Appendix Two

Voluntary and Community Services Annual Performance Report

Contents:

1. Introduction

On the 20 March 2023, Cabinet agreed for contracts to be awarded Slough CVS and Citizens Advice East Berkshire to deliver Voluntary and Community Sector Infrastructure and Advice and Information Services respectively, following a procurement exercise.

The services went live on the 1 July 2023 for a contract period of three years with the opportunity to extend for a further two periods on one year, dependent on outcomes and funding. Both services are currently funded via the Better Care Fund and Public Health.

The Voluntary and Community Sector Infrastructure Support Service operated by Slough CVS has an original contract value of £408,149 per annum fixed over 5 years. This has subsequently increased to £474,050 p.a. in 2023/24 and will increase to £478,149 pa in 2024/25 for the duration of the contract. The total contract value for the potential 5-year period is £2,386,646

The Advice and Information Service operated by Citizens Advice East Berkshire has a contract value of £120,000 per annum.

The total contract value for the 5-year period is £600,000

This document sets out the impact of the services in terms of development, reach and impact. In addition, an analysis provides highlights of the main challenges and the steps taken to resolve them within this developmental year of delivery.

Outstanding resolutions requiring further work in year 2 are set out within the action plan at Appendix 2.

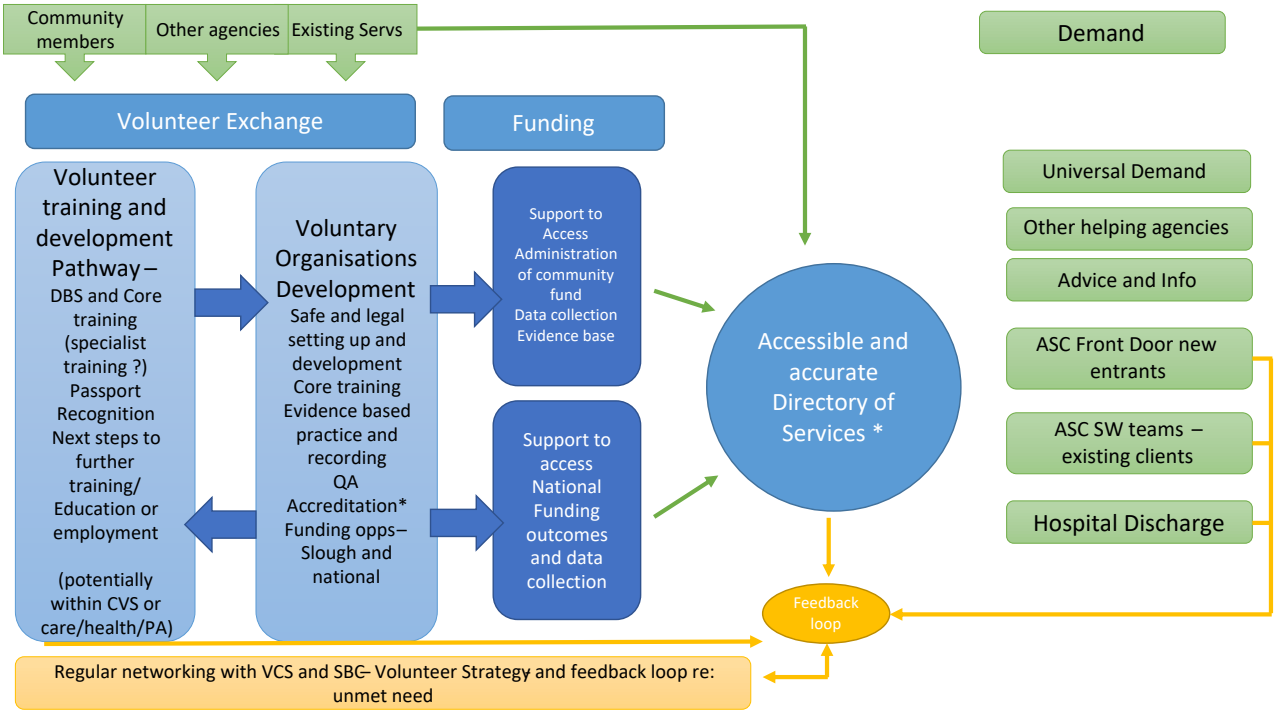
2. Service description - remodelled Voluntary and Community Sector Infrastructure Support Service:

Slough Council for Voluntary Services is commissioned to provide a community and voluntary infrastructure support service in Slough.

There are a number of component parts to this service which align to support a more integrated approach to community wellbeing in Slough, enabling people to make informed choices about support and preventing or delaying the need for unnecessary health and care interventions.

These include:

- Development and maintenance of a Directory of Services
- VCS Infrastructure Support
- Volunteer recruitment, development and training
- Management of the Community Connector Service
- Administration of the One Slough Community Fund



3. Remodelled Advice and Information Service:

The provision of accurate and timely information and advice is a further important aspect of the revised model of support for people in Slough. The provision of a person-centred service will be enhanced by the ability to access the Directory of Services, allowing staff to provide onward referral information in addition to the service they provide.

This is particularly important as people seldom present with just one issue to address, and access to a community offer increases the ability to find a holistic solution. This is best illustrated via the Iceberg model below:

The service is expected to:

- Strengthen the advice and information offer in respect of social care in accordance with the Care Act 2014
- Increase the number of face-to-face sessions which are undertaken.
- Maintain the use of volunteers to support the core service and provide adequate training to enable them to fulfil this role.
- Draw upon the Directory of Services produced by the Infrastructure Provider to signpost to the VCS.
- Liaise closely with the contract management team and share detailed data concerning accommodation advice sought
- Undertake detailed casework.
- Strengthen links with Housing and with Adult Social Care to provide intelligence to support strategic developments

4. Year One Progress

Key progress and performance of SCVS and Slough Citizens Advice East Berkshire is outlined below:

