

Wellbeing Exeter Strategic Review: May 2021

Wellbeing Exeter is a partnership of public, voluntary and community sector organisations working together to provide the firm foundations for individuals and communities to promote and improve their own health and wellbeing. The partnership brings together key strategic funders pooling resources to deliver the holistic programme: Devon County Council, Exeter City Council, Sport England and Primary Care Networks (x4). The partnership has developed into a city-wide social model of prevention which recognises that communities, and the relationships that make them, are vital to creating and sustaining health and wellbeing. To achieve this, we put connecting, supporting and strengthening communities at the heart of our work.

Wellbeing Exeter's four key aims are to:



As a current collaboration of 11 local delivery organisations, the programme offers Community Connecting (“social prescribing”) for adults, families and young people in combination with Community Building, alongside a current focus on physical activity as a means to improved health and wellbeing. Across the programme, our work is informed and framed by the [5 Ways to Wellbeing](#) and takes an asset/strengths-based approach to supporting individuals and communities to improve their health and wellbeing. In practice this means:

Community Connectors work alongside individuals and families to identify their own health, wellbeing and social goals, providing person centred and strength-based support that encourages sustainable change, community connections and citizenship. Community Connectors coach and support individuals to identify what matters to them and how they might be able to have enriched lives within their communities to bring about improved wellbeing. A Connector might, for example, accompany someone to a community group, research suitable opportunities to link with locally, or help them get advice on debt.

Community Builders in each local neighbourhood listen to what residents care about and want to take action on, identify community assets, connect people, ideas and assets together and support people

to act together for the good of the community. This builds communities' capacity to offer opportunities to residents, including those supported by Community Connectors, for connection, involvement and interdependence.

Focusing on those who aren't currently active, **Community Physical Activity Organisers** support individuals to move more in their daily lives in ways that work for them and work alongside communities to develop resident-led, welcoming and long-lasting opportunities for physical activity in local neighbourhoods.

The **Coordination Team** enables diverse organisations to work closely together, supporting the day-to-day delivery, collaboration, internal and external communications, monitoring and coordinating the learning and development programme. Now the host of the **Single Point of the Referral**, the Coordination Team is also responsible for managing and responding to all referrals in to the programme, welcoming all individuals to the programme and working with the Community Connectors to support individuals' journey through the programme.

Overall **programme leadership and management** provided by Devon Community Foundation, including planning and monitoring progress, monitoring and evaluation, managing and distributing funding, managing risks and emerging issues/developments.

Proposed areas of redesign and development:

The Covid-19 pandemic and its consequences have had and continue to have an impact across all of the Wellbeing Exeter programme and on the communities and individuals we work alongside. This has necessitated a review of certain aspects of the programme to ensure we are effectively responding to both the existing and emerging health and wellbeing challenges and inequalities across the city and maximising the benefit from investment in the programme.

Based on initial discussions with funders, delivery partners and stakeholders we have identified eight key areas for development:

- **Within the specific Covid-19 landscape, develop work across the programme to support and encourage individuals and communities to take steps to improve their wellbeing as restrictions lift**, including working with them to feel comfortable again meeting in person, in community settings and groups, including (re)starting being physically active again, recognising the anxiety that many will be feeling about this. This will involve (hyper) local work, joint working between the various frontline roles and linking up with wider work/campaigns across the city, including Live and Move campaign to support increased physical activity.
- **Growing our team of Community Connectors to ensure a universal offer across the city while further locating and embedding the Community Connector team in targeted local communities & populations**, ensuring that connecting people to community life remains at the heart of supporting people to improve and sustain their health and wellbeing. This local approach is one of the ways in which, informed by health outcomes data, we can ensure this support is accessible for those who are most likely to experience poorer health and

wellbeing. We will also continuing development work to ensure the programme is as inclusive as possible, having recognised that further improvement was needed in this area. This will include developing roles to be embedded in specialist delivery organisations, including those that work directly with individuals from BME backgrounds.

- **Reengaging with primary care as the Covid-19 landscape shifts, to ensure that the Wellbeing Exeter offer remains embedded in primary care and is able to respond to emerging health and wellbeing needs.** Further developing Wellbeing Exeter's relationship with primary care to ensure that the programme is built in and utilised across the primary care system and the growing number of clinicians based within primary care networks.
- **Expand our referral routes in to the programme to increase referrals, embedding it into other key parts of the health and social care system, ensuring the programme is available to those individuals who can most benefit and expanding the capacity of the programme to play a preventative role.** Alongside this, expand and enhance the role of the Single Point of Referral in introducing individuals to the right resource or support for them, focusing on the journey of the individual through the programme and supporting quality and consistency across the Community Connector offer.
- **Integration/alignment with Population Health Management Programme** – consult with Devon County Council and the CCG to identify targeted work with specific cohorts as agreed with DCC Adult Social Care and NHS local Community Teams. Align the work of Wellbeing Exeter with the emerging Local Care Partnership and associated health needs assessment data
- **A review and redesign of the governance** of Wellbeing Exeter, is underway, led by Exeter City Council as the lead commissioner, to ensure we have the right structures and processes in place to ensure strategic commitment, oversight, quality and financial sustainability.
- Alongside this we will review **how we monitor and evaluate the programme** and its impact, and how this is reported in to the governance structure as well as wider stakeholders. We will continue to work with the steering group to deliver the planned evaluation of the programme via the One Devon Dataset, but this will require prioritisation by steering group partners if we are to demonstrate the programme's impact on health and social care usage as envisaged. Individual wellbeing outcomes for participants, now fully digitalised and rolled out across the Community Connector team, will be shared as part of regular monitoring as sufficient data is available for analysis. We will continue to work closely with the SELDP evaluators to capture physical activity related outcomes and relevant learning to inform future programme and pilot delivery.
- We are also taking the opportunity to review **how the programme communicates and engages internally and externally**, to ensure this is suitable and effective for the redesigned programme. This will include a planned redesign of the programme website and a focus on ensuring our communications with referrers are maintaining ongoing awareness and uptake.

