

CWM TAF MORGANNWG SOCIAL VALUE NETWORK SPRING EVENT REPORT 2022

1.0 INTRODUCTION

The Cwm Taf Social Value Virtual Event took place on the 8 February 2022 and was supported by the three County Voluntary Councils, Bridgend Association of Voluntary Organisations (BAVO), Interlink RCT, Voluntary Action Merthyr Tydfil (VAMT), and the Cwm Taf Morgannwg Regional Partnership Board (RPB). The Partnership Board exists to improve the health, social care and wellbeing of people living in Rhondda Cynon Taf, Bridgend and Merthyr Tydfil.

The event was attended by over 100 participants from community and voluntary groups and public services from across the region. The main purpose of the event was to look at how we promote, develop and measure social value in the region, and to raise awareness about the development of the new regional plan as well as the Social Value and the Health and Social Care Regional Integration Fund.

The Social Services and Well-being Act (Part 2, Section 16) places a duty on local authorities and local health boards to promote the development of not-for-profit organisations to provide care and support for carers, and preventative services, in their areas. They must also establish regional forums to support social value-based providers. The aim of the forum is to encourage a flourishing social value sector which is able and willing to fulfil service delivery opportunities. The purpose of the forum is to: maximise the positive outcomes and well-being of local people; influence local service provision; and add value and focus to what matters to people in a way that exceeds exclusively monetary value. In this event and report, 'social value organisations' is an inclusive term and includes not-for-profit, community and voluntary, third sector and service-user led organisations, social enterprises and cooperatives.

The event was very successful based on the number of attendees, the quality of the presentations and films, the workshop discussions, and the feedback. The event provided an opportunity to learn from 'on the ground' experiences of how groups deliver and measure 'social value' to improve wellbeing alongside promoting awareness of the plans of the RPB. This includes co-producing a population needs assessment, and addressing these identified needs through investing in a regional plan through a Health and Social Care Regional Integration Fund.

The feedback from the event workshops will be evaluated as part of a piece of work being undertaken by Leon Quinn of the Social Effectiveness Research Centre and funded by the RPB. This work will provide recommendations on how partners can work together to promote social value in Cwm Taf Morgannwg.

"We are all like family basically...definitely enjoy coming to like a space where people know what I'm going through and I understand what they are going through to..." Young carer, Barnardo's Cymru Young Carers Service.

'It's important to be able to keep it simple so that it is achievable for organisations in the third sector to evidence social value without negatively impacting on the people that we are helping...'

Workshop participant.

2.0 PRESENTATIONS

Link to all Social Vale Event presentations

100 Days of Engagoment	Jenny Mushiringani Monjero, Regional
100 Days of Engagement	Engagement and
Having Conversations That Matter	Co-Production Coordinator

Unfortunately, Jenny was unwell and unable to attend but provided an overview of the innovative methods used to fully involve people in co-producing the population needs assessment. The 100 days of engagement was a collaboration between the RPB and the Public Service Boards for Cwm Taf and Bridgend to inform regional plans that will influence future direction and decisions.

Through the 100 days engagement activities at least 1,183 residents across Cwm Taf Morgannwg were engaged through a variety of different engagement methods that included developing word clouds, engagement toolkits, group discussions, a roadshow, an online survey, a series of 'hackathons', and engagement of the paid workforce.

Here is a link the film: <u>100 days montage</u>. For more detailed information visit <u>100 days web link</u> or please contact Jenny at <u>jenny@rctpeoplefirst.org.uk</u>.

Social Value Cymru Social Value Cymru web link Eleri Lloyd, Social Value Manager, Mantell Gwynedd

Social Value Cymru was a three-year programme funded by the National Lottery from 2016-2019 and involved five county voluntary councils on working with:

- 25 social value organisations to measure and manage impact
- the public sector to look at social value within commissioning and procurement activity

Eleri explained what social value is and the principles adopted by the North Wales Forum, emphasising the importance of involving stakeholders and the quantification of the relative importance that people place on the changes and what contributes to that change – using expertise gained through lived experience. Eleri emphasised that by investing in early intervention and social value, this enabled resources to be reallocated to those areas that contribute the most social value to improving wellbeing.

Social Value Principles	What is social value? Social-value-cymru web link
BE RESPONSIVE	• Social Value is the quantification of the <i>relative importance</i> that people place on changes.
R BONGTON WHAT CHILES	 People experience changes (outcomes) in their lives.
RE RESPONSIVE	 Some changes are more important to people than other changes.
BE TRANSPARENT BE RESPONSIVE	 Impacts means understanding how much we are contributing to changes.

Dementia First Casework Service

Rena Sweeney / Frances Holland, Bridgend Care and Repair

Bridgend County Borough Council's The Dementia Strategy calls for "a dynamic and innovative approach" in developing services for people with dementia that focus on prevention, early intervention and the 'use of assistive technology'. The Dementia First Service is based on understanding, comfort and security, being person centred and providing continuity and trust.

