City Health Care Partnership CIC

a co-owned business

SOCIAL ACCOUNTS 2015/16



2015/16 Social Accounts

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Contents

Introduction

The Purpose of Social Accounting for CHCP CIC
The Scope
Social Return On Investment (SROI)
The Process

06 08

Apprentices

Reason for Being	
Social Value	
The SROI Calculation	
Case Study	

The CHCP Foundation

Reason for Being	16
Social Value	18
The SROI Calculation	19
Case Study	20

Let's Tall

Reason for Being	
Social Value	
The SROI Calculation	
Case Study	

Corporate Sponsorship - Freedom To Tell Tales

Reason for Being	28
Social Value	30
The SROI Calculation	31
Case Study	32
The Quays Services For Homeless People	
Reason for Being	34
Social Value	36
Case Study	37
Tele-Health	
Reason for Being	38
Social Value	40
The SROI Calculation	42
Case Study	43
Family Nurse Partnership	
Reason for Being	44
Social Value	46
The SROI Calculation	47
Case Study	48

Welcome to City Health Care Partnership CIC's 6th set of social accounts. I am very happy to be able to share another successful year with you.

These accounts show what we are doing 'above and beyond' the services that we are contracted to provide, to make sure that the communities we serve get the maximum social value from CHCP CIC.

The social accounts are just a snapshot of some of the ways in which we are delivering this value and the impact that our activities can have on people's lives; this kind of work is going on day in, day out across the areas where we work, thanks in no small part to the dedication and commitment of colleagues in all our services.

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There are some inspiring examples in this document that demonstrate how our creative, caring and compassionate approach can make a real difference, from opportunities for young people to work as apprentices to the innovative work of our Let's Talk service, which has an excellent SROI of $\pm 1 \pm 29.14$, really impressive for a new type of psychological wellbeing service.



Providing Quality Care

Thanks are due to everyone who has contributed to these accounts:our colleagues, stakeholders, the Social Audit panel and our social accountants, Jenko. Your support is invaluable.

The Purpose of Social Accounting for CHCP CIC

This social accounting process measures success against our Social Investment Strategy, which outlines all our intentions in relation to our corporate social responsibility and how we plan to invest, aligned with the overarching business objectives.

The action plan breaks down activities under four headings:

Engaging with the local community and social causes to build goodwill, trust and benefit for society

Community

Embedding environmental sustainability across different aspects of business practice

Environment





Going above and beyond statutory requirements to be a socially responsible employer



Focusing on how the business behaves in the marketplace - e.g. buying goods that have been ethically and sustainably produced



Preparing annual social accounts is part of our corporate social responsibility. By measuring how we add value, we can be specific about the 'what, why and how' we achieve value. It is more important now, more than ever, to be entirely transparent about our output. Social accounting is one way we can be transparent about our activities, and along with other analysis tools, it is beginning to shape decision-making at board level. Andrew Burnell, CEO, City Health Care Partnership CIC



The Scope

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To demonstrate the social investment strategy in action, the Social Accountants looked at the following areas for the 2015/2016 Social Accounts:

Marketplace Let's Talk Homeless Project The Quays FNP

> Be a provider of excellent healthcare services

Community CHCP Foundation Culture Health+ Out Of Area

> Ensure we are able to compete in a competitive healthcare environment and market



Workplace Apprentices

Be an employer of choice



Environment Tele-Health

Putting our customers and customer satisfaction at the heart of what we do



Social Return On Investment (SROI)

SROI is a framework developed by the SROI Network for measuring and accounting social value, documenting change by measuring social, environmental and economic outcomes. It uses monetary values to represent these outcomes.

There are seven core principles for good SROI Practice:

- **1.** Involve stakeholders
- **2.** Understand what changes
- **3.** Value the things that matter
- **4.** Only include what is material
- **5.** Do not over-claim
- **6.** Be transparent
- 7. Verify the result

The Process

The social accountants use face-to-face meetings, telephone conversations, email contact, questionnaires, polling and research techniques with stakeholders to return an accurate report. The full Social Accounts document is audited by the Community Partnership Forum, which meets three times a year and acts in a stewardship role in relation to our social investment strategy and annual social accounts.



