

Delegated Cabinet Member Decision Report

Decision Maker and Portfolio area	Cllr Arooj Shah, Leader of the Council
Date of Decision	March 2022
Subject:	Thriving Communities Evaluation & Next Steps
Report of:	Sayyed Osman, Deputy Chief Executive
Report Authors:	Neil Consterdine, Assistant Director for Youth, Leisure and Communities Rachel Dyson, Thriving Communities Hub Lead
Ward (s):	All

Reason for the decision:	To extend the Social Prescribing Innovation Partnership contract which ends on 31 st March 2022 for 1 year until 31 st March 2023 with expansion to develop an offer for children. The report requests one year extension as allowed within the provision of the current contractual terms. The report also requests delegated authority to the Deputy Chief Executive or an Executive Director to extend this contract by the remaining two one-year extensions available within the contract should funding be identified to do so. In addition, the report seeks to secure resource to implement the recommendations of the Thriving Communities evaluation until March 2025. This will be at a total cost of £765,023.
Summary:	Oldham's Thriving Communities Programme was initiated as part of the GM Transformation Programme in 2017/18 the programme has run from 2019-2022, funded by c.£2m of GM Transformation funding and a contribution from Council reserve.

In December 2019 Commissioning Partnership Board agreed to commission an independent evaluation partner to evaluate the impact of these three elements of the programme, as well as the overall programme, with a view to that evaluation informing decisions about the continuation and development this work. This paper presents the findings and recommendations of that evaluation and makes proposals for implementation of the recommendations based on funding available.

What are the alternative option(s) to be considered? Please give the reason(s) for recommendation(s):

Option 1 – The proposals outlined in the report are agreed; the Social Prescribing Innovation Partnership contract is extended for 1 year, including provision of children’s social prescribing for this 1 year period as part of the innovation partnership contract; delegated authority is given to the Deputy Chief Executive or an Executive Director to extend this contract by the remaining two one-year extensions available within the contract should funding be identified to do so; programme resource is secured to lead the implementation of the evaluation recommendations until March 2025. This will be at a total cost of £765,023.

Option 2 - It is agreed not to extend the Social Prescribing contract. This option would have no direct cost to Oldham system partners however, if delivery were to cease this would have the knock-on impact of the current Social Prescribing caseload and those in triage, at total of 600+ people, potentially being left without support and needing additional services from the wider system. It would have associated impacts for the Innovation Partnership providers who would either need to seek alternative funding in a short timescale, or cease delivery putting existing staff at risk. In this option no children’s social prescribing model would be implemented. This would mean the evaluation recommendations would not be implemented unless capacity to do this could be found from existing resources.

Recommendation(s):

Option 1 is the recommended option. This will be at a total cost of £765,023.

Implications:

*What are the **financial** implications?*

The preferred option outlined in option 1 which is to:

- Extend the Social Prescribing contract to March 2023 £355,343
- Expand Social Prescribing to Childrens £88,000
- Extend Thriving Communities programme staff to March 2025 – 2 years at £160,840

Total cost £763,023

The CCG has provided the Council will additional funding of £615,343 and the shortfall of £147,480 can be met from the existing Thriving Communities reserve.

There are no adverse financial implications associated with this report.

(Nicola Harrop – Finance Manager)

What are the **procurement** implications?

The Council undertook a procurement exercise in lines with the PCR2015 to set up an Innovation Partnership with Action Together for the Social Prescribing in Oldham. The current Social Prescribing Innovation Partnership arrangement is coming to an end on 31st March 2022. There is a provision to extend the innovation partnership by a further three-year period on 1+1+1 year basis. A deed of variation will be required to add the Children's offer.

There are no procurement implications to the recommendation on extending Thriving Communities programme staffing resource to March 2025.

(Raj Ahuja, Senior Commercial Lead, 31.03.2022)

What are the **legal** implications?

The contract provides for extension of the contract by a year (and on 2 further occasions), by issuing a notice to Action Together, therefore such extension complies with the Contract Procedure Rules and the Public Procurement Regulations 2015, although the required notice period will not be achieved which carries some risk of rejection. Subsequent to the extension, a Deed of Variation will be required to vary the specification (and charges) to add the Social Prescribing offer for children and young people (Mark Hope)

What are the **Human Resources** implications?

The proposal to extend the Thriving Communities Hub Lead, Project Manager and Project Support roles will provide stability for the individuals and help with retention of the Officers.

Due to length of service, the Hub Lead and Project Manager roles would be given the rights of a permanent employee and would be eligible for redundancy payment if the contracts are not extended beyond 31 March 25.

(Catherine Pearson, Strategic HR Lead)

Equality and Diversity Impact Assessment attached or not required because (please give reason)

There are no equalities implications to the recommended option.

What are the **property** implications

None.

Risks:

No risk comments provided.

Co-operative agenda

The allocation of this funding is consistent with the Council's co-operative themes of community leadership, co-production and early help.

Key Decision:

Rule 13 of the Constitution has been sought and agreed by the Chair of the Overview and Scrutiny Board.

Has the relevant Legal Officer confirmed that the recommendations within this report are lawful and comply with the Council's Constitution?

