



**Bristol Ageing Better Programme Board
Tuesday 29th September 2015
Age UK Bristol, Victoria St**

Present: Adam Rees – BAB (AR), Alan Carpenter – AUKB (Chair) (AC), Bianca Rossetti – BAB (BRo), Brian Richards – OPPB (BR), Claire Miller – LinkAge (CM), Dominic Murphy – Cities of Service (DM), Gloria Morris – BOPF and Goldies (GM), Guy Robertson – Positive Ageing Associates (GR), Judith Brown – BOPF and BAB (JB), Kay Russell – BCC (KR), Mark Baker – AUKB (MB), Mina Malpass – RSVP (MM), Mirella Brittan – CRUSE Bereavement Care (MBr), Robin Means – UWE (RM), Ruth Richardson – BAB (RR), Silvia Jimenez Cruz – BAB (SJC), Steve Davies – Bristol CCG (SD), Zehra Haq – Dhek Bal (ZH)

Apologies: Bob Maggs – RSVP (BM), David Cottam – St. Monica Trust (DC), Mandie Lewis – Carers Representative (ML), Ruth Bamford – BLF (RB), (KS), Keith Sinclair – Carers Support Centre (KS)

Not present: Cherry Hartley – Malcolm X Elders (CH)

1. Welcomes, Introductions, Apologies

AC welcomed all to the meeting. AC introduced AR and SJC to their first Board meeting. AR introduced himself and spoke briefly about his career history in the Third and Public sectors, and SJC introduced herself and spoke about the work she's been doing during her first two months with BAB. All present introduced themselves.

2. Declarations of Interest

AC mentioned that MM's involvement with RSVP is relevant to discussions about social prescribing. AC reminded the Board that Linkage (CM) and St. Monica Trust (DC) are the delivery partners for the first two CDOP areas.

MB mentioned that he has worked closely with DM for the past 20 years – a positive relationship that facilitated the development of the Memorandum of Understanding between BAB and Cities of Service and DM's placement on the Board.

BR reminded all present of the Code of Conduct regarding pecuniary interests (NB: this was a general reminder not directed at any particular person or organisation present).

3. Minutes of last meeting (For approval and agreement)

The minutes were approved as a true and accurate record. SD asked that future minutes include a glossary of terms, names and acronyms at the end for clarity. (NB: following additional requests

from Board members, these and future minutes will also include organisations alongside names at the beginning and a table of action points at the end with responsibilities and deadlines.)

4. Chair's Opening Remarks and Introduction to Agenda

AC reiterated the primary purpose of the BAB partnership; to provide strong leadership for older people in Bristol. He mentioned the need to be realistic about BAB's areas for improvement.

Following AC's remarks, GR mentioned the importance of maintaining awareness of where the BAB Board fits with others, such as the OPPB.

The BAB animation was shown in full. The animation was launched at the Celebrating Age Festival launch event on 27.09.15.

5. Performance and Progress Report (For information and discussion)

RR introduced the performance & progress report and clarified the following points:

- The 5-year budget for the programme was put together almost a year ago, and the first year of the programme is being viewed as a developmental year. The BLF encourage a 'test and learn' approach and are accommodating for movement in the budget, so overspends are not necessarily a cause for alarm in the first year. RR and AR are in ongoing conversations with the BLF about the budget and the BLF will be made aware of any movements or overspends prior to each Board meeting.
- The staffing costs ran slightly under budget due to the delayed recruitment of the Programme Director and the Older People's Engagement Worker (the latter will be advertised once the terms of the CCF have been finalised)
- Comms is likely to be slightly over budget next quarter due to the development of a new website
- The Evaluation budget appeared as a slight overspend due to the costs not being allocated correctly – some cost should have been allocated to the Community Researchers budget. This will be amended for the next report.
- The Public Understanding budget showed an overspend due to the creation of a longer film than originally budgeted for (90 seconds became 150). However, the money that will be generated through licensing the film to other Ageing Better areas including Cheshire and Camden will bring money back to this budget. RR is hoping to have more interest in licensed versions at the Ageing Better networking event in Leicester on 08.10.15.
- The volunteer hours are incredibly encouraging, with 100 hours from the Babbers radio team alone

RR gave summaries of each of the current projects as below:

Age Friendly City

The amount of financial support from BCC for this activity was TBC at the time of the meeting; BCC offered matched funding for the AFC conference and baseline report and so the confirmed figure will be high. RR thanked KR and her colleagues for their support. The final AFC baseline report will be sent to all Board members soon.

