



<b>Date of meeting</b>	22 <sup>nd</sup> September 2008
<b>Title of paper</b>	Mapping Voluntary Sector Activity
<b>Agenda item no</b>	7
<b>Paper number</b>	B3
<b>Action required</b>	For Decision:  to agree to proceed with part two of the mapping exercise.
<b>Paper prepared by</b>	MAC



**Mapping project for Wandsworth LINK to establish schedule of existing health and social care groups, projects, initiatives in Wandsworth Borough (excluding statutory services) as a resource and reference point for Wandsworth LINK future activities.**

As a result of the LINK public meeting in June expressing a wish to have a mapping exercise carried out, Wandsworth Care Alliance in its role as LINK Host, asked the Moore Adamson Craig Partnership to draw up a proposal. MAC responded on 7 August with a proposal in two parts.

Wandsworth Care Alliance, in its role as the LINK Host, commissioned the Moore Adamson Craig Partnership on 11 August to carry out Part One of this mapping project at a cost of £1,000 in fees plus VAT to be paid for by the Host.

This is the report on Part One which is submitted to WCA by the deadline of 8 September in order to give the Host time to consider it and make recommendations to the 22 September meeting of the LINK IE about moving forward with implementation of part two of the project. It is anticipated that Part Two would be paid out of the LINK Disbursement budget.

**Part One**

**1. Criteria for inclusion of non statutory groups, activities, recourses and facilities and exclusion of statutory services**

- 1.1. This mapping exercise is intended to establish the extent of existing voluntary sector groups, projects and initiatives in Wandsworth in order to provide a resource and a reference point for Wandsworth LINK future activities.
- 1.2. LINKs throughout the country are intended to be networks of networks building on and co-operating with other voluntary activity for and on behalf of users of health and social care services. It is not the intention, nor would it be realistic, for any LINK including the Wandsworth LINK to try and take over and become the sole voice of the people in a particular Borough in relation to health and social care services.
- 1.3. At the LINK public meeting in June and again at both LINK IE meetings in July and August it has been emphasised that LINK should build on the existing good work of many different local organisations. It is strongly felt that LINK should work alongside those existing organisations and together strengthen the voice of local people.

- 1.4. In this mapping exercise we wish to identify the network of projects throughout the Borough that are in touch with the users of services and their families and carers. We want to find out the extent to which there is already an outlet for the views of people who have first hand experience of health and social care services.
- 1.5. Excluding statutory programmes and services from the mapping exercise, at least at this initial stage, is not intended to suggest that statutory activity is less important or entirely separate. However statutory services are mainly provided and funded by the local authority and the Primary Care Trust and they are not necessarily a reliable source of user views. That is not to say that statutory providers do not try to find out the views of their users and indeed they have a statutory duty to do so. However service users often feel vulnerable and are reluctant to express views which service providers might see as critical or demanding.
- 1.6. It is often through voluntary sector activity that the views of the less vocal users are discovered. It is often through informal grass roots networks that people have the opportunity and are given the support and confidence to express their feelings and needs. It is often people who are less articulate, due to learning or language circumstances, or who are the more vulnerable due to health or personal circumstances, who do not get their say. LINK has a clear responsibility to act with and on behalf of these groups in the community.
- 1.7. It is hoped that in addition to establishing existing networks, the mapping exercise will also show up where there are important gaps. LINK can then make a greater effort to contact those specific sections of the community.

## **2. Geographical area to be covered**

- 2.1. Wandsworth LINK has a clear brief to work within the Borough boundaries. Its membership is defined as people who live in the borough or who are registered with GPs based within the Borough. Organisational members include those groups who have an active interest in health and social care within the Borough. Undoubtedly statutory and voluntary activities and services will cross Borough boundaries.
- 2.2. People who live outside Wandsworth certainly use health services within the borough (for example hospitals and specialist clinics) although funding through commissioning tends to be linked to where you live.
- 2.3. Social services have a more direct Borough connection and it is rare for anyone living outside the Borough to get any specific support from

services within Wandsworth. It is also rare for there to be social service initiatives covering more than one Borough.

- 2.4. For the purposes of LINK, activity is generally Borough based.

### **3. Sectors and special interests to be included**

- 3.1. Health initiatives covered by the mapping exercise should be as comprehensive and inclusive as possible including specific conditions such as Sickle Cell or Alzheimer's and defined sections of the population (for example older people or mother and baby groups). The map should include patient groups linked to the major Trusts such as St. George's Hospital and smaller groups linked to GP surgeries. Health initiatives could also be positive and preventative such as health and fitness groups, alternative and complimentary therapies.
- 3.2. Social care initiatives should be equally wide ranging for example carers support groups, housing/tenant groups, faith groups, employment and trade unions, chamber of commerce and any other voluntary associations which take an active interest in the social welfare of their members.