Reason for Being

96% of employers of apprentices report benefits to their business. 76% of those employers who employ apprentices agree they make their workplace more productive.

As a major employer we see apprenticeships as fundamental to our cause, not only as a social business but also as an ethical employer rooted in our communities. The social accountants have seen evidence that we make every effort to give apprentices work opportunities and contextual work experience.

Apprentices are an asset to any organisation and bring significant benefits to the business and existing workforce. Apprenticeships are a unique way to 'grow your own'; they combine on-the-job training in our organisation with off-thejob learning, and provide us with an effective way of growing their skills base. The apprentices' learning takes place in context and provides a real understanding of the working world, combining practical skills with theoretical knowledge. Apprenticeships can therefore offer a career route into our organisation or prepare them for work elsewhere with an invaluable opportunity to develop their skills. Jane Wilson, Learning Resource and **Organisational Development** Lead, City Health Care Partnership CIC

of employers report benefits to their business.

agree they make their workplace more

productive

Social Value

We have a high regard for our apprentices and understand that they offer aspects and points of view that may otherwise have been missed. They bring younger people's perspectives to the organisation and are given opportunities to express these. Their relationship with the company is definitely seen as a two-way street where knowledge is shared and learning is saved and acted upon.

We employ the same mechanisms of personal development and talent management with our apprentices as we do with any other employee. Apprenticeships provide routes into a variety of careers and are an excellent opportunity to earn, gain work experience and achieve nationally recognised qualifications at the same time.

We really consider the career paths of all of our employees and that is the same for our apprentices. We believe we are developing future leaders within our organisation and, without question, our apprentices repay our input by bringing fresh ideas and new ways of thinking to the organisation. Jane Wilson, Learning Resource and Organisational Development Lead, City Health Care Partnership CIC



The SROI Calculation

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There are two elements to the SROI calculation:

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- The perceived benefit to the organisation's productivity based on research done by City & Guilds
 A value exercise survey amongst people who have
 - benefitted from a work experience placement

Case Study : Amy's story

Amy started a Level 2 Apprenticeship in Business Administration in November 2014, to provide admin support to the Health Visiting and School Nursing Team based at The Orchard Centre.

After successful completion of her apprenticeship, there wasn't a permanent vacancy in the team so she was advised to apply to join the Bank staff where she continued to do some work for CHCP CIC. With encouragement from her colleagues, Amy applied for a Finance Assistance post and was offered the fulltime permanent post. Amy emailed her supervisor and manager where she had carried out her apprenticeship:



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I just wanted to email you to say thank you for everything you've done for me this past year! I really appreciate you giving me this opportunity to work as an apprentice and then as bank staff for you. I have thoroughly enjoyed this experience and have learned a lot over this past year and I am going to miss working for you but I am excited to start this next chapter which I don't think I'd have the confidence to do if it wasn't for this opportunity you gave me.



Reason for Being

City Health Care Partnership Foundation is our charity, set up to support and fulfil our objectives as a social business, to give colleagues the opportunity and experience of running a small business and to make its resources work harder. The Foundation is managed by a board of trustees who are all staff shareholders.

CHCP CIC provides the Foundation with financial support and supports the charity as a guarantor. Grants of up to £1,000 are awarded to local groups, charities and organisations through small grant programmes and to local or national charities by sponsoring staff up to £1,500 for charitable endeavours. Culture Health+ grants of up to £5,000 per project are also on offer.

Always keen to play a part in improving the landscape of the areas where we provide services, we were keen to do something for Hull's 2017 City of Culture status. We believe strongly that culture is fundamental to wellbeing in terms of positive health outcomes from activities involving art, drama and music etc. The Opera North programme for young children living and learning in the Bransholme area is superb use of Foundation money. Andrew Burnell, CEO, City Health Care Partnership CIC

City Health Care Partnership Foundation

Social Value

We have been evaluating the social value created through our small grants and staff sponsorship programmes for the past four years.

