

Washington Area Committee Call for Projects

Applications for the Home From Hospital Project

The Project Outcomes expected from proposals for this Call for Projects are:

- Reduce Accident and Emergency attendance and enable timely discharge from hospital.
- Support people to self-care and provide care closer to home.
- Deliver a local scheme to help improve the wellbeing of older people.
- Engage the target group in activities and services to improve their wellbeing.
- Increase social interaction.
- Increase awareness of support available.
- Provide a level of support, services and activities to help older people live more independently following a stay in hospital.
- Show how the project will link to the work of the integrated teams in Washington and the Recovery at Home service.
- Area Committee was very keen to encourage a collaborative bid and only those applications that include a partnership approach to delivery with the local VCS will be able to apply for more than £10,000. Applications primarily led by one organisation delivering the activities and services can only apply for up to £10,000.

Application No.1

Name of Project	Home from Hospital
Lead Organisation	Washington Mind

Total cost of Project	Total Match Funding	Total SIB requested
£69,500	£29,500	£40,000 (Inc. £20,000 CCG)
Project Duration	Start Date	End Date
1 Year	March 2016	Feb 2017

The Project

The project proposal is a collaboration model with 6 VCS partners involved in the delivery of a package of activities and services.

It starts with Community Workers placed with the partner organisations auditing/mapping relevant and current provision in order to avoid duplication and manage effective working relationships with local providers. The lead organisation is ideally placed to utilise the wellbeing info. Network they currently manage to disseminate and promote information.

The proposal then undertakes it will work via GPs and hospital staff to make them aware of the additional services available to patients leaving hospital. A credit card sized resource will be produced to be distributed across other services and providers re one stop shop contact.

The project intends to utilise current clubs and activities as well as establishing new ones – primarily in the form of lunch clubs but will hopefully be a mechanism to develop other appropriate delivery and activities. The lunch club is seen as the first step in engaging and encouraging self-help especially with older people. The 3 new clubs will be hosted at the Millennium Centre, will provide transport.

Activities provided will include 3 x additional lunch clubs, transport to activities, wellbeing activities at the new clubs and other provision, some specific support for those patients leaving hospital with head injuries, volunteers to support individual users across a range of activities to help address isolation and encourage social interaction.

The project intends an individual approach for Washington residents/patients leaving hospital to map their needs and signpost to appropriate support and activities. One of the key aims of the project is to establish good working relationships with hospital teams – building on work already taking place with Washington MIND and local GPs.

The project undertakes to raise the profile of activities through effective publicity and marketing. Clear pathways will be in place to access the proposed services – this information will be shared via the local Networks, partner organisations, and wider information sharing opportunities.

The project identifies a wide range of partners that they will co-ordinate with – Gentoo, Age UK, Live Life Well team. Community Integrated Team, Recovery at Home Services, GPs, VCS Network.

Washington MIND has undertaken to lead with regards to longer term sustainability managing risk and dependency on behalf of the consortia and intends to set up a specific Funding Group to develop the sustainability for the project post SIB funding. Monthly meetings with the consortia partners will be held to ensure proactive project management and monitoring.

Outputs of the Project

Based on previous discharge information for Washington people who are over 65, the project has identified there will be 1920 beneficiaries and 5 new schemes implemented over the 12 month period of the project.

Milestones

Milestones are realistic with links established April – May re CIT, hospital teams and GPs, transport resources confirmed by June, new schemes to be set up by June, PR and communications launched June with a full audit of services and activities carried out to identify gaps, opportunities, signposting etc.

Budget

Proportion of workers time to this project (16 hours per week)	£20,800
Club establishment and activities	£15,000
Community Transport	£ 3,000
Marketing, publicity, cards etc	£ 1,200

Match funding:	Wellbeing Officer in-kind time	£12,500
	Counselling appointments	£17,000
	Volunteering time	

This application has been submitted through Area Committee's Call for Project and using the formal SIB governance protocols and guidance, the application has been assessed and has scored 90 out of 100 for the technical assessment element of the process.