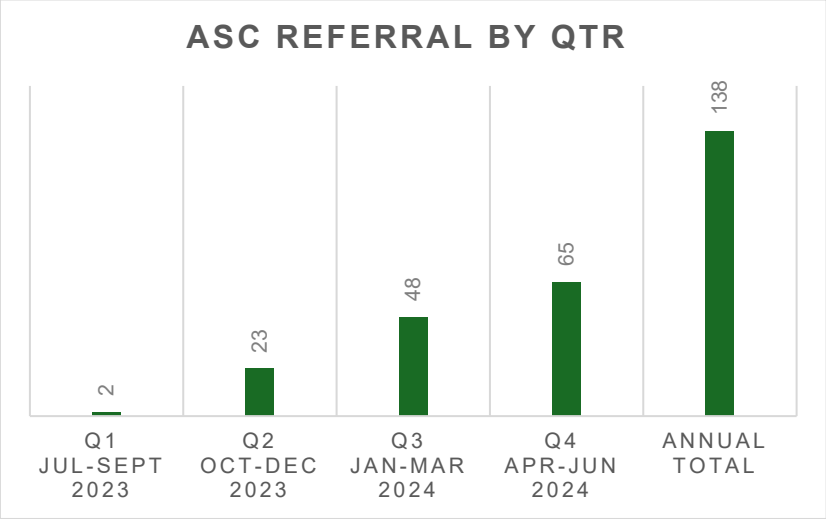
SCVS – Voluntary and Community Infrastructure Support service

Area of provision	Progress
Directory of Community Services	A public-facing universally accessible Directory of Services – received 25,751 individual hits against a target of 15,000, with 83% of those who responded, saying they found the site helpful. • 155 groups were added to the directory – an increase of 55% over the period
VCS Infrastructure support	Support enabling existing and future community groups to set up as safe and legal organisations, able to respond to the community need they have identified in an effective and sustainable way. • 103 community groups actively supported through advice and 1:1's, including 23 new groups • 49 of those supported to bid for non-Slough funding. This last year saw just over £2.5 millions of external funding coming into Slough groups.

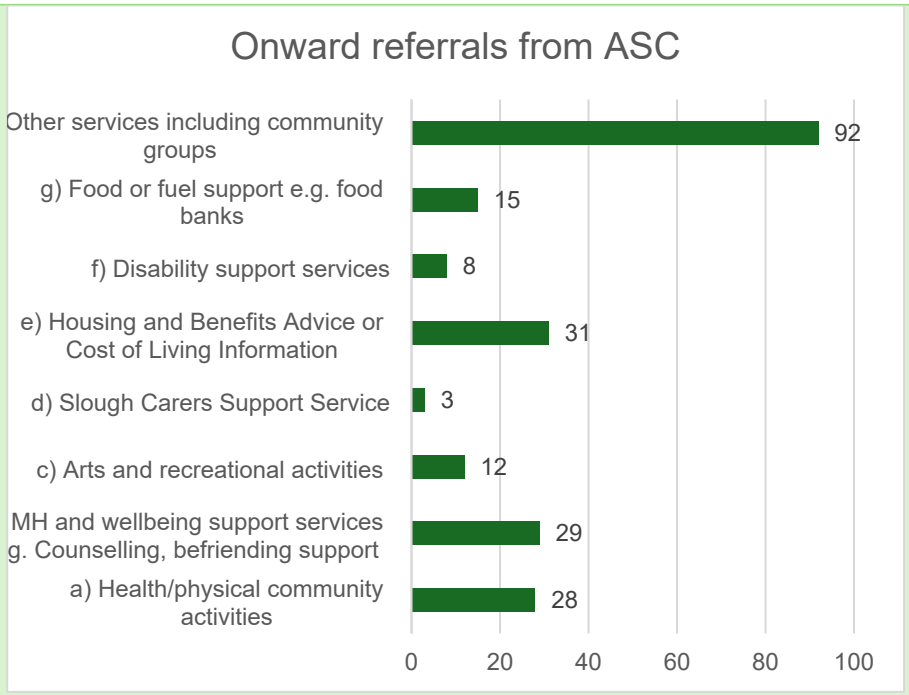
Volunteer recruitment, development and training	Development and training to grow and retain the volunteer base, providing both a core and specialist training offer, enabling volunteers and CVS groups to match skills and interest, as well as providing a volunteer pathway that takes account of the longer term aims of volunteers. • The service invested in a new volunteer platform allowing an improved matching platform and more accessible access for volunteers and groups seeking support. • 2,097 people were listed on the original volunteer platform at the start of the contract • Post-Covid data cleansing showed 727 were still active, providing 6,416 of volunteer hours across the community • 57 training sessions have been run supporting an average of just over 200 people per quarter, with just over an average of 120 who were new to SCVS. • 97% of respondents reported that the sessions met their training needs and 100% rated the training as 'good' or above.
Slough Community Fund	The programme is open to Slough based community groups who for the 2023/24 round bid for approx. £108k of funding to support wellbeing projects based on the needs of people within the community and also meet the SBC Corporate Strategy and the Wellbeing Strategy priorities. • 27 groups received funding in the first year's funding round with a combined target of reaching 3853 local people • Groups recorded 6,696 residents supported over the last period – an average of £15 per person per annum • 1,668 sessions supported – an average of £60 per session per annum • 450 volunteers contributed 3,547 volunteer hours – the equivalent of just over 95 FTE weeks of support • Nearly 40% of residents reported health improvements The 2024/25 bid round followed the review of the Fund programme leading to • 44 applications with a total request of £291,980 this year's funding pot of £108,235. • In recognition of the impact of local provision, the BCF have increased the funding pot by £65,000 this year, and by £70,000 from next year's onwards
Community Connector service	The Community Connector service diverts demand away from ASC and helps successful discharge from WPH by supporting people into community support. The first year of this new service has seen Community Connectors support 892 people. The referral routes break down as follows: OBJ

- 138 referrals have come directly from ASC
- A snapshot of 76 referrals demonstrated that of the 33 new referrals seeking a Care Act assessment, 13 were diverted away from assessment
- 16 referrals from Customer Services
- 541 referrals have come from Wexham Park Hospital for those ready for discharge
- 25 of these were from out of area
- 172 referrals have come from self or other agencies/community groups
- 100 % of those referrals who responded were satisfied and would recommend the Community Connectors service to others
- 73% of clients engaged with the service they were supported into
- 95 % of clients who engaged with the onward referral, reported that the support had a positive impact on their wellbeing

The breakdown below shows the increasing number of referrals from the ASC teams into the Connector service as the team become embedded over the first year:



The table below indicates the areas ASC referrals were signposted to:



CAEB – Information and Advice Service

Information and Advice	**Information and Advice has been provided to 1,131 people covering 5,824 issues including:** • **1668 housing issues** • **1095 benefit and tax credit advice issues** • **492 debt issues** **A total of £144,337 in income was gained for people via reimbursements from services and loans, debts written off, and repayments rescheduled.**

5. Development Strengths

A Collaborative Approach

An essential part of service development has been a commitment to working collaboratively with providers. This has provided a range of benefits for all partners but most importantly the residents of Slough who rely on a vast range universally available support service.