2012/2013 - £1 : £28.15 2013/2014 - £1 : £33.90 2014/2015 - £1 : £36.38

Small grants: **£20,837** awarded to 23 voluntary and community organisations Culture Health+ grants: **£25,459** awarded to nine organisations Staff sponsorship: **£10,380** awarded to 14 colleagues

The Foundation continues to support all of the usual kinds of good causes captured in the previous SROI calculations listed above but this year we asked our social accountants to use the SROI ratio calculated for 2014/15 for the Foundation and add to it some new lines to capture some of the social value generated through its Culture Health + Scheme. Opera North were awarded a Culture Health+ grant of £12,000 over three years towards the running costs of a singing school, 'Little Singers', for pre-school age children and their parents/carers living in Bransholme, one of the most socially deprived areas of Hull. 20 to 25 parents/carers will be involved with 20 to 25 children at each of three Children's Centres.

Little Singers' expected outcomes for young children are:

- To improve personal, social and emotional development
- To improve communication, language and literacy development
- To extend the reach of Opera North's Early Years work
- To improve the standards of music delivery
- To embed learning and effective practice
- To enhance relationships, both parent/child and between adults with young children

Although Little Singers only began in Bransholme in September 2015, the social accountants attempted to measure some of it with a forecast SROI calculation, which is likely to be only the tip of the iceberg in terms of the total social value being created.

The SROI Calculation



There are six lines in this SROI Impact Map:

- 1. The social value generated for Small Grant end recipients 2014/15
- 2. The social value generated for Staff Sponsorship end recipients 2014/15
- 3. The social value generated for employees
 - supported by the Staff Sponsorship scheme
- 2014/2015

- 4. The enhanced relationships between parents/ children involved with Opera North's Little Singers
- 5. The improved personal, social and emotional development of the young children involved with Little Singers
- 6. The improved communication, language and literacy of the young children involved with Little Singers

Case Study : Lilly-May's Story

Three year old Lilly-May has been involved with Little Singers since 2015 and has significantly developed over the past year. She lives in Seacroft, a deprived area of Leeds.

Before Lilly-May started Little Singers she expressed a series of personal, social, communication, language delays and didn't have a lot of confidence. At the start of the programme she needed comfort from a familiar adult and to sit with them throughout the whole of the first year of delivery.

The progression Lilly-May has made is outstanding. She can now use instruments competently (claves and shaky eggs) and is able to sing confidently in the correct pitch. Lilly-May has learned how to express her own feelings and to develop an awareness of other people's emotions and to respond through facial expression or vocalisation.

She has grown a sense of independence and now very much enjoys listening to different rhythmic patterns and joining in with the actions. She has a clear sense of beat and can recognise a beat without it being demonstrated to her. Kate Johnson, the Day care manager at Parkland's children's centre said, **It has been a great privilege to witness the** positive impact this experience is having on the children. We are seeing their confidence flourish week by week, they are developing their listening and observational skills and are encouraged to copy, mirror, imitate and contribute their own ideas. Children are learning about rhythm, rhyme, repetition, vocabulary and culture through singing lots of familiar, new and multicultural songs while at the same time learning about tone and intonation and moving their bodies to the different beats. They are listening attentively and are able to anticipate what is coming next. Little Voices helps to build trusting interactions and gives children a very strong message that they are valued and that people around them respect their contribution; all ways of empowering children to become confident communicators which then affects their all-round development.



Reason for Being

Let's Talk is a city-wide single point of access assessment and treatment service for people with mild to moderate depression and anxiety living in Hull.

This is a new model of service delivery where CHCP CIC acts as a lead provider working with a network of ten accredited service providers, giving patients a choice of clinical care.

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The main interventions of the service are: Guided self-help Cognitive Behavioural Therapy (CBT) Psycho-educational groups Counselling

Moving away from the traditional boundaries meant we were allowed more freedom to design a service where a much broader range of psychotherapies could be made available to our patients. For example, they can access a time-bound treatment of CBT in line with their presenting problems. Putting the patient first in terms of their preference of therapy style following a clinically guided discussion makes Let's Talk a truly beneficial and meaningful service in most cases. Kate Cowl, Professional Lead, Psychological Wellbeing Services, City Health Care Partnership CIC

Stress is completely <u>normal</u> Sometimes, we just have <u>too</u> <u>reach</u> of a normal emotion.

