

# VS6 – Working together to build a stronger Liverpool City Region

## Building On: Finding a Better Way to Support Carers, and Shielded and Vulnerable People in LCR

Summary of discussions and recommendations arising from VS6's Vulnerable and Shielded People VCFSE Sector Assembly

Tuesday 16<sup>th</sup> June 2020

**1. RISK ASSESSMENTS:** The right tools for VCFSE organisations, shielded and carers

**2. SUPPORT FOR VCFSE GROUPS TO GET RUNNING AGAIN**

**3. PROMOTE LOCAL SUPPORT OFFERS FOR CARERS, AND SHIELDED AND VULNERABLE PEOPLE AT AN LCR LEVEL**

**4. ACCESS TO FORMAL AND INFORMAL RESPITE CARE**

**5. PPE – for Carers as part of hospital and care home discharge planning including to shared accommodation**

**6. UNDERSTAND CHANGING SUPPORT NEED – as current support needs and capacity change**

**7. REVIEW EMERGENCY PLANNING AND LESSONS:** how do we keep and build on what has worked well?

**8. REBUILD A SUSTAINABLE VCFSE FINANCIAL MODEL**

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## Foreword

During the City region's response to coronavirus, there has been a great deal of energy put in to protecting and supporting "shielded and vulnerable" people. While there are large numbers of people who have been formally notified to shield, we know that 1 in 4 people of working age in the City Region have a limiting health condition and might therefore be described as "vulnerable".

As ever, the 181,000 Merseyside carers, have been a vital part of how we look after each other but have faced new challenges and barriers in how they look after family, friends and neighbours, while the increase in mutual aid has been more than commendable.

The VS6 Vulnerable and Shielded People VCFSE Assembly was held via Zoom on Tuesday 16<sup>th</sup> June 2020. Angela White, Chief Executive of Sefton CVS, chaired the event which was attended by over 60 participants while 51 organisations signed up. For this event we used the terminology developed by government but we are conscious that terms like "vulnerable" are disempowering.

The event comprised a keynote on the impact of Covid-19 on vulnerable groups and their carers from Dave Sweeney (of the Cheshire and Merseyside Health and Care Partnership), followed by a series of three workshops. These three workshops focused on vulnerable and shielded adults, their carers, and the VCFSE organisations who work with them respectively. During these workshops, participants discussed the key themes in terms of their own organisation's experience, concerns and ideas. These were collated by the facilitators, and form the basis of this report.

The ideas, concerns and requests have been drawn together by VS6 into a set of recommendations for building back VCFSE activity supporting vulnerable and shielded people and their carers. Participants and registered organisations were asked to respond and help finalise these draft recommendations and these were agreed. Key recommendations are on the following page.

## 8-Point Plan for LCR VCFSE Organisations

### 1. Risk assessments to support shielded and vulnerable people

There needs to be risk assessment support for:

- a) Organisations offering support to shielded and vulnerable people, and their carers; this should include mechanisms for groups to share learning.
- b) Carers and shielded people so that they can make their own judgements about risk and what they might expect.

An important outcome from both sets of risk assessment support should be that there is a standardised sense (i.e. what the 'new norm' might look like) of what people can expect from community centres and venues. This will make it easier for people, and help build their confidence in venturing out for the first time in 3 months.

### 2. Support and resources for groups to adapt services and spaces and to return!

Attendees recognise CVS as a key source of support and guidance, however, there is a need for further and immediate resources for frontline and volunteer-led 'micro' organisations, as well as community centres. A safe return to face-to-face working is increasingly vital for our communities and citizens. This needs to include PPE, plastic screens, advice on adjusting income generation strategies as well as digital solutions. Resources to make this happen will be important. Sources of funding, especially cash for quick spot purchasing, will be important.

### 3. Promote local support offers for carers, and shielded and vulnerable people at an LCR level

The development of a single portal, linked to carer support organisations for instance, could be part of this approach. Alongside wellbeing support, this could also make it easier to offer effective access to economic opportunities for carers, and shielded and vulnerable people (e.g. training and employment). It will offer the opportunity to understand what support is available, what support is essential and where the gaps are.

