

## **Response to Members' Questions**

### **re Review of Covid-19: Update to the Interim Review of the Response by East Suffolk Council to the Covid-19 Pandemic**

**– 17 February 2022**

#### **Current demand for support through Home But Not Alone**

- (a) The table notes referrals for January 2022; what is the nature of these and does this suggest a long-term need in view of the current gloomy economic prognosis? What is the projected need for this service? (Councillor Gooch)**

There has definitely been an increase in referrals – across a number of different schemes and services - relating to cost-of-living increases and we anticipate that demand will increase further over the coming months. More urgent requests for help are being received for help with food and heating fuel due to the inability of individuals and families to make ends meet, with fewer referrals due to Covid-19. It is clear that some of those who were 'just about managing' to make ends meet are no longer able to manage due to across-the-board price increases and static wages.

Demand for the Local Welfare Assistance Scheme has increased to the extent that the processing time has just been increased from 5 – 10 days. This has meant that the Council is increasingly having to provide emergency support to people (food parcels or fuel vouchers) whilst they are waiting for their LWAS support requests to be processed and agreed. The report identifies the key support that is currently available to residents, including the pinkorange four-week food box offer but many of the requests that are being received are for help immediately.

**(b) Re 2.2 - In view of the low activity on Home but not Alone, do you think that this is adequately serving the need, or could there be more intervention at a local level? (Councillor Beavan)**

In some communities, those in need know who to go to and therefore don't need to come through Home But Not Alone but it provides a safety net for individuals and families in those communities where community-led/mutual aid support is not available or not everyone is aware of it.

There is also the aligned Suffolk Advice and Support Service offer (calls go through the same system as Home But Not Alone) which is still seeing high demand, as is the Local Welfare Assistance Scheme. Referrals through HBNA are increasingly complex and multi-faceted and many involve safeguarding and vulnerability issues. However we would always welcome and do what we can to enable, local responses to local problems.

**Community networks and emergency planning**

**(c) One community group in my ward (Kirkley and Pakefield) applied for an ECB grant to fund dedicated technology (a laptop and phone). Is the council maximizing 'teching up' opportunities for community groups, for example by supplying, if available, surplus laptops etc.? (Councillor Gooch)**

We have supported a number of community response groups with tech kit through our four specific grant schemes - Community Support, Bounce Back, Community Restart and Boost but this is an area where we could potentially do more.

**(d) Re 3.7 - How do we maintain interest in emergency plans – coastal flooding, climate resilience? (Councillor Beavan)**

Community emergency plans are focussed on responding to an emergency e.g. coastal flooding or fire (which may be viewed as impacts from the climate emergency), but we do not consider climate resilience. We should not conflate the two types of 'emergency'; one of which requires the Local Authority to work with the Emergency Services and other Category 1 responders to protect the public and the environment from immediate danger.

A clear and imminent threat provides the impetus for many spontaneous volunteers, as has been seen throughout the pandemic. This initial enthusiasm tends to wain when the immediate need reduces and the focus of attention switches to alternative priorities. Without the real or perceived risk, the impetus for engagement in emergency planning declines and the Joint Emergency Planning Unit (JEPU)

struggle to find individuals or groups willing to participate in the develop of plans. We are left with individuals, normally members of the parish or town council, that have the time and energy to devote to altruistic activities to benefit their community.

In the future, Local Authorities require a mechanism for using spontaneous volunteers. The current Government guidance (and learning from Grenfell) suggests that the setting up of a Volunteer Reception Centre (VRC) to manage spontaneous volunteers is crucial in larger scale emergencies. The Suffolk Resilience Forum (SRF) has an aspiration that this work will be led by the Collaborative Communities Board (CCB), in conjunction with Community Action Suffolk (CAS), and discussions are underway to facilitate this.

### **General**

**(e) Re 2.3 2.9 - There is a high number of informal mutual aid groups. Do we need to devise an admin and governance model fit for the present technological age as well as traditional structures of committees etc in the good Neighbours Scheme? (Councillor Beavan)**

Mutual aid groups have really made a difference during the pandemic, but no-one ever imagined that mutual aid would be required to continue for this long. There is a question about whether and when mutual aid becomes good neighbourliness and community spirit, but creating sustainable community support to address the needs that are emerging in our communities may need more than mutual aid. A Mutual Aid group would not be able to sign up to Warm Handover as it does not have the governance or policies. Running a GNS is not onerous, it does not require lots of funding either, but does have many positives including that it provides good practice and protection around insurance, DBS checked volunteers, confidentiality and GDPR, safeguarding etc.

**(f) Re 2.6 - Great potential for Warm Handover scheme to act as a portal for all the different help?**

That is the intention – that we drive as many organisations and groups as possible to use Warm Handover so that help is provided in an efficient, consistent and co-ordinated way. As shown by the diagram, it is an effective way of resolving multiple issues without the customer having to tell their story multiple times which can be really difficult and demoralising. The aspiration is that Warm Handover is not just about referral into specialist agencies and services but into community support as well e.g. Good Neighbour Schemes, Men's Sheds, Lunch clubs for Over 60's etc.