This application:

- 1. Evidences a good track record of successful delivery and experience**
- 2. Evidences it meets at least one of the key priorities of the Washington Local Area Plan**
- 3. This proposal meets most of the project outcomes as detailed in the published Project Brief:-**

- **Support people to self-care and provide care closer to home:** The work and activities proposed will hopefully encourage those supported will be able to have a more positive role in providing some of their own care by encouraging more social interaction.
- **Deliver a local scheme to help improve the wellbeing of older people:** Locality delivery and activities are proposed with evidence of being able to signpost appropriately to other services and activities at the targeted group.
- **Engage the target group in activities and services to improve their wellbeing:** Well evidenced.
- **Increase social interaction:** Well evidenced for those they can engage in the scheme.
- **Increase awareness of support available:** Good plans for increasing awareness and promotion of relevant services and activities. Proposals to work closely with GPs and hospital teams to identify appropriate users for the services.
- **Provide a level of support, services and activities to help older people live more independently following a stay in hospital:** Proposals seem to be targeted adequately to encourage more independence for those taking up the services. Also skills and knowledge will be in place to signpost those who require other provision or support, including the more specialised.
- **Show how the project will link to the work of the integrated teams in Washington and the Recovery at Home service:** Evidences knowledge of those services although does not identify how they will ensure joint working and co-ordination for the benefit of the users.
- **Area Committee was very keen to encourage a collaborative bid and only those applications that include a partnership approach to delivery with the local VCS will be able to apply for more than £10,000. Applications primarily led by one organisation delivering the activities and services can only apply for up to £10,000:** Consortia/full partnership approach in place. Delivery partners include Washington MIND, Washington Millennium Centre, Washington Trust, Springwell Community Venue, Washington 100 (Volunteers), Headway, Forget-me-Not, ELCAP
- **Reduce Accident and Emergency attendance and enable timely discharge from hospital:** Whilst it is anticipated the programmes proposed, together with other specialised provision that users will be signposted to should reduce A & E attendance of the targeted audience, this proposal is not able to quantify how that will happen.

RECOMMENDATION TO APPROVE Subject to the following Terms and Conditions:

- **Clarity with regard to the number of people they will support. The Lead Agent to confirm a new target output for proposed 'participants/individuals' it intends to work with and support (Beneficiary outputs at 1920 include contacts via cards and information).**
- **Based on the above to confirm the capacity of the new clubs plus the current provision to take on additional numbers of individuals**
- **Confirm how the costs of travel/community transport have been determined.**
- **Confirm how the project will manage the consent/access to patients issue.**
- **Identify how the project will ensure joint working and co-ordination for the benefit of users, particularly with integrated teams in Washington and the Recovery at Home Service.**

Application No.2

Name of Project	Home from Hospital
Lead Organisation	Age UK

Total cost of Project	Total Match Funding	Total SIB requested
£18,600	£0	£18,600
Project Duration	Start Date	End Date
1 Year	April 2016	March 2017

The Project

This proposal looks to build the capacity of Age UK Sunderland's Hospital Discharge initiative and the Living Well services and offer a prolonged service to Washington people through additional capacity for AUKs Befriending Service and Information and Advice team.

For those people targeted, the Befriending Service will provide a weekly telephone contact from a volunteer and a visit from the Friendly Faces volunteer. Age UK's Volunteer Co-ordinator aims to recruit 6 volunteers from the Washington area to deliver the above. All volunteers will receive induction and have an awareness of what other services and support can be provided in the community.

Age UK will also provide access to benefits information and assistance via their Information and Advice Worker.

Community Sustainability Services (CSS) will also provide handyman tasks for customers being discharged from hospital in the Washington area. In order to reduce trips, slips and falls this might include securing loose carpets, tidying trailing cables, resealing windows, fitting low energy bulbs to light key areas overnight, and clearing and salting pathways.

