



## Better Care Support Team Thematic National Workshops in Bristol and Birmingham in 2019

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The Better Care Support Team (BCST), supported by the Social Care Institute for Excellence (SCIE) ran two national workshops, looking at how two vital parts of the system supporting people with care and support needs - housing, and the voluntary and community sector (VCS) - can support the ambition of integrated, personalised care for people, in their own home or in community settings. The events were held in Bristol on 14<sup>th</sup> February 2019, and in Birmingham on 28<sup>th</sup> February 2019, and open to colleagues from all regions.

Both sessions were well-attended, with housing and VCS delegates alongside people representing the health and social care statutory workforce. The sessions were each hosted and introduced by a senior figure in the BCST, and featured plenary speakers and two workshops – one on housing, the other on the VCS - each run twice so delegates could attend both. The events saw speakers and delegates share ideas, stories and insights about how relatively small-scale interventions from the VCS and housing sectors could have significant and lasting benefits for people with care and support needs.

This report briefly describes the workshops and speakers, with links to their materials. There is also a discussion of the main themes and messages emerging from the events.

### **Bristol**

The Bristol event was opened by Matthew West, Strategic Direction Programme Manager at the BCST, who set out the context for the day's discussions – including the NHS 10-Year Plan, the social care Green Paper, and the focus in both (we assume) on prevention and integration as important drivers for improvement. The first key note speaker was Neil Penny, Joint Commissioner for Older People at NHS Gloucestershire CCG/Gloucestershire County Council. Neil spoke about the clear links between poor housing and poor health, and how Gloucestershire has, since 2016, run a Housing Action Plan involving local authority, health, VCS and housing partners to try to address the correlation. Jane Caldwell, Chief Executive at Age UK East London, then spoke about the work she is leading across six local authority areas, whereby c.1800 people a year are supported to spend as little time in hospital as they need to through Age UK's Home from Hospital integrated discharge model.

The two workshops were led by Becky Bell, Home Improvement Agency Team Manager, Regulatory Services at Oxford City Council, and by Damian Brady, CEO at Tower Hamlets Council for Voluntary Services. Becky talked about the range of work her team is doing to creatively use various funding streams to support people to stay in or return to their homes by making small or large adaptations to them. Damian spoke of the role the VCS can play – either in partnership or as single organisations – in developing truly personalised and localised responses to people's situations.

## **Birmingham**

The Birmingham workshop was hosted by Jane Lord, Regional Relationship Lead at the BCST. She spoke about the range of support that the BCST offers the sector, and how housing departments and the VCS are vital partners in what the BCST do. She then introduced the morning's key note speaker: Charlotte Price, Living Well Project manager from the Isle of Wight. The Living Well Project is a collaboration of VCS groups supporting people who are not eligible for adult social care with preventative early interventions, aimed at avoiding hospital stays, or shortening them when they do occur. Safia Iqbal, Healthy Housing Manger at Derby City Council, was unable to attend on the day, but her slides on the role of housing in keeping people well are included here.

Becky Bell reprised the workshop she ran in Bristol. The other workshop was led by Stephen Chandler, Director of Adult Social Services and Lead Commissioner Adults and Health, at Somerset County Council. Stephen shared Somerset's transformed engagement with the VCS, to develop a more trusting partnership, which makes full use of the localised knowledge and flexibility of small community groups.

Across the two events, several key themes emerged:

### **1) Crisis as a catalyst for change**

Jane Caldwell identified the alignment of increased needs and reduced resources as one of the catalysts that prompted local decision makers to look to the VCS for answers to the problem. Others shared this sense that new approaches have opened up in response to the challenges the age of austerity has brought. Charlotte Price acknowledged that it was the Isle of Wight's struggles with delayed transfers of care (DToCs) that prompted the development of new ways of working on the island, and Stephen Chandler also pointed to DToC pressures as a trigger for new approaches. Interestingly, he also cited the extensive flooding in Somerset in 2013-14 as another sort of crisis which made people reflect on how best to support local communities.

