

# Health wellbeing and the voluntary sector

How Voluntary and Community  
Organisations contribute to keeping  
residents healthy

# Patient and Voluntary sector Engagement: Whole Systems Integrated Care for over 75s



**Engagement  
Over 70s & Carers**

- 1-to-1 interviews
- Focus groups

**Voluntary Sector**



**Patient Panel**



**Model of Care Working Group**



**Whole Systems Steering Group**



**Out of Hospital Committee**

**Patient & Public Engagement Committee**



**West London CCG Governing Body**

# Interim Report: Whole Systems Integrated Care Patient Engagement



## Recommendations and impact on the Voluntary Sector

1. Accessible transport ..... Any solution should include routes between the north and south hubs.
2. .... the hub should be part of the local community and not merely a place to go to for treatment.
3. Co-ordination needs to be at the centre of the model of care. ....
4. ....quality assurance of the whole system, including co-ordination, should be established and sit outside the model of care. Contract management should include patient experience and social value outcomes.
5. Among most of the participants, there was a clear appetite to work alongside professionals to take responsibility for their own health and wellbeing. .... Self-help and self-management initiatives, particularly those provided by the voluntary sector, should be an integral component of the model of care. ....

## Recommendations and impact on voluntary sector cont.



6. More needs to be done to enable informal carers to continue to care. ...  
... further development of flexible respite services particularly for carers  
people with mental health problems and those from BME communities, an  
expert carers programme and a carers' helpline.
7. The front door of any service...has an effect on the patient's attitude to all  
that follows. ... Customer service training should include working with  
difference, e.g. culture, ethnicity, disability, sexuality, as well as  
communication skills for working with an older population.
8. .... poor communication between GPs, hospitals, social care services and  
community health services ....
9. A communications strategy ....from a patient perspective should be  
developed so that older people and their families have confidence and belief  
in the rationale for change and see themselves as partners in improving  
health and wellbeing services for the whole community.
10. Older people are part of our communities and contribute positively to them.  
They should be seen as assets, not simply as problems to be solved. .... A  
recognition of these lifetime contributions should be evident at every stage  
of the engagement process.

## Voluntary sector contribution



- Voluntary organisations support the health and wellbeing agenda by:
  - reducing hospital admissions and demand for statutory services
  - supporting people to manage their long-term conditions
  - reducing social isolation, anxiety and depression thereby reducing dependence on statutory services
  - influencing the agenda and enabling others to do so

## The Numbers

- 143 organisations contributing to health and wellbeing on KCSC database
  - 64 Older people
  - 58 Vulnerable people
  - 30 Carers
  - 26 Alcohol and drug misusers
  - 35 Homeless
  - 26 Mental health
  - 28 Physical disabilities
  - 21 Learning disability
  - 49 BME

# Services

- Transport
  - Car schemes to: enable people to attend GP appointments; enable access to health and exercise sessions
- Dementia
  - Singing for the brain
  - Dementia support workers
  - Dementia peer support groups
- Health specific exercise classes
- Health specific workshops, talks, advice etc.

# Specific examples

## Age UK K&C

- Primary Care Navigators
  - Supports GP patients to find their way round the health and social care systems
  - Reduces their A&E attendance
  - Reduces GP visits
  - Reduces 'Did Not Attends'
- Projected **net** savings of £267,895 2013-14



# Al-Hasaniya

- Mental Well-being service
  - Improved women's ability to deal with practical and emotional issues
  - Improved access to mainstream services
  - Raised awareness of mental health

# Midaye

- Health access for BME groups with chronic conditions - A multi-stranded approach to help BME people for whom English is not a first language access primary care services
  - Improved client's knowledge of their condition and awareness of self-management
  - Improved clients ability to self-manage
  - Improved access to primary care and community health services

## Working together results in:

- improved health and well-being for K&C residents
- reduced pressure on statutory services
- net savings

# What's next for the sector



- Organisations need to be able to:
  - Demonstrate savings to Health and wellbeing funders
  - Be clear about their unit costs
  - Segment their users (several ways!)
  - Anticipate and prepare for new monitoring trends