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*Health & Well Being Update  
Keeping you in the know*

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## Health & Well Being Update - July 2011 - Issue 34

The Health & Well Being E-Bulletin is produced 6 times a year, every 2 months. We are currently sending our Health & Well Being Bulletin out to 169 members.

The E-Bulletin is aimed at voluntary and community groups to

- Increase their knowledge of local, regional and national health and well being policies and strategies
- Increase their knowledge of resources, funding, training and support.

If you want to nominate more members then please let us know so that their details can be added to our database and they too can benefit from the information we provide.

*Contact details to advise us of interested parties can be found in the section "Receiving the Health & Well Being Bulletin" on Page 28 .*

## NHS REFORMS AND THE VOLUNTARY & COMMUNITY SECTOR

The government's proposed reforms to the health and social care system include clear aspirations for the voluntary and community sector as a provider of health services, a source of support for commissioning and a partner in tackling health inequalities. However, the reforms also present a number of challenges and risks.

*The voluntary and community sector in health: Implications of the proposed NHS reforms* considers the main opportunities and challenges facing the sector. It discusses what needs to happen to ensure the sector can flourish in the new system and what it needs to do to grasp new opportunities.

As an existing provider of services and of knowledge about local needs, the voluntary and community sector can develop its role in helping the NHS deliver better, more efficient care. But the likely impact of the reforms is uncertain. In a best case scenario, the voluntary and community sector would be empowered as a real partner to GP consortia and health and wellbeing boards, but in the worst case scenario the sector will be left struggling to forge new relationships and unable to survive in the competitive market.

Based on a joint project between The King's Fund and the **National Council for Voluntary Organisations**, this paper includes a number of recommendations, aimed at national policy-makers, local bodies and the voluntary and community sector itself, to ensure that the sector can grasp this opportunity to participate fully in the new health and social care system.

## NEWS

These include ensuring that:

- Commissioning consortia and health and wellbeing boards are required to involve and engage with the sector
- New and innovative funding mechanisms are developed to ensure the sector can compete on a level playing field with private and NHS providers
- The voluntary and community sector takes a strategic approach to the future by addressing its development needs, urgently tackling the need to better measure and demonstrate its value and overcoming issues of internal fragmentation.

### WOMEN AND THE CUTS

['Women and the Cuts'](#) is a new factsheet from Women's Resource Centre that aims to provide an overview of the cuts and key policy changes that will affect public spending by the Lib-Dem/Conservative coalition government.

- Research shows that 43% of women's organisations are small with an annual income of less than £100,000.
- The cuts will have a greater impact on Black and Minority Ethnic women: 40% of them live in poverty, twice the proportion of White women.
- A survey of mothers using Sure Start centres found that 35% felt that they would be more socially isolated if services were removed or reduced, and 32% thought it would be harder to see their midwife or health visitor.

## NEWS

### DEPARTMENT OF HEALTH– VOLUNTEERING FUND SUCCESS

The Department of Health has announced the 13 organisations who are receiving the £6 million [Volunteering Fund National Awards](#). This will support volunteering projects in health and social care centred around four themes.

For more information follow the link above or visit [http://www.dh.gov.uk/en/MediaCentre/Pressreleases/DH\\_127295](http://www.dh.gov.uk/en/MediaCentre/Pressreleases/DH_127295)

### NHS FUTURE FORUM REPORTS ON LISTENING EXERCISE

In their summary report on the listening exercise, the NHS Future Forum indicates that there is universal support for the aims of reform, but the measures themselves have caused deep and genuine concern in NHS staff, patients, voluntary and community groups and the public. In order to address these concerns the Forum proposes a number of changes.

- GPs should take responsibility for the health of their local populations and the financial and quality consequences of their clinical decisions through commissioning consortia, but they should not operate in isolation and must be required to 'obtain all relevant multi-professional advice' to make sure their decisions are appropriate.

## NEWS

- Competition should never be an end in itself, rather a tool for promoting choice, integration and quality. Monitor's role in relation to promoting competition should be 'significantly diluted'.
- There should be much greater focus on how different parts of the system - GPs, public health, hospitals and social care join up to provide integrated care.

As a public service the NHS requires transparency about decision making and expenditure at all levels. The Forum made 16 core recommendations. The recommendations were widely welcomed by major health bodies and commentators. Some, such as greater powers for health and wellbeing boards and co-terminosity with local authorities are particularly positive for councils.

