

This checklist outlines how health and wellbeing boards might expect to see their concern with loneliness and isolation amongst older people reflected in partnership working between CCGs, local authority departments and the voluntary sector.

Health and wellbeing boards that have identified loneliness and isolation amongst older people as an important issue in their JSNAs and their JHWSs might expect to see it reflected in the work of Clinical Commissioning Groups (CCGs) and local authorities.

Health and wellbeing boards might expect that CCGs will:

- work with local authorities, to better understand the issue and develop the evidence base about need and how best to address it for example, developing protocols for data sharing;
- encourage GP practices to link to and work in partnership with other statutory and voluntary organisations with a role to play for example, referring older people to services designed to prevent and reduce loneliness and isolation;
- jointly commission services with local authorities.

They might expect that local authorities will:

- develop an overall strategy for reducing loneliness and isolation amongst older people across their departmental boundaries;
- work in partnership with CCGs to develop the evidence base to inform both strategy and service development;
- lead on the development of partnerships to ensure that local resources are being used to best effect to address loneliness and isolation amongst older people and
- jointly commission services with CCGs, particularly services aimed at reaching the mostly lonely and isolated older people.