### 4. Access to formal and informal Respite Care

Carers are bearing a huge burden in supporting shielded and vulnerable. We need to find new ways to offer support, opportunities to 'bubble' and ways to increase confidence in using respite services as they return. Access to these services, like Dementia Cafes, and confidence in using them is increasingly essential.

### 5. PPE

CVSs are currently working with the Merseyside Resilience Forum's PPE cell to progress work here. There should be a single, organised approach to coordination for groups and carers in each borough. The CVS role will be key to how councils lead on this.

Carers should be able to access PPE as part of hospital and care home discharge planning (i.e. an allocation for carers is specified). This should include discharge to shared accommodation for people with additional support needs.

### 6. Understand impact of drop off in informal carers and volunteers and changing needs

As people return to work, the impact on shielded and vulnerable people (operating social distancing and addressing risks) could have significant impact. We also need to develop our ambition for how we might build back better support for people who need the support of others.

## **7. Review emergency planning and lessons; how do we keep and build on what has worked well?**

There are a number of lessons for the sector and for supporting shielded and vulnerable people. In particular:

- a) The Community Resilience Hubs have been essential as has the VCFSE role in supporting them. How can what has worked well be continued? The emergent model of working more closely with Adult Social Care has been important and should be built on and enhanced – e.g. the St Helens Together model.
- b) Shift to home working for VCFSE agencies needs reviewing e.g. access to laptops, adequate home working arrangements, internet.
- c) Guidance and communications to the sector to facilitate changes in approaches/best models for adapting delivery, etc. are key – i.e. develop a wider VCFSE communications system.
- d) Enhance and streamline processes for recruiting and accessing (vetted) volunteers. This should include an understanding of how to passport volunteers.

## **8. Understanding how to support and build a sustainable VCFSE Financial Model**

We accept that there will be limited additional investment to protect key services for shielded and vulnerable people. Assessing and understanding key support is essential but needs to be part of a review (see recommendations 3 and 7a in particular). Lost income (to date and going forward), the end of furlough, the end of Covid-19 response funding, and increased pressures on limited social care/council resources, will continue to impact on carers and shielded and vulnerable people's support services. Commissioners can continue to play an important role in supporting VCFSE providers.

## **Workshop A: What issues has COVID-19 and the lockdown raised for the people you work with? Issues, risks and challenges**

### **What are the emerging issues and concerns for your cohort?**

- There are growing concerns over unemployment and debt – especially amongst younger people.
- Digital exclusion is a growing concern – particularly amongst older people. This has intersections with isolation, mental health, and changing barriers to accessing new online only services.
- Isolation, loneliness and anxiety around the situation are contributing to an increase in mental health issues. This has been compounded by the more limited access to services and the reduced efficacy of online/telephone support compared with face-to-face.
- There's been an increased in food poverty and in those who are shielding going hungry as they're scared to leave their homes.
- Loss of support through reduction of face-to-face services, a breakdown in informal support from family due to restrictions on travel, and many non-Covid-19 health care treatments being postponed.
- Health inequalities are being increased across the board – particularly those impacting BAME people. There are new sets of barriers to accessing online/telephone services – particular where language barriers and access needs around communication present.
- Concerns about the projects that have been provided through COVID-19 being stopped if the funding stops.
- Huge loss of faith in the safety of care homes, no one wants to go into one anymore.

### **What changes could you make to respond to these issues and new needs?**

- Deliver arts and other activity packs activities to clients' homes.
- Maintaining fixed social pods as we return to face-to-face delivery with smaller groups in larger or outdoor spaces.
- Increased use of digital technologies to deliver online and telephone support.
- Increase offer of information and support around debt, unemployment and how to liaise with service providers such as electricity and gas companies.
- Develop risk assessments for the shielded and shielders to enable them to make decisions on how they can move forward as safely as possible.
- Listen to clients' voices and survey them to find out what people need.