The government launched its response at a session involving the Prime Minister, the Deputy Prime Minister and the Health Secretary. The government has indicated that it will implement the Forum's core recommendations. It has also set out more detail about the changes it will make.

To view the full briefing follow this link <http://www.wolverhamptonvsc.org.uk/node>

## THE TYPES OF ABUSE WHICH AFFECT VULNERABLE ADULTS

### Safeguarding Vulnerable Adults

Geeta Patel is the Third Sector representative on the Adult Safeguarding Board. She chairs a subgroup that is tasked with promoting greater awareness of safeguarding adults within the City. A number of agencies, including Wolverhampton Homes, the hospital and Adult Education are going to use their existing communication methods to raise awareness by using case studies of the 7 types of abuse that can happen to adults. These are: Financial, Physical, Sexual, Emotional, Neglect, Discriminatory and Institutional abuse.

In this edition of the Health and Well Being E Bulletin we are looking at Financial Abuse.

### What does Financial Abuse mean?

In the guidance it is explained as theft, fraud, exploitation, or pressure in connection with Wills, property, inheritance, or financial transactions.

To misuse or misappropriate the property of a person, or their possessions or benefits.

In the subgroup we thought that financial abuse is a crime. It is when another person uses someone else's property, money, or other resources without the person knowing, understanding or giving consent.

## NEWS

### Case Study

*Mr P is 81 and lives alone following the death of his wife several years ago. Mr P is physically very frail, had a stroke last year, resulting in left sided weakness, reduced mobility and speech affected. Mr P has a care package of two visits each day.*

*The carers have reported that Mr P is often short of money, his bank book recently disappeared. However it has now reappeared and £700 appears to have been withdrawn from the account. The carers have also noticed that Mr P has been visited on several occasions by a neighbour, who until very recently they have never seen before. Mr P does not appear to know this neighbour very well and is unable to tell the carers where she lives or her full name, referring to her only as "she".*

**If what you have read has caused you concern about a vulnerable person, you can discuss this anonymously, if you wish, by calling the Safeguarding Adult Team on 01902 553218/553259.**

**If you have read this information and wish to raise a referral or wish to discuss a possible need for an assessment, this can be undertaken by the Access and Initial Assessment Team on 01902 551199.**

## NEWS

### **NORTH/SOUTH DIVIDE IN ADULT SOCIAL CARE SPENDING**

*Council spending: making it clear*, a survey by the BBC and CIPFA has revealed a geographical divide in adult social care funding with large cuts in the north but budgets continuing to expand in the south. Spending in the North and Midlands will fall by 4.7% this financial year, but southern councils will increase by 2.7%.

Councils in the North West are considering service reductions, management restructures, raised eligibility, increased charges, re-tendering contracts and lower level reablement costs and staff reductions.

In the national funding allocations, while councils lost an average of 4.4%, northern authorities had a cut of 9%.

### **HEALTH ADVISORS TO DAVID CAMERON**

A panel of senior health experts has been set up to advise the Prime Minister on NHS reform. The panel includes two former NHS Chief Executives Lord Crisp, Sir Ian Carruthers, (two former NHS Chief Executives), former Monitor chairman Bill Moyes, Nuffield Trust chief executive Jennifer Dixon plus senior representatives from the NHS.

Health Service Journal reports that the group was not being established to discuss Andrew Lansley's proposals but to "try out" other ideas.

### CONCERNS ABOUT PUBLIC HEALTH FUNDING

A discussion article in *Health Service Journal* has described the problems facing local authorities from a £4 billion allocation for public health which is described as being 'a pathetic amount' at less than 4% of the current NHS budget.

The funding is based on the last full year of NHS financial data 2006-07 in which public health budgets were 'raided to bail out the first payment by results funding disaster' meaning the budget has got off to a bad start.

Previously the sum did not include the National Treatment Agency, public health observatories, strategic health authority and government offices, or sexual assault referral centres.

The sum also does not include overheads (HR, finance, IT support, public information and press communications) which could add 15-25% to the bill.

The article indicates that the health secretary wants 'a ringfenced budget, protected from plunder', but states that 'a ringfenced budget of *nothing* is still *nothing*'.

