City and County Council

ALONE









