Active Ageing Strategy
2016-2021

Our Vision is one of Northern Ireland being an age friendly region in which people, as they get older, are valued and supported to live actively to their fullest potential; with their rights respected and their dignity protected.
Ministerial Foreword

We are delighted people in our society can now look forward to many more years of healthy life than ever before. In making the right decisions now, we hope to enable more people to enjoy longer, healthy and active lives in the future, whilst ensuring that appropriate support is there for those who need it.

We have developed this Active Ageing Strategy with the help, assistance and expertise of older people, voluntary and community sector organisations and Government departments. We are particularly grateful for the advice provided by our Ageing Strategy Advisory Group, chaired by Claire Keatinge, the former Commissioner for Older People. We are also appreciative of the people who contributed to the public consultation, especially those who attended the consultation events and made them lively interactive sessions.

The Active Ageing Strategy highlights how much older people contribute to the quality of life in communities; it draws attention to the issues hindering some older people from living more actively; it stresses their rights, value and contribution and challenges all forms of ageism: the negative stereotyping of older people. The Strategy is designed to make a real difference to the quality of life of older people to enable as many people as possible to enjoy the benefits and rewards of life for as long as possible.

ARLENE FOSTER MLA
First Minister

MARTIN McCUNNESS MLA
deputy First Minister

EMMA PENGELLY MLA
Junior Minister

JENNIFER McCANN MLA
Junior Minister
CHAPTER ONE

Introduction

1. One of the great success stories of modern times is that we are living longer. Over the ten year period between 2003 and 2013 the number of adults here aged 65 and over increased by 22%. The trend is expected to continue with the proportion of the population in this age group projected to increase by 63% to just under half a million people by 2033.

2. This is great news for us all because not only are we living longer but our society as a whole will benefit enormously from the many contributions that older people make to our communities. It is vital to stress this because of the prejudice and ageism that some older people face.

3. Older people make a major contribution to our society in many ways including:
   – their leadership and membership of many local organisations, groups and societies;
   – their contribution to community safety through Neighbourhood Watch and helping children travel to school safely;
   – in many cases, continuing to work;
   – sharing their skills and experience;
   – underpinning the viability of many local services; and
   – contributing to childcare for their families.

4. While these cannot be easily quantified in cash terms, they are valuable and vital to society’s development and should be recognised as such.

5. However, we must not lose sight of the significant challenges faced by some older people. Working with the age sector we know that these include:
   • Poverty and fuel poverty;
   • The need for more appropriate housing;
   • Better access to transport;
   • Appropriate health and social care provision;
   • Social isolation and loneliness;
   • Access to education;

1 http://ageing.oxfordjournals.org/content/43/3/379;
• Improved access to leisure opportunities;
• Better employment opportunities; and
• Freedom to live without fear of crime.

6. Whilst many older people are living full active lives, some are facing real difficulties and we need to address these.

7. In addition, members of minority groups, including the black and minority ethnic groups and those from the lesbian, gay, bisexual and transgender communities face particular challenges and these must be tackled.

Who are older people?

8. This Strategy focuses on removing the barriers to people living actively as they age; it therefore includes in its remit not just older people, but also people in their forties and fifties. In these decades, some people leave the workforce permanently; this is often a result of health conditions or caring responsibilities and this can create financial difficulties for them in later life.

9. As well as people in their forties and their fifties, the Strategy also focuses on the needs of older people. As we are often asked who we mean by this, for the purposes of this Strategy we are defining older people on the basis set out in the legislation that created the Commissioner for Older People. That law defined an older person to mean a person aged 60 or over; however, in particular circumstances people aged 50 or over can also be categorised as an older person.