## EVENTS

# A Free Half Day Outcomes Taster Session

**Friday 29<sup>th</sup> July 2011**

**At Wolverhampton Voluntary Sector Council,  
16 Temple Street, Wolverhampton  
10.00am- 12.30pm**

**To book a place contact Kuly Sidhu**

**Tel: 01902 773761**

**Email: [ksidhu@wolverhamptonvsc.org.uk](mailto:ksidhu@wolverhamptonvsc.org.uk)**

## EVENTS

### **Dudley CVS Social Media Surgery**

**A free event, where you can get excellent advice & support  
on your social media use**

**Thursday 7 July 2011**

**5.00PM – 6.30PM**

**at**

**Café Grandé**

**15 Stone Street ,Dudley ,West Midlands DY1 1NS**

**To book a place, please follow the link below**

**[www.tinyurl.com/dudleysocmed](http://www.tinyurl.com/dudleysocmed)**

**or contact Lorna Prescott at Dudley CVS**

**Tel: 01384 573381**

**Email: Lorna Prescott [lorna@dudleycvs.org.uk]**

## POLICIES AND STRATEGIES—NATIONAL

### **GP CONTRACT TO INCLUDE GREATER PATIENT INVOLVEMENT**

The Pulse Today reports that in the new Directed Enhanced Services contract GPs will have to gain formal approval from patient groups before making any 'significant changes' to the services they provide such as altering opening hours.

They must also establish a patient representative group to help identify issues to prioritise, carry out annual patient surveys, and agree action plans to tackle issues raised in the surveys. Practices must also provide information on their website relating to patient engagement. The Direct Enhanced Services contract has funding of £60m.

### **ADULT SAFEGUARDING TO HAVE STATUTORY STATUS**

The government intends to legislate to make safeguarding adults boards statutory, ensuring partners participate, while maintaining their freedom to operate in locally flexible ways.

The statement also sets out principles and outcomes to benchmark, assess and improve their existing arrangements

## REVIEWS OF POLICIES AND PROCEDURES

### REVIEW BY CQC OF DIGNITY AND NUTRITION IN HOSPITALS

#### **Review by CQC of Dignity and Nutrition in Hospitals**

The Care Quality Commission has undertaken spot checks of 100 hospitals and reported on 12 of these.

Unacceptable failures were found in three of the 12 where essential standards of dignity, nutrition and hydration were not met.

Worcester Acute Hospitals NHS Trust, the Ipswich Hospital NHS Trust and Royal Free Hampstead NHS Trust could face enforcement action and three others needed to improve.

Inspectors found examples of people not being helped to eat or drink, being spoken to in a condescending manner and being "talked over".

## RESEARCH

### **WHICH? INVESTIGATION INTO CARE HOMES**

Which? placed investigators in four care homes for a week and found poor cleanliness and nutrition and behavior amounting to abuse including a staff member dragging a resident to the toilet by their arm and another pushing a resident trying to stand up back into their seat. There was a lack of activity in homes with timetables not carried out. Some good practice, including extensive activities and freshly produced local food was also found. Which? has passed the information on to the Care Quality Commission and advised them to increase inspection of homes.

### **ALLIED HEALTH PROFESSIONALS AND THEIR SUCCESSES**

A report describes a number of projects exploring the value of allied health professionals in a range of health services such as reducing waiting times, self referral to physiotherapy, podiatry referrals, improving the care pathway for childhood obesity services, primary care brief interventions for pain and an integrated health and social care service for acquired brain injury.

## RESEARCH

### **PRIVATE SECTOR SUCCESSFUL IN REDUCING OBESITY**

Researchers at the University of Birmingham randomly assigned obese or overweight patients with one co-morbidity to either privately provided services (e.g. Weightwatchers), primary care interventions or vouchers for a local leisure centre.

The study found that all programmes achieved significant weight loss, but after a year GP and pharmacy-led counselling did not maintain weight loss. Patients on commercial programmes had significantly greater weight loss than those on vouchers after 12 weeks.

The study concluded that commercial weight management services are more effective and cheaper than primary care services.

### **SOCIAL WORK PRACTICE PILOTS**

Pilots in which social workers will work more independently of councils in social worker-led organisations are expected to start this summer for two years.

The projects which will be overseen by the Social Care Institute for Excellence include:

- Birmingham Council - physical disabilities and long term conditions
- Shropshire Council - older people, physical disabilities, learning disabilities
- North East Lincolnshire Care Plus Trust - older people
- Lambeth Council - all adults funding their own care or needs below eligibility criteria
- Suffolk council - adults who are deaf, visually impaired, or dual sensory loss
- Surrey council - people who are deaf or hard of hearing.

