

Proposal for the future Council contribution to the Wellbeing Exeter Partnership Fund

Report of the Director of Integrated Adult Social Care

Please note that the following recommendations are subject to consideration and determination by the Cabinet (and confirmation under the provisions of the Council's Constitution) before taking effect.

1) Recommendation

That the Cabinet:

- a) Agree to cease the Council contributions to the Wellbeing Exeter Partnership Fund as per option 1 in section 4 of this report.

2) Context

- 2.1 In common with other local authorities the Council is working hard to achieve financial sustainability. This is mirrored across the country and in District and City Councils across Devon. Collectively we are having to think about how we can make our budgets go further by focussing on the things we must do.
- 2.2 The recommendation within this paper is part of a wider Council savings strategy that includes other difficult decisions that will result in changes for people in the Council, in other partner councils and in our communities.
- 2.3 In developing the saving strategy, the Council has tried wherever possible to reduce investment that limits the impact on our residents, communities and partners. However, even with this work the Council is still in a position where it must make some difficult choices. Where difficult proposals are made, the Council has acted as a system partner and engaged with those potentially impacted, including all District and City authorities across Devon and being active in conversations that seek solutions.
- 2.4 The Council has listened to the feedback received and worked hard to understand the impact of its proposals. In response to concerns heard, the Council has been engaging with Exeter City Council and the VCSE.
- 2.5 Although this paper recommends the Council withdraws funding from Wellbeing Exeter, it is not a recommendation of a withdrawal from working in partnership with the VCSE, or indeed Exeter City Council.

- 2.6 The Council values and is committed to the key relationships it has with Exeter City Council and the collective serving of the people of Devon. That makes recommendation like this all the more difficult, but the Council believes that this is the right course of action at this time. The alternative options set out in this paper do not contribute sufficiently enough to the Council's saving strategy and the financial challenges of the years ahead.
- 2.7 The Council is also committed to working with the VCSE across the whole of Devon, recognising it plays a leading role in supporting the development of community resilience and providing opportunities for people to live the lives they want to live.
- 2.8 The Council has a Best Value Duty; the requirement is set out in the Local Government Act 1999 to "secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness."

3) The development of Wellbeing Exeter

- 3.1 Wellbeing Exeter was established through the Integrated Care Exeter (ICE) Project (2012 to 2017). Under the leadership of the ICE Director, Wellbeing Exeter was established as a proof of concept in 2013, working within one GP practice in Exeter and a range of voluntary and community sector organisations.
- 3.2 By 2015 Wellbeing Exeter expanded to cover several GP practices across the city and key partners agreed to extend funding to continue to develop the programme.
- 3.3 The Council initially funded the early pilot of Wellbeing Exeter through the ICE (Integrated Care Exeter) programme. The Council secured funding of over £1.5 million from the Department for Communities and Local Government in 2015-16 on behalf of the then Integrated Care for Exeter partnership, which went on to develop the Wellbeing Exeter model.
- 3.4 Subsequent years funding from the Council has been through the Integrated Adult Social Care budget, with the intention that future and on-going funding would be identified by the programme. On-going funding of £395,000 per year has continued from 2018 by the Council from the Adult Social Care budget. For 2023/24, Exeter City Council has reduced the requested sum to £270,000.
- 3.5 As part of the exit strategy for ICE, Exeter City Council was invited to take over the management and leadership of Wellbeing Exeter when it appointed the ICE Director to its Strategic Management Board in July 2017.
- 3.6 Wellbeing Exeter is now an established partnership of public, voluntary and community sector organisations working together providing foundations for individuals and communities to promote and improve their own health and wellbeing. Wellbeing Exeter offers three main services:
- 3.6.1 Resilient People: social prescribing
 - 3.6.2 Resilient Communities: community building and supporting active lifestyles

3.6.3 Resilient System: network support and co-ordination

3.7 Funding from government to the NHS for social prescribing in Primary Care was initially pooled by local practices into Wellbeing Exeter but this funding was withdrawn in 2022/2023. The four Exeter Primary Care Networks have now set up their own in-house health and wellbeing teams to deliver social prescribing, this approach gives them more oversight and accountability for the work. It is understood that funding from other partner is under review.

3.8 The Council's current funding commitments to Wellbeing Exeter are coming to an end, and in February this year Wellbeing Exeter's commissioning organisations came together to make decisions about its future role in the city and the wider health and care system. At that point the Council advised the programme lead that it was developing consultation proposals on the future of its funding contribution to Wellbeing Exeter.