CSS, Sunderland Care and support and Age UK already have close links and would co-ordinate and promote the referral process to the Recovery at Home Hub

The project also proposes an additional 'telecare' service specifically for Washington residents. This would provide equipment to monitor temperature extremes as well as enable the customer to raise alarms. This service would be free for the first 6 weeks.

Outputs

216 older people supported – 104 of these to receive benefits checks
6 volunteers recruited to the Age UK Befriending Service
25 telecare equipment installations
200 small home jobs

Milestones

Patients discharged from hospital and at risk of isolation receiving befriending services by March 2017
Increased awareness of support available by March 2017
People assisted to independence at home by 2017

Budget

Salary costs Befriending Co-ordinator (7 hours per week)	£3861
Salary costs Volunteer Co-ordinator (5 hours per week)	£2758
Salary costs Information & Advice Worker (5 hours per week)	£3062
Salary costs for handyman service/small jobs	£3600
Publicity	£ 319
Telecare installations	£5000

Match funding: £0

This application has been submitted through Area Committee's Call for Project and using the formal SIB governance protocols and guidance, the application has been assessed and has scored 65 out of 100 for the technical assessment element of the process.

This application:

1. Evidences a good track record of delivery and experience within the sector.
2. Evidences it meets at least one of the key priorities of the Washington Local Area Plan.
3. Members expressed a number of concerns via the formal consultation process with regards to how the proposals duplicated the core offer of current services at Age UK, including the CAB service which delivers debt advice to people discharged from hospital, and funded via CCG.
4. The proposal includes 216 people as targets/outputs – the same number already receiving support and services from the current Hospital Discharge Service. There is no evidence to support the 216 as being additional outputs whose needs would be met via this new project and not the Hospital Discharge Service.
5. No information or evidence with regards to sustainability.
6. Concerns with providing Telecare equipment for 6 weeks only – what then if customer does not retain it? If they do retain it – where does income go?
7. This proposal partially meets some of the project outcomes as detailed in the published Project Brief:-

- **Support people to self-care and provide care closer to home:** Services will be led by the needs of the person discharged and the volunteers will support people to make sustainable change. However some concerns were raised with regards to ensuring the volunteers were sufficiently skilled and trained in a relatively short space of time re the main social determinants of health, risks and opportunities, and appropriate knowledge of local services and provisions. The proposal indicates a 12 month service with delivery commencing April.
- **Engage the target group in activities and services to improve their wellbeing:** This proposal will engage via the Befriending volunteers and inform people of relevant services and support but does not engage directly in activities.
- **Increase social interaction:** Via weekly telephone calls and one visit from the Friendly Face volunteer.
- **Increase awareness of support available:** This proposal will provide 104 welfare benefit checks and assistance to claim.
- **Provide a level of support, services and activities to help older people live more independently following a stay in hospital:** Assistance with small jobs in the home.
- **Show how the project will link to the work of the integrated teams in Washington and the Recovery at Home service:** Current strong working relationships with CCS, Home Discharge, Recovery at Home, and Sunderland Care and Support.
- **Area Committee was very keen to encourage a collaborative bid and only those applications that include a partnership approach to delivery with the local VCS will be able to apply for more than £10,000. Applications primarily led by one organisation delivering the activities and services can only apply for up to £10,000:** This proposal does not adequately meet this project outcome. There is limited contribution to delivery by local VCS partners. The main benefitting organisation re salary costs and delivery is a single organisation but the proposal is in excess of the £10,000 maximum quoted in the brief. There is little evidence of a consortia approach.
- **Reduce Accident and Emergency attendance and enable timely discharge from hospital:** Whilst it is anticipated the proposed services and support together with other specialised provision that users will be signposted to should reduce A & E

attendance of the targeted audience, this proposal is not able to quantify how that will be measured.

