Rural Pastoral Support Network
Project Report

A Research Project examining rural isolation in Lancashire

August 2015
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Left - Photographer - Rachel Molina Right – Photographer – Emma Rind
**Introduction**

The Rural Pastoral Support Network Project (RPSNP) began in November 2013 following research carried out by the Arthur Rank Centre into rural isolation across the UK. Initial findings from this research concluded that isolation and loneliness can result in an increased likelihood of physical and mental health problems among people of all ages and backgrounds including older people, parents, carers, children and young people. There was an awareness that the causes of this also included lack of transport, work or childcare commitments and being housebound. At this early stage, it was recognised that there were likely to be many people in local communities with the abilities and experience that could be used to contribute to addressing these issues, but initiatives and processes needed to be put in place.

The RPSNP was created in response to these needs and funding was then received from the Duchy of Lancaster Benevolent Fund to pilot a project in Lancashire. A partnership was developed with Blackburn Diocese to explore ways in which local rural churches could become part of the answer to some of these issues.

This report summarises the wider background relating to rural isolation in the UK, outlines the process and findings of the project and provides conclusions and recommendations which can be used by churches across Lancashire and further afield. It should also be read in conjunction the ‘Rural Outreach Toolkit’ which has been produced as part of the project. This can be found at [www.germinate.net/go/isolation](http://www.germinate.net/go/isolation)

**Rural Isolation and Loneliness**

It seems that scarcely a week goes by when the local or national media are not expressing concern about isolation or loneliness in our society. In a significant development during July 2014, it was announced that local authorities in England will now be measured according to their effectiveness in addressing social isolation in their communities and GP’s are being encourage to ‘prescribe’ activities which will address health concerns of social isolation. (A BBC report can be found [here](http://www.germinate.net/go/isolation))

Also, in September 2014, the Big Lottery announced the initial results of their new £82 million initiative ‘Fulfilling Lives: Ageing Better’ which aims to address social isolation among older people.

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“The greatest disease in the West today is not TB or leprosy; it is being unwanted, unloved, and uncared for. We can cure physical diseases with medicine, but the only cure for loneliness, despair and hopelessness is love. There are many in the world who are dying for a piece of bread but there are many more dying for a little love.”

Mother Theresa
1. Definitions

The terms isolation’ and ‘loneliness’ are often used interchangeably, but it is important to recognise that they are distinct concepts, and a good understanding of each is required.

Isolation is defined as ‘the absence of social contact’ e.g. friends, family, community involvement or access to services. It is therefore a tangible and measurable concept and isolation can often lead to loneliness. Practical steps can often be taken to address isolation such as improved transport links, increased use of internet or localisation of services and resources.

Loneliness is a ‘subjective, unwelcome feeling of lack or loss of companionship. It happens when we have a mismatch between the quantity and quality of social relationships that we have, and those that we want.’ Loneliness, therefore can be manifested very differently from person to person because each of us responds differently to circumstances around us. For example, some people are very happy and comfortable if they have no contact with others for days at a time and others begin to struggle if they see nobody else during the course of a day.

2. Statistical Information

Because of specific concern for older people in relation to isolation and loneliness, much of the statistical information on the subject relates to this age group. Some of the most startling figures find that:

- Half of all older people (about 5 million) consider the television as their main form of company
- Over 500,000 older people spent Christmas Day alone
- 12% of older people (over 1.1 million) feel trapped in their own home

Across the broader population, however, there is also evidence to show that at least 5% of people often feel lonely.

In rural areas of England, one in four older people lives alone currently and this is forecast to increase to nearly one in three (32%) by 2020. Also, farmers and farm workers – many of whom live in very remote locations - are at high risk of stress, depression and suicide. Farmers who develop mental health problems rarely approach mental health services, because of the perceived stigma and the shame of being seen as “not coping”. Mental health services may also be difficult to reach geographically. In addition, farmers work long hours and may not be able to take time off to use mental health services when GP surgeries or health clinics are open.
Specifically in Lancashire, 262,200 (22%) people live in rural areas, and groups particularly vulnerable to exclusion include the 4,175 lone parent households, and 13,665 pensioners living alone.  

3. Impact on health and wellbeing

There is increasing research being carried out internationally to explore the impact of isolation and loneliness on the health and wellbeing of individuals, as well as assessing the impact of various interventions.

