

**9<sup>th</sup> July 2018****Agenda Item: 5****REPORT OF THE SERVICE DIRECTOR, STRATEGIC COMMISSIONING,  
SAFEGUARDING AND ACCESS****PROGRESS ON A RANGE OF PREVENTION INITIATIVES****Purpose of the Report**

1. This report provides a progress update on the following prevention projects and services, as requested by the Committee, and asks the Committee to consider whether there are any further actions it requires arising from the information contained in the report:
  - a) Aged Veterans (in partnership with the Defence Medical Welfare Service)
  - b) Connect services
  - c) Age Friendly Nottinghamshire pilot
  - d) Falls prevention project.

**Information****Aged Veterans Project**

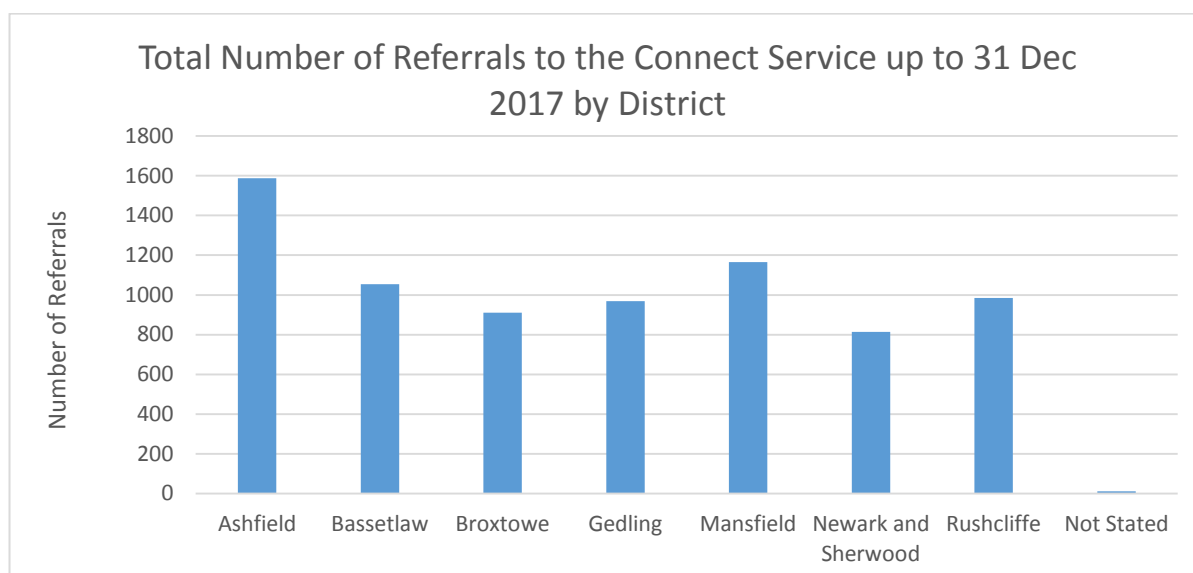
2. This project has been funded with a £106,242 award (over two years) from the Armed Forces Covenant under a portfolio of projects in Nottinghamshire and Herefordshire co-ordinated by the Defence Medical Welfare Service (DMWS). The the work being delivered by the Council focusses on identifying aged veterans, supporting them to access appropriate support networks and services and working with the aged veteran population to co-produce a range of health and wellbeing projects and activities. The project is part of a portfolio of projects for Nottinghamshire that includes a DMWS delivered welfare service to support people on healthcare pathways, DMWS delivered Mental Health First Aid training and Alzheimer's Society delivered aged veteran dementia awareness training. The report to Adult Social Care and Health Committee on 18 April 2017, which set out the details of the bid, is available as a background paper.
3. The two year funding approval was received in April 2017 and approval has since been received to extend the period over which the funds can be used to September 2019, to reflect the time that was required at the start to put agreements in place and recruit to funded posts.
4. A Nottinghamshire County Council Co-production Development Worker has been in post since November 2017 and is making good progress against the milestones for the project, which fall into six main areas:

- a. Promotion & Stakeholder planning and engagement:  
The project was formally launched on 6<sup>th</sup> March 2018 under the name 'Veterans Together Network'. The launch was covered by ITV's Central News, BBC Radio Nottingham and several local newspapers, and was attended by Armed Forces champion, Councillor Keith Girling. The project is being promoted in line with a communications plan that has been developed with the support of the Senior Communications Business Partner. The Council's 'Supporting armed forces' web page has been updated and there was a 134% increase in hits following the launch. A new page for the Veterans Together Network has been developed through which people can join the Network. 12,000 promotional leaflets and 400 posters have been produced and are being disseminated to promote the project. The Co-Production Development Worker has engaged with a wide variety of organisations that have a specific remit around aged veterans, such as Royal British Legion, the Nottinghamshire Veterans' Meeting, SSAFA and Newark Patriotic Club. The Co-Production Development Worker is also building links other potential partners and stakeholders who might identify and connect veterans to the project, such as the Council's older adults teams, hospital discharge teams, day services, libraries, Age UK, G.P. practices, Borough and District Councils, Balderton Salvation Army, County Enterprise Foods and East Midlands Reserve Forces and Cadets Association.
- b. Identification of aged veterans:  
Customer Service Centre staff are now engaging with callers to the Council around their veteran status and using this to help direct people to the Network and other appropriate groups and services. The Co-Production Development Worker has worked with appropriate people within the Council to develop an online, self-referral form (embedded within the webpage), and also a radio button within the Council's social care recording system so that existing and new customers can be identified as veterans.
- c. Advising and signposting:  
Advising and signposting activity is now happening as part of the work of Customer Service Centre and this is being recorded.
- d. Engagement of Aged Veterans and Five Ways to Well-being (5WW) Assessment:  
A Welcome Pack has been developed to introduce veterans to the project. Sixteen people have completed an assessment based on 5WW (see **Appendix 1**) with the Co-Production Development Worker. This is on target against milestones for development at this stage. The ambition is to have engaged 250 veterans across at least 8 co-produced activities or projects by September 2019, with wellbeing measures scored for 100 people. The wellbeing score, and the legacy of the work completed, will form the basis for impact measurement.
- e. Well-being reviews:  
This activity is due to start during June, to assess the impact that this engagement has had on veterans' wellbeing.
- f. Development of co-produced projects and activities:  
This project is just getting going, but as a result of engagement with veterans who have been identified to date, a number of groups and projects have been started. These include a Health & Wellbeing Group/Reminiscence Group in Broxtowe, which has led

to a variety of activities including artefacts shown and time in the forces discussed; a Health and Wellbeing Group in Bingham, which since April has become 'This is Me' dementia portfolio for veterans and their families; and Tesco Toton Health and Wellbeing Group, which has initiated a photography project and is also going to work with the Toton group to support the Beeston Rylands Heritage Centre by having two raised beds as part of their community project. There are further groups forming, including a newly formed Netherfield Loco Centre group; and a joint project with Volunteer Action Broxtowe Carers' Café and a local history group on a competition around photographs people took during their time in the forces.

## Connect Services

5. The Connect services were commissioned during 2015 and commenced in January 2016. Three contracts were awarded for an initial period of three years with two, one-year extension options. The combined annual contract value for the three services is £1.1 million. As a new service offer, they were designed, linked to duties under the Care Act, to promote well-being and to prevent, reduce and delay the need for higher level interventions. They were designed and commissioned jointly with Public Health and incorporated the brief intervention role of existing Community Outreach Workers, but built onto this a short term support offer. Reflecting evidence from the Institute for Public Care around the risk factors that are most likely to result in escalating need, demand for social care and admission to residential care, the support element was commissioned to deliver positive outcomes around improving health management; managing independence; reducing the impacts of social isolation; achieving safe and suitable accommodation; and improving economic well-being.
6. Around 8,000 people have used the Connect services since they commenced. Activity varies from district to district with higher activity levels in more densely populated areas.