The shared understanding of each partners strengths and limitations has enabled agile responses to range of development issues as outlined in the sections below.

Recruitment of Community Connectors

Recruitment of suitable staff has proven to be a challenging and lengthy process for provision, a theme that is widely shared across support services.

At the start of the service in July 23, an internal role shift meant a senior and experienced Community Connector was available immediately to start the development work for what was a brand-new service on 1 July 2023. There were delays in recruiting a second and third Community Connector at that time – however, referrals had not yet started so the impact was minimal.

The service was supported by two existing PT staff who flexed hours to support the Community Connector service, one providing support for residents and one providing admin support and referral coordination. This covered a series of recruitment sessions up until the current complement of 4x PT Community Connectors were successfully inducted.

These changes presented initial challenges in the visibility of the roles and the ability to develop professional relationships.

Despite these challenges positive work and outcomes have been achieved and the current team is now well-embedded with the operational teams.

Changes in Community Connector Pathway and data collection within ASC

The initial plan of embedding Community Connectors within an 'Adult Social Care (ASC) Front Door Hub' to sit alongside customer services and social work team members was not realised as the Hub was not progressed as initially anticipated.

Calls intended to be diverted to Community Connectors to prevent demand on ASC resource, were scheduled to use data sets from customer services JADU system alongside ASC reporting tools to evidence impact. As this was no longer practicable, SCVS, Commissioning and Operational colleagues collaborated to redesign a simple referral route for Social Workers to refer directly into Community Connectors.

This means people known to services, as well as those newly entering can be diverted and supported by Community Connectors.

Whilst this removes the original diversion approach ensuring that people would not reach ASC at all, the service is now receiving self-referrals and other community groups, which means they are avoiding the SBC front door entirely. Take up is being monitored to ensure that Community Connectors are not oversubscribed, with ASC and Hospital referrals taking precedent.

The service is also taking referrals from the ASC Duty Desk requiring new mechanisms to determine whether that diversion prevents or delays a Care Act assessment.

Whilst these mechanisms need refining, (**action point 1, appendix 2)** snapshot data pulled from LAS for the period August 23 to March 24 demonstrated that of the 76 recorded as referred into Community Connectors, 33 were new referrals for assessment, of which 13 were diverted form assessments. Future data returns will be able to demonstrate whether these diverted cases returned for an assessment, and if so, how long the assessment was delayed. **(action point 2, appendix 2). This** will support the use of a notional cost avoidance figure to be calculated **(action point 3, appendix 2)**

Part of the evidence base of the effectiveness of the Community Connector service is to understand the impact of the service on social work teams. Consequently, teams have been surveyed at 6 monthly intervals.

Response rates are low but showed an increase of just over 30%, and they tell a consistent story of those who have referred into the service:

If you have used the service, how would you rate the support offered?	Would you refer again, or if you have yet to refer, would you in future?
8.43 Ave rating	**86% said yes**

Main reported benefits to the team are:

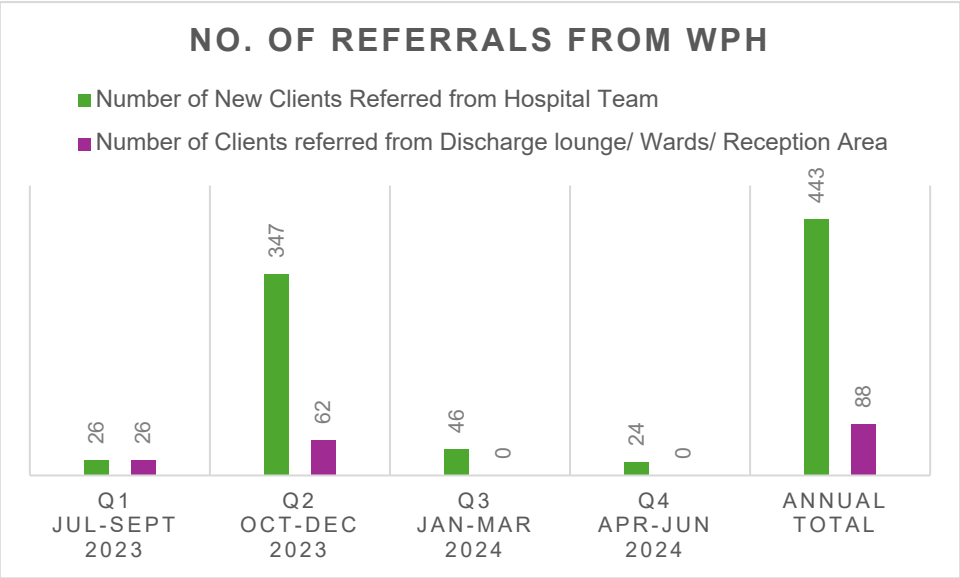
- Time saving/supported workload 48%
- Supports wellbeing of the service user 69%
- Provides good information and advice 62%
- Reduces care need 24%

<u>Responding to changes in Pathway and data collection within Wexham Park Hospital</u>

Multiple contact points within Wexham Park Hospital risked a fragmented approach to the work of Community Connectors. However, the initial complexity of approaches did not halt referrals, and the intelligence gathered as part of this early pathway work have enabled the service to identify the most impactful groups to target.

Subsequent work with Hospital social workers now enables Community Connectors to work with identified patients, being discharged with no clinical or care needs and who would benefit from local support that falls outside of care and/or clinical interventions.

Quarterly figures demonstrated a spike in referrals based on this non-targeted approach which resulted primarily in signposting rather than a ‘warm handover’ into appropriate local voluntary sector support. The revised approach has seen referrals settle into a baseline that is more comparable with the number of referrals from ASC.



Community Connectors - Outcomes measurement and equitable service provision

Through the development of the provision, the requirement to demonstrate measurable and meaningful outcomes has been at the forefront of service delivery. For commissioned services we have introduced the requirement to feedback outputs (i.e. how many interventions were undertaken) – alongside outcomes (i.e. did the intervention produce a good outcome) as a routine part of contract monitoring.

Whilst this is an essential part of developing an evidence base for the efficacy of the model, the ability to correlate referral data with outcomes data can also highlight health inequality issues and potential differences in experience of the service of people with protected characteristics.

This is a particularly complex requirement when working with a diversity of small groups, who may lack the experience of, or resources required to submit workbooks, or whose ethos to working with people is undermined by 'personal intrusions'.

We have worked collaboratively with our Public Health colleagues to identify straightforward ways of establishing this, and the use of qualitative data – such as case studies - is widely recognised as an important aspect of demonstrating individual impact and examples are included at the end of this appendix.

