

## Appendix One: Feedback from stakeholder forums

Listed below is the feedback collected by facilitators at the following 2 stakeholder forums.

Forum one: Bournemouth and Poole Councils for Voluntary Service, Health and Social Care Forum on 20 May 2014. This forum was attended by approximately 40 health and social care organisations.

Forum two: NHS Dorset Clinical Commissioning Groups 'Supporting Stronger Voices Forum' on 22 May 2014. This forum was attended by 45 patient, carer and public representatives. Attendees represented a wide variety of conditions, geography, demography and diversity.

### **Forum one: Bournemouth and Poole Councils for Voluntary Service Health and Social Care Forum 20.05.14**

Each box in the following tables represents the feedback collected by the facilitator of a table top discussion.

Q1	<b>This service is being designed to meet the needs of frail older people and people with multiple long term conditions. Do you think it will meet their needs?</b>
	<ul style="list-style-type: none"> <li>• Will the eligibility criteria be a barrier to case finding?</li> <li>• Frail, older person- how do we define this?</li> <li>• What about Holistic needs?</li> <li>• Challenge: NHS Universal service. Social Care is not-greater boundaries-perception of closed doors</li> <li>• Voluntary sector eligibility criteria is unclear therefore might not meet needs of all</li> <li>• Individual wealth will affect accessibility</li> <li>• How do we support those with Long Term Conditions but not frail or elderly e.g. Mental Health</li> <li>• Self-referral is positive but does this happen? (This happens locally but not sure for statutory services)</li> <li>• Concern about 'doing to' people</li> </ul>
	<ul style="list-style-type: none"> <li>• Good Plan- yes if implemented correctly</li> <li>• Maybe- If needs can be identified-how?</li> <li>• Consistent staff and single point of contact</li> <li>• Generally YES but lots of how's</li> <li>• Will social care package thresholds be a barrier?</li> <li>• Will the frail with no health needs be missed?</li> <li>• Yes if the service is consistent across the county</li> <li>• How will people know it exists? Who is gatekeeper?</li> <li>• Culture shift for service providers-moving away from this is what we can provide- what would you like?</li> </ul>
	<ul style="list-style-type: none"> <li>• Transient groups- How to get access?</li> <li>• Having to put people through a system before being able to help</li> <li>• Crucial to identify carers and offer support</li> </ul>

	<ul style="list-style-type: none"> <li>• Need to put carers 'on the agenda' as many organisations do not care</li> <li>• How to make people aware of the system and what is available</li> </ul>
	<ul style="list-style-type: none"> <li>• Care Co-ordinator and Voluntary Sector is a key feature</li> <li>• NHS and local authority</li> <li>• Agreed with model- Lots of benefits i.e. integrated IT system</li> <li>• Good consultation</li> </ul>
	<ul style="list-style-type: none"> <li>• Model- Yes but How?</li> <li>• Check and Confirm that it meets individual needs (case study examples) <ul style="list-style-type: none"> <li>-Language/read/write-Sexual Gender</li> <li>-Travellers</li> </ul> </li> <li>• Hard to reach group (accessibility to all)</li> <li>• Single Point of Access - Access (what is multiple long term condition)</li> <li>• Feedback from referral to person making referral</li> <li>• Care Co-ordinator Term already used (what else/other name/service user- what do they think?)</li> <li>• Jargon- Softer</li> <li>• Bringing people together- National Voices rather than bringing professionals together</li> </ul>

<b>Q2</b>	<b>Is it clear what we are proposing the integrated health and social care teams will do?</b>
	<ul style="list-style-type: none"> <li>• <u>Clear</u> <ul style="list-style-type: none"> <li>-Will locate people</li> <li>-radical changes</li> <li>-aspirations are clear- not how</li> </ul> </li> <li>• <u>Not clear</u> <ul style="list-style-type: none"> <li>-How will this be communicated?</li> <li>-Where is the focus on social life?</li> <li>-How will this be funded?</li> <li>-Is the provision sustainable?</li> <li>-Expectations of voluntary services?</li> <li>-Cultural change challenge</li> <li>-Where is the leadership and governance?</li> <li>-Workforce integration 'Christmas party test'</li> </ul> </li> </ul>
	<ul style="list-style-type: none"> <li>• Lots of how's</li> <li>• How will outcomes be measured?</li> <li>• Understand project, plans and intentions- not clear if it is achievable?</li> </ul>