7. People access the services through a very broad range of other services and also by contacting the provider direct. From April 2016-March 2018, the top ten referral source categories were as follows:

Referral Source	Total Referrals April 2016 to March 2018
Self	2,381
Voluntary/Charitable	1,334
Family	1,093
Health Service	887
Social Care	659
NCC Customer Service Centre	362
Not Known	240
Other	187
Housing Association	134
Friend/Neighbour	104

8. In reality, the breadth of referrers is huge, as any one of these categories can include a multitude of sources, e.g. 'health' will include referrals from GP surgeries, occupational therapists, respiratory nurses, community matrons, hospital-based staff, palliative care and others.
9. Of the people who access a Connect service, around 90% receive brief interventions, through which the provider might offer information and advice about how to use Notts Help Yourself and the services, activities and resources available; referrals to services required; or direct support e.g. to resolve a problem, or complete an application form.
10. Where this is not enough to address the needs identified, people are provided with a short period of support (up to 12 weeks) and, in these cases, the provider records the outcomes that are achieved against the specified outcomes framework. On average, people supported achieve three positive outcomes. The most common achieved outcomes are: maximising income, building social connection, solutions to maintaining independence and better management of mental health and emotional well-being. It is often the case that income is maximised through the claiming of attendance allowance or personal independence payments and that this additional income enables people to achieve other outcomes by funding transport, buying in help at home or paying for social activity.

### Case Study

HT is a 91 year old lady who lives alone in a large privately owned bungalow. She has mobility issues and is in constant pain which renders her housebound. She has no close family and was very isolated in her bungalow. HT felt vulnerable due to people walking through her garden as a short cut. She was frightened of opening her door.

HT said that she had recently paid a gardener £2,000 for work, but it was very obvious the garden had not been maintained. Connect staff reported the matter to the police, who told HT that the people concerned were known to them as fraudsters. The bank was then contacted and Connect staff managed to stop the cheque on behalf of HT.

Connect staff then supported HT to have a six foot fence erected around her property with locked gates on both sides, using the recovered £2,000 to pay for this. HT then felt

safe to once again open her doors and use her garden. Connect staff also identified a recommended local gardener who now calls to maintain her garden every two weeks.

HT was also helped to find a safe and trustworthy cleaner, who visits her once a week. This provides HT with social contact and gives her another safe point of contact.

Connect staff identified that HT was not claiming the correct benefits and she was supported to complete an attendance allowance application form. The additional income will now enable her to fund the cost of the additional services that she needs to continue to manage at home.

HT commented “Ironically, now that I am fenced in, it has opened up my life, and I feel safe in my garden.”

11. Whilst the services are monitored through quarterly provider returns and contract review meetings, a more detailed evaluation of the impact of the services has been designed and will be undertaken in the coming months.

### **Age Friendly Nottinghamshire Pilot**

12. An Age Friendly Nottinghamshire pilot has been funded with £275,000 of Better Care Fund and commenced in January 2017. The project aims to use community organising methods to build the capacity of communities to support each other, particularly in relation to social isolation and loneliness. The pilot has been centred on two localities within Beeston and Mansfield. The work has involved Nottinghamshire County Council employed Neighbourhood Co-ordinators talking with and listening to people in the identified communities, and identifying and supporting people to train as community organisers. Nearly 30 community organisers have then been supported to build the skills to engage with local people and to develop a range of social groups and activities including a breakfast club, coffee mornings, singing groups and a volunteer befriending scheme, often recruiting the voluntary support of others to achieve this.
13. People involved in developing many of these activities benefit hugely from this role. One man in his seventies who was isolated, lonely and not looking after himself well now organises a whole schedule of groups and events, transforming his life through new-found confidence, purpose and connection. The concept of service provider and recipient becomes redundant as the givers and the beneficiaries significantly overlap.
14. There have been over 800 attendees at community events, and around 180 people are thought to attend regularly held activities, although it is more difficult to keep track of activities and participant numbers through this pilot as the activities are owned by the community, not the Neighbourhood Co-ordinators.
15. In Mansfield, the work has more recently spread into the town centre where there are now over 20 people, some new to the area, others recently bereaved, who meet in a community room provided, free of charge and with free refreshments, by the Four Seasons Shopping Centre. Within four weeks, new friendships are visible and people have organised themselves into going on to have lunch together after the group gathering.