Budget:

We propose a 3-year pooled budget for the programme:

Income	2021-22	2022-23	2023-24
SELDP Accelerator	298000.0	298000.0	298000.0
SELDP Accelerator Underspend	142500.0	190000.0	190000.0
DCC Funding	194750.0	264859.3	270156.5
Primary Care Networks (x 4)	132856.0	132856.0	132856.0
STP	34000.0		
ECC	259666.0	264859.3	270156.5
Learning and Development Budget (underspend brought forward)	12000.0		
Subtotal:	1073772.0	1150574.6	1161169.0
Brought forward from previous year		30130.0	20517.2
Total:	1073772.0	1180704.6	1181686.2
Expenditure (forecast)			
Expanded Community Connectors Team (Exeter)	376300.0	481848.0	491485.0
Community Builders (Exeter)	277576.0	283127.5	288790.1
Community Physical Activity Organisers (Exeter)	100660.0	102673.2	104726.7
Expanded Co-ordination Team, including Single Point of Referral	91073.0	92845.0	94653.0
Cranbrook (Community Connector and Community Builder)	33783.0	34458.7	35147.8
Engagement, participation, events and comms (including primary care / other stat services)	50000.0	50000.0	50000.0
Learning and Development	20000.0	20000.0	20000.0
Digital, data and ICT	10000.0	10000.0	10000.0
Measuring, monitoring, impact and learning	20000.0	20000.0	20000.0
Programme Development	15000.0	15000.0	15000.0
Management, Financial and Grant Administration	49250.0	50235.0	51240.0
Total:	1043642.0	1160187.4	1181042.6
Income	1073772.0	1180704.6	1181686.2
Variance	30130.0	20517.2	643.7

Notes on budget:

Income:

- DCC match ECC annual contribution over 3 years, with a reduced spend in Year 1 (for 9 months delivery instead of 12).
- ECC CBs funding continues for 3-year period with an annual 2% cost-of-living salary increase.
- Remaining agreed SELDP accelerator funding and underspend spread over 3 years (9 months in year 1).
- 4 x PCNs funding for Young People's Community Connectors continues as per agreement for 3-year period.
- £25,000 STP funding in year 1 only, with underspend from 2020-21 brought forward to 2021-22.
- Learning and Development underspend of approx. £12,000 brought forward from 2020-21.

- Overall underspend in year 1 and year 2 brought forward to year 2 and 3 consecutively.

Expenditure:

- Annual 2% cost-of-living salary increases across all funded roles.
- 3 x FT CPAOs continue for 3-year period.
- Young People Community Connectors continue for 3-year period.
- Cranbrook Community Builder and Community Connector continue for 3-year period.
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- Expanded Coordination Team with Single Point of Referral becoming permanent additional function of team and continuing for 3 years (FT Coordinator, D and I Assistant – 30 hours and Coordination Connector – 28 hours).
- 50% reduction in primary care engagement budget; to also include work with wider statutory services / referrers, participation, comms and events.
- Reduction in L and D budget from £30,000 to £20,000 per year.

Based on the above proposed budget, a 66% expansion of Community Connector time would be possible by Year 2 as per the below staggered implementation. This is a 66% increase of the remaining Community Connector capacity in May 2021 after the departure of Westbank, Age UK Exeter and Estuary League of Friends from the programme (which represented 52% of previous capacity). Within this re-expanded model Community Connector support will be available to all Exeter residents, across all ages, for both individuals and families while allowing us to also focus some resource on those who can most benefit from improvements to health and wellbeing, as highlighted above.

	2021-22 (Year 1)	2022-23 (Year 2)	2023-24 (Year 3)
Existing CC hours per week	338 (9 FTEs)	338 (9 FTEs)	338 (9 FTEs)
Additional CC hours per week	122 (3.25 FTEs) <i>36% increase on May 2021 capacity</i>	234 (6.25 FTEs) <i>66% increase on May 2021 capacity</i>	234 (6.25 FTEs)
Total CC hours per week:	460 (12.25 FTEs)	572 (14.5 FTEs)	572 (15.25 FTEs)

In line with the above expanded capacity, and as Covid-19 restrictions lift, **we will look to increase the number of individuals the programme is reaching significantly, both through direct referrals and the wider work of the Community Physical Activity Organisers and Community Builders.** The rate at which we are able to do this would depend on both external factors, including the continuing impact of Covid-19 and related restrictions, and the extent and speed at which we are able to expand referral routes and re-expand Community Connector capacity. Taking in to account these caveats, we propose the following:

- A return to pre-Covid referral rates in the first half of 2021-22 to approx. 70 per month and an increase in line with expanded capacity in the second half of the year to approx. 100 per month).
- A further increase in referral rates in year 2 in line with further expansion of capacity to approx. 120 per month.
- An increase in the number of individuals that CPAOs are working alongside, either individuals or in group settings to approx. 50 per month.

Next steps:

- May-June 2021: Design workshops/discussions based on themes identified above with delivery partners / funders and stakeholders.
- June-July 2021: Finalised design document for agreement by funders, delivery partners and stakeholders.
- End-July: Grant agreements and operational plans developed and implemented for August delivery start