The importance of active ageing

10. People here are living longer and their health has improved greatly over the last century. Good health enables us to get the most out of our lives. The World Health Organisation (WHO) has defined health as ‘a complete state of physical, mental and social well-being and not simply the absence of disease or infirmity’. This supports the view that health is largely determined by our social, economic, physical and cultural environment, employment status, educational attainment, appropriate housing, etc. The key message of this Strategy is that keeping active, both physically and mentally, as we get older is the most effective way to enable as many of us as possible to enjoy the benefits of living longer and to minimise the problems that some older people face. We need to encourage and support active ageing and to tackle the barriers to active ageing. This

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2 http://www.legislation.gov.uk/nia/2011/1/section/25
means addressing the problems that older people face now and encouraging people in mid-life to live more active, healthier lives.

11. Additionally, when people are younger, if they hold negative attitudes towards older people and the ageing process, there is research that suggests that when they in turn become older they may experience poorer health and even a shorter life than people who have always held positive views about ageing. The prejudice against ageing therefore becomes almost a self-fulfilling prophecy. Therefore, it is in all our interests to view the entire life course as the positive fulfilling journey that it can be.

12. Below we provide information on the Strategy’s vision, goals, outcomes and proposed new programmes to tackle the problems facing older people. This Strategy was issued for public consultation in the spring of 2014 and the consultation included a series of both public and sector-specific meetings, with both paper and online options to provide comments, as we wanted to ensure we provided as many people as possible with the opportunity to comment. The Strategy will be implemented using an outcomes based accountability process, which will focus departmental efforts on the changes we want to make (the overall outcomes), rather than focussing on the output targets of particular processes, which may not necessarily affect the overall outcome for older people. More information on this is available in Chapter 3.

Our Vision

Our vision is one of Northern Ireland being an age friendly region in which people, as they get older, are valued and supported to live actively to their fullest potential; with their rights respected and their dignity protected.

4 The consultation document is available at http://www.ofmdfmni.gov.uk/age
Purpose of the Strategy

13. The purpose of the strategy is to transform attitudes to, and services for, older people. As this is a Strategy of the NI Executive, all Ministers are committed to its delivery and so it will help provide direction for departments’ policies, make connections between strategies and lead to the improvement of services for older people. It will increase the understanding of the issues affecting older people and promote an emphasis on rights, value and contribution as opposed to needs, costs and burden.

United Nations Principles for Older Persons

14. The United Nations Principles for Older Persons were adopted by the General Assembly of the United Nations in 1991 to help decide what needs to be achieved to ensure the continued and enhanced inclusion of older people in society.

15. There are 18 principles (see Annex A), which are grouped under five themes:
   - Independence;
   - Participation;
   - Care;
   - Self-fulfilment; and
   - Dignity.

The high level goals of the Strategy – Strategic Aims

16. To improve older people’s lives, we have worked with older people and organisations representing older people to create a set of high level goals to achieve the Strategy’s vision. These goals, based on the five UN themes, and expressed as Strategic Aims, will be implemented by those Government departments and agencies with responsibility for the key programmes and services that improve the lives of older people, such as increasing older people’s income and providing health and social services.

Proposed new programmes to help older people

17. In addition to improving existing services to ensure they better meet the needs of older people, we have worked with departments to propose some new actions to tackle the challenges facing older people. These will be taken forward in phases. The first phase
will involve programmes or initiatives where resources have already been identified to make them happen. For the remaining programme proposals, additional resources will be required. Subject to funding becoming available, they will form the second phase. A list of these actions is attached at Annex B.

**European Innovation Partnership on Active and Healthy Ageing (EIP-AHA)**

18. The European Commission has identified active and healthy ageing as a major societal challenge common to all European countries. The EIP-AHA initiative aims to increase the average healthy lifespan of European citizens by two years by 2020 through enabling EU citizens to lead healthy, active and independent lives while ageing; improving the sustainability and efficiency of social and health care systems; and boosting and improving the competitiveness of markets for innovative products and services for older citizens.