Development work with the Community Connectors service has resulted in a revised measurement approach that is proportionate to the level of involvement and allows an uncomplicated system of measurement based on customer identification of the impact of their issues on their wellbeing. The question will be repeated at the end of the involvement period allowing a measurement of progress that is comparable regardless of the individual issue experienced. In this way the impact of the model can be assessed. A small number of follow up questions regarding barriers and

enablers will enable us to understand which part(s) of the model need development. (**Action point 7, Appendix 2)**

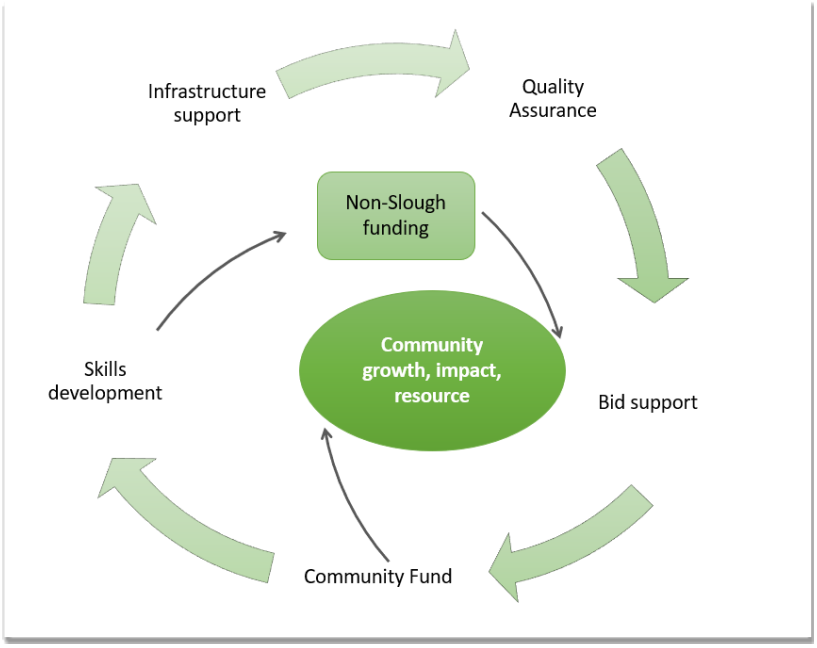
As year two progresses, we will be able to gain insight into the wider successes of the approach. (**Action point 8, Appendix 2)**

The findings from a snapshot survey in the final quarter of year one of the Community Connector service has been included earlier within the report.

As previously mentioned, the introduction of the JOY platform will enable correlations between referral demographics and achieved outcomes, to be established, allowing the whole customer journey to be understood and areas of effective practice to be highlighted. (**Action Point 7, Appendix 2)**

The Slough Community Fund

The component parts of the overall SCVS service are designed to provide a programme of activity to support a flourishing VCS offer within Slough and the Community Fund is an important aspect of this approach:



<u>The 2023/24 bid round</u>

The Slough Community Fund provides annual funding for local community groups able to demonstrate outcomes that align with agreed local aims and objectives highlighted within Sloughs Health and Wellbeing and Corporate Plans.

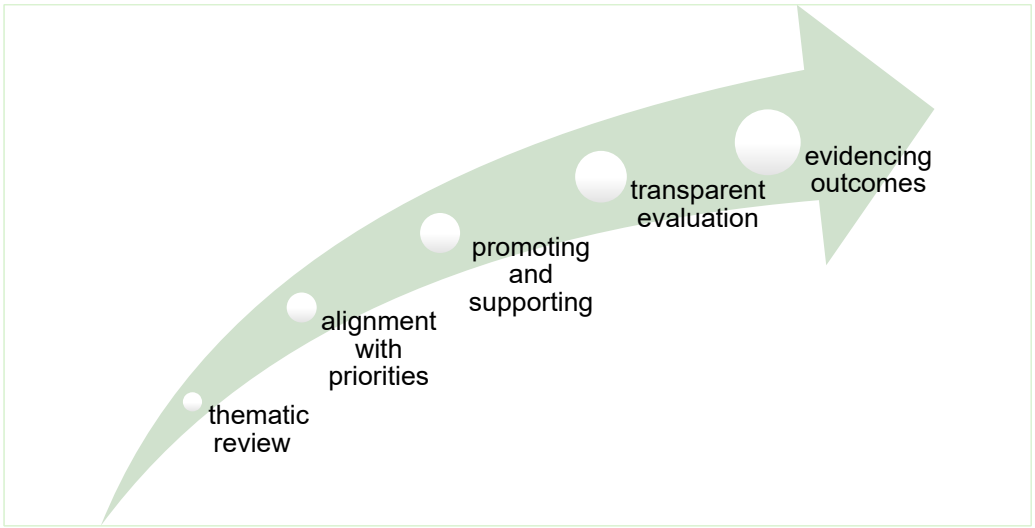
It is administered by Slough Council for Voluntary Service (SCVS) as part of both their previous and current contract to deliver infrastructure support to Slough's voluntary and community sector.

The funding is made up of a percentage of the annual contract price, generally not less than 25% with an expectation that the contract provider will maximise the funding beyond the current amount. The funding available for this round was £108,000.

The Grants are open to all Slough Voluntary and Community groups and aim, in particular, to provide support to those smaller organisations that may have restrictions to apply for larger grants and are at the grassroots level and closest to those who face health and wellbeing issues and/or inequalities.

All applicants must be constituted and have completed or be working towards a quality assurance mark.

Community Fund Review



Following the successful procurement, the revised approach to VCS support provided the opportunity to review the historic arrangements of the Community Fund, to ensure clear and robust governance. This included:

- the methodology for collating feedback across the system
- alignment of themes with the Slough Wellbeing Board priorities
- revised and widely promoted eligibility criteria to support more local groups to apply
- a transparent evaluation process
- robust demonstration that outcomes have been met

This work was undertaken with SCVS in a collaborative approach that emphasised further development of existing strength in good practice.

These changes are highlighted below:

- Collating feedback

SCVS have links with some 400 local community groups within Slough and organise a series of events that run throughout the year. These network events provide the opportunity for local groups to feedback on the issues and needs they are experiencing locally.

Feedback from Community Connectors and intel from the use of the Community Directory of Service are collated to determine where demand for support is currently high, and where there are currently no services or groups able to respond.

This provides a valuable tool to determine the most pressing priorities local communities are facing and provide the backbone to the Grant application bids.