A major study carried out in the US in 2010 found that lacking social connections can be as damaging to our health as smoking 15 cigarettes a day, being alcoholic, or not exercising and is twice as harmful as obesity. Other studies have found that loneliness can lead to increased risk of high blood pressure, physical disability, cognitive decline, depression and dementia (one study found that there is a 64% increased likelihood of developing dementia if you are lonely). Sadly, loneliness and low social interaction are also predictors of potential suicide among older people.

As a result, it is more likely that those struggling with isolation or loneliness will:

- Visit their GP more often; have higher use of medication; higher incidence of falls; and increased likelihood of long term care
- Undergo early entry into residential or nursing care
- Use accident and emergency services independent of chronic illness.

4. Implications in rural areas

Much of the information and evidence on the subject of isolation and loneliness is generic in nature and consequently does not provide a comprehensive picture of the impact specifically in rural areas. One key report produced in 2013 by DEFRA however, recognises that 23% of the rural population are over retirement age compared to 18% in urban areas, and as a result, rates of disease, disability and mortality are far higher in rural areas than urban. The same report highlights that rural areas have a unique set of circumstances that can exacerbate the social isolation of older residents, leading to poor health, loss of independence and lower quality of life. These factors include lower per capita expenditure on social care; greater reliance on car ownership - particularly for visiting family or the getting to the shops; and poor broadband access.

A report produced in June 2014 in Northern Ireland examined ‘Rural isolation, poverty and Rural community/farmer wellbeing’ found that there are often those who experience negative impacts [to rural isolation] such as mental health issues, the risk of suicide and potentially reduced life expectancy.  

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5. Unique position of local churches

It is estimated that there are 13-15,000 rural churches in England. Although some are now dwindling in attendance, there remains a unique opportunity for churches to respond to issues of social isolation as they often provide the key community facilities in rural communities.

At a time when squeezed local authority budgets are leading to Youth Centres, Children’s Centres and Lunch Clubs being closed or reduced in size, there is an increasing need and opportunity for churches and faith groups to explore ways in which they can become part of the answer to some of the challenges being faced by local communities. In many rural areas, the only buildings available (if any) which enable local people to meet socially and/or provide community activities are pubs, village halls and church buildings. Often, church members have good links with the wider community and – along with other residents – can be a lifeline to identify and support those with limited mobility. This is underlined in a report produced in 2013 by Respublica in which the church is described as ‘an utterly unique institution with enormous reservoirs of good will, education and capacity, as well as an asset base that – because it can be put to the use of all of our communities – can transform every community.’

One example of a Christian charity responding to issues of social isolation is The Link Visiting Scheme. Initiated in Berkshire as a church-based community project in 1998, the charity aims to combat social isolation by befriending older people through regular home visits and other social events and activities. The charity currently visits over 160 isolated older people locally and has a volunteer visitor team of over 160. Other regular activities include Understanding Computers Courses, Bowls Clubs, Crochet Groups, Pub Lunch Events and Singing Groups. Their local authority has recognised the value of the charity’s work over recent years and has provided grant funding since 2008.

The charity is now in the process of working with churches in other parts of the UK to support them in establishing similar projects in their communities. (See www.linkvisiting.org)

For details of other initiatives addressing rural isolation and concerns see Appendix 2.
Summary of the Rural Pastoral Support Network Project

The RPSNP was initiated to look into and begin addressing some of the above issues initially within the county of Lancashire. The county is made up of 14 local authorities, two of which are unitary authorities (Blackpool and Blackburn with Darwen) and the remaining 12 are district councils. The County Council describes the area as being:

... known for its industrial heritage, its association with the cotton and textile industries and its traditional mill towns, but, in reality it is a diverse and largely rural county. Over a quarter of its residents live within rural areas and over 80% of the land area lies outside the main urban centres.

The county’s landscape varies from the remote Forest of Bowland and the West Pennine moors to the intensive agriculture of the coastal plain. The varied nature of Lancashire’s rural areas is reflected in its communities. In small isolated communities agriculture can still play an important part in the life of the village and its economy.

Throughout the county, market towns provide important service centres and hubs of economic activity for the villages of the rural hinterland. On the urban fringes, settlements form closer relationships with the major towns of the county.

The relationship that exists between the rural areas of the county and the adjacent urban concentrations therefore presents unique opportunities in terms of assisting the regeneration of rural Lancashire.

