



Report to Healthier Communities and Adult Social Care Scrutiny & Policy Development Committee 27th February 2019

Report of: Scrutiny Prevention Working Group

Subject: Findings on Prevention

Author of Report: Emily.Standbrook-Shaw@Sheffield.gov.uk
0114 27 35065

Summary:

In November 2018, the Healthier Communities and Adult Social Care Scrutiny Committee held a meeting to consider 'Prevention'. Following that meeting, the Committee established a small working group to consider the issues in more detail.

The findings of the working group are attached for the Committee to consider/comment/agree.

If the Committee agrees the report, it will be submitted to the relevant Cabinet Members, with the request that a formal response comes back to the Committee in due course.

Type of item: The report author should tick the appropriate box

Reviewing of existing policy	<input checked="" type="checkbox"/>
Informing the development of new policy	<input checked="" type="checkbox"/>
Statutory consultation	<input type="checkbox"/>
Performance / budget monitoring report	<input type="checkbox"/>
Cabinet request for scrutiny	<input type="checkbox"/>
Full Council request for scrutiny	<input type="checkbox"/>
Call-in of Cabinet decision	<input type="checkbox"/>
Briefing paper for the Scrutiny Committee	<input type="checkbox"/>
Other	<input type="checkbox"/>

The Scrutiny Committee is being asked to:

- Consider and comment on the findings of the Prevention Working Group
 - Agree the findings of the Prevention Working Group
 - Submit the findings to the relevant Cabinet Members and request a formal response.
-

Healthier Communities and Adult Social Care Scrutiny Committee

Prevention Working Group

Findings on Prevention

Through our work this year, we've heard lots about the need to work in a more preventive way – to stop and delay people becoming ill, to shift resources up stream, to help people stay well in their communities – both because it's the right thing to do in terms of people's wellbeing, and because with reducing budgets and rising demand for public services, its financially necessary.

We wanted to unpick this – working in a more preventive way is talked about a lot, but what does this mean in practise? How successful are we in it, and is it working?

It quickly became clear that this is not an easy task – the prevention agenda is huge in scale and scope, even the word 'prevention' means different things to different people. We invited a range of people to our meeting in November to get their take on prevention. We talked to the Director of Public Health and the Head of Commissioning for Prevention and Early Help about the Council and partners' strategic approach to prevention; to Council officers delivering services across a range of areas; and to voluntary and community organisations about what their view is. Some members of the Committee also went out to visit projects going on across the City and talk to people working in, and using services.

There were some really clear messages to come out of this work – primarily around the importance of collaboration and partnership working with the Voluntary and Community Sector.

We became aware of some work, in its early stages being done around a prevention framework, and felt that the most appropriate way for us to report was to highlight the issues we are concerned about to Cabinet Members, so that our findings can help to shape the wider work on prevention.

We'd like to request that a report comes back to the Scrutiny Committee at an appropriate point responding to the issues we've highlighted, and will consider including them on our work programme if more detailed work is required. We also recognise that this is not just an issue for the Council, and we will continue to raise these issues in our discussions with partners such as the CCG.

We know that a lot of what we're saying isn't new, but we hope that in highlighting these issues and asking for reports back, we can help to move this agenda forwards. We're keen to see that our actions match our ambitions.

Key Issues and Concerns

1 Relationship with the Voluntary Sector.

The key message we have heard in considering this work is the crucial role that the VCF plays across the city in the prevention and wellbeing agenda. At a time when we are trying to deliver more services at community or neighbourhood level, VCF organisations are well placed to be the glue joining up communities and areas. We didn't just hear this message from the VCF - we spoke to a GP who reported that increasingly people are presenting with social, rather than medical issues – and that their local VCF organisation is a 'saving grace' in terms of taking on difficult cases and making real improvements to people's lives. Council officers also told us that improving the way we work with the VCF is important.