**(g) Re 2.8 3.6 - Do volunteer schemes integrate with RVS Good Sam app? How is that working now?**

RVS are still unwilling/unable to share any data about volunteers registered – enquiries were made earlier in the pandemic and there were very few volunteers registered in North East Suffolk and even less regularly signing “on duty”. Volunteer Suffolk is now the preferred and collective method of recruiting and deploying volunteers into groups and organisations across the county.

**(h) Re 3.3 - Can we be included in the Financial Inclusion Task and Finish Group? (Councillor Beavan)**

The Task and Finish Group is part of the structure of the Community Partnership Board, but other members are welcome to join the meetings.

**(i) Re 3.5 - How do the loss of pubs affect social isolation? Is there an answer? (Councillor Beavan)**

Quote from CAMRA: ‘Whilst it would be wrong to link alcohol consumption with positive mental health, many pubs are about much more than alcohol. In some villages and towns, they are now the only communal area, where regulars, neighbours and visitors can check in on each other. Even a polite two-minute chat can be a vital source of contact for those who would otherwise be isolated and lonely.’

Loss of pubs combined with lack of disposable income for people to visit pubs is clearly having an impact. A number of pubs are part of the Meet Up Monday’s scheme locally and provide a venue and free tea/coffee for local people on a regular basis, which can be a lifeline for people who are isolated. We could encourage more pubs to sign up as venues but also encourage people, where possible, to use or lose their local pubs.

**(j) Vaccination volunteers offered to help with the boosters in September to ensure that people could access a local and timely centre. Why were they ignored and then NHS staff had to be pulled off routine care to administer booster in a panic over Xmas? Are there any plans for the next booster or regular annual jabs? If we don’t use volunteers, we lose them. (Councillor Beavan)**

Community Action Suffolk were engaged with Suffolk and North East Essex (SNEE) ICS Workforce/vaccination taskforce and supported health colleagues to recruit and deploy hundreds of volunteers to the many pop up and established vaccination centres at short notice on the rollout of booster vaccinations. Norfolk and Waveney ICS did not utilise this opportunity but used Voluntary Norfolk who have limited presence in North East Suffolk. However discussions are underway between CAS, ESC and the CCG about improved connections in this part of Suffolk.

Following the launch of the volunteer campaign by the UK Government in early December '21 in response to the Omicron variant, the SNEE programme's Workforce Bureau was inundated with kind offers of support. The programme worked tirelessly to onboard as many eligible people into appropriate roles as possible, at pace. For example, the Bureau recruited and onboarded 644 individuals into a variety of roles within the three-week period leading up to Christmas. This was a combination of redeployments, new staff to the workforce 'bank', and unpaid volunteer marshals. Patient safety and data protection are priority consideration when onboarding new staff into the programme. This naturally defines the roles that volunteers can be deployed to, aligned to policy and legislation.

The decision to move to a hub and spoke vaccination model rather than a single site delivery model in the Norfolk and Waveney area was taken collectively. A number of factors were taken into account in reaching the decision, including the ability to staff large clinics whilst running practice services and sections of the population who had been unable/unwilling to travel to Reydon from Halesworth, Beccles etc. Volunteers across the CCG area were asked to support the booster campaign over the Christmas period, albeit at very short notice given the imperative to get the clinics up and running. The Sir John Leman High School site was stood up in December for the SWAN area in response to the national ask to significantly ramp up vaccinations. Councillor Bevan was contacted by colleagues planning this 'pop-up' vaccine clinic to understand any volunteer capacity that would be able to support the clinics.

N&W CCG is highly appreciative of all offers of volunteering support from communities and very keen to ensure we continue to work with Community Action Suffolk and Voluntary Norfolk to ensure all local residents who are interested in volunteering can access the appropriate guidance and resource to enable them to volunteer. There is a close working relationship between the Lowestoft PCN and the Lions in Lowestoft, who have supported the Kirkley Mill Vaccination Centre since January 2021 come rain or shine.

### **Looking Ahead**

**(k) How can this network and the volunteers work with integrated social care at social prescribing and community care? Are there professional barriers between the NHS and volunteers that need crossing? (Councillors Gooch/Beavan)**

Building upon the success of the booster campaign, as an Integrated Care System (ICS), Suffolk and North East Essex are currently creating a reserivist model that will link in with broader volunteering programmes as part of developing our 'One Workforce Strategy' in collaboration with Health, Social Care and VCSE partners). We will seek to proactively use this to meet workforce needs of the ICS across the totality of its delivery responsibilities, where this is feasible. This includes, but is not limited to, future phases of the C19 vaccination programme which have yet to be announced by the UK Government.

There is currently a pilot in Ipswich and East Suffolk Alliance area to link Good Neighbours to community care providers to provide additional support as an interim/emergency measure. However it is important to be recognised that volunteers should not be a replacement for paid workforce and cannot undertake CQC regulated care. The principles of volunteering should be considered at all times.

NHS N&W CCG are working with Voluntary Norfolk and Community Action Suffolk to support a collaborative and strategic approach to volunteering in Norfolk and Waveney, led and informed by the VCSE sector who are experts within this field. We will continue to work with and support the VCSE sector as we move towards the Integrated Care System for Norfolk and Waveney and the Integrated Care Board becoming a statutory body.