

Appendix 2

LCC Service Challenge Savings

Lancashire Wellbeing Service Consultation

How strongly do you agree or disagree with the proposal to cease the Lancashire Wellbeing Service?

Strongly agree

Tend to agree

Neither agree nor disagree

Tend to disagree

Strongly disagree

Why do you say this?

Over the life of the contract Lancashire Wellbeing Service has received 2045 referrals for residents in Pendle. Over the last 12 months there have been 697 individuals referred in to the service from the Pendle area with almost 60% of all referrals coming from either Social Care, self-referrals or Primary/ Secondary Care. The majority of referrals were for those with low level needs (struggling to cope with life, mild mental health issues or experiencing loneliness all accounting for 81% of cases). We are concerned that stopping this service will leave a significant gap for this cohort. Without the early intervention and support, these issues could escalate placing further demand on an already crippled health and social care system.

If this proposal happened, how would it affect your organisation?

Pendle Council is reliant on the LWS for implementation of our Early Help & Safeguarding policies. LWS is one of 3 main providers for low level support needs for our vulnerable customers, particularly our vulnerable debtors. (The other 2 main providers, CAB and Community Connectors are already operating to full capacity and have little scope to plug the gap). Last year, Pendle council directly referred 42 cases to LWS. This does not include the indirect referrals that come from the integrated working arrangements that we support.

We operated a successful LWS satellite base at our Customer Centre, Number One up until 2018 and have spent significant time adjusting our processes and systems across a number of our Service Areas and building a relationship with the LWS to support our vulnerable customers. LWS is now integral in our debt recovery process, helping us to determine genuine cases of hardship and vulnerability. We are concerned that without this service, our genuinely vulnerable customers are going to suffer.

In Pendle, the LWS has been effective in supporting low level needs and there will be a gap for this cohort should this service cease. Our experience of LWS in supporting more complex and multi need cases differs though. Pendle's Transforming Lives panel has, more recently experienced inconsistent, inflexible and minimal engagement of LWS – the service has not

taken referrals with no fixed abode and relies on other agencies to make the contacts in the most difficult cases. We have been disappointed with LWS commitment to the Transforming Lives process but recognise their valuable contribution elsewhere, as outlined above.

Thinking about our proposal, is there anything else you think we need to consider or that we could do differently?

There is an expectation that other voluntary services such as CAB and the EL CCG funded Community Connectors will fill the gap. Both services are already over stretched, particularly with the roll out of UC in Pendle. Community Connectors offers a more intensive support programme- unlike the LWS which is time limited and offers a fixed number of interventions, Community Connectors can provide longer term support. Operating on a smaller scale, Community Connectors took on 97 Pendle cases last year. Burnely & Pendle CAB have dealt with in excess of 6,000 cases 2018/19 across the 2 districts, indicating that they too are operating at full capacity.

Whilst accepting that savings need to be made, it seems that a complete cut to the LWS is unlikely to generate the desired savings longer term.

Perhaps more can be done to re-design commissioning processes to better align all social prescribing related services such as the LWS, including all those commissioned by the 6 CCGs. Rather than ceasing the LWS, could a small percentage of this budget be re-directed into a pooled Social Prescribing fund for each of the 5 Lancashire Integrated Care Partnerships? This will also require support and commitment pan Lancashire but reflects current thinking on health and social care transformation.

Although this wouldn't necessarily achieve the full budget savings proposed, co-commissioning will help maximise resources and deliver efficiencies in the system whilst also still generating significant savings for LCC.