### **What do you need to build back better to meet these needs? And from whom?**

- Organisations need risk assessments and clear guidance on how to use spaces safely, and clients need clear guidance on how to engage with services safely. This guidance needs to be announced early enough to allow time for planning and to be standardised across the City Region.
- The sector needs more funding and resources, including funding to support investment in new digital services and IT equipment, to adapt spaces to be more Covid-19 safe, and to try new service models designed for this new situation. The support that started during Covid-19 needs to continue.
- Commissioning needs to change: longer contracts, less cumbersome reporting and data collection requirements, changes to how outcomes are measured, fewer restrictions.
- To listen to those who it supports and to co-design services with them, with support for and buy in to this process from primary care social care too.
- To pull together better with more networking, better communication, and more effective circulation of good practice and good ideas
- Both the sector and those accessing services require more support and training in using digital services.
- Greater support from Adult Social Care Services.

## **Workshop B: What issues has COVID-19 and the lockdown raised for the carers you work with? Issues, risks and challenges**

### **What are the emerging issues and concerns for carers?**

- PPE is a massive issue. It's unclear where to get it from and the cost is prohibitive to many, unpaid and informal carers are being particularly neglected in this.
- Carers are facing increased financial pressure. Carer's benefits are much too low, and some shielding carers are being asked to come back to work or being made redundant.
- Guidance for carers has chaotic and confusing and this lack of clarity causes carers a lot of worry. Advice for unpaid and informal carers have been particularly overlooked.
- Young carers need particular attention: they're missing school, they're struggling with the lack of respite, they're more likely to be digitally excluded, and their mental health is suffering.
- Carers are exhausted and their mental and physical health is degrading. Many carers are avoiding seeking medical treatment for their own health issues to better maintain shielding, and sometimes struggling to access support for their own issues due to the lack of respite.
- Carers have little access to respite because of the suspension of many face-to-face services and a widespread lack of trust in the safety of care homes.

### **What changes could you make to respond to these issues and new needs?**

- The sector needs to advocate for improved recognition of informal and unpaid carers and support them in receiving the same level of support. It should also better support them through the creation of how to guides, risk assessments and signposting resources.
- Identify informal carers who can no longer continue care duties due to a change in circumstances (e.g. people who were caring for neighbours while furloughed but are now returning to work somewhere where it's hard to adequately socially distance) and ensure those they're supporting continue to receive care.
- Resume face-to-face delivery with smaller group sizes to maintain social distancing.
- Maintain open dialogue with carers to ensure their needs are being met now and in future.
- Create and support a peer support network for carers – a mobile application could play a useful role in this.
- Organisations should be taking a more open collaborative approach, working flexibly alongside other groups to ensure the right support is there without repeating work.
- Need to adapt services to offer respite in a socially distant way.

### **What do you need to build back better to meet these needs? And from whom?**

- Organisations need risk assessments and clear guidance on how to use spaces safely, and clients need clear guidance on how to engage with services safely. This guidance needs to be announced early enough to allow time for planning and to be standardised across the City Region.
- To pull together better with more networking, better communication, and more effective circulation of good practice and good ideas.
- Assistance is creating and running a carer's supports referral service – a shared single point of contact that connects those in need to the many different organisations and services across the City Region. Making it easier for carers to access the services they need and ensuring organisations are each able to focus on what they do best.
- More and more long term funding, with funders working collaboratively to achieve a wider reach.
- More intelligent commissioning – based on commissioning frameworks co-produced with the sector and with a greater emphasis on commissioning rather than procurement.
- Support with PPE procurement: formation of consortiums for PPE purchasing with Carers Centres working as local distributors, hospitals reviewing patient discharge planning to ensure that patients are discharged with appropriate PPE for their careers.
- Greater support from Adult Social Care Services.

## Workshop C: What would recovery look like for your group or organisation?

### What have been the impacts or concerns?

- Financial pressures:
  - Loss of income from trading, from a drop in service users, suspension of fundraising activities.
  - Increased costs from investing in PPE and new IT equipment for homeworking.
  - Additional pressures incoming as furlough scheme winds down.
- Uncertainty in medium and long term planning particularly with poor communication and uncertainty around the risks of a second wave.
- Uncertainty in the messaging we should be sharing.
- Difficulties in delivering on pre-existing contractual obligations.
- Challenges from home working: lack of camaraderie, childcare, less easy to bounce ideas off one another, some home environments not ideal for working.
- Challenges in returning to office based work: unsuitability of premises to social distancing, use of public transport, additional costs, lack space, additional PPE requirements.
- Challenges for staff needing to do things they weren't previously – having been redeployed to cover furloughed staff.
- Loss of volunteers due to shielding and loss of new volunteers who've been un-furloughed.