The Dementia First Service includes:	Social Value Objectives include:
 advice and assistance accessing grant funding and benefits maximisation help with form filling advice on a range of services/organisations a healthy homes check trusted assessors 	 maximising income obtaining grant funding crisis prevention reducing falls risks helping families and carers promoting a vibrant third sector

Due to stronger links with health and social care partners, particularly the community mental health team, it is estimated that the number of referrals for people with dementia has increased by approximately 78% compared with trends pre-ICF investment.

"People with dementia often feel they don't need any help. The service was put in place to enable this lady to be safe in her own home. Without this support, patients would need to go into long-term care environments more quickly. Services that help people live safely in their homes not only makes people happier, but help them to remain independent which gives them a far better quality of life, where they can carry on as normal a life as possible."

Statement from public service professional.

Barnardos Cymru Young Carers Service

Gemma Dunning

Link to young carers films

Quotes from these remarkable films.

"If I had to crawl the whole way from Merthyr to London Albert Hall, my daughter needed to see me in that Albert Hall and see how proud I am of her." Parent of young carer.

"It's something for me to do and instead of being in the house stuck in my bedroom it just makes me feel that I'm in a good place and I feel happy with Barnardos." Young carer.

Cynon Valley Organic Adventures Link to Cynon Valley Organic Adventures film

Janis Werrett, Director

Quotes from this remarkable film.

"It's given me a headstart to get a job when I'm older... I didn't know how to use a drill before I came here."

Young person.

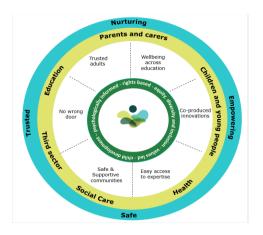
"I've seen some massive changes in children being in the outdoors to the point where they don't recognise the person that they used to be... After spending years in school when they are excluded from mainstream due to a lack of educational skills, when they come here they realise that they do have skills."

Janis Werrett, Director.

NEST / NYTH

A regional approach to children and young people's mental wellbeing

Nia McIntosh, Regional Commissioning Unit, CTMRPB



The CTM Regional Plan, Social Value and the Health and Social Care Regional Integration Fund

- NYTH/NEST Early Help and Enhanced Support to Children and Young People
- NEST Framework launched in summer 2021/
- Developed by NHS Wales Health Collaborative.
- Co-produced by families and a range of stakeholders.
- Supported by Welsh Government.
- Three documents produced: 'A Bird's Eye View'; 'What you need to know?'; and 'If you need to know more?'.
- Implementation plans to be produced by regions expected by 31st March 2022.

Sarah Mills and Geraint Evans, Regional Commissioning Unit, CTMRPB

- Core resources should support programme.
- Match resources can be made up of two key elements, monetary and wider resources. Monetary match funding consists of direct financial contributions from core funds or other non-Welsh Government grant sources. The wider resource contribution consists of staff time, volunteer time, and use of premises and/or facilities.
- The national delivery model embedding fund (70% intervention rate from Welsh Government and 30% from RPBs) is for projects that have been tested and evaluated as having had good impact.
- The accelerating change fund (90% intervention rate from Welsh Government and 10% from RPBs) will develop and test new models of care. This fund should be used for new ideas or projects that have not moved beyond initial concept phase, which need further development and testing of proof of concept.
- The Regional Intergration Fund's (RIF's) key principle is for all partners to commit

- A new five-year revenue fund, the Health and Social Care Regional Integration Fund (RIF) was approved by Ministers in July 2021 to build on the work and learning of the Integrated Care Fund and Transformation Fund to date.
- The RIF will run from April 2022 to March 2027 and will further focus on new ways of integrated delivery of health and social care services across Wales.
- All activity funded by the RIF must directly support development and delivery of the six national models of integrated care which are:
 - community based care prevention and community coordination
 - ✓ community based care complex care closer to home
 - promoting good emotional health and well-being
 - supporting families to stay together safely, and therapeutic support for care-experienced children
 - ✓ home from hospital services
 - ✓ accommodation based solutions

to growing their replacement match to 50%, with the aim being a 50/50 intervention rate from Welsh Government and RPBs by the end of the five-year fund.

Link to Cwm Taf Morgannwg Regional Partnership Board website

3.0 WORKSHOPS

Introduction and Discussion

How do we measure social value? What can we build upon to promote and evidence the impact of our work? Leon Quinn, Social Effectiveness Research Centre

Virtual workshops took place with six 'break-out' rooms and with notes being taken. This is a summary of the key points. Some changes are made to make the information as clear as possible. The full notes are made available to the evaluator for the evaluation.

Question 1 - What tools does your organisation currently use to measure

its impact and/or social value?

