

Main Grants 2017-18 report

Name of organisation	Age UK Lewisham and Southwark – Community Connections Partnership
Date of meeting	2nd September 2016
Names and positions of attendees	John Veness, Treasurer, Age UK Jacky Bourke-White, Chief Executive, Age UK Susan Underhill, Deputy Chief Executive, Age UK Winston Castello, Community Enterprise Manager, LBL

Group Name:	Total	Q1	Q2	Q3	Q4
Total funding received 2015-16	£252,000	N/A	£84,000	£84,000	£84,000
Total funding to be received 2016-17	£336,000	£84,000	£84,000	£84,000	£84,000

Outcomes	
	<p>Provide support to vulnerable adults to assist them in accessing services, prevent their needs from escalating, reduce the burden on statutory services and provide links to statutory services</p> <p>Increase the level of referrals from health services</p> <p>Maximise the potential of community organisations to meet the needs of vulnerable adults in the community</p> <p>Identify gaps in service provision and work with local voluntary sector organisations to develop services to meet these needs</p> <p>Develop intelligence on local services that can be shared across the neighbourhood teams</p>

	2015-16 Target	2015-16 Q2	2015-16 Q3	2015-16 Q4	2015-16 Total	% Achieved	2016-17 Target	2016-17 Q1	2016-17 Q2	% Achieved TD
Outputs: CTC 2.1 We will work with 600 vulnerable adults to create and implement person-centred plans - Referrals will be actioned within 14 days of being received - 600 support plans will be implemented, with CFs and Community Connector volunteers facilitating and supporting people to access suitable services and community resources that meet their needs - 600 impact satisfaction surveys will be completed - 10 Community Connector volunteers will be recruited and trained to support the work of the CFs	600	182	207	261	650	108%	800	232		29%
Referrals will be actioned within 14 days of being received -										
Further develop CDW liaison with GP practices and PPGs to establish referral pathways for individuals to community support and services - 200 referrals received from health professionals	200	100	59	119	278	139%	250	110		44%

<p>A minimum of 100 development visits will take place to community organisations. These visits will be to community groups, day centres, community centres, local assemblies etc. From these visits we will identify further services to refer service users to.</p> <ul style="list-style-type: none"> - We will work with a minimum 30 community organisations to increase their capacity to meet need - We will develop a marketing plan that will be aimed at service users, stakeholders and professionals 	100	1	29	131	161	161%	125	162		130%
<p>Through feedback from the CFs, and from health and social care professionals a composite list of gaps in services will be compiled and updated once a month.</p> <ul style="list-style-type: none"> - This will inform the community development work with a minimum 30 community organisations to develop their capacity to meet the identified needs through fundraising, identification of shared resources, marketing and service development. - Monthly gap analysis reports will identify gaps in services and actions taken to build capacity and meet needs within the community sector. - We will work with these organisations to explore and implement ways to fill these 	30	1	29	16	46	153%	38	20		53%

Identify a delivery plan for each neighbourhood team building a bank of intelligence and sharing information across the team in the most effective way	Achieved		4	1		25%
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1. Remove funding from under-performing groups/those performing least well

Have you achieved at least 90% of the agreed reporting outputs and outcomes in all quarters since the start of the programme?

Age UK leads the Community Connections Partnership and works with LDC, VSL and Rushey Green Timebank as delivery partners. The partnership further includes Voluntary Action Lewisham, Healthwatch and Carers' Trust as strategic partners.

Community Connections targets were achieved, with 650 support plans being achieved in the first three quarters, against a target of 600.

Work with GPs and health professionals has developed significantly in the last year, with 278 referrals achieved against a target of 200. In the first quarter of 16/17, an additional 110 referrals were achieved.

The target of 100 development visits was achieved in the first three quarters and an additional 162 were achieved in Quarter 1 of 2016/17. The first quarter of 2016/17 clearly shows continued progress as a result of developments which were put in place in 2015/16.

Have you achieved all of the wider outcomes outlined in the initial grant application?

The Community Connections partnership succeeded in exceeding the level of referrals and engagement with health services. Through its community development work, Community Connections also succeeded in developing community organisations' capacity to work with vulnerable individuals in the community. Community Connections has also undertaken gap analysis to identify service requirements, which identified a number of areas requiring additional development, including work with befrienders and provision for people with dementia. The development of work with health professionals has been the main feature of the last year, with significant work being undertaken across the borough with a range of GP practices, resulting in Community Connections being increasingly seen as a referral route by many GPs.

The initiative is developing its approach to social prescribing and works closely with a number of agencies to offer an increasingly wide range of local activities.

In its community development role, the Community Connections partnership has a neighbourhood focus to its work and works with locally based organisations, including social housing providers, churches and other community groups. The partnership is involved in working with GO ON in facilitating a number of networks, including those working with older residents. Community Connections Development Officers also liaise with local assemblies and participate in the work of assembly co-ordinating groups.