19. The Department for Health, Social Services and Public Safety and the Health and Social Care Sector have been actively engaged with EIP-AHA and will continue to do so to work towards increasing the average healthy lifespan of citizens.
CHAPTER TWO

Strategic Aims

1. The following are the Strategic Aims of the Strategy. We have also identified a number of outcomes to be achieved in relation to these Strategic Aims and these are contained in chapter three.

**Strategic Aim 1: Independence:**
To achieve active independent living by older people through the co-ordinated delivery of:

- suitable warm housing;
- timely and reliable transport provision (in both rural and urban areas);
- adequate income;
- promoting community safety and tackling fear of crime; and
- user-friendly information.

**Strategic Aim 2: Participation:**
To achieve the active participation of older people in all aspects of life including:

- social participation and volunteering opportunities which help address isolation and loneliness; and
- the active participation and citizenship of older people in decision making on policies and the provision of services.
**Strategic Aim 3: Care:**
To support and promote the health and wellbeing of people as they get older and to achieve access by older people, free from age discrimination, to best practice high quality health and social care services, tailored to individual need, including appropriate domiciliary care supporting those with long-term conditions.

**Strategic Aim 4: Self-fulfilment:**
To support older people to develop to the fullest of their potential and well-being through flexible practices in the workplace and appropriate training and re-skilling and by providing education, training, leisure and cultural opportunities.

**Strategic Aim 5: Dignity:**
To ensure that older people are able to live in dignity and security, free from exploitation and physical and mental abuse; to protect their human rights and entitlement to equality of treatment and to challenge the pervasive ageism and age discrimination in our society, recognising the additional challenges faced by many older people caused by prejudices such as those based around a person’s disability, sexual orientation, race, gender and transgender status.
CHAPTER THREE

Outcomes based approach

1. Previous monitoring and evaluation of Government strategies tended to focus on inputs and outputs. For instance, how much was spent, how many people were trained or how many medical referrals were made. While this is important and valuable data, it does not tell us if the interventions have actually made people’s lives change for the better. Were those trained able to gain employment and stay in that employment? Did those who were medically referred gain better health outcomes?

2. This Strategy will be implemented using an outcomes-based approach. Outcomes Based Accountability (OBA) is a method of planning and assessing performance that focuses on the results, or outcomes, that we intend to achieve.

3. OBA is a method that:
   • helps stakeholders to agree on a common language by clearly defining core concepts (such as ‘outcome’, ‘indicator’ and ‘performance measure’);
   • brings together key stakeholders and provides them with a structured approach to help improve outcomes; and
   • provides a framework, enabling discussions to take place about how to continually measure and improve outcomes.

4. OBA is a disciplined way of outcome-based decision making as part of the planning, delivery and reporting for projects, partnerships and communities. It provides a focus on the impact of policies and involves having fewer, better performance measures. The method allows a clearer way to manage improvement in service delivery and report results.

5. Crucially at a time of significant financial constraints the outcomes based accountability approach provides a framework to assess the effectiveness and cost efficiency of individual programmes in delivering on the overall agreed outcomes.

6. The following outcomes, informed by the consultation process, have been developed for the Active Ageing Strategy:

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8 For more information on the particular form of outcomes based accountability (sometimes called results based accountability) that we are using, visit: http://resultsaccountability.com/
Active Ageing Strategy – Outcomes

• Older people live independently for as long as they can, free from poverty and in suitable, safe homes.
• Older people are involved in their family and community and in civic life.
• Older people are healthier for longer.
• Older workers remain in employment for as long as they wish or need to.
• Older people participate in cultural, educational and physical activity.
• Older people’s dignity and human rights are effectively safeguarded.
7. The following diagram outlines the links within the Strategy -

**The Active Ageing Strategy**

**Vision**
Northern Ireland is an age friendly region in which people, as they get older, are valued and supported to live actively to their fullest potential; with their rights respected and their dignity protected.