- No set format. Think of beneficiaries and what's best.
- Annual video with anonymous journeys around mental health.
- Outcome star and other distance travelled tools.
- Most significant change used as a process to capture case studies.
- Qualitative: surveys, questionnaires, case studies.
- Quantitative: Warwick-Edinburgh Mental Wellbeing Scales (WEMBS), Patient Centered Assessment Method (PCAM), Emotional Quotient (EQ).
- Referral forms to capture initial status and exit interview/survey to capture post intervention i.e. six-week courses.
- Basic cost analysis of volunteer hours.
- Assemble used with volunteers reporting how often they volunteer and their experience of volunteering.
- Studio used to make action plans and measure progress.
- Registers, feedback and evaluation forms, facilitation of meeting members.
- Anecdotal, videos, digital, apps.
- Lamplight system where score measures the distance travelled.

"Your story" form is a case study which the client completes themselves. They can explain how the support has affected them in their own words.

Question 2 - What, if any, difficulties has your organisation faced in doing so?

• The financial cost and time it takes to research and implement systems and collect the data which takes time and resources from helping people.

- Increasing pressures on providers having to prove outcomes and social value for funding. Unrealistic expectations to 'prove' their work is having an impact.
- Lack of consistency between Merthyr, RCT and Bridgend as to how social value is applied. This triples the work involved when delivering across the three areas.
- A baseline model with opt in/out sections.
- Issues collecting data: people don't have access to internet/devices while feedback using paper forms can be time consuming.
- How can we measure long-term impact?
- How often is feedback required? Why are we requesting information so often?

'Tools needs to be scaleable/flexible to be used by larger and smaller organisations.'

One key point/message the group wants to share/feedback

- To be more consistence in our approach.
- To have training and increased understanding on tools.
- Creating more appropriate tools that can transfer qualitative and quantitative data to show social return on investment such as customer survey satisfaction and the WELLBYs.

'Tools need to be simple, useful and meaningful.'

Question 3 - What specific further steps could the following

organisations take to make it easier for you to measure and/or

promote your social value?

- Training needed for organisations to be able to use tools correctly.
- Resources must not be taken away from the frontline.
- Do the research looking into the best package available for measuring social values and advise the sector of which programme to use. Then provide follow up training for how to use the system and ongoing support.
- Pauline from Valleys Kids added that there needs to be a realistic and acceptable way to measure social value so that everyone is measuring in the same way and in a way that is understood by health board and local authority.
- Would be good to gain clarity from the below organisations and maybe set up a task and finish group to pilot ideas and tools to find out which works best and to come up with a more standardised approach all round.
- Guidance of what commissioners want is needed and what system to use, as well as having a clear idea of what to provide.

'Knowing which one of these organisations will be best to support us in how we create evidence of social return. Consistency is needed in tools used across the board.'

a) RPB/Regional Commissioning Unit

- Pay County Voluntary Councils (CVCs) to deliver training to organisations.
- Understand what they (the commissioner) want with a clear steer of what is required.
- Too wide a brief to measure social value across all areas. Better to focus on one area of delivery first such as children and young people.
- Examples of measuring physical and social value to share with organisations.
- Ensure that evidence to be gathered is known in advance (not changed afterwards).

'Need a standard toolkit with 'if it applies to you' sections.'

b) Your local CVC (BAVO/VAMT/Interlink RCT)

- Do the research (on what tools to use).
- Match similar sized organisations.
- Share good practice.
- Representation on RPB take back concerns.
- CVC staff to support smaller groups with data.
- Help to make links with other possible support such as college student placements.
- Assist partnership working to generate and evidence added value to organisations.

'Provide more training for organisations on how to do it and use different tools.'

c) Any other organisation (such as health board, local authority, the Social Value Network itself).

- Local authorities and the health board need to work with groups, openly communicate and share ideas more readily with other organisations and have clear expectations.
- If the direction is coming through the RPB and delivered by CVCs, there needs to be an awareness of third sector capacity and having the support they need.
- CVCs offering more support around social value: what it is it, where and when support is needed.
- Savings to the state are hard to prove (for a provider). The role of the commissioner is to identify costs and savings to get accurate evidence on social return on investment.
- Health board and local authorities make it easier for organisations to respond and gather more evidence by being more flexible and less prescriptive about data as with more generic themes (such as when using TOMS).

'Practical workshops - stripping it back, using examples.'

One key point/message the group want to share/feedback

• Increase training and awareness of tools, simple, useful and meaningful.

• Task and finish group was suggested.

'The importance in being able to keep it simple so that it is achievable for organisations in the third sector to evidence social value without negatively affecting the people that we are helping such as not having time length demands, complex IT systems or requiring many questionnaires.'

4.0 EVENT EVALUATION

Excellent (75%)	Very Good (25%)
Comments	·
 Interactive, engaging and well- 	co-ordinated.
	ople should only be invited to speak to put elevant information, apart from summarising the