BAB and BCC are looking to advertise the role of AFC Consultant soon, with the target start date being the beginning of November. BR asked whether BLF policies would be applicable to this recruitment. RR explained that the role has been pre-agreed with the BLF and will sit comfortably within BAB's current and approved commissioning procedures.

Social Prescribing (SP)

This activity is not due to begin until year 2. Preparatory work is beginning now that AR is in post. Please see agenda item 9 below for more information about the SP model.

Community Development for Older People (CDOP)

CDOP ran an underspend of £24k this quarter due to both contracts still being at the negotiation stage and having not yet drawn any funding. Both the BAB Programme Team and the delivery partners look forward to both areas of CDOP being up and running in the near future.

Community Chest Fund (CCF)

The terms of this activity are still a sticking point for the BLF as under the Terms and Conditions of grant BAB is unable to make grants. The BAB Programme Team are currently working with the BLF to develop a way to provide one-off resources or equipment to chosen organisations without paying them a grant. It's possible that BAB may need to procure the resources and give them to organisations, rather than giving them any money. Once the paperwork for this commissioning is signed off by the BLF it will be open for bids (hopefully in early 2016).

Community Researchers (CRs)

RM shared that the CRs are currently very busy with the asset mapping exercise in Greater Fishponds – the data obtained from this exercise will inform the delivery of CDOP in the area. Several CRs also volunteered at the Celebrating Age Festival launch event, and will also support the Age Friendly Walk in Southville on 17.11.15. The use of the money currently in the CRs' budget will be determined by the volunteers themselves, and will likely be used for some additional formal training.

RM confirmed that the recruitment of more CRs is currently underway, with people signed up for information events on 13.10.15 and 02.12.15. RM asked Board members to promote the opportunity.

The volunteer hours for the CRs is difficult to calculate as the CRs work across the city and don't log their time, but the hours for this quarter would certainly have been in excess of 100.

Group Work/Peer Support (GWPS)

Since the last meeting BAB have offered pilot contracts to seven organisations to cover the five target beneficiaries, subject to the receipt of satisfactory policies and references. The expectation is that the pilot projects will garner a good evidence base for future GWPS commissioning.

Combining Personalisation with Community Empowerment (CPCE)

Lal Heaton will begin leading consultation work from October – her post is based within BCC but funded by BAB.

Richard Kimberlee has begun working in different Bristol communities with Social Workers to develop life plans with older people.

The funding for this activity is likely to be higher than £15k due to the offer of matched funding from BCC.

SD queried whether this activity is linked to the CPCE work currently happening in Bedminster. RR confirmed that the two are interconnected.

The Board gave the following comments about the format of the report:

- SD shared that in his experience of using RAG rated progress reports, the more concise the information the better. This is also an important factor in respecting the level of the Board; further details can be teased out during the meeting, and concise information makes it more likely that Board members will come to meetings armed with constructive questions.
- KR suggested that we need not be afraid of too many red or amber ratings, especially as the report allows for explanations. RR explained that the reason so many projects are listed as green is that they haven't yet started. KR suggested that for future reports non-active projects be coloured grey to avoid confusion.
- GM suggested that future reports include the author's name, so that those reading them know who to contact with queries. GR suggested each heading lists the project lead.
- M suggested that he, AR and RR discuss a simple way to report on evaluation data gathered on each project.
- RM asked if a small document could be prepared by the Programme Team illustrating how each of the 16 activities fits together. MM added that a map format would be helpful. GR kindly offered to create this.
- GR asked whether risk levels could be included in the progress report going forward

RR will inform the Board once the report's format has been discussed and/or agreed by the BLF.

6. Finance Report (For information and discussion)

AR briefly talked through the report explaining that funds from the Director role have been used to cover the additional time spent by filling in for the Director post before AR started. MB explained that some overspends, such as that for Public Understanding, will continue to appear in Year 1 reports due to the overspent budget covering the whole year.^[R1]

SD asked whether the budget will increase for the next report. AR confirmed that it will, due to the hiring of new staff and signing of contracts by delivery partners.