3.9 The Council is committed to working with the VCSE across the whole of Devon, recognising it plays a leading role in supporting the development of community resilience and providing opportunities for people to live the lives they want to live.

3.10 The Council has a Best Value Duty; the requirement is set out in the Local Government Act 1999 to "secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness."

3.11 Exeter City Council is preparing a funding prospectus with the aim of recruiting additional philanthropic investors and a new organisational form such as a Community Interest Company for April 2024 and beyond. Part of this will need to include how the services provided through Wellbeing Exeter can continue to be sustainable. The Council commits to working with Wellbeing Exeter to do this.

3.12 The recommendation within this report means that people with [eligible needs as defined within the Care Act](#) will continue to have their eligible needs met.

3.13 A [report to the DCC Health and Adult Care Scrutiny Committee](#) provided an overview of the public consultation process, the level of engagement and the themes of the feedback received

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4) Options / Alternatives

4.1 The table below sets out the analysis of options for the future DCC contribution towards the Wellbeing Exeter Fund.

4.2 With every option, Devon County Council remains committed to working with partners to bring more funding into Devon to support them to deliver their statutory duties.

| Option | Detail | Impact | Financial Implication |
|------------------------------------|---|--|--|
| 1. Cease funding | To cease on 30/9, prior to 1 month notice period | <ul style="list-style-type: none"> • Contribution to the DCC savings plans • DCC refocus on its statutory duties • Reduced contribution to preventative working • Reduced DCC influence on preventative services | <ul style="list-style-type: none"> • £135,000 cost in 2023/24 |
| 2. Do nothing | Continue existing arrangements | <ul style="list-style-type: none"> • Contribution to prevention activity maintained • No contribution to DCC savings plan | <ul style="list-style-type: none"> • Continued in year, and on-going annual spend of £270,000 |
| 3. Find alternative funding source | Wellbeing Exeter Partnership to seek additional funding from elsewhere beyond 2023/24 | <ul style="list-style-type: none"> • Contribution to the DCC savings plans • Continued and sustainable funded | <ul style="list-style-type: none"> • £270,000 continued contribution in 23/24 • Halted DCC IASC spend beyond 23/24 |

5) Consultation

5.1 A consultation was launched on 9 March 2023 on the [‘Have Your Say’](#) public consultations page of the Council website, closing on 22 April 2023. Local Elected Members were briefed and Exeter City Council engagement and contributed to the impact assessment.

5.2 Through this public consultation the Council sought views on a set of initial proposals. Having done that and listened to the feedback, proposals are now the recommended to Cabinet.

5.3 A [report to the DCC Health and Adult Care Scrutiny Committee](#) provided an overview of the public consultation process, the level of engagement and the themes of the feedback received. The themes of the feedback received is summarised below:

5.3.1 The consultation received 136 responses to the Have your Say questionnaire, and a letter was received from Wellbeing Exeter Commissioning Board Members.

5.3.2 Positive feedback on Wellbeing Exeter as a highly valued service that effectively supports people during the pandemic.

- 5.3.3 Importance of continuing Wellbeing Exeter's vital work during the cost-of-living crisis to build resilient communities and protect vulnerable people.
- 5.3.4 Wellbeing Exeter is heavily used, preventing visits to GP or emergency departments, and reducing service waiting times.
- 5.3.5 Concerns about the impact of ceasing funding on already stretched services, compromising people's health and wellbeing, and putting them at risk of needing more intensive support in the future.
- 5.3.6 Challenges to the rationale behind the proposal, suggesting that removing this service would put vulnerable people at risk and questioning why alternative provision has not been secured before.
- 5.3.7 Wellbeing Exeter is not cost-effective and does not add value to the community.
- 5.3.8 Negative experiences with Community Builders, who may not organise activities suitable for everyone and spend too much money.
- 5.3.9 Issues with the effectiveness of the partnership, and equality of outcomes, and workers not having enough experience working with vulnerable people.
- 5.3.10 Report of other providers who offer this service without funding from DCC, suggesting that Wellbeing Exeter may not be required.

6) Strategic Plan

- 6.1 Our '[Promoting Independence](#)' vision describes what we are trying to achieve for people who need adult social care services in Devon now or may do in the future.
- 6.2 It seeks to align to the [government's vision for adult social care](#), One [Devon health and care system strategy](#), and the [Devon County Council strategic plan](#) whilst articulating the distinctive role and objectives of adult social care.
- 6.3 Our '[Promoting Independence](#)' policy sets the policy framework by which we operate including how we apply statutory guidance in Devon and the '[Commitment to Carers](#)' underpins our approach to unpaid carers.
- 6.4 Our '[Living Well](#)', '[Ageing Well](#)' and '[Caring Well](#)' strategies describe how we apply this vision and policy to people aged 18-64, people aged 65+, and unpaid carers.
- 6.5 Our '[Annual Report](#)' or 'Local Account' assesses our delivery against our vision, strategies and plans each year, using national surveys, performance information, and activity/cost/spend data to compare with others.