This contrast of rural and urban within the county leads to challenges in the provision of goods and services locally and this can be seen in a map showing rural and urban areas following the 2011 census (Appendix 1)

Much of the focus for this project in Lancashire was on two rural pilot project areas which have contrasting local demographics. In each area, Open Meetings were held to seek the thoughts and ideas of local people both in terms of current resources, issues and concerns and suggestions of ways to address these. The two areas were Pilling – towards the east coast of Lancashire, and Over Wyresdale near the Trough of Bowland. (See Case Studies on pages 12 and 13)
In addition, an assessment of existing services focusing on addressing rural isolation across Lancashire was carried out including the involvement of voluntary/community groups and churches.

The intended outcomes from the project were to create:

- An increased awareness of isolated residents by local churches and their communities.
- Opportunities for isolated/lonely residents to connect with and contribute to their communities.
- Good practice that can be shared with rural churches nationally and recreated in other places.

The findings from this research are being made available to churches in the Blackburn Diocese, as well as to those elsewhere through a toolkit focusing on reaching isolated people in the community.

**Lancashire Findings**

As part of this project, a study has been carried out to investigate the various groups, projects, events and services in Lancashire which aim to address rural isolation and loneliness.
The findings, in broad terms, were that initiatives aimed at older people were the most clearly aligned to specifically address rural isolation and loneliness. This is perhaps due to the apparent correlation between increased age, and concerns about isolation and loneliness. In contrast, there are few projects catering for the needs of younger adults, children and young people which hold specific objectives relating to rural isolation and loneliness. However, those organisations focusing on children, young people and adults will – in many cases – be implicitly having a positive impact on rural isolation through their existing activities and events (The following list is by no means comprehensive, but provides examples of activities taking place).

1. Older People’s Services

- Age UK Lancashire -The largest charity providing services aimed at older people is Age UK Lancashire (http://www.ageuk.org.uk/lancashire/) They provide a variety of services across the county through 11 local Age UK organisations including:

<table>
<thead>
<tr>
<th>Nature of Service</th>
<th>Number of areas offering service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information and Advice</td>
<td>11</td>
</tr>
<tr>
<td>Day Care Services</td>
<td>8</td>
</tr>
<tr>
<td>Hospital Aftercare Service</td>
<td>8</td>
</tr>
<tr>
<td>Outreach Service</td>
<td>7</td>
</tr>
<tr>
<td>End of Life Support</td>
<td>6</td>
</tr>
<tr>
<td>Community Leisure, Social and Physical Activities</td>
<td>5</td>
</tr>
<tr>
<td>Health Trainers</td>
<td>5</td>
</tr>
<tr>
<td>Home help</td>
<td>4</td>
</tr>
<tr>
<td>Cultural Activities</td>
<td>3</td>
</tr>
<tr>
<td>Dementia support</td>
<td>2</td>
</tr>
<tr>
<td>Foot care service</td>
<td>2</td>
</tr>
<tr>
<td>Bereavement support</td>
<td>2</td>
</tr>
<tr>
<td>IT training</td>
<td>1</td>
</tr>
<tr>
<td>Rural Day Services</td>
<td>1</td>
</tr>
<tr>
<td>Lunch Clubs</td>
<td>1</td>
</tr>
<tr>
<td>Rural Outreach</td>
<td>1</td>
</tr>
</tbody>
</table>
Age UK Lancashire holds a Local Directory on their website which provides details of all their services across the county which is also presented on a regional map which can be found at [http://www.ageuk.org.uk/lancashire/local-directory1/](http://www.ageuk.org.uk/lancashire/local-directory1/)

All local Age UK branches provide information and advice and the majority offer day care services, hospital aftercare and some form of outreach. Wyre and West Lancashire provide services specifically aimed at addressing rural isolation.

- **Other Older People’s Services and groups** – There are various lunch clubs, activity groups and social clubs that are operated by smaller voluntary and community groups. Many of these are held at community centres and village halls. For example, there is a Food Reminiscence club in Lancaster, a History Group in Galgate and a Multiple Sclerosis Society Lunch Club in the Ribble Valley. Many churches either run or host similar events. For example, St. John’s Hurst Green in Ribble Valley runs a ‘Three to One Coffee Stop’ for older people twice a month, and Christchurch Blackburn employs a Parish Nurse to provide whole person healthcare.

- **Community Transport Services** – The county is relatively well served in relation to community transport, although in the more rural areas, lack of a regular transport infrastructure is a significant issue for many people. The primary service across the county is Dial-A-Bus and this operates a door to door service and vehicles are equipped with tail-lifts. There are also community car schemes in operation in some areas which are operated by Preston Community Transport and Burnley, Pendle and Rossendale CVS.

