

This summary looks at the key findings of the independent evaluation of the West Sussex

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- POPP is meeting a previously unmet need for low level and prevention services particularly around practical help, welfare benefits take up and social isolation.
- The integration with other services is key to the success of POPP and it is acknowledged that better integration is needed at a local level particularly with local primary care services.
- The amount of time and energy taken up by the implementation process was significant and the tendering and recruitment processes particularly drawn out. The resulting more limited period for the pilot makes it difficult to show long term benefits at this stage.
- The role and contribution of the voluntary sector has been a key part of the way POPP has developed and is seen by older people as a vital part of the service.
- The pilot has challenged organisations and agencies to change their ways of working to work in partnership. The commissioning process has been a challenge for all involved.

For example, a 92 year old woman living alone had been referred to the CPT by her son and within a couple of days had received meals on wheels and an additional Zimmer, smoke alarms had been fitted by the Fire Service and she had been put in touch with a housework agency that she could afford. She commented

CPTs had strong links into the locality teams they had worked for. These staff connections, coupled with many CPTs being based in Adult Social Care locality offices, created a route to fast track clients into more acute or higher level services. However the loss of experienced staff to the locality teams in a period of local and national shortages of suitably qualified staff was considered to have created pressure on the locality teams and, in turn, pressure on CPTs to pick up more needy clients than had been intended.

The employment of the CLWs by voluntary organisations was acknowledged as creating structural and management problems for the CPTs and for the employing voluntary organisations. However the inclusion of the voluntary sector within the CPTs had brought with it staff with different and relevant experience and connection with the specialist skills and expertise of key voluntary sector providers.

The inclusion of health, social care and voluntary sector knowledge and experience within the teams was recognised as enabling the CPT to be seen as a more independent community based service which encouraged older people to use it.

The NN perspective

The initial Gap Analysis undertaken by each NN enabled a base line of community provision and activity to be established and a fuller picture to be developed of the varied levels of existing activity in the area. This was seen as helping to avoid duplication, and develop potential for sharing and linking groups and resources. It was helping to identify the needs of smaller sections of the broader community and enabling groups to be developed to support them.

However, there remained concern that too much

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early stages of the evaluation the overall model was not well understood and the different pace of development of the CPTs and the NNs was not helpful to ensuring effective linkages. Delays in the tendering processes and the complexity of employment arrangements had also made it difficult to realise the full potential of the model in the first phases of POPP.

Where the model was working well there was evidence that some roles were instrumental in this. Having both the CLWs and the CEWs in place and with good communication between them was helping as was having a neighbourhood network co-ordinator with good links to the CPT. There was some evidence that things were working better where there were clear management links between the NNC and the CEWs and where the supervision and management relationships in the CPT had been positively agreed.

There were considerable reservations about adopting the same model in each area. The fit with existing ways of working was problematic in some areas, and existing partnerships and roles in some cases had to adapt or change to work with it. Equally significant was the concern that the model had been developed for an urban area and would not necessarily be able to deal with the challenges of the more rural areas.

There was concern from some stakeholders and from the voluntary sector that the relationships between POPP and the District and Borough Councils and Local Strategic Partnerships were not well developed and that this had caused confusion and overlap on the ground.

Implementation

All sides agreed that the implementation had taken much longer than had been hoped for. The tendering process was experienced by the voluntary sector as too bureaucratic, and coupled with a complex recruitment process across a number of areas and partners this had caused significant delays to the implementation timetable. As a result some of the areas had only been fully operational for a year or less when the evaluation concluded.

The tendering process had required a lot of hard work and time from voluntary sector organisations

and both they and statutory stakeholders were concerned about the stress that process had put on their capacity. Voluntary sector partners felt that insufficient time had been allowed for the development of effective bidding partnerships and it was suggested that there should have been more awareness of the potentially divisive impact of a competitive tendering process on the sector.

However, having survived the process, both sides had learnt from the experience. Interviewees said this would inform the development of voluntary sector commissioning strategies and improve the skills of the voluntary sector to deal with future tendering opportunities.

The importance of key individuals and those who *collaborative workers* in the implementation SURFHVV ZDV UHFRJQLVHG ca7 KLV FRX do' attitude in many situations was seen as having significantly helped to get the model up and running successfully.

Other benefits

- POPP was seen as having provided an opportunity to bring different skills and experience into the sector and the route for this had been the employment of the community based staff through the voluntary sector.
- Many voluntary sector organisations recognised that the profile and understanding of their organisations were raised through their involvement and that collaboration was increasing the reach of the services they could provide together.
- Many smaller organisations had welcomed process across 5 Or P wa

Conclusion

The evaluation acknowledges the challenges of the context in which the pilot was developing. West Sussex has an increasing number of people living into old age likely to need input from services and a diverse population with pockets of affluence and deprivation. The rural nature of much of the county makes transport and access to services more difficult and the needs and cultural differences of ageing BME communities in parts of the county increase the complex service needs.

Two years is a very short period over which to demonstrate long term outcomes resulting from the implementation of a preventative approach to working with older people. Results indicate short term changes and some medium term outcomes that, if these ways of working are sustained, could generate the anticipated long term outcomes.

Despite the delays in implementation and the complexity of the model the evidence of the evaluation suggests the two pronged model was an appropriate approach to adopt in the West Sussex context. Whether the same

For more information

The West Sussex Partnerships for Older People Project (POPP): Working towards prevention 2009 by Marian Barnes, Phil Cotterell, and Naomi Smith from the University of Brighton and Chris Rainey, Di Hughes and Susan Davies from West Sussex County Council is an independent evaluation commissioned by West Sussex County Council.

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