Social Value

Access to Let's Talk is very easy: patients can self-refer by calling a 24-hour appointment-booking line, booking online, texting the service to request an appointment or visit their GP for a traditional referral. Within a maximum of seven days, the patient is seen face-to-face by the clinical assessment team at a convenient time and location. They are offered choices and options for their treatment, which begins within a maximum of two weeks from their initial point of access. This model reduces the burden on GPs.

Providers range from small local charities through to national services and are channelled by CHCP CIC (which is also a provider) to give flexible and diverse therapy routes for patients. A fast-acting and easily accessible Depression and Anxiety Service can greatly benefit the local community by helping people engage with society better, but it is guided patient choice that really makes the difference. Giving people choice improves patient engagement and helps them manage their condition better.

It is the flexibility of therapy intervention which creates additional value within Let's Talk. Patients can choose the date, time, the gender of the therapist and the therapy style under clinical guidance. The service delivery model means we can also offer treatment in the evenings and at weekends. Denise Everett, Head of Psychological Wellbeing,

City Health Care Partnership CIC



The SROI Calculation



There are six lines in this SROI Impact Map:

- 1. The benefit to NHS of reduced GP appointments by self-referrals and telephone triage into Let's Talk therapies
- 2. The benefit of an intensive CBT treatment
- 3. The value of a stress management course

4. The value to society of recovered patients enjoying psychological wellbeing

<u>et</u>

Depression & Anxiety Services Hull

- 5. The social impact of an individual aged 25-49 having high confidence
- 6. An estimate of the cost of employees with poor mental health to businesses

Case Study : Anonymous story

All patient identifiable information has been changed. Written and presented with the kind permission of a person who has recently accessed CHCP CIC Let's Talk Services.

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"I was around 40 when a doctor suggested that I was suffering with depression, but I remember as a child, my mum describing me as 'sunshine and showers'. I would be really, really down, I missed a lot of school and thought I was stupid. When I started work, I realised I wasn't really that stupid and managed to do a degree. That didn't stop these long periods of feeling like I had a heavy weight on my shoulders when I couldn't stop crying and I didn't understand why, everything should have felt good. Gradually, this would lift until the next time.

"I went to see the doctor who suggested I was depressed and I started taking anti-depressant medication for the first time. I realised I wasn't up in the air or down on the floor, I felt normal. I took this medication for years but experienced panic attacks more significantly triggered by periods of severe stress within the family. We went on holiday and by accident really, I ended up changing my anti-depressant medication, I was sleeping better so I stuck with it when we got home. Looking back it probably wasn't the best idea.

"I started having more regular panic attacks for what I thought was no reason, I had started my own business and I was exhausted trying to get it going. I had to do some public speaking and the panic I experienced before was the worst I have ever felt, it went on and on. My husband made me an appointment and we went to see the practice nurse. "The nurse was brilliant; she took me seriously, changed my medication and suggested I called Let's Talk to make an appointment. I noticed on the card she gave me, you could make an appointment online, it was really easy and it worked better for me because I was really anxious about speaking to someone.

"I met with [anonymous] she was so lovely and we planned that I would do the Stress Control course and then look at depression with CBT. I was a bit worried about the stress control class but it wasn't long before I was absolutely enthralled, I learnt a lot. The hand-outs they gave us were really good, I keep mine by my bed, I really took all the information in. "They had quizzes on interactive pads, you could say how you feel without putting your hand up or saying anything and then see it all up on the board.

"I went to all four sessions and when they ended I realised I was feeling much better already but I wasn't confident. I started some one-to-one sessions, CBT based but looking at managing my anxiety. I didn't think I could control it, but I am managing things better than I ever have. I realised that I started forgetting the odd antidepressant and I rarely took the beta blockers I'd been given at my worst. I'd felt like I was walking along with the practice Nurse and [anonymous] holding my hand, they have been fantastic.

