Better Care Stronger Communities Funding: Scoping Event – Meeting Notes

March 6 2019, The Batch, Warmley

Introduction

This meeting was an opportunity to discuss how Better Care Stronger Communities could use a common evaluation and outcomes framework for (future) funding, which include the best ways of measuring the impact of the activity provided by VCSE organisations. The event aimed to enable groups attending to:

- Understand the proposed process for developing and commissioning Better Care Stronger Communities services

- Begin to scope and inform possible shared outcomes for future Better Care Stronger Communities funding

- Begin to scope and inform the development of a shared impact measurement tool for evaluating impact

Sue Jaques, Commissioning Manager, South Glos Council introduced the event. She explained the South Gloucestershire Council wanted to improve the way it measures the impact of the services the voluntary sector provides to ensure it effectively demonstrates the benefits to the health and care sector and the individual. The previous round of Better Care Stronger Communities funding looked at fur priority areas: keeping people outside of the health and social care system; carers have recognition and support; focus on what people want from life and support; families and community groups to self-help. Organisations that were funded gave details of 3 outcomes per priority they would achieve and were required to address at least 2 priorities.

This was difficult to monitor as it was like comparing apples and pears. The council received a lot of narrative about activities and case studies but this in itself does not provide a compelling case to demonstrate the impact of the funding. No one would doubt or argue the fantastic work that is being undertaken in the voluntary sector locally but the council needed to be able to demonstrate the impact of that activity.

Through this session the council wanted to work together to develop thinking on would/could/should be measured with the idea of developing a 'pick and mix' basket of outcomes and to start the thinking around how the impact of those can be measured. Groups were invited to discuss issues and areas that were seen as important, achievable and not so achievable with the aim of working towards an evaluation framework with a shared narrative for organisations that receive funding to contribute their part.

The presentation from the day is available here: **Powerpoint presentation**

Groups were divided into four tables for each of the two workshop sessions. Feedback from each table and session has been grouped below to enable comparison between the range of feedback from each table.

The meeting was attended by 24 people.

Workshop 1

Participants were presented with the overarching outcomes currently for Better Care Stronger Communities funding and invited to discuss: What do you agree with and why? What would you change and why? If you propose changing anything what do you propose the council does instead?

The current outcomes that were discussed are:

- Support people to live well in old age and with long term condition
- Keeping people outside of the health and social care system, reducing or delaying the need for more intensive support
- Universal services that build capacity and resilience within individuals and communities.
- Thinking beyond services to focus on what people want from life, prioritising relationships and helping people of all ages to maintain their connections.
- Supporting families and community groups to self help
- Peer networks and circles of support.

Workshop feedback - Discussion 1			
What do you agree with and why?			
Table one	**Table two**	**Table three**	**Table four**
• Improving people's quality of life • Think of ways in which capacity and resilience might be expressed as an outcome? • Austerity and the scale of issues facing people • Self-care – important • Useful to talk about ends and means	• Providing / creating peer support - self support • Enable people to access appropriate services - Early stage diagnosis (if dementia) • Universal services – accessible to all / specialist services need specialist input • Last two points – important to reduce isolation – peer support	• Good baseline to get started • Agreement with 5 levels	• Suggestion that it's more of a circular process • Understand importance of being able to show impact • Concerns around difficulty of collecting quantitative data • Council promoting public health = good • Social side/peer groups/networks is good • Build resilience for the future • Prevention is really worthwhile • Discussion around common measurement framework
What would you change and why? If SGC change anything what would they do instead?			
• 2 Is more like an outcome – more tangible? - Or more difficult? How to do this…. - What starting point? • Describing the difference not the	• Build up people's confidence – (to) trust services (people who are often outside of the services) • Appropriate access of the services – national strategy: self-care/advocacy/take	• Suggestion that it's more of a circular process • Understand importance of being able to show impact • Concerns around difficulty of collecting quantitative data	• Should be a focus on how health and social care organisations can work together across all organisations/sectors • Early intervention is key and can be improved – enable people to

solution - The way of achieving that next step • Nb. Link to proportionality….important (small and large providers) • 2: Better expressed as early intervention? • Loneliness is a key issue – this needs to be included: make connections and maintain them • Anxiety and mental health issues need to be considered - Common goal - Clarity re starting point: greater need now? - Threshold / prioritisation - People on low incomes • Being clear about where the better care services fit in relation to other outcomes for other funding • Work and social adjustment – support into education, voluntary work etc - Independence - Must be integrated with other services	control/recognise • People's concerns of accessing primary services • Building resilience – self help/medical intervention • Providers build relationships with groups • Ageing well – lots of young people – message to get across, "ageing and living well" • Support people to make new connections - Reduce isolation etc • Older people/BME/disabled communities etc – access to services - Language we use amongst ourselves - Acronyms! • Person centred – sign posting – how do we know if what you're given is what you need		access services before crisis • Keeping people out of healthcare is not always possible (carers groups for example). Should be reworded to say 'supporting people to better access services) - Helping people to navigate 'the system' is has huge value - Accessibility - knowing what's available • Should areas of more deprivation be prioritised? • Needs to be baseline evidencing of the outcome needs. Can't just pick the outcomes out of the air • How do shared impact measurements work? Hard to prove impact across such a huge range of services • Diverse commissioning • Work should be done to increase understanding outside of commissioning - Language changes (less jargon)
Other Comments			
• All the statements need to be consistent	• All providers have a different focus • Measuring – directly relating to points		
Summary of Feedback from First Session			
• Ageing and living well		• Improve quality of life	

• Accessing primary services when needed – taking control	• Ways capacity and resilience can be expressed – why
• Different communities/sections of community access	• Consistent – value of each
• Avoiding crisis and needing statutory services	• Impact of austerity
• Building resilience – accessing better	• Where this fits with other services – interrelation
• Evidencing outcome needs	• Concerns about qualitative to quantitative data
• Starting point – what are the needs upfront	• Circular and informing others
• Clarity around what is part of the framework	• Groups reach all and their needs – linking

Workshop Session 2

The meeting looked at potential approaches for measuring impact and went on to consider in workshop groups:

- What do we need to deliver: activities, outputs, outcomes?