Application No.3

Name of Project	Passing Time
Lead Organisation	Foundation of Light

Total cost of Project	Total Match Funding	Total SIB requested
£14,825	£4,825	£10,000
Project Duration	Start Date	End Date
1 Year	April 2016	March 2017

The Project

The project will work with older people coming home from hospital. It will deliver weekly reminiscence sessions based around sport and physical activity designed to encourage movement and activity. Staff will be trained to identify suitable activity from a portfolio of activities that the Foundation of Light currently delivers. The sessions will be punctuated with opportunities for the participants to have a break in a 'tea and talk' environment and share experiences. This will also allow staff to be able to signpost participants to other services if needed.

The project will also utilise the Foundation of Light partnership with the Jamie Oliver Foundation – Ministry of Food to encourage healthy eating. Participants are shown how to prepare and cook nutritious home cooked food perfect for the budget conscious and those with limited cooking skills and experience.

Sessions will be delivered weekly over a 12 month period. There will be a minimum of 10 participants per course and the course will be repeated 8 times over the 12 months. The aim is for the sessions to become self-funding.

There will be a celebration event at the end of the project at the Stadium of Light.

The proposal identifies other organisations that deliver similar or complimentary activity – Age UK, Washington MIND, Washington Millennium Centre, Gentoo, 5-a-Side League Association, Active Sunderland.

The Foundation aims to compliment and not duplicate current activities and would work with the above organisations re promotion, signposting, and referrals.

The Foundation also intends to consult with local GPs, hospitals, Washington Leisure Centre and the Washington Locality Hub to assess referral options.

Outputs

8 courses
80 beneficiaries

Milestones

Development of materials	April 2016
Project Launch	April 2016
Engagement Day and Socials @ hospitals	April 2016
Delivery of courses commence	May 2016
End of first course/evaluate and review	June 2016
Celebration	March 2017

Budget

Project delivery and staff training and travel	£4484
Management Fee	£ 906
Facility Hire	£1200
Printing and Promotion	£ 500
Ministry of Food course/resources	£ 800
Sports equipment	£ 110
Celebration Event	£6825 (£2000 contribution SIB)

Match funding: £4825

This application has been submitted through Area Committee's Call for Project and using the formal SIB governance protocols and guidance, the application has been assessed and has scored 60 out of 100 for the technical assessment element of the process.

This application:

1. Evidences a good track record of delivery and experience delivering activities to address health inequalities
2. Evidences it meets at least one of the key priorities of the Washington Local Area Plan.
3. Focuses mainly on physical activities.
4. No data to support proposed outputs. Does not identify how it will identify appropriate clients.
5. Weak with regards to how the project will have access to the patients or how referrals will be made.
6. The portfolio of activities offered is already on offer and being delivered via the Foundation of Light.
7. This proposal partially meets some of the project outcomes as detailed in the published Project Brief:-

- **Support people to self-care and provide care closer to home:** Not well evidenced
- **Engage the target group in activities and services to improve their wellbeing:** This proposal will provide activities but is unclear how clients will be supported given the range of abilities, age and conditions that may be prevalent in the target group.
- **Increase social interaction:** The proposal will provide opportunity to increase interaction for 80 people but not a wide range of different support mechanisms evident.
- **Increase awareness of support available:** Will promote this proposal through established networks and the Foundation's own website, facebook and twitter. Leaflets and taster sessions in hospitals. No reference to how they are able to increase awareness of other support that might be available.
- **Provide a level of support, services and activities to help older people live more independently following a stay in hospital:** Food/cooking courses.
- **Show how the project will link to the work of the integrated teams in Washington and the Recovery at Home service:** No evidence.
- **Area Committee was very keen to encourage a collaborative bid and only those applications that include a partnership approach to delivery with the local VCS will be able to apply for more than £10,000. Applications primarily led by one organisation delivering the activities and services can only apply for up to £10,000:** This proposal meets this project outcome re one single applicant/delivery for less than £10,000.
- **Reduce Accident and Emergency attendance and enable timely discharge from hospital:** No evidence.