2. **Services for other groups**

As indicated above, there are few organisations or projects that specifically address rural isolation among groups other than young people, but there are a number of community groups which help to reduce isolation and loneliness by running activities and events on a regular basis. These include:

- **Village/Community Halls** – Over 150 community/village halls are registered as members of Lancashire Association of Community and Village Halls ([www.lancsvillagehall.org.uk](http://www.lancsvillagehall.org.uk)). These halls are typically used for a variety of social activities on a regular basis, catering for all ages. These include toddler groups, children’s uniformed organisations, youth clubs, keep fit groups, lunch clubs and private parties.

- **Church Halls** – Equally, many church halls are used on a regular basis for similar activities in local communities, with additional events of a more spiritual nature in operation including church services and other religious ceremonies.

- **Other Christian organisations** – There are many churches and Christian organisations across Lancashire engaging in social action initiatives which have a positive impact in addressing social isolation among all age groups. For example, ‘Together Lancashire’
focuses specifically on supporting church leaders and members, community and youth workers and voluntary activists to tackle the effects of poverty and build networks so that people can work more effectively together. Also, ‘The Olive Branch’ is based in Lancaster and supports those suffering distress caused by addiction, broken family relationships, poverty and homelessness.

These activities often form the ‘social glue’ which holds individuals and communities together, and if they were to cease operating it would significantly reduce the community cohesion in the area.
Pilling is situated on the southern corner of Morecambe Bay covering around 13 square miles, much of which has been reclaimed by improved sea defences. It is largely flat agricultural land and the parish area has a population of around 2,000, half of which is made up of those aged 55 and over.

In April 2014, an Open Meeting was attended by around 20 local residents and representatives of charities, churches and parish/district councils. The aim was to discuss issues relating to rural isolation in the area and begin to identify some relatively quick and easy initial solutions. The main issues raised were:

- **Transport** - It was agreed that Pilling has inadequate public transport routes which have a significant impact on levels and perceptions of isolation and loneliness. For example, a trip to the nearest market town takes 20 minutes by car. However, the shortest bus route involves two buses and a round trip of 2 hours 40 minutes!
  
  There were also concerns about pedestrian mobility within the village itself. Many roads do not have pavements and this can be dangerous particularly for older people and parents with young children.

- **Finding isolated/lonely residents** - Despite Pilling being a village where many people look out for each other, it was recognised that there are many properties that are very remote and where there may well be those struggling with isolation and loneliness.

- **Difficulties accessing healthcare** - Many people raised the problems of accessing Accident and Emergency facilities as well as GP surgeries. The nearest A and E unit is 10 miles away and the nearest GP surgery is 5 miles away. (See Appendix 3 for other issues raised)

**Action Taken**

During the Open Meeting, an appeal was made for volunteers to form a new Action Group which would take forward some of the suggestions made. An group called ‘CLIP’ (Community Life in Pilling) was created with members including a pub landlord, Chair of the Parish Council, the local parish vicar, church members and other residents. ‘CLIP’ selected the most pressing and straightforward concerns to address and as a result, the following actions have been taken:

- Increased publicity made available concerning an existing community minibus scheme
- Parish Council is investigating the possibility of hard surfacing some footpaths across local fields.
- A telephone information line has been set up in which a mobile phone will be held by different volunteers each week, who will have access to appropriate services, information and resources
- A Neighbourhood Challenge Week is being set up in 2015 in which residents visit one other person to build links, and a community event will be held at the village pub

The group reported that it was helpful to have an outside facilitator to encourage new ideas and to suggest initial priorities. It was also recognised that there was potential for making this a deanery-wide project and this is therefore being considered.
Over Wyresdale is an extremely remote parish bordering into the Trough of Bowland and the sparse population of just 300 residents is made up predominantly of young families and two thirds of residents are under 55. There is no ‘village centre', and community buildings and most dwellings (many being farmhouses) are located sporadically in locations across the parish.