"I wish years ago, when I was young that I had all this, I feel like I've started a new life in many ways. I am dealing better with everything. I can't believe how lucky I am that I live in [anonymous] and that all the right people have been in the right place for me."



Reason for Being

'Freedom to Tell Tales' is a spoken word and storytelling programme, launched at the Freedom Festival in 2013. The project continued in 2014 and for 2015, with a theme of a 'City of Stories'.

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reed We were interested in the project's positive impact on the psychological wellbeing of its participants and recognising potential synergy with 'Let's Talk', decided to sponsor the Freedom To Tell Tales 2015 City of Stories Project with a donation of £12,000.

The 2015 Freedom To Tell Tales project gave a platform to 63 community performers (30 of whom were 16-25 years old). It attracted an estimated audience of 5600 at the Freedom Festival in September 2015.

The project focus was capturing hidden voices from real people in Hull who had a story to tell. We could see a real benefit in terms of improved wellbeing, not only for the community performers taking part, but also for the audiences who would enjoy their stories at the Festival.



Social Value

Positive outcomes are evident for people experiencing mental ill health who engage in storytelling, expressive writing and poetry therapy in building confidence, reducing anxiety and improving overall wellbeing.

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I was more than a little nervous about going to the first workshop because of my gender status. I never know how people will react particularly people who are of an older generation. They can be brittle. But I felt welcome in that group over the weeks and I feel I blossomed as my confidence not just in being there but also in the storytelling techniques grew.

Participant & Community Performer, FTTT 2015

Whilst the programme of work resulted in the development and presentation of a wonderful collection of local stories, by far the biggest value can be felt at a more human level. Participant feedback told us they felt empowered, enabled and supported to grow as individuals, building new skills, increasing confidence and extending their social circles whilst also playing a part in celebrating their city. Jenny Coombes, Executive Director, Freedom Festival Trust



The SROI Calculation

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 Creative skill - the social value the community performers have encountered through learning a creative skill through their involvement with the FTTT project

3. Audience entertainment - the social accountants have estimated the social value created for the audience who enjoyed the storytelling performances brought to them at the Freedom Festival in 2015 by the FTTT project

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There are three lines in this SROI Impact Map:

 Psychological resilience and selfesteem - the social value generated for the FTTT participants in terms of improved psychological resilience and self-esteem as a result of the project

Case Study : Annie's Story

Annie said she felt privileged to have done the FTTT workshops. "It has been a rich experience of challenge, passion, fun, creativity and entertainment! I felt I was rediscovering a dimension within myself that I'd lost since childhood.

The facilitators complemented each other perfectly offering personality, a lifetime of skills, wealth of knowledge and most of all encouragement! They encouraged us to develop traditional skills and at the same time remain true to our own unique style and authenticity.



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What I really enjoyed was that the workshops were so accessible. As someone who has never felt confident to express myself through drama, creative writing or improvising I felt I had found a home in which I could express myself. I also got a lot from the other participants as they came from a variety of backgrounds and skills. It has inspired me with ideas for how storytelling could be a medium within the work I do.

Storytelling is a unique and versatile medium; it was fascinating to watch each participant develop their own style. I hope I can continue as it feels I am just scratching the surface of a rich seam of pure magic! I wasn't sure if I would have the courage to tell a story to an audience but I did! Thank you for an amazing experience.

Reason for Being

The Quays is one of six general practices managed by CHCP CIC in Hull and is based within Wilberforce Health Centre. It started in 2000 as a project with a team specifically set up to meet the primary care needs of socially excluded and homeless people.

The project developed and the skills of the original team were incorporated into the practice as it is today. The Quays is recognised by many local agencies as the "go to" place where homeless people can access primary care.

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Homelessness is not simple to define; some people are homeless through choice and some not through choice. Homelessness is not confined to those living on the street. We consider people who 'sofa-surf' with no fixed abode or living in hostels as homeless; unfortunately the vulnerable are often the most in need and struggle to access care due to their circumstances. Anyone, regardless of their personal circumstances, should be able to access highquality primary health care and that applies equally to those that find themselves homeless, and at The Quays they can. The Quays offers full equity of access and provides muchneeded care in a highly deprived city-centre location with staff who truly understand and go the extra mile.