Yes

Has the relevant Finance Officer confirmed that any expenditure referred to within this report is consistent with the Council's budget?

Yes

Are any of the recommendations within this report contrary to the Policy Framework of the Council?

No

There are no background papers for this report.

Report Author Sign-off:	
Date:	

Appendices to the report are set out below

Appendix number or letter	Description
1	Thriving Communities Evaluation Full Report
2	Thriving Communities Evaluation Executive Summary

Director Sign-off:



Sayyed Osman
Deputy Chief Executive
Date: 26.04.22

Signed:



Councillor Arooj Shah, Leader of Oldham Council

Date: 28.04.22

Thriving Communities Evaluation & Next Steps

1. Background

- 1.1 Oldham's Thriving Communities Programme was initiated as part of the GM Transformation Programme in 2017/18. At the centre of the programme were three funded elements intended to develop and test the delivery of social action and infrastructure within the Voluntary, Community, Faith and Social Enterprise Sector (VCFSE) with a particular focus on tackling loneliness and social isolation. The three elements were the Social Prescribing Innovation Partnership, Social Action Fund VCFSE investments and the Fast Grants micro grant funding. These elements have run from 2019-2022, funded by c.£2m of GM Transformation funding and a contribution from Council reserve.
- 1.2 In December 2019 Commissioning Partnership Board agreed to commission an independent evaluation partner to evaluate the impact of these three elements of the programme, as well as the overall programme, with a view to that evaluation informing decisions about the continuation and development this work. This paper is presented in the context that all three elements, and the supporting programme management, currently cease to be funded in April 2022.
- 1.3 Although the commissioning of the evaluation was delayed due to Covid19 pressures and budget uncertainty Human Engine were subsequently commissioned as an independent evaluation partner to undertake this work and began working on the programme evaluation since January 2021. The final full evaluation report has now been published alongside an executive summary (Appendix 1 & 2), this briefing note provides the background and context for that full report which is appended and highlights its recommendations.

2. Current Position

- 2.1 The final evaluation report sets out in full the findings in relation to each of the three delivery elements; Social Prescribing, Social Action Fund and Fast Grants, as well as the programme as whole.
- 2.2 A core aim of the evaluation approach was to ensure it would reflect the range of outcomes anticipated for residents engaging with the programme, as well as the wider system benefits. The intention being that it would represent a shared view of the impact across partners and as such inform decision making around the continuation and development of the Thriving Communities approach.
- 2.3 Reflecting this intention both qualitative and quantitative evaluation is presented, with a particular emphasis on wide ranging stakeholder engagement across the system, and at all levels, alongside a review of evidence from other similar approaches nationally. Initial return

on investment modelling for Social Prescribing is presented based on social care deflections as one key area for prevention, providing a model which could be built upon with the addition of wider outcome data over time.

- 2.4 The qualitative evaluation demonstrates the programme's influence on the increased recognition of the value of VCFSE by public services, as well as identifying the continued challenges to integration of those services both on the ground and as part of a wider strategy for prevention across the borough.
- 2.5 Both quantitative and qualitative analysis of Social Prescribing demonstrates the value of the Innovation Partnership as a commissioning model to enable a new approach to be co-designed and adapt to changing demand and need. The evaluation demonstrates the increasing demand and increasing complexity over the life of the service, and a shift in the needs of people accessing the service throughout the pandemic. Although loneliness and social isolation remains the most common reason to access to service, in most cases people are not healthcare 'frequent flyers' as was anticipated at programme initiation, but many have long-term health conditions and/or are at risk of escalation into costly social care, housing and welfare services if not supported. The evaluation demonstrates robust improvements in people's wellbeing following intervention based on ONS4 scores, alongside deflections from social care and healthcare (for those who were frequent attenders prior to intervention).
- 2.6 The evaluation also demonstrates the value of investment, through the Social Action Fund and Fast Grants, in the VCFSE ecosystem which is needed to support effective social prescribing. There are demonstrable benefits for project participants, as well as skills and capacity building within the sector. There is also significant learning provided about how the Council can improve and develop our approach to grant giving and investment to better support these aims.
- 2.7 The evaluation makes eight recommendations:

Recommendations for Oldham System

1. Create a cross-system working group to co-design and co-produce prevention model for the borough
2. Consider a single grant funding pot to pool resources for community-led initiatives and community capacity building. This will ease funding applications for organisations and create a sustained funding stream
3. Continue to progress data sharing arrangements to enable health, care and support organisations to better provide targeted services

Recommendations for Oldham Council

4. Consider funding options and models for the future of Social Prescribing and VCFSE grants from March 2022
5. Design a refreshed set of objectives, outcomes and measures for Social Prescribing that align to the funding model chosen and monitor through contract management as service becomes business-as-usual. The objectives should also be refreshed for the borough's context post-pandemic given the impact this had on the programme
6. Undertake a Thriving Communities Index data refresh to support evidence based and targeted commissioning and decision making

Recommendations for Oldham VCFSE

7. Invest in online engagement and computer literacy of your service users. Feedback from surveys has shown this is an area service users wish to maintain but not all have the capability to access

