

Annex A - CCG Workshops

Blue group

- In 2014 West Lancs CCG provided the West Lancashire VCFSE with an asset fund of £250K
- An ongoing amount of £100K per year (beginning in 2018) for the West Lancs. VCFSE has now been agreed by West Lancs CCG

- As a starting point, 2 funding priorities were identified

- social prescribing

- long term sustainability of the sector

- Feedback from the sector via a WLCVS Survey Monkey has informed the process

? Will money for 'Social Prescribing' be in addition to Social Prescribing project already funded in Skelmersdale? – Yes

- Does not have to be for a specific Social Prescribing Project

- Important to join up funding offers from each commissioner

- VCFSE often struggle to fund staff

- Discussion around peer support and its advantages

? Has there been any dialogue with e.g. U3As, who do not seem to struggle for funds?

- It is necessary to communicate what is happening in VCFSE to GPs e.g. Wellbeing Café at The Grove in Burscough

- CCG to train 'In Care Navigators' to fulfil this role. This could possibly be reception staff.

- A directory of services is already available in Skelmersdale as part of Social Prescribing project

- Susan Prynne from DWP drew attention to their 'Enhanced Support Offer', which supports DWP clients who have disabilities and who are not always engaged with health services

- Consensus that approach to social isolation and loneliness needs to move away from medical intervention and towards addressing social issues

- Funding offer needs to be more rounded than funding GPs to address these issues

- CCG to hold events in each of the neighbourhood areas

- When linking people with Mental Health issues to groups it is important to recognise that their confidence may be low and therefore they may require an 'enabler'.

- Parbold Picture House – entirely self-funding – could be considered as a provider of services for people with dementia.

- Blood Bikes funded solely through donations from the public, with volunteers using their own bikes – saving the NHS £600K per year.

- Community transport is an issue common to all 3 neighbourhood areas

Yellow group

Mike Maguire: CCG now in a position to set up £100,000 per annum recurrent fund to support the VCF&SE. The CCG is seeking ideas around work that could be done in the sector/community that the statutory sector cannot do.

Responses:

- VCF&SE can be more effective, for example in getting people back & cared for in the home, with staff training support (WL Peer Support);
- Green leader for Tawd Valley Park (WLBC). Jackie Moran noted number of GPs who cycle and who could work with WLBC.
- Potential of developing amphitheatre as a site for performing arts. Team Tawd days (WLBC) give local residents the opportunities to help with tasks (e.g. ongoing clearance).
- Performance-based service, use of the arts as health prevention/ support people into confidence (Divine Days).
- Role of the community centres: Greenhill set out to be a health and wellbeing centre. Need to move away from medical centres to community centres. Greenhill has to support groups when they lose funding, but activities (such as line dancing) take people out of social isolation. Would like to see community centres supported – volunteer-led centres cannot always have some available to attend meetings.
- Job Centre Plus: works with people, but difficult to get beyond the 'sick note' to find out what is happening for the person. Has a one-stop shop at Greenhill. Work coaches are trying to support by working with organisations. Now seeing people that would not be seen usually with introduction of Universal Credit; need to know what's available in the community. (CCG – Social Prescribing to join services & support – Elemental platform).

Red group

CCG introduced themselves and shared that they have always wanted to create recurring funding for our sector and have done it now. They care about the long-term sustainability of sector. It takes a long time to build up trust and the statutory services have not always understood VCFS. GP's ask themselves 'Can I trust this service? Can I refer a patient on to them?' It is getting better though.

Member commented that things like the Beacon GP/priest help with things like this – committed person living in Tanhouse, bridging gaps and bringing communities together.

Co-production and collaboration is way forward. Help the public understand the changes instead of thinking 'They don't care about me any more – they're just off-loading me to that group down the road.'

Comment from member – Decade of Health and Wellbeing worked well in Liverpool.

Peer Support – short of specialist help at right time, for example they helped terminally ill mother but she wanted to keep children with her and not be put into care. This did not happen.

Power of Music pointed out their added health/connecting benefits from choir at Hesketh Bank.