**UN Principles for Older People**
- Independence
- Participation
- Care
- Self-fulfilment
- Dignity

**Strategic Aims**
- To achieve active independent living by older people
- To achieve the active participation of older people in all aspects of life
- To promote the health of people as they get older
- To support older people to develop to the fullest of their potential
- To ensure older people are able to live in dignity

**Outcomes**
- Older people live independently for as long as they can
- Older people are involved in their family and community
- Older people are healthier for longer
- Older workers are supported to remain in employment for as long as they wish
- Older people participate in cultural, educational and physical activity
- Older people’s dignity and human rights are effectively safeguarded

**Delivering Social Change oversight committees**

- Shaping the Strategies, Policies, Services of Departments, Agencies, Health & Social Services.
- New Projects to tackle the challenges Older People face
CHAPTER FOUR

Implementation of the Strategy

1. The Active Ageing Strategy will be implemented through the Delivering Social Change initiative, a series of high level scrutiny committees that focus on social policy issues and ensure that these are taken forward in a cross-departmental way. The majority of the work that will contribute to the achievement of the Strategy’s vision will be carried out by departments and agencies such as health and social care trusts (which include hospitals). This is because these organisations provide the key services that improve the lives of older people such as pensions, benefits, the health service, social services, help with improving work-skills and others.

The voluntary and community sectors and older people

2. OFMDFM will also liaise with its Ageing Strategy Advisory Group, which includes older people and members of groups representing the interests of older people. We will explore with this group, which has played such an important role in providing advice during the development of this Strategy, whether it will provide a monitoring and review role of the delivery of the strategy through meetings with Junior Ministers and officials. We will also make arrangements to enable older people directly to be involved in the monitoring of how the Strategy is implemented and to have direct access to appropriate officials.

Resources

3. Significant resources are currently deployed in providing a wide range of services for older people across Government. In addition to health and social care spending, improvements in the quality of life of older people are enabled by provision of free public transport for older people (reducing feelings of isolation), the Winter Fuel payments for older people and Warm Homes Scheme grants which assist in keeping older people warm and comfortable in winter. We have set out at Annex B some key actions to be taken forward within this Strategy, to help address some of the issues facing older people. It is our intention to take forward additional actions as a second phase of projects, subject to resources becoming available. Over the next Assembly Mandate, we propose to undertake a more systematic review of the wide range of measures directed to improve the lives of older people in order to ensure that we achieve the maximum outcome for the significant resources deployed in this area. The outcomes based accountability approach will be crucial in that regard.
Monitoring through outcomes based accountability indicators

4. As stated in Chapter 3, the Strategy will be implemented and monitored through an outcomes based accountability process. OFMDFM has developed a set of draft indicators for each of the Strategy’s Outcomes, which will be issued for public consultation. Once finalised, they will be used to establish the current position in relation to, for example, pensioner poverty, and will be the main method we will use to measure progress on the implementation of the Strategy.

5. The following diagram outlines the various levels of scrutiny committees that the implementation of the Strategy will be subject to through the Delivering Social Change initiative -

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DSC Ministerial Sub-Committee

Delivering Social Change Programme Board

DSC Equality & Human Rights Steering Group

Cross-departmental Implementation Group
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Review of the Strategy

It is proposed to informally review the Strategy in three years. The Strategy will also be formally reviewed towards its end (2021) to assess its success.

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Annex A

United Nations Principles for Older Persons

The United Nations Principles for Older Persons were adopted by the UN General Assembly (Resolution 46/91) on 16 December 1991. Governments were encouraged to incorporate them into their national programmes whenever possible. There are 18 principles, which can be grouped under five themes: independence, participation, care, self-fulfilment and dignity.

Independence

1. Older persons should have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.

2. Older persons should have the opportunity to work or to have access to other income-generating opportunities.

3. Older persons should be able to participate in determining when and at what pace withdrawal from the labour force takes place.

4. Older persons should have access to appropriate educational and training programmes.

5. Older persons should be able to live in environments that are safe and adaptable to personal preferences and changing capacities.

6. Older persons should be able to reside at home for as long as possible.

Participation

7. Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.

8. Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.

9. Older persons should be able to form movements or associations of older persons.
**Care**

10. Older persons should benefit from family and community care and protection in accordance with each society’s system of cultural values.

11. Older persons should have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.

12. Older persons should have access to social and legal services to enhance their autonomy, protection and care.

13. Older persons should be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment.

14. Older persons should be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives.

**Self-Fulfillment**

15. Older persons should be able to pursue opportunities for the full development of their potential.

16. Older persons should have access to the educational, cultural, spiritual and recreational resources of society.

**Dignity**

17. Older persons should be able to live in dignity and security and be free of exploitation and physical or mental abuse.

18. Older persons should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.

Further information on the United Nations Principles on Older Persons can be found here www.un.org/ageing/un_principles.html
## Annex B

### Active Ageing Strategy – first phase actions for which funding is available

<table>
<thead>
<tr>
<th>Programme Title</th>
<th>Summary</th>
<th>Lead Department(s)</th>
<th>Contributes to Other Outcome(s)</th>
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</table>
| **1. Active Ageing (Age Friendly Environments)** | To promote physical and social environments that support healthy and active ageing and a good quality of life for older people through assisting the eleven new councils to become Age Friendly Environments working towards the longer term goal of making Northern Ireland an Age Friendly region. | Department of the Environment (DOE), Office of the First Minister & deputy First Minister (OFMDFM), in association with the Public Health Agency (PHA). | • Older people are involved in their family, community and civic life.  
• Older people are healthier for longer.  
• Older people’s dignity and human rights are effectively safeguarded. |
<p>| <strong>2. Fuel Poverty/ Affordable Warmth</strong> | To assist older people with the provision of energy efficiency measures with the aim of improving thermal comfort and reducing energy costs. | Department for Social Development (DSD) | |
| <strong>3. Fear of Crime</strong> | To address fear of crime and promote community safety by engaging with and understanding the concerns of older people and addressing these through community safety initiatives and intergenerational approaches where relevant. | Department of Justice (DOJ) | • Older people’s dignity and human rights are effectively safeguarded. |</p>
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<tr>
<td>4. Engagement</td>
<td>To enable older people to inform policies that affect them through their engagement in development, delivery and review of the Active Ageing Strategy.</td>
<td>OFMDFM</td>
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<td>(Having a say)</td>
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<tr>
<td>5. Digital Inclusion</td>
<td>To ensure older people are not excluded from accessing information and services: by promoting digital inclusion through the Go ON NI programme which works with various organisations to recruit digital champions, provide tuition and detail the help that is available to assist older people and people with disabilities access online government services, and by providing information in alternative formats.</td>
<td>Department of Finance &amp; Personnel (DFP), OFMDFM</td>
<td></td>
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<tr>
<td>6. Volunteering Strategy</td>
<td>To encourage more older people to participate in volunteering; a series of actions / projects are being developed by the Department for Social Development.</td>
<td>Department for Social Development - DSD</td>
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<tr>
<td>Programme Title</td>
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| 7. Care – Dementia Services     | To improve the services and support arrangements currently available for people with dementia, their families and their carers through actions to complement recommendations in the Northern Ireland Dementia Strategy, November 2011. Phase 1 projects include work on awareness raising, information and support, training and development, delirium and short breaks and support to carers. | Department of Health, Social Services & Public Safety (DHSSPS), OFMDFM (in association with Atlantic Philanthropies) | • Older people live independently for as long as they can, free from poverty and in suitable, safe homes  
• Older people’s dignity and human rights are effectively safeguarded. |
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<tr>
<td>8. Self-fulfilment – Apprenticeship</td>
<td>A new model of apprenticeships as articulated in the NI Strategy on Apprenticeships will be open to all ages with the new model moving towards higher level apprenticeships and encouraging people already in the workplace to take part. Considering how the model is promoted and in particular the language used will be critical in order to appeal to older people.</td>
<td>Department for Employment &amp; Learning (DEL)</td>
<td>• Older People Participate In Cultural, Educational &amp; Physical Activity.</td>
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<tr>
<td>9. Self-fulfilment – Education and Leisure</td>
<td>To continue to promote the benefits of further education to all potential learners including older learners. Encouraging Higher Education Institutions (HEIs) to target, among others, adult learners as one of the groups underrepresented in higher education.</td>
<td>DEL</td>
<td>• Older people are involved in their family, community and civic life.</td>
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<td>DEL</td>
<td>• Older people are involved in their family, community and civic life.</td>
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<tr>
<td></td>
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<td></td>
<td>• Older people remain in employment for as long as they wish or need to.</td>
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<td>11. Dignity – discrimination</td>
<td>To end unfair age-related discrimination through developing and consulting on proposals to extend age discrimination legislation on the provision of goods, facilities and services.</td>
<td>OFMDFM</td>
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<tr>
<td>12. Dignity – decision making (Mental Capacity)</td>
<td>To uphold the right of people to make decisions in respect of their healthcare, welfare or financial affairs; and to provide support and protection to those who do not have capacity to do so. This will be achieved by progressing the draft Mental Capacity Bill which will introduce a new, single statutory framework governing all decision making in relation to the care, treatment or personal welfare of a person aged 16 or over, who lacks capacity to make a specific decision for themselves.</td>
<td>DHSSPS &amp; DOJ</td>
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**Active Ageing Strategy – proposed second phase actions for which funding is still to be secured**

