Prevention Matters Development Programme

PREVENTION MATTERS
Building community capacity for prevention and early intervention services in Buckinghamshire

COMMUNITY PRACTICE WORKER

Introduction
Prevention Matters service model that has been designed in conjunction with over 100 key stakeholders. Further information including a short video explaining the service model, can be found on the knowing Bucks website - http://www.buckinghamshirepartnership.gov.uk/partnership/BSP/partners/partners_data.page

The programme provides an opportunity to fundamentally change the way we deliver social care services in the future and provides a local solution to managing future demand on increasingly stretched and expensive social care and health services.

Target Cohort
The target cohort for the Prevention Matters programme are individuals that fall somewhere between the 'eligible' and 'ineligible' threshold for Adult Social Care services - adults who may be experiencing difficulty in maintaining their independence and who, as a result, are expected to need more intensive health or social care support in the near future. For example, someone who has recently lost their spouse or due to age related frailty is becoming increasingly isolated or someone who has just had a stroke and as a result can no longer access previous social networks and activities. In addition, it is also recognized that people who have been in hospital and received a short period of reablement to help them regain their health and independence, may also require support to enable them to maintain that improvement. Based on Planning4Care data, it is expected that around 7,000 people will be within our target cohort, with the majority being over 65.

The role of Community Practice Worker
One of the main components of the programme is the introduction of 14 Community Practice Workers aligned to GP localities across the county. Referrals will be via GPs/primary care teams and other statutory service providers.

Community Practice Workers (CPWs) motivate and enable individuals to remain independent for longer and connect people with services, networks and volunteering opportunities. Whilst these functions are already fulfilled by a range of professionals and volunteers working within the health sector, housing, social care and community development, the CPW role introduces a single point of access and a resource that can provide a hand holding and review function.

To extend the reach and scope of their activities to as many users as possible, CPWs will spend much of their time liaising with professionals – primary care teams, housing officers and other professionals who will have regular contact with members of the target cohort. This is important for two reasons: firstly, to ensure that these professionals actively identify and refer users to CPWs for support; secondly, to provide these professionals with tools and awareness of what is available, so that they can make referrals to community support themselves, rather than always relying on CPWs to do so.

Role

- Signposting individuals to services and networks
- Providing / referring to training and know-how to maintain independence
- Liaising with Community Links Officer (another new role that is being introduced through the prevention programme that will focus on building community capacity) to identify support available locally
- Spreading the prevention agenda by providing tools and awareness of holistic needs assessment to frontline workers

Activities and responsibilities

- Regularly meeting with primary care teams, social workers and other referral agents to exchange knowledge about individuals and encourage referrals
- Supporting users by signposting and connecting them to relevant services, resources & networks (including some hand-holding and form-filling)
- Assisting, training and motivating users in prevention-related activities
- Targeting individuals at greatest risk
- Tracking and documenting visits and activities by users
- Identifying gaps in community services and support and feeding to CLO

Current Position

The first phase of CPW recruitment has been completed and 2 workers employed by local VCS organisations will begin the implementation of the service in Aylesbury Central and Amersham/Chesham GP localities. This will enable us to refine the referral and assessment processes and establish effective monitoring procedures within each of the GP practices. Each CPW will be aligned to 4-5 surgeries within their locality.

Surgeries will be required to support the development of the service in the following ways:

- help develop appropriate referral system within the practice
- help identify ways in which required monitoring information can be captured
- facilitating opportunities for CPW to attend relevant meetings within the surgery/locality
- providing opportunities for CPW to run sessions within the surgery if appropriate
- identifying information needs for practice/locality re CPW service
- help refine the future service model - feedback on progress as required
- highlighting any issues/concerns re CPW role

The second phase of recruitment to appoint a further 12 workers will begin shortly to enable full countywide service roll-out as soon as possible. This phase will also be delivered through VCS partners

Evaluating Outcomes

The collation and reporting of all outcome monitoring will be managed through a centralised 'Intelligence Hub' which is being designed as an integral part of the programme.

It is vital that we are able to demonstrate both the financial and social impact of the new prevention services and the framework has looked at the methodology to achieve this. This will include data gathering from GP surgeries, social care and the community. The intelligence Hub will also provide a centralised information database (Bucks Connect) and reporting systems to collate the monitoring data

Programme Governance

A number of working groups are undertaking time limited pieces of work. A Service Delivery Group is responsible for overseeing the full implementation of the programme and reporting

any issues and concerns to the Programme Board via the Project Manager. At present this consists of the 2 VCS organisations delivering the CPW service but will include other providers once appointed so that all elements of the programme are represented. Whilst the Programme Board has overall accountability for the successful delivery of the programme, the Health & Wellbeing Board will retain oversight of the programme as a whole. It is also recognised that there are a number of other Boards & forums that the programme needs to update to ensure cross fertilisation with other prevention initiatives such as Families First, Carers breaks & Community Wellbeing Task Group. Further work is being done to detail the links, reporting requirements and the anticipated benefits that the more coordinated approach will realise.

The Programme Board held its inaugural meeting on 30 October. Membership of the Board is currently

Trevor Boyd	Strategic Director, Adults & Family Wellbeing
Rachael Rothero	Service Director, Commissioning & Service Improvement
Steve Goldensmith	Lead Commissioner Housing Support & Prevention
Jane McVea	representing both Clinical Commissioning Groups
Victoria Sprules	Public Health Programme Manager
Phil Dart	Service Director, Localities & Safer Communities
Marcia Smith	Service Manager Performance
Paul Nanji	representing Chiltern & South Bucks District Councils
Stephanie Moffat	Aylesbury Vale DC
Giulia Johnson	Chief Executive, Age UK
Diane Rutter	Community Impact Bucks
Aviv Katz	Innovation Unit

Representation is being sought from GPs, Carers Bucks and subject to further discussions, potential future funders and/or programme evaluators.

For further information:

Diana Fentiman
Programme Manager Prevention Matters
01296 387178
dfentiman@buckscc.gov.uk