## CONSULTATIONS

### FOOT HEALTH CONSULTATION IN WOLVERHAMPTON

Consultation on foot health services in Wolverhampton until September 2011.

The Primary Care Trust is consulting on four options for re organising foot health services.

You can respond by:

Responding via the website of the PCT [www.wolvespct.nhs.uk](http://www.wolvespct.nhs.uk)

There are also a range of meetings organised for voluntary and community groups and to find out about these contact:

Tracy Cresswell on Tel 01902 445894 or e-mail [Tracy.Cresswell@wolvespct.nhs.uk](mailto:Tracy.Cresswell@wolvespct.nhs.uk)

### DEMENTIA

Wolverhampton Council & Health Services are consulting on a joint dementia strategy. You have till 8<sup>th</sup> August 2011 to respond. Go to the Wolverhampton Primary Trust Website and you can see the strategy in English, Bengali, Gujarati, Hindi, Polish, Punjabi, Urdu and other languages.

## CONSULTATIONS

### **NATIONAL ASSOCIATION FOR VOLUNTARY ACTION (NAVCA)**

#### **RESPONDS TO HEALTH LISTENING EXERCISE**

NAVCA has submitted a response to the NHS listening exercise. The listening exercise was launched by the government after the growing public concern about the plans to transform the NHS contained in the Health and Social Care Bill. Although much of the debate has focused on competition, NAVCA's response also emphasises the need to ensure that local communities and patients are involved and adequately represented on any new health structures.

In the submission, NAVCA argues that increased competition will not necessarily improve NHS services or put patients first. What is needed is culture change, shared decision making and improved access to information and choice around treatment options. NAVCA believes that the debate on competition is needed, but this debate must not drown out equally important issues around community engagement and health inequalities.

NAVCA argues that:

- Local HealthWatch will only be able to provide a strong, independent and inclusive voice for patients and local communities if its governance arrangements make it accountable principally to local communities, not to local authorities or HealthWatch England.

## CONSULTATIONS

- GP commissioning consortia and Health and Wellbeing Boards must be required to engage with and involve local voluntary organisations, community groups, patients and the public, as well as local HealthWatch, in decisions about local health services.

**Katy Wing, NAVCA's Improving Local Services Director** said:

"A lot of the debate has focused on the proposals to increase competition. The professional health associations and even the Deputy Prime Minister have voiced concerns. However, we have heard less about ensuring any new health structures are properly accountable to local communities.

"The government has said that 'no decision about me, without me' is a key principle underpinning its plans for reform. This is not just about individuals being given a say on their own treatment. It also means involving communities in decisions about local services. Local voluntary organisations and community groups must not just be seen as 'providers': they have a vital role to play as strong advocates for local communities. They need to be involved in decision-making processes, so that the diverse voices of patients and local communities are heard. The bill needs to be changed to put this right."

[Read NAVCA's submission](#)

## RESOURCES/INFORMATION

### **SAFER RECRUITMENT SERVICE**

CRB checking service for voluntary and community organisations in Wolverhampton

For further information please contact:  
Gemma Hindley, Safer Recruitment Service Co-ordinator  
Tel: 01902 877547  
Email: [saferecruitment@yow.org.uk](mailto:saferecruitment@yow.org.uk)

### **EATWELL PLATE RESOURCES**

#### **Eatwell plate resources**

The Department of Health has published a new explanatory guide and visual aids - postcard and poster - to help spread the message about health eating.

For more information follow the link above or visit

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_126472](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_126472)

## RESOURCES/INFORMATION

### THE READY FOR CHANGE TOOL

Rocket Science has developed a [new tool](#) for voluntary and community sector organisations which are having to prepare for and manage change. This free tool prompts users to reflect on their strengths and weaknesses at a time when many, particularly smaller organisations, are having to adapt to a very challenging environment.

For more information follow the link above.

### GUIDANCE ON DESIGNING AND RUNNING COMMUNITY BUILDINGS

#### [Guidance on designing and running community buildings](#)

A booklet summarising the learning from Big Lottery Fund's Community Building projects has been published. It documents challenges faced by the projects, and ways they can be minimised or overcome. It aims to share learning to help others avoid common problems.