AR confirmed that the £94k underspend is likely to be spent in the next quarter; this could end up being an overspend due to the changes to the director salary and the continued impact of the Public Understanding overspend.

AR will provide a detailed financial update at the next Board meeting.

7. Risk Management (For information)

AR briefly updated the Board on the development of a risk register. AR will provide a report at the next Board meeting including the risk management structure and risk register. The report will likely be based on a 'raw risk', which considers the likelihood of risk against the potential impact of it happening. GR suggested that it may be useful to identify any risks to sustainability as well as to start up and delivery. On this note, GR suggested that the BAB Programme Team, project leads and delivery partners spend a half day looking at sustainability.

SD asked whether it may be appropriate, once the first report is run, to agree a 'risk threshold' below which the Board can agree for the Programme Team to monitor and above which must be reported to the board. All agreed that AR provide a complete register to the next meeting and look at condensing it for future meetings.

KR said that she would appreciate the opportunity to attend a workshop on risk. RR reminded all that one was run last November, but suggested that it may be worth arranging another. KR also suggested that the report identifies general issues as well as identified risk.

AR shared that on 08.10.15 he, RR and JB will be attending an Ageing Better networking event, which will be a good chance to discuss with other areas how they are identifying and reporting on risk and issues.

8. Cities of Service / BAB Memorandum of Understanding (For discussion and agreement)

DM introduced the MofU, stating that it is as expected by BAB and CofS; based on principles rather than set figures. The difference between the two drafts sent to the Board is that the second includes BAB metrics as approved by the BLF.

RR stipulated that the second paragraph of the document will be replaced by BAB's official positioning statement. MB shared that he felt very positive about the collaboration and that it would make volunteers' experiences easier. DM shared that he sees BAB as a key pilot programme for CofS.

GR asked what results are expected from BAB's involvement with CofS. DM mentioned a recent meeting between him, RR and Nesta, where it was agreed that the targets for the collaboration be closely aligned with BAB's, such as the 10% increase in older volunteers within two years. DM shared that he is keen to ensure targets are agreed on BAB's terms rather than Nesta's.

CM shared that LinkAge have recently seen a drop-off in their volunteer numbers, and would like to encourage new volunteers as well as assisting current ones. CM shared that CofS could benefit from a strong media campaign aimed at inspiring people to volunteer.

GR asked what platform volunteers will use to get involved. MB mentioned that there are currently many barriers that stop people from volunteering, a key one being the feeling that one's skills aren't needed or valued by society, which makes it important to have an accessible shared platform. This is likely to be Voscur. MB shared the view that it may be useful to avoid exclusive use of the word 'volunteering', which has middle-class associations and is not as attractive to those with a lack of

confidence in their assets. MB stressed the importance of Bristol's voluntary sector working together as a non-competitive partnership; the sharing of volunteers would be a good way to show this to the outside world.

DM shared that one of CofS's key objectives is the recruitment of over 50s as active volunteers. One challenge they will face is how to accurately measure this objective, as some volunteers will be working for organisations that are not BAB partners.

JB shared that there are a lack of volunteers aged 40-60, and it should be made easier for people to begin volunteering before retirement to ease the transition. It could therefore be useful to speak to large businesses in Bristol and ask to speak to employees nearing retirement. ZH shared that many of the volunteers at Barton Hill Settlement are from the private sector, and it could be worth creating a directory of services to inform them of opportunities through BAB partner. RR commented that this should tie in well with what DM is planning. CM mentioned neighbourly.com, which provides a similar service for the private sector.

SD mentioned that from the groups of over 50s he's spoken to, many people don't see themselves as being in the bracket that BAB is targeting.

AR shared that he would like the Board to look into the best way to support training for volunteers with all partner organisations, such as running First Aid training through BAB that is applicable to roles at various organisations.

DM shall produce a document including targets and figures for BAB's collaboration with CofS in time for the next Board meeting.

