READING BOROUGH COUNCIL

REPORT BY DIRECTOR OF ADULT CARE AND HEALTH SERVCIES

TO:	HEALTH & WELLBEING BOARD				
DATE:	14 JULY 2017	AGENDA	TEM:	7	
TITLE:	MEETING THE NEEDS OF VULNERABLE PEOPLE IN READING: JOINT LOCAL AUTHORITY / CCG RESPONSE TO FINDINGS OF HEALTHWATCH READING				
LEAD OFFICERS:	JANETTE SEARLE / SARITA RAKHRA	TEL:	0118 937 0118 982		
JOB TITLE:	PREVENTATIVE SERVICES MANAGER, RBC / COMMISSIONING MANAGER, BW CCGs	E-MAIL:		Searle@rea khra@nhs	<u>ading.gov.uk</u> / . <u>net</u>

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 Healthwatch Reading presented a report to the March 2017 meeting of the Reading Health and Wellbeing Board on '*Meeting the needs of vulnerable people in Reading*'. This summarised the observations of 13 local voluntary sector organisations on delivering services to vulnerable adults in the current economic climate. This report sets out the joint response of Reading Borough Council ('RBC'), and North and West Reading Clinical Commissioning Group and South Reading Clinical Commissioning Group ('the Reading CCGs').
- 1.2 RBC and the Reading CCGs recognise that voluntary sector partners are often a valuable source of information on people's experiences of services and the issues they face. This is demonstrated in Healthwatch Reading's report, which has and will continue to inform discussions about how to ensure that plans for health and social care are based on people's experiences of the key issues.
- 1.3 The three commissioning bodies appreciate that Reading needs a sustainable and thriving third sector to help meet the challenges ahead. Clearly the sector is operating under pressure currently, and the report presented by Healthwatch Reading highlights the reasons for needing to work together across statutory and third sector services to pool resources for residents' benefit.

2. RECOMMENDED ACTION

2.1 That the Health and Wellbeing Board notes this joint response and asks Healthwatch Reading to share it with those organisations which contributed to the 'Meeting the needs of vulnerable people in Reading' report presented to the Board in March 2017.

3. BACKGROUND

3.1 The stated aims of the '*Meeting the needs of vulnerable people in Reading*' report, and of the voluntary and community sector roundtable which informed the content, were to:

• understand the impact on local people, of the first nine months of Narrowing the Gap (a new funding arrangement from 1 June 2016 that required voluntary sector organisations

to bid for Reading Borough Council contracts, instead of the previous system of receiving allocated grants);

understand the impact on local people, of the overall reduced value of RBC funding compared with the value of previous years of grant funding or commissioned contracts;
understand any other national or local pressures on the voluntary sector, which affect their ability to deliver services;

• inform RBC commissioners and councillors of any lessons learned, for future funding rounds; and

• help fulfil Healthwatch Reading's statutory role on the Reading Health and Wellbeing Board, of representing both the public, and the voluntary sector.

3.2 The report presented by Healthwatch Reading to the March 2017 Health and Wellbeing Board invited the statutory commissioner members of the Board to consider, inter alia, how more effective joint working could help to address some of the issues raised in the report. The local authority and CCGs therefore offered to bring back a joint response to the next meeting of the Board.

4. FINDINGS AND RESPONSES

Finding (1)

"People using voluntary sector organisations have more complex needs than before."

Response (1)

Through our assessment and signposting processes, statutory care providers will often respond to individuals by helping them to link up with third sector providers, possibly as the first port of call, but we need to ensure this is safe and appropriate. A number of changes have been made recently which support this aim.

Reading's Adult Social Care service has recognised the need for a stronger focus on talking to people and really understanding their needs so we can support them in the best way. In April we launched a radically simplified social care assessment tool to help us move away from process driven conversations towards this new way of working.

RBC has recently recruited to the safeguarding adults manager post, and has reviewed the way in which safeguarding concerns are dealt with and by which teams. This has started to address concerns so that progress to an enquiry is completed in a shorter timeframe.

The Community Mental Health Team (CMHT), which is a joint health and social care team, has worked closely in the last year with the Single Point of Access Team (SPOA) to ensure that appropriate safeguarding cases are referred and that a timely and robust response is given. There is a designated safeguarding lead within the Reading CMHT to enable close working links.

In order to improve understanding of what community support is available for mental health, the Council has recently developed a resource pack, which is now being used by the CMHT and other partners. See:

http://servicesguide.reading.gov.uk/kb5/reading/directory/advice.page?id=n0eWsuf2uVo

RBC completes assessments on individuals referred to them by the hospital that they assess as requiring ongoing social care needs, and there are several different services which support people when they are discharged from hospital that are always used to their capacity. If there are concerns relating to unsafe discharges these can be reported through social care to investigate through safeguarding procedures.