	<ul style="list-style-type: none"> <li>• Case finding-how?</li> <li>• Management of initial demand for services? – If well promoted</li> <li>• How will expectations be managed?</li> <li>• Would this service recognise potential for some carers to be in need as well (i.e. would they have the same case manager?)</li> <li>• Locality issue- Hampshire/Somerset etc.</li> </ul>
	<ul style="list-style-type: none"> <li>• Supported Housing (early interventions)</li> <li>• All agencies involved in early intervention-person centred</li> <li>• Admission avoidance</li> <li>• Yes- clear systems</li> <li>• Referral route for all agencies needed</li> </ul>
	<ul style="list-style-type: none"> <li>• ‘This is me’ passport</li> <li>• Properly planned discussions</li> <li>• Ensure the person that knows the service user the best is listened to</li> <li>• Named co-ordinator is a great concept but how realistic?</li> </ul>
	<ul style="list-style-type: none"> <li>• Integrated Model- Not clear</li> <li>• GP is central to patient need</li> <li>• Not clear where GP fits- Integral part of team (locality)</li> <li>• Continuity/Trust-GP (Named GP +75)</li> <li>• How to make it clearer – Examples (now-new model)</li> <li>• Issue: How managed? Locality Team Voluntary sector- Could act as manager</li> <li>• Issue: Clarity on what teams and team members will be doing- What is different?</li> </ul>
	<ul style="list-style-type: none"> <li>• Model- Yes but How?</li> <li>• Check and Confirm that it meets individual needs (case study examples) <ul style="list-style-type: none"> <li>-Language/read/write</li> <li>-Sexual Gender</li> <li>-Travellers</li> </ul> </li> <li>• Hard to reach group (accessibility to all)</li> <li>• SPA- Access (what is multiple long term condition)</li> <li>• Feedback from referral to person making referral</li> <li>• Care Co-ordinator Term already used (what else/other name/service user- what do they think?)</li> <li>• Jargon- Softer</li> <li>• Bringing people together- National Voices rather than bringing professionals together</li> </ul>

<b>Q3</b>	<b>Do you think there is anything we have missed – please explain?</b>
	<ul style="list-style-type: none"> <li>• Maintaining physical health and mental health through social activities</li> </ul>
	<ul style="list-style-type: none"> <li>• Voluntary sector champions linking in?</li> <li>• Pro-active identification of additional needs and demands</li> <li>• Locality led flexible resources-differences in rural vs urban</li> <li>• How will knowledge, lessons learnt, success etc. be shared across localities?</li> <li>• Assurance of consistency across all localities?</li> <li>• Where will commissioning sit? Finance and budget unknown?</li> <li>• Ability to finance across localities-not limited by locality</li> </ul>

	<ul style="list-style-type: none"> <li>• Linking with Housing</li> <li>• Looking at people stories</li> <li>• Include transport in the assessment process</li> </ul>
	<ul style="list-style-type: none"> <li>• If there is a standardised form, should there be a standard outcome?</li> <li>• Immediate notification of change in circumstance</li> <li>• Homeless, transient and people in temporary accommodation</li> <li>• People who do not want to use the system</li> </ul>
	<ul style="list-style-type: none"> <li>• Information services available to care co-ordinator <ul style="list-style-type: none"> <li>-Accuracy</li> <li>-Utility- My Health My Way</li> </ul> </li> <li>• Concern- maybe not missed</li> <li>• Voluntary sector manager/member</li> <li>• What about Pilot <ul style="list-style-type: none"> <li>-1x Team</li> <li>-Rural vs Town</li> <li>-Trial/review/amend</li> </ul> </li> <li>• Core and Explicit- How- Protected characteristics and diversity</li> </ul>

<b>Q4</b>	<b>How can the voluntary and Community Sector best be supported to play a full part in the proposed new arrangements?</b>
	<ul style="list-style-type: none"> <li>• Procurement process- Smaller organisations</li> <li>• Decide what you want Voluntary Community Services to deliver or who should be working together with stat services and who shouldn't?</li> <li>• Financially- Core Costs/everything for nothing</li> <li>• Be honest and manage expectations Health and Social care + Voluntary Community Services- unrealistically big- Sort Health and Social Care first</li> <li>• Is it the right time for Better Together to consult/engage with Voluntary Community Services?</li> <li>• Better Together role in supporting those on personal and health budgets</li> <li>• What do you want?-let us say what we can offer</li> </ul>
	<ul style="list-style-type: none"> <li>• By being recognised and respected equally for contributions they can make</li> <li>• Continued engagement</li> <li>• Finding the right point of contact to effectively communicate Voluntary Sector services available</li> </ul>
	<ul style="list-style-type: none"> <li>• Funding- Funding services that people want and longer term contracts</li> <li>• Housing- central to the support and valued</li> <li>• Increasing voluntary input issues around funding</li> <li>• Building capacity working together- Limited funding</li> <li>• Giving the right tools and funds to do jobs</li> <li>• Talk to us</li> </ul>
	<ul style="list-style-type: none"> <li>• Conversation about contracting, commissioning and funding</li> <li>• Best value for money</li> </ul>

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| <ul style="list-style-type: none"><li>• Equal value and recognition</li><li>• Respect for collaborative working</li><li>• Monitoring resources</li><li>• More resources for provisions</li><li>• Capacity building of Voluntary sector</li><li>• Access to training</li></ul> |
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