9. Public Health Social Prescribing Framework

RR shared her experience of the Voscur-organised social prescribing conference held on 10.09.15, at which Public Health (PH) presented their draft framework for SP that has been put together over the past six months. The model focuses on a 'health and wellbeing hub' for people with non-medical health conditions, which signposts people to support and services via telephone interviews. The hub is not just designed with social prescribing in mind, and will also be used for goals such as weight loss and smoking cessation. The role of Hub Manager is likely to be advertised for and appointed soon. It is believed that PH's involvement with social prescribing will end with setting up and funding the hub. The model will not be imposed upon GPs who already have an established and well-running social prescribing service. RR shared that this model was not widely supported by Bristol's voluntary sector, especially those groups who had done preparatory work establishing relationships with GP surgeries and individual GPs. There is concern that the knowledge and experience of the voluntary sector could be lost, and the hub could become a 'dumping ground' rather than a way for GPs to engage with their patients' overall wellbeing.

AC seconded the concern that the delicate relationships that the voluntary sector has built up with GPs could be affected. MB concurred, stating that RSVP have worked to build up positive

relationships with 32 GP practices throughout Bristol and it's important that this work doesn't get lost.

GR mentioned a meeting he attended a year ago with eight GPs, where all expressed enthusiasm for SP on the grounds that the process be simple and that they could have faith in the outcomes as per their Duty of Care. GR expressed the view that GPs are unlikely to have confidence in this model as the GPs have no control over what happens to patients once they contact the hub, and the vulnerable patients they will be encouraged to signpost may not have the confidence to pick up the phone. For SP to work it must be asset-based and include face-to-face contact.

RM raised a concern that the model may focus more on unburdening GPs than on supporting isolated older people. RM suggested that if BAB's target outcomes are unlikely to be reached via this model it would be unadvisable to put BAB money in.

There was a general agreement from the Board that this 'one-stop-shop' model will lose personal contact and richness that GP-given prescriptions would give. JB shared that she felt the model was too bureaucratic and impersonal, and could run the risk of people losing trust in their GP. SD shared that he felt the model was disconnected from the original reason the Council supported the implementation of SP. GM said from what she's heard of the model it won't work.

MB summarised the discussion by saying that PH is a key partners of BAB and it's important that BAB engages with them. Many people have been involved with the development of this model, not just organisations that work with older people. BAB has always seen SP as a guided conversation based on a coaching approach, which is very different from what Public Health is proposing. Mark expressed the hope that Jo Copping (JC) would take a different kind of model to the Health & Wellbeing Board in October following feedback from GPs and the voluntary sector.

KR let the Board know that she has noted its concerns would speak to JC and Mike Hennessey prior to their meeting with AR and MB w/c 5th October. SD will be present when the model is presented to the Health & Wellbeing Board on 21.10.15, and will ensure the Board's concerns are mentioned.

10. Evaluation of Meeting

GR mentioned that meeting was chaired well.

11. Date of next meeting and 2016 meetings (For discussion and agreement)

All present were happy for meetings to continue to happen every two months. BRo will send out a Doodle Poll with suggestions for future meeting dates, and will call BR to discuss. Please note that the next meeting will likely be after the agreed date of 03.12.15.

Action Points

<u>What</u>	<u>Who</u>	<u>Deadline</u>
Promotion of the recruitment of community researchers	All Board members	Before second information event on 02.12.15

Discuss Board's concerns about SP with JC	AR, MB	06.10.15
Draft a small document illustrating how each of BAB's 16 activities fits together.	GR	Ideally by next Board meeting
Report outlining risk management structure and risk register	AR	Next Board meeting
Document including targets and figures for BAB's collaboration with CofS	DM	Next Board meeting

Glossary of acronyms and organisations

AFC: Age Friendly City

AUKB: Age UK Bristol

BAB: Bristol Ageing Better

BCC: Bristol City Council

BLF: BIG Lottery Fund

BOPF: Bristol Older People's Forum

CCF: Community Chest Fund

CCG: Clinical Commissioning Group

CDOP: Community Development for Older People

CofS: Cities of Service

CPCE: Combining Personalisation with Community Empowerment

CR: Community Researcher

GWPS: Group Work/Peer Support

MofU: Memorandum of Understanding (a draft agreement between BAB and Cities of Service)

Nesta: A registered charity focused on innovation in the fields of health, education and the Arts. Funders and supporters of Cities of Service alongside the Cabinet Office.

OPPB: Older People's Partnership Board (Bristol City Council)

PH: Public Health

Raw risk: the level of risk faced by an organisation before any internal controls are applied

RSVP: Retired and Senior Volunteers Programme

SCDA: Southville Community Development Association

SP: Social Prescribing