For more information follow the link above or visit

[http://cdx.us1.list-manage.com/track/click?  
u=32c730a82e8537f1444a92070&id=59da1af1cc&e=a6ebcbaefb](http://cdx.us1.list-manage.com/track/click?u=32c730a82e8537f1444a92070&id=59da1af1cc&e=a6ebcbaefb)

## RESOURCES/FUNDING

### ACT FOUNDATION

[Provides grants for charities](#) that enhance the quality of life for people in need, especially those focused on mentally and/or physically disabled people. There are no minimum or maximum grant amounts and funding can be used for building modifications, equipment such as mobility aids and financial assistance for things like short-term respite breaks.

**For more information follow the link above or visit**

<http://www.theactfoundation.co.uk/applying-for-a-grant-mainmenu-4>

Tel: 01753 753900

### IT EQUIPMENT AND INTERNET ACCESS

The [BT Community Connections Awards](#) scheme provides successful applicants with a laptop and a year's free broadband Internet connection. The scheme is keen to target areas of deprivation which normally receive little or no funding and would otherwise have no IT provision. Deadline 15 September.

**For more information follow the link above or visit**

<http://www.btplc.com/Responsiblebusiness/Supportingourcommunities/Digitalinclusion/BTCommunityConnections/ApplyingforaCommunityConnectionsAward/index.htm>

Tel: 0845 257 6792

## RESOURCES/FUNDING

### THE DRAPERS CHARITABLE FUND

[This fund provides grants](#) under £10,000 for charities working with the homeless, prisoners, the elderly and disabled adults.

**For more information follow the link above or visit**

[http://www.thedrapers.co.uk/Charities/Grant-making-trusts/The-Drapers-Charitable-Fund.aspx?dm\\_i=3MG%2CENYU%2C8LRPK%2C17VSF%2C1](http://www.thedrapers.co.uk/Charities/Grant-making-trusts/The-Drapers-Charitable-Fund.aspx?dm_i=3MG%2CENYU%2C8LRPK%2C17VSF%2C1)

Tel 020 7588 5001

### HELP THE HOMELESS GRANTS

[Help the Homeless](#) offers grants of up to £3,000 towards capital costs of projects that assist individuals to return to mainstream society. Funding is allocated mainly to small and medium-sized charities (with an annual turnover of up to £1 million). Grants to larger charities will only be considered if the project is very innovative and can only be developed by a large organisation.

**For more information follow the link above or visit**

<http://www.help-the-homeless.org.uk/Grants.htm>

Email: [HTH@help-the-homeless.org.uk](mailto:HTH@help-the-homeless.org.uk)

## RESOURCES/FUNDING

### TIME TO CHANGE

They can support events run by small groups or organisations led by people with direct experience of mental health problems. They offer up to £500 to cover expenses, mentoring and practical advice, help with spreading the word about what you're doing, and [Time to Change](#) branded materials to distribute on the day.

**For more information follow the link above or visit**

<http://time-to-change.org.uk/about/what-are-we-doing/time-change-champions/time-change-support-your-event>

Tel: 020 8215 2357

## RESOURCES/TRAINING

### **Wolverhampton Voluntary Sector Council offer tailored support to develop and embed an outcomes approach in the voluntary & community sector**

**If you are interested in receiving tailored sessions on outcomes with your organisation contact Geeta Patel or Saffi Price.**

#### **Geeta Patel**

Tel: 01902 328976

Email: [gpatel@wolverhamptonvsc.org.uk](mailto:gpatel@wolverhamptonvsc.org.uk)

#### **Saffi Price**

Tel: 01902 328977

Email: [sprice@wolverhamptonvsc.org.uk](mailto:sprice@wolverhamptonvsc.org.uk)

## RECEIVING THE HEALTH AND WELL BEING BULLETIN

The Health & Well Being Bulletin is sent out to Voluntary and Community Groups who believe that they work around issues of Health and Well Being in the City.

Please let us know if you have any friends or colleagues who would like to receive a copy of the health & well being e-bulletin. Copies can be sent out to multiple members in one organisation via email or hard copy in the post.

Details should be sent to:

**KULVINDER SIDHU  
HEALTH & WELL BEING ADMINISTRATOR  
WOLVERHAMPTON VOLUNTARY SECTOR COUNCIL  
16 TEMPLE STREET  
WOLVERHAMPTON  
WV2 4AN  
TEL: 01902 773761  
EMAIL: [ksidhu@wolverhamptonvsc.org.uk](mailto:ksidhu@wolverhamptonvsc.org.uk)**

\* Details should include: Name, Position, Organisation, Department, Address, Telephone Numbers, Email address and Fax Number.

***THANK YOU.***