### **2) Prevention & small-scale changes**

What was evident across the workshops was that, even when the pressures on the system are acute, some of the steps that can address these pressures can be small in scale, particularly when implemented early enough. This message was especially clear in housing-based presentations: minor adaptations can be transformative in people's lives, and when aggregated, this can have a significant impact on local systems and budgets. Becky Bell related tales of people not being able to be discharged from hospital because of a blocked lavatory, and how a flexible response to minor household repairs can spare people many days in hospital, with all of the associated loss of confidence and functioning that extended hospitalisation can bring. Neil Penny told delegates of how a programme of insulation of homes in caravan/mobile home parks has (while acknowledging that correlation is not necessarily causation) gone alongside a reduction on hospital admissions from park home residents.

Low-level interventions, done responsively and quickly, are a forte of the VCS, and delegates heard about how, for example, the Age UK teams in East London can ensure people have bread, milk and other basics at home on their discharge from hospital, so they do not have to navigate the local shops when at their most frail.

### **3) Creativity and flexibility – especially from the VCS**

A recurring motif throughout the discussions was the need for creativity and flexibility in our responses to people with care and support needs, and how the VCS leads the way in this. One factor in this is the really localised community knowledge VCS staff and volunteers can bring. Damien Brady spoke about this in the context of communities in the East End of London; Stephen Chandler discussed it in relation to Somerset villages. But urban or rural, the theme of community agents able to match people and support at a very local level was the same. Charlotte Price described how, on the Isle of Wight, the Living Well programme employs people more traditionally located in the statutory sector – social workers, nurses – but frees them up to work in different ways with people, who in turn welcome a VCS intervention which they may be less keen on having from the statutory system.

Flexibility is of course not the sole preserve of the VCS. Becky Bell motivated her audiences with many descriptions of how she and colleagues found ways of accessing funds for people by thinking creatively about how they could help, or how best to classify what they were doing. And some of the best, creative work from the VCS relies on intelligent commissioning from statutory colleagues, such as Somerset enabling a network of individual micro-providers to flourish in small, sometimes isolated communities.

### **4) Different partnerships and conversations**

Speakers and participants on both days highlighted the need for, and the opportunities arising from, different conversations and different partnerships. This could be at a small-group level, such as having community agents at discharge meetings alongside – and with an equal voice to – hospital consultants. Or having – under the Good Gym initiative in Oxford – joggers, as part of their exercise regime, committing to run to visit isolated people for mutual support and encouragement.

But it is also about new conversations at a strategic level. Both Damian Brady and Charlotte Price talked about new partnerships among VCS organisations. Housing and health staff came together in new ways, Neil Penny told delegates, to develop the Housing Action Plan in Gloucestershire. And in Somerset, the VCS is now a much stronger voice on strategic forums such as the Health & Well-being Board.

### **5) Funding**

Whatever the focus on the impact of small-scale interventions, and different ways of working together, the question of funding – where it comes from, and how much there is – inevitably cropped up as a theme. The use of Better Care Fund (BCF) money to kick-start projects was a clear benefit to many of the speakers. The Living Well scheme on the Isle of

Wight is a good example, as is some of the grant money available to the Oxford Home Improvement Agency.

Becky Ball also spoke about the challenges of seeking council funds for her work, but of how these challenges were ultimately surmounted because of the recognition that money spent on prevention can save much larger sums further down the line. The same approach motivated Somerset to maintain its spend on preventative VCS contracts, even where the savings accrued to other parts of the system. Both events gave weight to the view that, wherever the funds come from, money spent on early interventions – be they small housing adaptations or community groups tackling isolation - amounts to effective commissioning in difficult circumstances.

## 6) Data

The maxim “In God we trust; all others must bring data” was cited by Stephen Chandler. The need for each pound spent to have the maximum impact highlights the importance of data – of knowing where money is spent, on which services, and how effective those services are. Damian Brady’s workshop looked at the importance of data in determining how money can most effectively be spent, and saved, in the future. Charlotte Price and Becky Bell were able to point to strong figures for the effectiveness of Living Well and the Oxford Home Improvement Agency respectively, demonstrating improved outcomes for people, as well as cost savings in other areas of the system. Neil Penny was among others in discussing the challenges of evaluating prevention: it is fundamentally difficult to prove what did not happen as a result of a preventative intervention. But speakers and delegates alike were engaged in the effort to find good measures, recognising that rolling out effective preventative work, in housing and in the VCS, is vital to the whole Better Care Fund agenda of personalised support in people’s homes and communities.