- Alignment with strategic priorities

To support a more targeted approach to the themes, a four-week engagement phase with critical stakeholders was introduced. This process aims to ensure that operational and strategic colleagues, portfolio holders and members of the Co-Production Network have an opportunity to add their own knowledge of groups that should be highlighted as in particular need.

This feedback was included within the Grant application process, encouraging smaller or more specialised groups to step up.

The priority target groups would be described as ‘bids that are particularly welcomed’ rather than restrict all bids to these areas. This approach allows all bidders to make an approach but ensures that those actively working in more targeted areas are not discouraged by the generic nature of wider health and wellbeing ambitions.

To ensure funding is distributed across a range of projects and to grassroots organisations, priority would be given to groups applying for up to £2,000, £5,000 then £10,000, in that order.

The 2024/25 Bid Round Results and Increased Funding

The fund attracted **44 applications with** a total request of **£291,980** against this year’s funding pot of **£108,235.**

All bids meeting the criteria were considered within the system stakeholder moderation panel to further hone successful bids into those that:

- Most closely aligned with the strategic aims of the fund
- Were representative of Slough’s diverse communities and cultures

This process resulted in awards being allocated to 27 groups, 10 of which only received partial funding; 40**%** of the allocated funding going to applicants responding

specifically to the ‘most welcomed’ themes identified by strategic partners following the community feedback thematic review – a significantly higher percentage than in previous funding rounds.

Increased demand on VCS support is likely to continue and is likely to align more closely with new models of diverting demand from the front door. Action point 8

In recognition of this, alongside the reach and impact of funded groups, the BCF have agreed to increase funding by **£65,901** in- year, enabling all part-funded groups to become fully funded and enable the next 4 highest scoring projects to be funded.

To support the sustainability of the sector, the fund will be increased by **£70,000** from the 2025/26 funding round onwards, bring the total community fund pot to **£170,000 pa**.

Community Fund - Outcomes measurement and equitable service provision

An important part of the Community Fund review is to support potential bidders to develop an approach to demonstrating a proportionate approach to evidencing outcomes.

This is now included within the bid questionnaire and encourages bidders to identify what good would look like for their provision:

Describe the benefits for people using the programme, your volunteers and the wider community and explain how you will demonstrate that these benefits have been met?

The provider has rolled out a successful program of training to support voluntary groups to evidence the impact of their work and this is an important enabler in supporting bidders to seek non-Slough funding, bringing additional resource into Sloughs communities.

The results of this change will become clear at the end of the 2024/25 funded round of successful bidders. **Action point 9**

6. Development challenges

Community Connector services - Hospital Feedback

The feedback mechanism from health colleagues is undeveloped and needs to be proportionate to the number of patients being dealt with. **(Action point 5, Appendix 2)** However, the CC service has developed a feedback mechanism to support patients to comment on the Community Connector service as outlined within the Action Plan. **(Action point 6, Appendix 2)**

Work to explore mechanisms to measure impacts on health services and establish correlation in a longer-term goal across all preventative services. The anticipated use

of the JOY platform by SCVS, funded by the BCF, will support in identifying outcomes as well as correlating them to demographics. (**Action point 7, Appendix 2)**

This will provide a clearer picture of the impact on all service users but will particularly highlight any lack of equity in outcomes, which in turn informs work to address local health inequalities.

Leadership Churn at Citizens Advice East Berkshire

Several interim leaders have been in post at the information and advice service following the contract start date which has led to some setbacks in fully implementing some aspects of service delivery, in particular face to face delivery on a consistent basis. In addition, several key volunteers left to undertake employment.

The commitment to training with CAEB is significant, which limits the number of people in a position to apply to become a volunteer. This has also impacted on the service's ability to respond to increasing demand- however the service is exceeding previous service provision by 10%

Whilst appointments are set up for face-to-face sessions with those assessed as needing casework, plans for a 'drop-in' have been delayed.

A number of other voluntary sector groups are reporting an upturn in demand for information and advice, including form-filling support.

Work is underway to explore the role of the VCFSE in informally providing advice and/or information where it is not part of their usual activity. Please see the Action Plan for further details. **Action points 10 - 12**

Information and Advice - Outcomes measurement and equitable service provision

CAEB provide a comprehensive dashboard to support quarterly monitoring. This provides an overview of all activity undertaken, including summary demographics, key themes and needs, thereby presenting a clear picture of current concerns for Slough clients.

Whilst this does not provide for a correlation of specific activity to demographic group, it can show changes in demand by differing demographics such as age, gender and ethnicity. It can also demonstrate whether the demography of clients is representative of Sloughs diverse communities.

Outcomes beyond financial benefit are hard to quantify as a client generally stays with the service until a conclusion is arrived at, where the service has resolved the issue, or where a resolution is impossible within the confines of legal or regulatory constraints. Caseloads may take many months to reach this point. Currently the CAEB customer reporting platform does not provide for recording the nature of an outcome once a case is closed. The collation of this data would have to be undertaken manually which would take considerable resource.

7. Development Priorities for Year Two

- **Embedding the Joy platform into the service** – this will allow accurate collation of data that will allow correlation between individual referral and their service journey to their final outcome. The report function of the platform will therefore allow for reporting against groups with protected characteristics and/or impacted by health inequalities to understand the equity of the service in terms of equity. (**Action Point 7, Appendix 2)**

- **Information and Advice –** further work will be undertaken to understand how information and advice can be provided in the most effective way within local communities. This will build on a snapshot survey which highlighted areas of demand experienced by voluntary groups who are increasingly being approached by residents who are impacted by the currently oversubscribed commissioned service. (**Action points 10-12, Appendix 2)**

- **Collaborative working with other 'Community Connector' roles –** the community connector, or navigator role, is increasingly being used across all sectors of the system, providing support through the lens of individual funders. An important part of the original specification is to develop an operational group that pulls together these various roles in order to understand each remit, avoid duplication and highlight trends that support future preventative services. (**Action Point 15, Appendix 2)**

- **Continued development of Community Connectors at WPH –** recent inroads into the hospital discharge process will continue with a view to linking in with Connected Care data to understand the longer-term benefits to health as well as social care- for example – data that demonstrates a reduction in GP visits, a reduction in emergency admissions, or an improvement in attending elected appointments **(Action point 5, Appendix 2)**

- **Increase volunteer numbers –**work will continue to increase and develop a broader group of volunteers, focussing the wider benefits to volunteering – from improved wellbeing outcomes to valuable work experience, skills and training. Work to target under-represented groups will be supported by engagement with specialist agencies supporting those groups. (**Action point 13, Appendix 2)**

- **Ensuring alignment with the revised Front Door Target Operating Model -** Work will begin where applicable after Cabinet have approved the model. (**Action point 14, Appendix 2)**

8. **Feedback and Case Studies**

Community Connectors

Client Background:

"A"'s mother came to us through MaDE week at WPH because of their concerns for their son. "A" (43) has been diagnosed with Bipolar, ADHD and is receiving support from Turning Point. His parents are both pensioners and are finding it difficult to manage with him as he still lives with them. They want him to stand on his own two feet and have a better quality of life but felt like they had been pushed from pillar to post, without any tangible results.

