

ELGC COV VS 18

Ymchwiliad i COVID-19 a'i effaith ar y sector gwirfoddol

Inquiry into COVID-19 and its impact on the voluntary sector

Ymateb gan: Bwrdd Iechyd Prifysgol Aneurin Bevan

Response from: Aneurin Bevan University Health Board



## **Aneurin Bevan University Health Board**

### **Evidence to the Equality, Local Government and Communities Committee of the Senedd**

### **Impact of COVID-19 on the Voluntary Sector in Wales**

**November 2020**

## **Introduction and Purpose of the Report**

This written submission is provided to the Equality, Local Government Communities Committee of the Senedd from Aneurin Bevan University Health Board to support the Committee's consideration of the impact on the Voluntary/Third Sector organisations in Wales during the COVID-19 Pandemic.

This report provides information regarding the impact in the Health Board area during the first COVID 19 wave and the continuing work that the Health Board is undertaking with the Third Sector during this time. This document aims to illustrate the impact and additional support that has been required during the period and also the innovative ways the sector has adapted to support service users in the community in a more targeted way, which has used new technologies wherever possible, whilst also ensuring continuity of care.

## **Background**

The Aneurin Bevan University Health Board collaboratively works with both Gwent Association of Voluntary Organisations and Torfaen Association of Voluntary Organisations in order to engage and support the sector in Gwent. Even before the pandemic, the Health Board greatly valued the significant contribution the third and voluntary sector makes in supporting the health and wellbeing of the Health Board's population. The Health Board has a long history of commissioning the third and voluntary sector to deliver bespoke health and social care services, using a number of different joint funding schemes to enhance the additionality of the sector. The Health Board has always acknowledged the added value that the sector offers, by providing a flexible approach to service delivery and the ability to successfully engage with citizens who do not engage with health services.

During the COVID-19 first wave the majority of the service level agreements that the Health Board commissions with the third and voluntary sector were enabled to be maintained as the majority of services were able to be provided remotely to continue to support service users. Where services were required to be stopped as they did not lend themselves to remote working during the pandemic the staff were in receipt of furlough grant payments.

Staff working in the third and voluntary sector have adapted and worked from home and changed the way they work to keep services running. The biggest impact for services has been the inability to visit people face to face either in hospital or their home during the pandemic. Many staff have fed back that they feel this has had an impact for some service user groups as often visiting individuals at home identifies other underlying issues. Staff working in the sector have also identified that some service users group do not have full access to technology, however for a large proportion of service

users the new ways of working have been embraced and have sought assurance that this will remain.

### **Example of Good Practice**

The Health Board has provided below an example of good practice in terms of the ways the organisation has continued to work with the Third Sector and how Third Sector bodies have continued to provide support and services.

The Gwent Association of Voluntary Organisations (GAVO) and the Health Board have worked together to deliver a home-based support package for those who have existing health conditions that require ongoing management during the pandemic.

The well-regarded "Education Programmes for Patients" (often referred to as 'EPP') was an already well established pathway for meeting the aims of supporting patients in the community. Therefore, plans to convert the existing face-to-face courses to virtual courses that could be delivered online were commenced by GAVO's EPP Team, to enable participation from home during COVID-19, when community-based delivery wasn't possible.

The Programme seeks to:

- Ensure the person's health conditions are adequately managed
- Encourage them to manage their condition(s) and undertake recommended activities
- Maintain their baseline cardiovascular and respiratory fitness
- Promote a good diet
- Promote and support mental wellbeing
- Work closely with Primary Care through Neighbourhood Care Networks (NCNs), supporting patients from their first point of contact with GP's
- Deliver a complete support and health management programme within the comfort of their own home.

GAVO committed a proportion of their Welsh Government/WCVA COVID funding to the support and recruitment of a Volunteer Co-ordinator, who is employed by GAVO and who works closely with health and social care within Caerphilly County Borough Council.

The focus has been on recruiting and inducting Volunteer Buddies and matching them with vulnerable people. The scheme is also using the Welsh Government funded, national digital platform for volunteer recruitment and management – Volunteering Wales. This platform enables the analysis of data from the scheme as we move forward and will track the impact of the volunteering on the lives of both the volunteer and the vulnerable people.

**Service Delivery Aim for the next 2 years** - Across the next 24 months, the Scheme will aim to:

- Build communities and the resilience of vulnerable citizens
- Provide safe recruitment and deliver effective induction/training to all Volunteers involved in the Scheme
- Build a 'bank' of Community Buddy Volunteers who can be called upon to provide a rapid, safe and quality community response, if/when/where required
- Develop and improve the well-being of local people who have been shielding and self-isolating; signposting to specialist agencies/groups/local services and working in partnership, where appropriate
- Develop the skills and confidence of Community Buddy Volunteers to support local people through utilising the wide-ranging skills, experience and resources the partnership team members offer and sourcing and delivering relevant training
- Equip the Community Buddy Volunteers with skills to help them encourage vulnerable people to have less reliance on the Volunteer Buddy Service, without withdrawing vital support where needed
- Ensure effective systems are in place and maintained, to ensure continued support is available throughout the process and carry out evaluation of the Volunteer journey, ensuring their experience is positive and meaningful.

Signpost vulnerable people to local support groups/activities/services to enable them to move out of social isolation. Providing necessary support throughout, to build confidence, their own resilience and encourage them to become more independent and active in their local community.

### **Key Challenges**

Organisations have had to adapt how they engage with people, clients, and their families, switching from frequent home visits to telephone consultations. For many, technology channels have been more convenient and flexible, and less time-consuming. We are aware that staff providing telephone consultations feel this kind of service is insufficient to truly understand the needs of the person they are supporting. This is partly because they depend on a person's capacity to adequately explain their current situation orally, but mainly because they rely on self-reporting.

Often a home visit for one issue reveals many more, either through conversation with the client or using a caseworkers' expertise to spot where additional help might be needed. Similarly, telephone consultations are not always appropriate for people with hearing difficulties, or other disabilities, which is an additional barrier to access.

## **Governance Arrangements**

The Health Board continues to engage with colleagues within the sector who have asked in submitting a report to the Committee that the following are acknowledged as having provided exceptional support during the pandemic and have ensured services are maintained within the sector:

- Comic Relief Grant funding – Although there have been many grants available to the sector, acknowledgement should be given to the Comic Relief Emergency Fund. The money was agreed with a quick turnaround from Comic Relief and passed to CVCs through WCVA. The grant allowed CVCs to have the opportunity to support local grass roots groups to manage their COVID response and was able to support groups to continue to provide a vital support to communities.
- Welsh Government was a vital partner to produce advice and guidance on how to deal with key aspects in managing the disruption. One piece of Policy/Guidance created really supported the sector:
  - Handling money - It was clear that within communities shielding and isolating, there would need a need to have a positive community response. People registered to volunteer, but in order to protect the volunteer and the community members, a generic document to support the handling of money was needed and this has been implemented to good effect across Gwent.

In order to fully support the third/voluntary sector across Gwent a multi-agency group has been re-established through the local Strategic Co-ordinating Group structure. The third sector support group has met on a monthly basis to provide support and advice for our communities and community partners.

## **Conclusion**

Aneurin Bevan University Health Board acknowledges the huge contribution that the third/voluntary sector provides to the citizens of Gwent. During the pandemic that support has been highlighted in the good practice that have been developed and highlighted above and the approach has further increased our collaboration with the third sector, which was already well established. The Health Board is clear that a robust and well supported third/voluntary sector is a key component to meeting the needs of local people and particularly our service users.