Claire Ripper, Head of Primary Care Medical Services, City Health Care Partnership CIC Providing the service has many risks in terms of personal safety for the team. Homeless people often lead very chaotic lives. Together with their homelessness and possible social exclusion, people who attend the practice may present with an addiction, have learning difficulties, be offending or are ex-offenders and may present with antisocial behaviour.

In addition to providing services for homeless people, The Quays operates the Government's Gateway Protection Programme where vulnerable refugees come into Hull to be resettle in the UK in partnership with the United Nations High Commissioner for Refugees (UNHCR).

Social Value

The "open access" approach offered at The Quays for homeless people means that health conditions are treated earlier, reducing the burden on other health care services, in particular A&E.

Ensuring that the clinical staff have some time dedicated to the care of local homeless people brings considerable value in respect of the partnership working with many other agencies.

This cohort of society is often socially excluded, has complex needs or is often 'hard-to-reach' in terms of their community health care and in light of this, this section of the report has not been assessed for Social Return on Investment.



When it comes to The Quays, a practice that we are proud to have had the responsibility for providing over the years, the work undertaken by staff to care, help and support those in greatest need such as homeless people and asylum seekers is key in driving an approach that has wider social value at its heart. The impact goes beyond the services we provide and in terms of our corporate social responsibility this is definitely the right thing to do. The survival and sustainability of this remain a top priority for us.

Andrew Burnell, CEO,

City Health Care Partnership CIC



Case Study : A homeless person's story

The Health Care Assistant who works full time at The Quays recounted a time when a young man had attended the surgery to give bloods. He was very down and tearful. He said that he was an IV drug user and in Methadone treatment. He had no family or friends and had lost his job. The landlord of this patient's flat would not accept DSS benefits so he was being thrown out of his accommodation. The patient was very distressed at being out of work and homeless and he was unsure of his future. He had a dog and many personal and household belongings but nowhere to transfer them to. The Health Care Assistant rang the Roper Street Hostel, where she had built up a good working relationship with the Key Workers of the service during the many times she had visited the hostel.

The Health Care Assistant explained the patient's situation and expressed her concern about him going into a hostel. She thought it would be preferable to house this patient in a flat. He was advised to go to Roper Street hostel where a Key Worker would assess his situation and suitability for one of their flats.

Three weeks later the patient came to the surgery looking a lot happier and thanked the Health Care Assistant as he was now settled in his own flat. She had helped make such a difference to his future.



Reason for Being

Telehealth is the delivery of health-related services and information via telecommunications technologies so that patients can be managed remotely for their conditions at home.

Telehealth is recommended by the Department of Health for the management of long term conditions such as COPD (chronic obstructive pulmonary disease), diabetes, asthma, coronary heart disease and heart failure. It is used in Hull by 716 patients to interpret vital signs data to make health care decisions so that patients get the right level of care and advice when they need it.

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Telehealth was a no brainer for us. The technology is available and proven. The benefits are clear. So I guess in Hull you might say we are quietly getting on with it. We have over 700 patients benefiting from telehealth now. In my opinion it is the future and a catalyst for change in times of austerity. Andrew Burnell, CEO, City Health Care Partnership CIC

Our Telehealth team has developed and implemented patient led care plans for all their patients, covering health and social care needs with a clear approach to supporting self care. The hub, which is underpinned by a triage response service, receives patients' vital signs on a daily basis. The information received by the Telehealth team leads to decisions about the kind of intervention required:

• Some alerts will result in a face-to-face consultation referred to the community matron who will visit the patient

• In other cases the team will contact the patient to investigate the alert. They may ask the patient to repeat the recording and/or carry out a telephone consultation to determine the next action or treatment

• Other alerts may result in no further action e.g. if a patient is already being treated for a chest infection. This kind of alert is to be expected and allows the team to keep an eye on the patient concerned.