RBC has, unfortunately, lost staff over the last year which has resulted in the use of agency staff, although several of the teams have been unaffected by this and have retained staff. RBC is now actively recruiting and offering permanent positions which should ensure greater

consistency across the teams. Social workers continue to receive professional supervision on a regular basis against a standard framework. This is supplemented by less formal but also valuable team supervision and peer support.

Finding (2)

"An increasing number of people are turning to some voluntary sector organisations due to difficulties caused by central government policies."

Comment (2)

The feedback on increased demand for information and advice reflects the Council's review of performance and need which will underpin the development of our next voluntary sector commissioning framework. This includes intelligence from commissioned providers and other local organisations offering information and advice, all of which will be welcome to comment on the Council's draft plans for the refreshed commissioning framework.

In addition, representatives from the Council's Welfare Reform and Debt Advice teams will be addressing Reading Voluntary Action's next Wellbeing Forum to explore how the Council and third sector organisations can work together more effectively to support Reading residents affected by financial difficulties.

Finding (3)

"Service users have experienced high anxiety about proposed closures of commissioned voluntary sector services."

Response (3)

The prospect of any change to services, but particularly the possibility of closure, can provoke anxiety. RBC and the Reading CCGs are committed to working together more closely in future to consider this carefully in how we develop communication, consultation and any recommissioning, de-commissioning or migration plans.

The Healthwatch report specifically refers to the peer support service for mental health currently delivered by Reading Your Way. Both the Council and the Reading CCGs are continuing to commission this service for 2017-18. The Council is also continuing to provide the organisation with rent-free premises. Although RBC and the CCGs have separate funding agreements with Reading Your Way, we are now aligning our contract monitoring meetings. This will enable us to plan future commissioning on the basis of shared information and aspirations, considering crisis prevention and crisis support, and ensuring that people with mental health problems can have timely access to services.

Finding (4)

"NHS grants to the voluntary sector have also been cut."

Response (4)

The CCG proposes to align its future voluntary sector commissioning with Reading Borough Council's commissioning plans including the 'Narrowing the Gap' framework. For example, the CCGs aims to renew the home from hospital service that mirrors one of the Council's current Narrowing the Gap outcomes and work with the Council to commission services such as social prescribing, after stroke support, carers' information and advice, and support for people with dementia, including young people (aged under 65) with dementia.

Finding (5)

"Staff and volunteers in voluntary sector organisations are carrying a higher emotional burden due to the complexity of client cases."

Response (5)

The Health and Wellbeing Board exists to improve the health and wellbeing of the people in the local area, and to support the development of commissioning plans to this end. This has to include considering the wellbeing of those who work within local third sector organisations - on a paid or an unpaid basis - and the particular needs of third sector organisations. The Board expects its members to address this issue as future budget proposals are prepared and risk assessed in what is already a challenging climate.

One of the themes of the Council's Narrowing the Gap bidding framework is 'thriving communities' through which the local authority funds several infrastructure support services. These help to sustain voluntary and community groups and their members.

Finding (6)

"Some organisations are starting to charge fees or are having to step up fundraising efforts to maintain service levels, and some fear for the future."

Response (6)

It is important that statutory partners support third sector partners where appropriate to be able to deliver the services needed in Reading. This includes exploring new commissioning opportunities, particularly as we try to shift our emphasis onto preventing ill health rather than simply addressing its consequences. In addition, though, the Council supports and encourages third sector partners to develop alternative funding streams to improve their long term viability. This includes circulating information about other funding opportunities and working with some providers to model / remodel their service as a charged-for offer, e.g. to people with care needs who hold Personal Budgets or who are self funders. Some very small Reading community groups are running very successfully on this basis.

Finding (7)

"Narrowing the Gap has led to new and positive partnerships."

Response (7)

The Council is pleased to receive this feedback on its first voluntary sector commissioning framework, and hopes to build on this in developing the second framework. The benefits in terms of better sharing of information and good practice are what the Council hoped to achieve. Stronger partnership working wasn't expected to reduce costs in itself but to mitigate against the impact of less funding being available.

Finding (8)

"The voluntary sector urges RBC to learn lessons for the next contract round."

Response (8)

RBC is determined to do just this, and is grateful to the Narrowing the Gap bidders - successful and unsuccessful - who met with Council officers in June last year to share their feedback and

observations on the process. There will be further opportunities for local organisations to influence the next framework over the summer of 2017.

The move towards the Narrowing the Gap Commissioning Framework was a radical departure from the annual grant allocation round, which is why there was such an extensive period of engagement. We expect future rounds to be a refinement rather than such an overhaul, and not to require so many meetings.

5. BACKGROUND PAPERS

Meeting the needs of vulnerable people in Reading - Healthwatch Reading report presented to the Health & Wellbeing Board in March 2017.