7) Financial Considerations

- 7.1 The cost of Devon County Council's contribution to the Wellbeing Exeter Partnership fund has been £395,000 per year, reducing in 2023-24 to £270,000.
- 7.2 Subject to the recommended action, including the reduction in the contributions from April 2023 to September 2023 (£125,000), the ceasing of funding on 30 September (£135,000), the in-year savings achieved will be £260,000.
- 7.3 The budget for 2023/24 does not include funding for options 2 and 3. If it is decided to proceed with one of these options, the additional costs as set out in the table in section 4 will need to be funded on a one-off basis from Reserves in 2023/24 and from ongoing savings in future years.
- 7.4 If option 1, is not recommended it will cause a financial pressure of £270,000 in the current year – this will be monitored closely as part of the overall budget throughout the year and if it cannot be mitigated a recommendation to use Reserves will be brought to Cabinet as part of the Outturn recommendations in May of next year.

8) Legal Considerations

- 8.1 The lawful implications of the proposal have been considered and taken into account in the preparation of this report on the proposal set out above.
- 8.2 Legal challenges will always form part of any consultation that seeks views on proposals for change, this has been the case during the course of the public consultation. The recommendations within this report mean that people with [eligible needs as defined within the Care Act](#) will continue to have their eligible needs met.

9) Environmental Impact Considerations

- 9.1 This report has no specific environmental impact implications that are not already covered by or subsumed within the detailed policies or actions referred to therein

10) Equality Considerations

- 10.1 Where relevant, in coming to a decision the Equality Act 2010 Public Sector Equality Duty requires decision makers to give due regard to the need to:
- eliminate discrimination, harassment, victimisation and any other prohibited conduct;
 - advance equality by encouraging participation, removing disadvantage, taking account of disabilities and meeting people's needs; and
 - foster good relations between people by tackling prejudice and promoting understanding in relation to the protected characteristics (age, disability, gender

reassignment, marriage and civil partnership (for employment), pregnancy and maternity, race/ethnicity, religion or belief, sex and sexual orientation).

- 10.2 A decision maker may also consider other relevant factors such as caring responsibilities, rural isolation or socio-economic disadvantage.
- 10.3 In progressing this particular proposal, an [Impact Assessment](#) has been prepared which has been circulated separately to Cabinet Members and also is available on the [Council's website](#)
- 10.4 Members will need to consider the Impact Assessment for the purposes of this item.

11) Risk Management Considerations

- 11.1 This proposal has been assessed and all necessary safeguards or action have been taken to safeguard the Council's position.
- 11.2 Devon's proposal to cease the Wellbeing Exeter contribution was accompanied by an [impact assessment](#), published at the start of the consultation. The impact has been updated to take account the consultation responses, including risks and mitigations.

12) Summary

- 12.1 The financial challenge facing the Council means that difficult decisions need to be taken. The long standing and key relationship the Council has with Exeter City Council makes this decision all the more difficult.
- 12.2 The Council has heard the consultation feedback and committed to working with Exeter City Council and the VCSE to limit the impact of the recommendation.
- 12.3 Although the Council has contributed to the Wellbeing Exeter Partnership Fund since its inception, through the Integrated Adult Social Care budget, the service does not directly contribute to the meeting of our adult social care statutory duty to meet eligible needs.
- 12.4 The funding is primarily used to support social prescribing that connects people to opportunities to support their broader and less complex needs than set out in adult social care legislation.
- 12.5 Funding from government to the NHS for social prescribing in Primary Care was initially pooled by local practices into Wellbeing Exeter but this funding was withdrawn in 2022/2023. The four Exeter Primary Care Networks have now set up their own in-house health and wellbeing teams to deliver social prescribing, this approach gives them more oversight and accountability for the work. It is understood that funding from other partner is under review.

- 12.6 Since the consultation was launched Exeter City Council has been working with others to seek additional funding to replace the Council contribution.
- 12.7 Cabinet is asked to agree to cease the Council contributions to the Wellbeing Exeter Partnership Fund as per option 1 in section 4 of this report.

Name

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Electoral Divisions: All Exeter Divisions

Cabinet Member for Integrated Adult Social Care and Health: Councillor James McInnes

Local Government Act 1972: List of background papers

Nil

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