Outcomes

• Due to the relationships that have been built over the last few months with ASC, we were able to access "A"'s case history to develop a fuller understanding. As a result, it confirmed that the family had been signposted back and forth without much resolve.

• Following discussion with ASC, it became apparent that we needed to get in touch with the Community Mental Health Team (CMHT), as the case was no longer assigned to ASC. There had been a breakdown in communication between CMHT and the family. CMHT suggested we could help by reconnecting both parties because "A"'s case had come to a standstill. We spoke to "A" to gain his consent to move forward with the family's request for supported housing and then emailed this in writing to the CMHT as per their suggestion. This was a huge relief for the family and said it was the first time they felt they had been heard.

• In addition, in conversation with "A", it became clear that that he is intelligent and very capable. He has worked in the past and is interested in working but didn't know how to go about it because of his issues. "A" was interested in doing something where he could use his life experiences to help others suffering from similar conditions. "A" has been referred to Ways into Work. We are currently in the process of trying to help arrange the initial meeting with them

<u>Case Study: "Client B":</u>

Client Background: The timing was fortunate because when I called, client B was completely at rock bottom and said she was thinking of ending things because didn't know where to turn. Client B had been moved to accommodation in Maidenhead the night before. The place was unfurnished apart from a chair and the kitchen only had very basic utensils such as a few items of crockery & cutlery, a kettle and toaster. No white goods, oven or microwave. She had spent the night

sleeping in the chair and has many health issues. She was told that she needed to furnish the place herself, but she had no money for food let alone furniture. After contacting her named social worker, who was away, she was redirected to duty. At this point, she was given the number for Giving Hope Furniture and no further support. So, by the time I had called, she was very hungry and had given up.

Outcomes:

• Through the Capacity Building Manager's contacts, we managed to get food from a charity called Helping Hands within a couple of hours, The volunteer spent around £100 on food items & donated a microwave that she had at home.

• Although client B had to continue to sleep on the chair for two nights, The Baby Bank delivered a bed, a new mattress, and a fridge; all items which they don't typically have available.

• A follow-up email was sent to client B's social worker, SCVS & ASC Safeguarding leads, with the suggestion that client A's case should be used as an example of what went well, look at the gaps and what processes need to be put into place to avoid future reoccurrences.

• Client B was lucky that we got to her in time, and we were able to turn things around. She is doing much better and has been referred to Dash for further support

Patient Feedback:

"*I had the best experience today speaking to community connector, I didn't even know we had 'them', the most vital thing for me was the language barrier with hospital staff, so having been able to speak to the community connector in Punjabi/Urdu has somewhat relived me that my concerns are being listened to and in fact actioned as well which I'm very grateful for! The lady listened to my request, which were plenty, and managed to accommodate them. I'm so grateful that we managed to find an appointment available on the following day of my discharge next week! The lady was kind, patient, compassionate and helpful. These are qualities that made this community connecting experience a truly satisfying one. Thank you"*

Case study: Client C

Client background:

C, a 79-year-old female, was admitted to WPH due to severe COPD and water retention. Although initially set for discharge, her health declined due to a urine infection.

C sought support from the CC as she felt lonely and isolated and wanted to improve her mental wellbeing.

Impact/Action Taken:

- C was referred to the Knit Your Socks Off group, a local knitting and crocheting charity. This has helped her to socialise and focus her energy on something she has a passion for.
- She expressed a desire to become a volunteer for the Wellbeing Befriending Telephone Service upon discharge to help others who are isolated and lonely.
- C aims to stay engaged, meet people, and attend Community Café's Warm Spaces to overcome her loneliness and socialise with others to help improve her health and wellbeing.

Client Feedback/Comments:
"I want people to know that I've had a wonderful life, and even if it ends in the hospital, I'll do so gracefully. Meeting incredible people on this ward, especially through the Community Connectors Project, has been a highlight. It's a fantastic way to reach out to older folks like me who often have no visitors and no one to share their day with. The Connectors are a lifeline here; it can feel like a prison at times, but they advocate, signpost, and(they)r can connect us with local health services and make a real difference."

Community Fund services 2023/24:

- Slough Immigration Aid Unit "When we represent people's cases to the Home Office, they are generally successful in gaining further permission to stay, or indefinite leave, though Home Office long delays for family and private life applications continue. We continue to support many women whose marriages have ended due to domestic abuse, applying for an independent immigration status, and this security is vital for their and often their children's future and health. Others who have experienced destitution and actual or potential homelessness gain confidence and improved mental health when the conditions on their stay are changed to enable them to access mainstream benefits, or to work, or even when they now know there is an organisation with the specialist knowledge and ability to help, and friendly people they can contact for reassurance."
- Community Online CIC "We have delivered eight IT-based teaching sessions to reduce digital exclusion and social isolation, as well as help tackle a digital skills shortage in our community. These are targeted primarily at the socially disadvantaged, such as older people, the unemployed, those from ethnic minorities, migrants, and those with disabilities, since they are the groups most at risk. We will be running these sessions along with one off awareness sessions to bigger groups for over 6 months. These sessions are bilingual where necessary as majority of our participants speak Hind/Urdu/Punjabi and our tutors can speak the languages and to harness basic digital skills to increase people's independence, confidence and impact their social mobility. Therefore, they will be learning how to utilise their smartphones, tablets, and home computers better, including the use of essential apps/programmes, and services."

Good news story- Berkshire Vision

"Member A submitted their third PIP application and received their third refusal. Together with the SLSO they called the RNIB and made the referral to take over the PIP appeal. The PIP decision was subsequently overturned, and A was awarded the maximum amount of both the daily living and mobility elements of PIP received a back payment of over £8,000. The SLSO also made applications for a disabled bus pass and blue badge for A to help them travel more independently"

Good news story - Slough Immigration Aid Unit

"When we represent people's cases to the Home Office, they are generally successful in gaining further permission to stay, or indefinite leave, though Home Office long delays for family and private life applications continue. We continue to support many women whose marriages have ended due to domestic abuse, applying for an independent immigration status, and this security is vital for their and often their children's future and health. Others who have experienced destitution and actual or potential homelessness gain confidence and improved mental health when the conditions on their stay are changed to enable them to access mainstream benefits, or to work, or even when they now know there is an organisation with the specialist knowledge and ability to help, and friendly people they can contact for reassurance."