The message we took away from VCF representatives was that the Council and statutory partners need to work in partnership with the VCF. Rather than using the VCF as a 'supplier', we should be working together, in partnership, from the earliest stages to identify the issues we need to deal with and the most appropriate solutions. Co-design, co-production and collaboration were all highlighted as areas we need to work on in Sheffield. Our approach to commissioning and procurement should facilitate a thriving and stable voluntary sector.

We heard that whilst, for example, the People Keeping Well partnerships have been good for building relationships between the statutory partners and the VCF organisations involved, there are many smaller organisations doing vital work all over the city, and we need to consider how we can best provide support for these, and emerging organisations to grow in a sustainable, well governed way, and ensure that these organisations are linked in to the 'system'. It's become clear to us from our visits with social prescribing organisations that a successful system relies on this network, or 'web' of organisations but we have found it hard to get a comprehensive sense of which organisations are providing what services across the city. We feel that it is important that organisations and residents know what's going on in their communities, so referral routes are effective and people can access help when they need it. We feel that a mapping exercise would be useful, so we can understand what's going on across the city; identify any gaps and areas where we may need to develop, grow and invest in the VCF; as well as learn from, and spread good practice. Ward Councillors could play a useful part of any mapping exercise, given their insight into their local areas.

Key Questions

- How can we improve our relationship with the voluntary sector, including our approach to commissioning, procurement and investment?
- How can we get a comprehensive understanding of what and where VCF organisations are operating in the City?

- Can we nourish and grow the VCF in areas that need it, including smaller and emerging organisations.

2 Are we doing it right, and is it working? How do we know?

It was made clear to us that a preventive way of working requires a shift in the way the whole Council works. We've heard a lot about the need for us to become a preventive organisation, however it is less clear how we plan to achieve this culture change.

We've heard from Council Officers about really good examples of services and projects that are working in a preventive way – so we know that good work is going on, but we found it hard to get a measure of how well we are doing in terms of progressing the prevention agenda. Are we shifting resources to preventive work? And is it working? Can we develop a set of indicators to help us understand whether we are achieving our ambitions?

Health and wellbeing is everyone's business, and is as much about an inclusive economy, green space and transport as health and social care services. To encourage this move towards prevention across all areas of work, it would be helpful to build in health and wellbeing considerations into the decision making process.

Key Questions

- We've heard a lot about the need for us to work in a more preventive way – but what is actually happening to achieve this shift?
- What does success look like, and how can we measure it? Is it possible to develop a set of indicators to help us understand whether we are achieving our ambitions?
- How can we build consideration of health and wellbeing issues into the decision making process?

3 Locality Working

We're hearing more about the move into neighbourhood/locality/community working across a range of organisations such as GP practices, neighbourhood policing, social work teams. We have some concerns about the different locality boundaries and their implications for joined up service delivery. We heard examples where People Keeping Well Partnerships were unable to bid for funding from GP Neighbourhoods because the PKW partnerships were operating outside of the boundaries of the Neighbourhood, and vice versa. Is coterminous boundaries across all organisations operating in the city a realistic prospect?

We also heard about how different areas are at different levels of 'maturity' in terms of relationships between organisations. Whilst we recognise that every area is

different, and has different needs, we think that we need a citywide vision for how we work more effectively in neighbourhood.

We've heard that our frontline staff are facing more complex and complicated cases than ever before. Given this, we need to make sure that they are trained, equipped and enabled to build strong and effective partnerships with other organisations working in their area.

We must ensure that the resources we deploy directly in our communities are providing the right kind of interventions, targeting the people who need it and achieving the outcomes necessary to deliver on the prevention agenda. We must also make sure that Council resources are complementing, rather than duplicating activity that is already being carried out successfully in localities by VCF organisations.

Key Questions

- How can we work with other organisations to ensure that different geographical boundaries don't adversely affect locality working?
- Are we using our resources – staff, estate, investment - to maximum effect within localities? How can we do it better?