- What do we need to measure?

- What changes can be made to develop practice so that information to measure impact is part of the process?

Discussion 2			
Table one	**Table two**	**Table three**	**Table four**
What do we need to deliver: activities, outputs, outcomes?			
	• Outcome – surveys • Impact – how info is put into practice • Outcome/impact – make your aim/work smarter – funding bids - More efficient effective • Outcomes – Opportunity – capturing feedback in an appropriate way	• Reduce loneliness • Improve quality of life • Maintaining mental wellbeing – lack of anxiety	• Q1 Lots of variables (groups, one-to-one sessions, emails etc). Is there a weighting to different activities • Short term and long term impacts • Big strategic aims are subjective as people's lives are complex. Tricky to define obvious, clear outcomes
What do we need to measure?			
• Needs flexibility – negotiation • Monitoring forms reflect requirements	• Before and after scale wellness - Reinforce learning over time/differences	• Increase knowledge about community services/groups • Proportional amount of work	• Consistency – are you hoping to compare overall impact? Or specific project impact

• Timescale – vital to have measures in place first • Timescales for commissioning reflect what's feasible re monitoring – agreed set of metrics from outset - Reflected in overall process map so there's sufficient time to develop. - Proportionate! - Monitoring fit for purpose: part of consultation process? - Reasonable expectation - Include expected and unexpected outcomes – process of reflection and response is part of the monitoring / reporting • Demonstrate the influence of work overall • How individuals are involved in setting their own goals	• Different ways of monitoring – eg case studies • Balancing act (on measuring activities) • Focus groups – not pre-planned – "unannounced" – staggering – independently facilitated – frank discussions		• What do all organisations do to measure impact currently?

What changes can be made to develop practice so that information to measure impact is part of the process?

• Danger of shared tool: some groups will have a different validation tool which is better. • In relation to future support: comparing and sharing local (and national) tools would be very helpful • Must be appropriate to the group.	• Evaluation as part of the process - change – Take back and use and use as part of the process of evaluating individual persons need		• Danger of overcomplicating measuring impact - How much resource/time is meant to be used measuring impact and could this take away from delivering the service - Some groups will be able to measure impact better (eg large organisation v one person project) • Need to strip it back to understand common impact measurement across all orgs – at a basic level

			• Big strategic aims are subjective as people's lives are complex. Tricky to define obvious, clear outcomes • Should talk to people in the community – not just VCSE and commissioners • Lay people having to give too much info to prove impact could be a barrier to receiving services
Summary of Feedback from Second Session			
Measures - Tools being used - Validate tools that are effective for current services - Adjustments – allowed for in the process - Proportionality - What does this work influence - Share knowledge experiences (locally and nationally) • Organisations and individuals • Wellness scale • SMARTER aims		• Capture feedback • Using visits to evaluate **Elements** • Loneliness • Quality of life • Maintaining - preventative focus • Increase knowledge and services/access • Not over complicating – keep it simple • Common measurements and clear outcomes	

Next Steps

Sue outlined the proposed process in working towards an evaluation framework for Better Care Stronger Communities funding:

- Feedback will be incorporated into the evaluation framework that will be included in the consultation

- To gain approval from elected members to consult on the Better Care Stronger Communities funding

- To update proposals from consultation findings

- To open the awards process for BCSC

- To make awards

- New contracts to start in April 2020

Participants expressed a strong desire to continue working together to support the process. It was agreed that a further meeting in order to progress the draft framework would be helpful.

Evaluation

We asked participants to rate:	Average score out of 5
Your understanding of subject at start	2.9
Your understanding of subject at end	4.2
Did you feel able to represent the views of your organisation?	4.1
Did you feel empowered to work in partnership with other organisations?	4.1
We asked participants what they might do differently as a result of this meeting and to tick as many as apply:	
Work in closer partnership with another organisation?	2.0
Review the current practice of your organisation in this field?	13.0
Get more involved as a voluntary sector representative	1.0
Explore or develop a new project or piece of work	6.0

We asked: Are there any particular topics you would like to see covered in future meetings?

- Measurement Tools / Evidencing impact
- Overall Quantification
- Funding arrangements before new bids
- Explored in discussion
- More consultation
- Could bring existing outcome measures next time to see if any could be used across organisations
- Proportionality with funding outcomes/length of report
- Improving monitoring form / sharing impact measurement tools
- Process of funding application

- How about what commissioners will actually base decisions on
- Just follow up from this meeting

We asked: are there any other comments you would like to make?

- Confusion over terminology
- Thank you, very helpful and informative morning. Added benefit – great to meet and learn about other organisations
- Thank you - very thought provoking
- It's good to meet people from so many organisations
- Lack of interpreter, intro round difficult to follow, room acoustics poor (echoes)
- Smaller rooms for discussion
- Good to have it clear what outcomes the local authority want from the fund too

Other – please specify

- Review how to measure outcomes
- Continue to be involved if asked

Appendix – list of attendees