In June 2014, an Open Meeting was held at the local primary school which has around 60 pupils. The meeting was attended by 15 children and 5 parents, and the aim was to gain their views and opinions of isolation and loneliness locally. With the children, this was achieved by using ‘child-friendly exercises’ which used a short cartoon video about loneliness; photos of various people to encourage reflection about the subject and varied feedback opportunities to record responses. The main issues raised were:

- **Transport** – Inadequate public transport links with main nearby towns
- **Youth provision** – Despite relatively high numbers of young people, there is no regular youth club in the area.
- **Need for trips out** – especially for men.
- **Children agreed that they look after each other quite well** and that living in a rural area encouraged them to do this.

**Action taken**

As a result of these issues being raised, suggestions for future action included investigating possible community transport options, provision of youth facilities and exploring trips out for local residents. Plans are now underway to begin piloting a Youth Hub which will provide a safe, secure and relaxed setting with a variety of activities available. There could include a quiet space for a Homework Club, and other youth activities such as pool table, table tennis and other sports/recreational facilities. The hub will initially be run by local parents with support from the local church and other organisations.

**Conclusions**

The Rural Pastoral Support Network Project has provided an opportunity to investigate the extent of rural isolation on a national, regional and local level through our focus in the county of Lancashire.

There is conflicting evidence and data as to whether social isolation is more prevalent in rural areas than elsewhere. In many rural areas where there is a clearly defined village centre and properties are reasonably well clustered together (such as Case Study 1), there is often a strong sense of community and residents will look out for each other. In this case, there will also often be a local community centre or village hall, convenience store, village
pub and one or two churches. However, this does not mean that in this scenario there is no social isolation. There are still likely to be those who – for reasons of physical or mental ill-health – are unable to leave their home and are therefore susceptible loneliness and isolation.

It is more likely, however, that social isolation is a much greater and more hidden problem in rural areas with a sparse population and no village centre (such as Case Study 2). In these settings, properties are often very dispersed and include remote farmhouses which are easily cut off during winter months. Isolation and loneliness can become a major issue in such circumstances. Where human interaction is minimal, depression and mental health problems can quickly set in and this can lead to an increasing likelihood of other health problems and even risk of suicide.

There are, however, a variety of projects, groups and activities operated by local authorities, charities and faith groups which often provide a lifeline for those at risk of social isolation. Groups which support young parents, children, young people, and adults of all ages and abilities can be found to varying degrees within rural communities, although it is likely that there will always be gaps and areas of need as the population changes and develops.

**Recommendations**

This project has primarily featured examples of Case Studies involving local churches within the Blackburn Diocese and our hope is that much of the learning and ideas will be transferrable for use in churches and faith groups in other parts of the country.

As indicated in the report, many churches are in the unique position of owning buildings which can be used to benefit the wider community and having potential ‘people resource’ (albeit sometimes limited) to run groups and activities. These factors, combined with the core Christian values and beliefs which underpin churches engagement in the community do provide churches with a great opportunity to be a catalyst for social transformation in local communities, particularly in relation to rural isolation. In order to become part of the answer to the issues contained in this report, the following recommendations provide a framework for exploring next steps for a church congregation. We have also produced a separate straightforward guide which provides more detailed ideas that can be used by local churches:

1. **Know your community** – Explore ways of getting to know local residents, other organisations and charities. This can be done informally as well as through more organised options such as Open Meetings or Community Surveys.

2. **Prioritise responses** – As you become more aware of the needs, concerns and strengths of your community, and understand the role of other local groups and organisations, a picture will emerge of pockets or gaps in provision. Combined with
prayer, this information will provide invaluable information about the most effective response that your church can make based on resources, skills and experience available to you.

3. **Carry out pilot projects** – Before launching a major new initiative, pilot the idea for six months to assess the way in which it works, the demand and any unintended outcomes.

4. **Review progress** – Once a project has been set up to address isolation and loneliness, carry out regular reviews to assess areas for improvement and to ensure that it is still needed.

As we have been exploring the subject of isolation and loneliness in this report, it is telling to recall some of the last words of Jesus on the cross before He died as being *‘My God, my God. Why have you forsaken me?’* There were many times in Jesus ministry when he deliberately sought ‘solitude’ so that he could commune with his Father in prayer and fasting and we are reminded to use this as a discipline in our Christian walk as well. There were, though, many times – not least on the cross – when Jesus would have felt the pain and anguish of loneliness and isolation. It is therefore not surprising that throughout the Bible there are many reminders for us of God’s heart and concern for those on the margins of society, including challenges for the church to show Christ’s compassion to those most in need such as *‘A father to the fatherless, a defender of widows is God in His holy dwelling. God sets the lonely in families.’* (Psalm 68)