### What would a sustainable future look like for your organisation? Can you build back better?

- Better pandemic plans in place and the flexibility to move back to home working and increased online delivery without major disruption – home risk assessments done, IT equipment purchased, etc.
- Moved to a focus prevention of issues vulnerable people and carers are facing, not just emergency response.
- Better pandemic robust infrastructure offering clear guidance on how organisations should be responding.
- Model adapted to accommodate socially distant group work as standard.
- Pandemic safe spaces to deliver in.
- Financial model more secure.
- Greater national recognition of carers and carer services.
- Adapted to new methods for outreach and volunteer induction.
- Established robust online safeguarding measures.
- Strong mutually supportive relationships with other organisations across the City Region.

### What do you need to build back better? And from whom?

- More and more long term funding and investment is needed, including assurances from the statutory sector that funding won't dry up while we're in recession. Funding for core costs, adapting buildings to make social distancing viable, staff training, and the tech for digital working is particularly key.
- Recognition and acceptance from funders and commissioners that reported key performance numbers are going to be down.
- Standardised guidelines and risk assessments between community spaces to ensure best practice is overserved across the City Region and to make it easier for service users to understand and follow the rules.
- Strong partnership working and mutual support and information sharing between originations (including support for and involvement of grassroots groups) to help deliver a coordinated response.
- Support for staff and support for organisations around having difficult conversations about job losses when the furlough scheme comes to an end.

## Assembly Agenda

Time	Item
9:30am	Welcome, introduction, housekeeping <i>Angela White (Sefton CVS)</i>
9:40am	LCR impact of COVID-19 on vulnerable groups – adults and carers <i>Dave Sweeney (Cheshire and Merseyside Health and Care Partnership)</i>
9:50am	Workshop A: What issues has COVID-19 and the lockdown raised for the people you work with? Issues, risks and challenges
10:20am	Workshop B: What issues has COVID-19 and the lockdown raised for the carers you work with? Issues, risks and challenges
10:50am	Workshop C: What would recovery look like for your organisation and the people you work with?
11:20am	Plenary <i>Angela White (Sefton CVS)</i>
11:30am	Close

**Chair:** Angela White, Chief Executive of Sefton CVS



## List of Organisations Registered

1. 4Wings Northwest CIC
2. Accessibility of Things
3. Age Concern Liverpool & Sefton
4. Age UK Mid Mersey
5. Age UK Wirral
6. Al's Activity and Respite Centre
7. British Red Cross
8. Buzz Hub St Helens CDP
9. Change Grow Live
10. Chinese Wellbeing
11. Citizens Advice Halton
12. Citizens Advice Sefton
13. Citizens Advice St Helens
14. Citizens Advice Wirral
15. Diocese of Liverpool
16. Growing Sudley CIC
17. Halton & St Helens VCA
18. Halton Carers Centre
19. Halton Disability Partnership
20. Healthwatch Knowsley
21. Healthwatch St Helens
22. Help Close By
23. Helplink Community Support
24. HOTA health on the agenda
25. IIN Community
26. Imagine Independence
27. Involve Northwest
28. KPAIS
29. Local Solutions (Liverpool Carers Centre)
30. Macmillan Cancer Support
31. Mary Seacole House
32. NCNW
33. One Knowsley
34. Plus Dane
35. Porchfield Community Association
36. Rape and Sexual Abuse Support Centre
37. Rotunda Ltd
38. Sahir House
39. Sefton Carers Centre
40. Sefton CVS
41. Southport and District Samaritans
42. Speke Training & Education Centre Ltd (STEC)
43. St Bede with St Clement Church
44. Teardrops Supporting the homeless
45. The Bread Church, Liverpool
46. The Neuromuscular Centre
47. The Orrell Trust
48. Tide - Together in Dementia Everyday
49. WEA
50. Wirral Multicultural Organisation
51. Wirral Older People's Parliament