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<tr>
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<tr>
<td>13. Poverty (Benefit Uptake)</td>
<td>To annually target up to 10,000 older people, older people living with a disability / care needs, older people as carers themselves and working age people caring for older people with the aim of increasing the uptake of benefits.</td>
<td>DSD</td>
<td></td>
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<td>14. Housing (Accessible Homes – Public Sector)</td>
<td>To meet the housing needs of older people and those with disabilities by implementing an Accessible Housing Register for social housing to identify and support the allocation of suitably accessible and adapted properties.</td>
<td>Northern Ireland Housing Executive (NIHE), DSD</td>
<td></td>
</tr>
<tr>
<td>Programme Title</td>
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</table>
| 15. Care – Dementia Services (phase 2)              | To improve the services and support arrangements currently available for people with dementia, their families and their carers through actions to complement recommendations in the Northern Ireland Dementia Strategy, November 2011. Phase 2 projects include e-health and social care, supported housing and dementia analytics. | DHSSPS, OFMDFM (in association with Atlantic Philanthropies)                         | • Older people live independently for as long as they can, free from poverty and in suitable, safe homes  
  • Older people’s dignity and human rights are effectively safeguarded. |
| 16. Care – My Home Life                             | To improve the quality of life of care home residents by implementing the “My Home Life” programme aimed at empowering and enabling older people to have more control over their lives. | DHSSPS                                                                            | • Older people live independently for as long as they can, free from poverty and in suitable, safe homes  
  • Older people’s dignity and human rights are effectively safeguarded. |
| 17. Care – Carers Support (Short Breaks)            | To improve the health and well being of carers and their choice and control over respite provision by establishing a Short Break Bureau and influencing change in traditional models of respite. | DHSSPS                                                                            | • Older people live independently for as long as they can, free from poverty and in suitable, safe homes. |
| Programme Title | Summary                                                                                                                                                                                                 | Lead Department(s) | Contributes to Other Outcome(s)                                                                。
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------------------------|
| 18. Self-fulfilment Education and Leisure Employment Opportunities (Working Life) | To implement a strategy to tackle economic inactivity in NI and to increase the employment prospects of economically inactive older people of working age (16-64), specifically those who have a work-limiting health condition or disability or those with family or caring commitments. The strategy will also seek to help other adults of working age who fall within the aforementioned economically inactive groups. | DEL              | • Older people live independently  
• Older people are healthier for longer |