Our hope and prayer is that this resource will provide ideas, inspiration and resources which enable you and your church to reach those struggling with loneliness. By offering love, care and practical support in an effective and affirming way, we can all become a small part of the answer for those who society has forgotten.
References

1 BBC News (7th July 2014) ‘GP Prescriptions to tackle loneliness’ (http://www.bbc.co.uk/news/uk-28202717)


7 Cohen, G.D. et al. 2006 ‘The impact of professionally conducted cultural programs on the physical health, mental health, and social functioning of older adults’ The Gerontologist 46 (6)


10 DEFRA (2012) ‘Social Isolation Experienced by Older People in Rural Communities’ p.3


Appendix 1: Rural/Urbane Classifications in Lancashire (2011 Census)
Appendix 2: Organisations and reports addressing rural isolation and issues

The Plunkett Foundation - Helps rural communities through co-operatives and community-ownership to take control of issues affecting them.  
www.plunkett.co.uk/

Rural Coffee Caravan Information Project - Befriends people and offers them access to the information they need to empower them.  
www.ruralcoffeecaravan.org.uk/

Campaign to End Loneliness – National body supporting organisations to address loneliness and isolation and campaigning about the issues.  
www.campaigntoendloneliness.org/

Over the Hill Campaign - Offers innovative solutions to the problems faced by people who are growing older in the English countryside  
www.overthehillcampaign.org.uk/pdf/over_the_hill_report.pdf

‘Access All Areas’ (NCVO) – A report about rural-proofing communities

Parish Nursing - Christian charity helping churches to appoint nurses, who in turn support people and communities towards whole person healthcare.  
http://parishnursing.org.uk/

Link Visiting Scheme – Christian charity supporting churches to establish befriending schemes aimed at isolated older people.  
www.linkvisiting.org

‘Neighbourhood Approaches to Loneliness’ (Joseph Rowntree Foundation) – A comprehensive report and toolkit produced following a three-year action research programme exploring and identifying what makes us feel lonely where we live and work and what we can all do about it.  
http://www.jrf.org.uk/topic/loneliness

Streetspace – Provide ideas, support and networking opportunities for churches engaging with young people on the margins of society  
www.streetspace.org.uk

Connections Bus Project - A charity providing youth work services across Cambridgeshire including two bespoke double-decker buses converted into youth friendly venues, open-access, universal services, building based youth clubs, support for smaller community youth projects, youth consultations for Parish Councils, community groups and others  
http://www.connectionsbusproject.org.uk

Rural Expression - Rural mission initiative that recruits, equips, deploys and networks self-financing teams pioneering creative and relevant expressions of the Christian church among under-churched groups and communities in rural areas  
http://www.ruralexpression.org.uk/
Appendix 3: Feedback from Pilling Open Meeting

What is already going on that helps to address isolation?
Post bereavement befriending
Church pastoral work
Lunch Club
Pilling in Bloom
General befriending
Old Car Club
Bowls Clubs
Helpline pendants
Giving lifts to people
Hosting events
Coordination between organisations
Neighbourhood Watch

What are the current issues for Pilling?
Improved communication
Transport – threat to existing bus service
Awareness raising
Difficult to get to healthcare services
Difficult to increase attendance at lunch club – issues of pride and stigma
Isolation getting worse
Need for smaller older people’s accommodation closer to village centre
New village hall
Don't know who’s lonely
Need broader range of activities
Enthusiasm needed to spread message
Bereavement and meeting others afterwards
Housebound at greatest risk - need to visit
Rural people are proud
Less walking now - cars more widely used
Pedestrian mobility/access
Youth isolation

What would you set up if money was no object?
Transport solutions - Volunteer drivers/minibuses/community transport
Home visiting services for housebound
Improved communication - newsletters/information
Build on what is here and develop it
Village Hall accommodation/hub
Build on good work of churches
Winter get-togethers - Friendship groups/tea & chat
Cheaper lunch club
Accessible footpaths (tramper trails?) – including footpaths along the road
Improved access to health services (transport/ drop-in clinic?)
Transport to Garstang
Minibus – Dial-a-ride
Meals on wheels
Shopping trips
Address access to broadband
Mobile grocery store
Paid Community Coordinator/Organiser
Consult with local people
Community Carers
Training in use of Skype

**Comment**
We don't want organising, all we want is a kick start to enable the enthusiasm that is there to be released (72 year old Pilling Resident)