### **4. Sectors of population who are less likely to be covered by any of the groups/activities in this mapping exercise**

- 4.1. LINK must try and reach groups within the community who are less likely to be expressing their views and responding to surveys and consultations run by the Local Authority or statutory health services. This will not be an easy task and LINK is likely to always need to work through other networks which exist and which provide a focal point or specialist support.
- 4.2. LINK must guard against the assumption that people fit into one or other group with one special need or circumstance. It is more likely that people experience multiple problems which may mean that they could be linked to several different networks. Multiple problems may however mean that some people are completely out of all the links: long term health problems, lack of transport, financial hardship and other personal circumstances may all combine to make it difficult for the person to live an independent life.
- 4.3. Recent arrivals to the UK who make up a significant percentage of Wandsworth's population might be reached through specialist advice and legal services. These newly arrived residents or even long standing older residents for whom English is not their first language often get information, translation, interpretation and support through faith groups.

- 4.2. People with mobility problems often meet at local day centres where disabled transport provided. The concept of independent living for people with physical disabilities is a very challenging area and LINK will have to make special efforts to reach people confined to their homes.
- 4.3. People with learning difficulties may use educational programmes or reading groups provided at the library or college or voluntary organisations. This group of people are likely to have transport needs as well.
- 4.4. People with mental health problems may attend support groups at their GP surgery or health clinic. LINK must think imaginatively and laterally about where people already congregate and feel comfortable.
- 4.5. Whilst many elderly residents are actively involved in representation in health and social service matters, there is still a silent majority to be reached.
- 4.6. Also local residents in the 20 to 40 year old age group who usually have work and family responsibilities are very difficult to engage in any type of health, welfare or civic activity. LINK need to reach this group to get a full picture of views and needs across the whole population. Access through leisure and social activities could be tried and perhaps through leafleting at train and tube stations.
- 4.7. Children under the age of 18 are not included in the LINK remit although late teens are a group LINK could try to reach through educational and social connections.

## **5. Outline of existing material, directories, mailing lists, membership lists etc which could be used as source of information**

- 5.1. The mapping exercise needs to spread out with a ripple effect. It needs to start in the obvious places and then spread out to less well known and more specialist networks. For example the Council and Wandsworth Primary Care Trust have very extensive lists and directories of local organisations with contact details and at least a brief idea of the
- 5.2. *Careline* also has a PDF list of local organisations which can be used by LINK.
- 5.3. Wandsworth Community Empowerment Network also has valuable contact lists which it is willing to share.
- 5.4. Those organisations in turn will have membership or mailing lists and newsletters and handouts which could be used to reach other more remote isolated sections of the community.

**6. Data protection position on sharing lists and contact information for non profit reasons**

6.1. Whilst there is extensive data protection legislation to stop organisations misusing their members or customers details, the legislation is designed to stop inappropriate use. Where there is a legitimate purpose which is not commercial or political, it is likely to be legal for organisations to share their lists. Where organisations are reluctant to give LINK direct access to their lists, LINK can ask them to act as a distribution outlet to their members/customers. Specific examples may need specific legal advice as it is essential that LINK as a public body always behaves in a legal and appropriate way.

**7. Validation of scope and nature of mapping exercise with LINK IE, WCA Board, WBC, WPCT, other knowledgeable local individuals and key network co-ordinators and other significant local stake holders.**

7.1. As soon as the LINK Interim executive approve implementation of the mapping project, it will be essential to validate the scale and nature of the exercise with the WCA Board and project staff, the Borough Council, Social Services and the Wandsworth Primary Care Trust and other key local individuals and stake holders.

7.2. A standard letter can be sent to all key players with a copy of the mapping project asking them to comment if they feel there are omissions or errors in the assumptions included or the methodology proposed. The letter should undertake to provide feedback at key stages in the mapping project.

**Part Two**

**8. Proposal for implementation**

8.1. **It is proposed by the MAC Partnership that the LINK IE commission them to implement part two of this mapping project. As well as having extensive experience in health and social care activities in Wandsworth, MAC already have a working relationship with the Host and are fully informed about the role, responsibilities and limitations of LINKs.**

8.2. MAC could implement the following Action Plan immediately.

**9. Indicative outline**

- Refine criteria proposed in part one
- Confirm geographical area

- Confirm and if necessary expand sectors and special interests to be included
- Contact relevant key bodies and individuals listed in part one to inform them that full mapping exercise is going ahead and asking for their directories, lists, contacts, and any further ideas or support they might be able to offer
- Produce “a map” in both words and pictorial form which describes the results of the mapping project
- Verify findings with key local sources
- Report to LINK IE in time for the IE to be able to report to the LINK Public meeting in December 2008

## 10. Timetable and cost

- 10.1. Assuming that at their September meeting the Interim Executive give MAC approval to go ahead with part two of the mapping project as proposed, the work could be complete and available in early **December 2008** (to coincide with IE meeting and/or at the LINK Public meeting).
- 10.2. **Consultancy cost will be £5,000** plus VAT and out of pocket expenses which are likely to be minimal because all activity is local. This rate represents approximately 15 days of senior consultancy work @ £350 per day and reflects the need to use senior partners with personal knowledge and contacts to do sensitive research work with local people across a wide range of sectors and issues. It also reflects the fact that the work will have to be carried out under considerable time pressure in order for results to be reported to the LINK public meeting in December 2008.

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**8 September 2008**