16. The work has also resulted in a community led response to anti-social behaviour from bored young people, which was impacting how safe older people were feeling in their Mansfield community. A young community organiser has now been offered the pool room in the local pub in which to hold a regular pool group; has worked with young people in the area to build bridges e.g. with the local shop keeper who had been targeted by them; and has supported an inter-generational clean-up of the park (with cakes supplied by an older resident).
17. The Neighbourhood Co-ordinators have also built the Take a Seat campaign. Supported by Councillor Wheeler, shops and businesses in Beeston, Stapleford and Mansfield are signing up to being 'age friendly', providing a seat and a more personal approach to people who might struggle to shop without access to a welcome place to rest. Some businesses which sign up are also able to offer a drink or access to toilet facilities.
18. The pilot will run to December 2018 and an evaluation report, commissioned from Nottingham Trent University, is expected in September.

### **Falls Prevention Project**

19. From January 2017 a one year, Better Care Fund falls prevention project commenced to increase awareness of the risks and impacts of falls, improve the identification of people at risk and promote actions that can reduce the likelihood of falling.
20. The project focussed on:
  - a. delivery of a broad communications programme that included:
    - Sharing over 20,000 copies of the 'Get Up and Go' guide (developed by the Chartered Society of Physiotherapy) through older adults teams, Connect providers, other voluntary sector organisations working with older people, GP surgeries, libraries and at events.
    - Social media campaigns that led to over 6000 hits on the Falls webpage and further downloading of the Get Up and Go guide
    - 25 Get Up and Go events held with a range of partners over the fortnight period around Older People's Day. 750 people attended these events, some taking part in Tai Chi taster sessions, and four new strength and balance classes were established as a result.
  - b. Delivering training to front line staff through both face-to-face sessions and through an online module. Those in key, frontline social care and voluntary sector roles are targeted for face to face training, led by NHS falls leads, in which they learn about using a *Guide to Action* tool to assess risks and identify appropriate actions. 125 staff have completed this training to date, with a further 135 having completed the online training to the end of March.
  - c. Collaborative working under a shared agenda. This aspect of the work has helped make the project successful. Not only did Public Health colleagues play a vital role in bringing expertise to, and sharing oversight of, the project, but partnerships across health and voluntary sector have meant ambitions have been shared and that messages have been consistent.

21. In December 2017, Committee approved the extension of the Falls Prevention Project from April 2018 for a further two years, using £150,000 of Public Health reserves. Work is now under way against the three strands of the continuation project:
- a. Embedding key prevention messages – under this strand, the training of front line staff will continue with sessions schedule for July and October, each with capacity to reach around 100 staff. Work is also planned to review how this is being translated in action in the workplace.
  - b. Developing a falls prevention exercise offer – 14 exercise instructors from six of the districts' leisure providers, Public Health's physical activity and weight management provider (Everyone Health) and freelance instructors, have now been trained to deliver OTAGO, a form of strength and balance exercise with good evidence of falls prevention impact. Everyone Health will, through a variation to their contract, support this programme by establishing exercise classes with a social element in a range of community settings. The Commissioning Officer for the Falls Prevention Project will be working with the same pool of instructors to establish classes in care home, extra care and other group settings, such as lunch clubs. Processes for this are currently being established and a first session will take place within a Mansfield care home in June.
  - c. Improving falls prevention through hospital discharge processes – this element of the project is working with a broader project to improve hospital discharge processes in order to ensure co-ordination of approaches and communication.

### **Other Options Considered**

22. No other options have been considered.

### **Reason/s for Recommendation/s**

23. The report provides an opportunity for the Committee to consider any further actions arising from the information contained within the report.

### **Statutory and Policy Implications**

24. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

25. There are no financial implications to report linked to this progress update.

## **RECOMMENDATION/S**

- 1) That the Committee considers whether there are any further actions it requires arising from the progress update on the range of prevention projects and services contained in the report.

**Paul Johnson**

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### **Constitutional Comments (LM 14/06/18)**

26. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

### **Financial Comments (DG 13/06/18)**

27. The financial implications are contained within paragraph 25 of this report.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Defence Medical Welfare Service bid to develop Aged Veteran Services in Nottinghamshire – report to Adult Social Care and Health Committee on 18<sup>th</sup> April 2017

[April 2017 Committee report](#)

Extension of Falls Prevention Project – report to Adult Social Care and Public Health Committee on 11<sup>th</sup> December 2017

[December 2017 Committee report](#)

### **Electoral Division(s) and Member(s) Affected**

All.

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