Through its work with local communities, Community Connections is making an important contribution to addressing key areas of wellbeing among vulnerable adults.

If no to either of the above:

- what are the mitigating factors?
- what plans are in place for improving performance?
- what progress has been made against actions agreed with your Development Officer?

N/A

What local support/evidence of need can you identify for the work you are undertaking?

As the older population increases, the demand for services offered by Age UK is likely to increase, particularly in relation to vulnerable adults. Age UK Lewisham and Southwark is increasingly focusing its work on this group.

Referrals from statutory agencies, including health professionals, demonstrate this increase in demand. Referrals from these sources have increased significantly in the last year, resulting in 110 referrals in the first quarter of 2016/17 against an annual target of 250.

2. Negotiate reductions and seek alternative funding streams

Are there any proposals that you can put forward that will deliver significant saving against current expenditure? This can include capital investment to change your delivery/business model.

In common with other advice service delivery in Lewisham, Age UK will be working to redesign current access to advice provision. This better integration of services is aimed at leading to more effective working and a more streamlined service for residents. In addition to this, Age UK is also considering integrating its advice provision with its Community Connections work.

Age UK is further seeking to relocate from its current premises which could result in savings.

What alternative funding streams are you already pursuing?

Age UK Lewisham and Southwark has a well-developed strategy for business development, including the identification of alternative sources of funding. The organisation currently receives grants income from the two boroughs of Lewisham and Southwark. Community Connections is a partnership-based initiative with partner agencies employing the Community Facilitators. These partners include: VSL, LDC and Rushey Green Timebank. The organisation has recently worked with Lewisham Council and CCG to develop a SAIL initiative in Lewisham following the successful launch of a similar project in Southwark.

With regard to additional funds, the organisation is currently pursuing an application to City Bridge Trust.

Are there any other funding streams that you can identify that the council can support you to access?

In order to mitigate against any reduction in funding, Council officers will work with Age UK to identify alternative funding for parts of its provision.

Following the meeting with the partnership it was confirmed that alternative funding for the Community Connections Partnership had been secured through the Better Care Fund. This funding reflects the crucial Community Development role that Community Connections has undertaken, and will continue to deliver, in support of the development of the borough's Neighbourhood Care Networks.

3. Work with groups to consider mergers or asset sharing

Are there any organisations doing similar work to you in the borough who you may consider sharing resources or merging with? Who have you considered/approached?

Age UK is exploring better co-ordinating their advice service with the work of Community Connections. They believe this is the advantage of developing the advice and information skills of their Community Connections team and enabling the advice team to better target their service to the needs of individuals referred by community organisations.

The organisation is open to working in partnership and collaborating with other groups in the borough. However, given its relative size and complexity, a merger is unlikely to be an option.

The organisation is currently looking at its premises requirements and this could involve working more closely with other Lewisham-based groups.

Through Community Connections, the organisation has very strong links with key local partners, including VSL, Rushey Green Timebank, LDC and Carers Lewisham.

It should be noted that, should a reduction in funding be made, this would have an impact on the partner organisations who employ Community Facilitators as part of their partnership with Age UK.

Are there other groups in the local area that you could share resources with even if they are delivering a different type of service? Again, who have you considered/approached?

Age UK has expressed an interest in working with groups supporting older residents in the borough and is willing to share its expertise in working with this demographic.

What support might you need to move these suggestions forward?

Age UK will continue to work closely with LB Lewisham officers in planning its future provision for its advice services and Community Connections work, particularly in respect of future neighbourhood-based delivery.

4. Pro-rata reductions across all groups

What would a 25% cut in your grants look like in service delivery terms? What are the wider impacts?

A cut to Community Connections is likely to result in a proportionate reduction in the number of referrals that the organisation is able to work with.

Have you modelled this cut and developed an action plan for its implementation?

The partnership has not as yet modelled the potential impact of a 25% reduction. However, its initial analysis would suggest that a 25% reduction would result in a commensurate reduction in services.

Conclusion

Any other comments / areas discussed

N/A

Conclusion and recommendation

Given the crucial Community Development role that Community Connections has undertaken, and will continue to deliver, in support of the development of the borough's Neighbourhood Care Networks officers have secured significant funding for the service via the Better Care Fund.

There will be £250,000 available through the Better Care Fund which means that the Main Grant can be reduced to £86,000 while protecting the current funding of £336,000 per annum.

Equalities groups disproportionately impacted by recommendations

Ethnicity:		Pregnancy / Maternity:	
Gender:		Marriage & Civil Partnerships:	
Age:		Sexual orientation:	
Disability:		Gender reassignment:	
Religion / Belief:			

Commentary and potential mitigations:

NA – Funding is being maintained at the current levels.