Slough Community Transport - Update

"Work has continued on providing door to door transport for people who identify as unable to safely access public transport. Most trips are to perform activities of daily living, for example to attend medical appointments, shopping, banking etc. However, we have also seen an increase in the numbers of people who wish to access community activities at Britwell Library, Langley Free Church and at the Crossroads and Age Concern day centres.

...ient feedback

"The items donated were the only items M.G had for her baby, and I could see from her reaction this was a huge of a weight lifted off her shoulders as she is a single parent."
Slough Foodbank from The Baby Bank donations

"Thank you, thank you, thank you, your team are incredible, I don't know how you did it, providing clothing, bedding and beds for 5 children within a week is fantastic. For the first time in their lives they are all sleeping in their own beds, with their own clean bedding" The Baby Bank client

Berkshire Vision

A new Member, N, was referred to Berkshire Vison by the ECLO's after N had attended clinic and was registered as SSI. N lives alone and has no local support. N is very independent, but has challenges with shopping, cooking, housework and managing paperwork. N's main difficulties are not being able to read mail, cooking instructions, sell by dates on packaging, or travel independently. This has had a significant financial impact on N's finances as using taxis and local takeaway venues are expensive solutions.

Through engaging with Berkshire Vision, we were able to check on N's behalf that they were receiving all the correct benefits and concessions. We also made applications for the concessionary TV licence, disabled blue badge and Attendance Allowance for N. The TV licence has been processed and the refund received, which provides a little financial relief. N is waiting for the blue badge and Attendance Allowance applications to be processed.

We also made internal referrals to other Berkshire Vision services that would best support N, such as Tech Buddies, so N could receive help using their phone, and a demonstration of accessible equipment. N identified a portable magnifier that would support their impairment and give them some independence to perform day-today tasks. We were able to help N with applying for grants to cover the cost of the magnifier. One grant has been approved and N is waiting on the second grant to be approved. In the meantime, N has started attending local social events and socialising with other visually impaired people with the Slough and Langley Club.

Volunteer Stories:

Dolly's volunteer story

"Since retiring as a Nurse Practitioner, I have continued to be involved in health and wellbeing, founding Living in Harmony, a wellness group in Slough, nearly 10 years ago, and as a Diabetes Champion. I am always on the lookout for new volunteering opportunities, as it gives me immense satisfaction giving back to the community, so I signed up to the #OneSlough Volunteering platform and entered my credentials.

Recently I received an email from #OneSlough Volunteering asking me to apply for the position of Trustee at Crossroads Care Slough and two months ago I joined the organisation. As a trustee I work with the team to deliver efficient services, to provide high quality care in Slough."

Rapide's volunteer story

"I am an asylum seeker from the Congo and I decided to volunteer to gain new experiences but most importantly to find a community of people. I have volunteered at Slough CVS events and in a local Scope charity shop.

Volunteering has made me happier and feel more connected. I have built my confidence, especially whilst talking, adopting and adapting to, and learning the British culture."

Asif, a 40-year-old man with undiagnosed cognitive difficulties was referred to us from Ways into Work, looking for volunteering opportunities.

After a face-to-face meeting with him, we agreed upon a retail-based opportunity, to allow him to develop his communication skills and gain valuable retail experience. Asif was then supported during the application process. He has since been recruited in a local retail shop and is volunteering 2 days a week.

Training Feedback

"Thank you so much for providing such a beautiful, useful and fruitful experience. I learned about the importance of each individual's activity in the societies and how beautifully our activities are impacting that positive change we all want to see in our societies." Mapping your Impact training

"Great trainer, good mix of resources, great learning style and offered a safe space to communicate. Nice to have a smaller group to share and exchange ideas." Volunteer Passport training

"Really liked the presenters. Hearing from someone with lived experience who talked really openly and inclusively was so helpful." LGBTQ+ training

VCFSE Networking Events

The Slough Community Forum took place on Tuesday, 18th June, at the Cippenham British Legion, bringing together over 70 attendees from the voluntary, statutory, and business communities. This event coincided with the #MonthOfCommunity, a period dedicated to celebrating community spirit and fostering inclusivity. The event continued with a discussion about how we can reduce isolation and loneliness and concluded with The Big Lunch – Outdoor Community Picnic & Networking session

Slough Community Network: End of Year Celebration

On Wednesday 13 December, Slough CVS hosted its much-anticipated annual End of Year celebration, bringing together over 40 stand holders, and over 100 statutory and community partners, and volunteers.

The event took place at Weekes Drive Community Centre and attendees were warmly welcomed by Vicki Atherton, SCVS' Director of Operations. Cllr Amjad Abbasi, the Mayor of Slough, extended a warm welcome to all participants expressing his gratitude for the remarkable contributions made by the voluntary sector to enhance the well-being of residents and communities in the local area. He then visited each of the stands to speak about their work.

On Wednesday 6 March, we celebrated Social Prescribing Day at the Slough Community Forum. Over **100** representatives were present at the session.

The day provided opportunities for members of the voluntary sector to meet with local partners including social prescribers, social workers, GP's, and health professionals working across Frimley and how partners can work in collaboration to improve wellbeing and health of our residents.

Thank you to all the statutory and voluntary groups that contributed to the event and shared their projects and stories, including Dr Priya Kumar, Transformational Clinical Lead Connected Care, Frimley, Sandy Wilson, a client of Art Classes Group, Saida Mughol and Rahi Bains from The Sangeet Group, Sam Cheney from Ways Into Work, Mark Clements from Slough Community Café, Shoba, a former SCVS volunteer and Kat and Zo from Mind In Bucks.