8. Continue to undertake mid-project evaluation collecting quantitative wellbeing statistics of service users to evidence improvements

3. Issues

- 3.1 Recommendations 1-6 include continuation of the development of the Social Prescribing model (Rec 4.), taking the learning from VCFSE grants programmes forward into a pooled grant funding pot (Rec 2.), and a refresh of the Thriving Communities Index (Rec. 6). Each of these will require direct investment as well as programme resource to support implementation and to drive forward the system change recommendations around the development of a prevention model (Rec 1.), outcomes measurement (Rec 5). and data sharing (Rec. 3).
- 3.2 There is also an ambition as part of the Children's Services Early Help model to develop a Social Prescribing offer for children and young people with investment alongside in the VCFSE ecosystem needed to support this. However, the proposals currently in development rely on the existing Social Prescribing infrastructure remaining in place to enable relatively low cost and quick implementation building on the adult model.
- 3.3 Oldham does not currently have an early intervention and prevention strategy. Whilst there are many programmes, interventions and services, including social prescribing, focused care and early help, undertaking effective work to improve health and wellbeing and reduce demand on health and care services, there is overlap between and a lack of coordination across these approaches. If the current offer is extended for the period 22/23, this would provide an opportunity to undertake a full review of existing early intervention and prevention offers and develop a strategy and investment plan for the future. The intention of this work would be to ensure there is a coordinated and appropriately funded offer for Oldham residents, which improves health and wellbeing and reduces demand on health and care services.
- 3.4 The CCG have committed £615,343 of funding to the Thriving Communities programme to support the continuation of Social Prescribing and the expansion to Children's Social Prescribing during 22/23 on the basis that the future of these services beyond that time is considered as part of the development of a broader early intervention & prevention strategy.

4. Proposal

On the basis of the evaluation recommendations and the funding available the following proposals are made:

- 4.1 The CCG £615,343 funding is allocated to the existing Thriving Communities reserve.
- 4.2 This funding is used to extend the existing Social Prescribing Innovation Partnership for 1 year (22/23) at a total cost of **£355,343**. Social Prescribing is currently contracted to a consortia of VCFSE partners, led by Action Together, through the Innovation Partnership on a 3+1+1+1 contract, with the first three years ending 31st March 2022. In addition to the core model funded through the Innovation Partnership a number of link workers have subsequently been funded through the PCN Direct Enhanced Services (DES) contract but employed by Action Together within the wider Social Prescribing service, contract renewal for these staff has been agreed in principle with formal renewal currently in progress. A breakdown of annual delivery costs is shown in the table below, costs to be covered by the CCG contribution are shown in red. The report also requests delegated authority to the Deputy Chief Executive or an Executive Director to extend this contract by the remaining two one-year extensions available within the contract (+1+1) should funding be identified to do so.

Component	Current Funding Source	Total Annual Cost	Delivery Partners
Manager, Triage & 2 FTE Community Development Workers	Innovation Partnership Contract (GM Transformation Fund)	£148,593	Action Together
4.5 FTE Link Workers	Innovation Partnership Contract (GM Transformation Fund)	£156,750	Action Together, TOG Mind, Age UK, Positive Steps
7 FTE Link Workers	PCN DES Contract	£238,777	Action Together
VCFSE Development	Innovation Partnership Contract (GM Transformation Fund)	£20,000	VCFSE grassroots orgs (via Action Together)
CMS Software Licensing	GM Person & Community Centred Approaches	£30,000	Elemental
Total		£594,120	
Total Funding Requirement		£355,343	

- 4.2 Aligned to the ambition of the Children’s Early Help model the social prescribing service is expanded to provide bespoke support to children, shifting the focus of the current model which is predominantly adults, through the addition of 2.5FTE link workers at a cost of **£88,000**. It is also recognised within the Children’s Early Help model that in order to enable the expansion of Social Prescribing to support children there needs to be corresponding investment in the VCFSE ecosystem with a particular focus on grassroots organisations supporting children and families. An annual initial annual investment of £60,000 to the One Oldham Fund has been agreed from the Troubled Families Investment Fund, contingent on the expansion of the link worker service to include children.
- 4.3 That the remainder of the CCG contribution alongside a contribution from the existing TC reserve is used to secure the programme resource until March 2025 to lead the development and implementation of the evaluation recommendations. The Programme support for Thriving Communities is currently funded until 31st March 2023 through Covid Outbreak Management funds and officers are on fixed-term contracts until that date. This comprises three officers; hub lead, project manager and project support. The evaluation highlights the role robust programme management played in the implementation of Thriving Communities and would continue to be required should the recommendations be implemented as described above. This resource would support delivery through contract monitoring, development of refreshed objectives and outcome measures, and progressing data sharing arrangements, as well as strategic development and implementation of a single VCFSE funding approach and wider work around the role of VCFSE in early intervention and prevention. The cost of the programme team is **£160,840** per annum.

Appendix 1 – Thriving Communities Evaluation Full Report



Mgt Board Briefing
- Thriving Communit

Appendix 2 – Thriving Communities Evaluation Executive Summary



Mgt Board Briefing
- Thriving Communit