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Appendix Three

Year Two Action Plan

Development Area and action point	What we will work on to achieve the outcome	How we will know if we are making progress	Comments
Community Connector **AP 1**	We will continue to work with ASC performance analysts to finesse data capture	We will understand the number of referrals diverted from the ASC duty desk into the Community Connector that do not enter the ASC system, or where they do enter the system, are prevented or delayed in requiring a needs assessment under the Care Act	As the service is taking referrals from the ASC Duty Desk, new mechanisms are required to determine whether that diversion prevents or delays a Care Act assessment. Whilst these mechanisms need refining, snapshot data pulled from LAS for the period 01 07 23 to 31 03 24 indicated that of the 76 referrals made to CCs, 33 were new referrals seeking a Care Act assessment and 13 were diverted away from assessment
Community Connector **AP 2**	We will routinely monitor asc referrals on a 6 monthly basis	We will understand whether people return to ASC after a CC intervention and the time elapsed in between	
Community connector **AP 3**	Work with performance analysts, operational team and finance to explore potential cost avoidance of CC interventions	We will understand the feasibility of the approach with current systems	
Community connector **AP 4**	We will continue to work with ASC Operational colleagues to promote the use of Community Connectors and the importance of their feedback.	There will be an increase in referrals to the CCs. There will be an increase in responses to the 4 monthly surveys	Prevention sessions including the role of the Community Connectors have been undertaken with Operational colleagues, throughout November with over 150 attending the series of events. Whilst over 80% respondents said they were more confident in referring into preventative services, a follow up survey

		sent to ASC operational Community Connector service	planned for December will demonstrate whether the importance of feedback has been understood.
Community connector **AP 5**	We will work with Hospital colleagues to develop a feedback mechanism including greater use of the Connected Care data	We are able to routinely gather information about the impact of CC interventions on hospital staff We understand the benefits of the CC service We understand the barriers to effective working and can make improvements	Health colleagues have reported that ‘’Accessing community support via our community connectors- our LAP and Cluster patients are referred to the community connector team for befriending and socialisation support. The service is timely, and we always receive feedback on how our residents receive this support.’’
Community connector **AP 6**	We will develop proportionate outcomes reporting for those CC referrals signposted into other services	Smaller groups will be able to use their limited resources on providing their support We will have a clear evidence base of self-reported outcomes We will understand where the model is making an impact and where changes are required	Development work with the Community Connectors service has resulted in a revised measurement approach that is proportionate to the level of involvement and allows an uncomplicated system of measurement based on customer identification of the impact of their issues on their wellbeing. The question will be repeated at the end of the involvement period allowing a measurement of progress that is comparable regardless of the individual issue experienced. In this way the impact of the model can be assessed. A small number of follow up questions regarding barriers and enablers will enable us to understand which part(s) of the model need development.
Community connector	We will work the provider to support the implementation of the	The platform will be operational	The JOY project timelines fall within the remit of the BCF - anticipated to start

AP 7	BCF- funded JOY case management system		before the end of the financial year 2024/25.
Community connectors **AP 8**	We will routinely analyse referral and outcome data as part of quarterly contract monitoring	We are able to identify groups that are benefitting from provision alongside any groups that are receiving poorer outcomes – informing approaches to identified health inequalities and protected characteristic	
Community Fund **AP 9**	We will analyse the results of the revised approach to outcomes measurement within the 2024/25 Community Fund	The ability if community groups to evidence their impact will be understood, This will support revised training approaches to improve impact	The provider has rolled out a program of training to support voluntary groups to evidence the impact of their work and this is an important enabler in supporting bidders to seek non-Slough funding, bringing additional resource into Sloughs communities. The results of this change in evaluation criteria will become clear at the end of the 2024/25 funded round of successful bidders.
Information and Advice **AP10**	Work with VCFSE colleagues to understand the sector's role in both formally and informally providing information and advice, especially where it sits outside of their remit and is non-digital	The level of demand and the capacity of the sector to respond will be understood, The support needs of the sector to safely undertake this work will be understood.	A number of other voluntary sector groups are reporting an upturn in demand for information and advice, including form-filling support. Work is already underway to explore the role of the VCFSE in informally providing advice and/or information where it is not part of their usual activity. Confirmation of BCF funding to support an Information and Advice Co-ordinator to undertake project work is awaited.

			As above – co-production activity will be determined by what is included within the overarching TOM engagement
Information and advice **AP 11**	Using the findings of the above work, we will seek to co-produce an effective model to support partners in safely supporting and/or referring onto expert information and advice provision where needed	Partners are willing to collaborate Partners feel better able to support with clear pathways into expert or specialist provision, as well as into safeguarding and other statutory provision	This will need to align with the Front Door TOM
Information and advice **AP 12**	Using the findings of the above work, we will seek to co-produce an effective model to support partners in safely supporting and/or referring onto expert information and advice provision where needed	Voluntary groups are not left vulnerable Residents- particularly those who need face to face support can easily access help in their community, and from groups they have a trusted relationship with. We have a clear picture of where to target funding for effective preventative information and advice	As above – co-production activity will be determined by what is included within the overarching TOM engagement
Developing the volunteer base **AP 13**	We will work with specialist agencies supporting under-represented groups to: • increase understanding of the benefits of volunteering, and • understand the barriers and enablers to becoming volunteers	The numbers of volunteers are increased Volunteers are retained Target groups understand the individual benefits to them of volunteering	The reduction in volunteer numbers post-covid has been experienced on a national level, as people returned to work after lockdown and many people experienced a level of burnout. The NCVO report 'Time well spent impact of covid-19 on the volunteer experience' July 2022 found that

			‘’the evidence from this research has consistently shown an elevated level of anxiety and fatigue among pandemic volunteers as well as their strong sense of guilt’’ (of not being able to respond)’’ stricken volunteers suffer from burnout.’’ This report provides a range of solutions to explore with the provider and the voluntary sector.
Front Door Targeting Operating Model **AP 14**	We will actively work with the approved model once approved by Cabinet, aligning approaches which will include access to information and advice	The approach to provision complements and supports the approved Front Door Tom approach We will have a clear idea of areas of inclusion for the services We will have a timeline within which to agree revised approaches We will be able to communicate the direction of travel with our providers and wider stakeholders.	The TOM approach is currently in development. This is very likely to include engagement and co-production across the SBC area which will in turn inform how service developments are shaped by the ASC Co-production Network Increased demand on VCS support is likely to continue and is likely to align more closely with new model of diverting demand form the front door. The VCS sector in Slough is vibrant, diverse and already committed to supporting residents. The appetite to do more was evidenced in the increase in good bids being received for the community fund – particularly for those aligned with the strategic aims as evidenced in the number of successful bids for ‘most welcomed’ themes.
Collaboration with other Connector/Navigator	We will continue to work with SCVS to map current functions and remits of connector / navigator roles	We will better understand the picture of provision in Slough	

roles operating with in Slough **AP 15**	We will develop a forum for roles to come together to share intelligence and good practice	Similar roles will understand each other's remit Duplication of effort will be avoided We will have insight into unmet need within the community	