Social Value

There is a phenomenal amount of social value being created in Hull by the Telehealth service.

Being diagnosed with a long term condition can have a huge impact on a patient's life. Often the symptoms associated with the illness are just one aspect of the condition affecting someone's wellbeing. Anxiety and losing confidence are often equally as difficult for patients to deal with. Telehealth can help hugely with all of the difficulties patients with long term conditions have to face.

People with long term conditions account for 31% of the population but use 52% of all GP appointments, 65% of all outpatient appointments and 70% of all inpatient bed days.

The real social value created by CHCP's Telehealth Hub is clearly apparent:

- Patients take control of their conditions
- Having specialist health care professionals reviewing their vital signs and wellbeing daily means any signs of deterioration are picked up quickly, giving patients peace of mind
- Involvement in daily monitoring of their own conditions and wellbeing changes helps patients achieve deeper awareness and understanding of their condition
- Reducing A&E visits, unnecessary hospital admissions and bed days

If a patient needs hospitalisation they will be admitted without hesitation. However, monitoring vital signs and wellbeing via Telehealth on a daily basis allows us to monitor our LTC patients very effectively so we can care for them and keep them safe at home the vast majority of the time.

Toni Yel, Business & Service Development Manager, Corporate Services, City Health Care Partnership CIC

Feedback shows that our telehealth patients and carers feel reassured. They know if they need hospital, they will be admitted. However, it is equally important to many patients to know that if hospital isn't necessary the people taking care of them at the hub will prevent it. Wendy Train, Senior Community Nurse, Clinical lead for Telehealth, City Health Care Partnership CIC

I have found Telehealth very helpful not just from a medical point, but it is very reassuring. It reminds me on some points regarding my condition of COPD. I have had call backs from the Telehealth team after using the equipment and it was a very quick response. The long term conditions team in my home town responded very quickly following on from this. This I know has kept me out of

hospital which can be very traumatic, so you are helping me very much. It also gives my wife peace of mind that she has someone she can call, so we don't feel on our own. It gives me a more secure

feeling. Many thanks to all.

A Telehealth Patient



The SROI Calculation



There are five lines in this SROI Impact Map:

1. Peace of mind - we carried out a value exercise with Hull Telehealth patients to measure the social value associated with the reassurance patients feel as a result of daily monitoring and contact with the telehealth service Daily monitoring - the social value created as a result of vital signs being monitored daily

- Reduced unnecessary hospital admissions - the estimated social value in terms of cost savings for the NHS in terms of a reduction in unnecessary hospital admissions
- Reduced A&E Visits the estimated social value in terms of costs savings for the NHS in terms of a reduction in A&E visits
- 5. Improved Patient Education the social value created for long term conditions patients in terms of improved patient
 é education

Case Study : Edith's Story

Edith, who lives with her daughter, has COPD as well as dementia. She had a history of frequent hospital admissions due to exacerbation of COPD, which has been incredibly distressing for Edith and has also caused much disruption for the family unit as well extra financial burden due to the cost of travel to the hospital. A multi-disciplinary meeting was arranged to discuss Edith's best interests and agree the best course of action to support Edith and her family at home. Edith's daughter agreed to Telehealth monitoring and to provide support to her mother with the daily questions and peripherals. For Edith and her family their quality of life has improved. They have fed back that:

- Anxiety was reduced for Edith and her family
- Edith's hospital admissions have been reduced
- Edith has needed fewer additional services, which not only means a better quality of life for Edith and her family but also cost efficiencies for the NHS.

partnershif The programme's primary focus is the future health and wellbeing of the child of a young mother.

The Family Nurse Partnership (FNP) is an intensive, preventative home-visiting programme offered to first-time young mothers (18 or under) in Hull, from early pregnancy (8 to 12 weeks) until the child is two years old. Families receive regular visits from the same Family Nurse throughout this time. Each visit consists of structured conversations and activities designed to improve self-efficacy, facilitate behaviour change and build parent/child attachment.

The aims of the FNP programme are to improve:

- antenatal health
- child health and development
- parents' economic self-sufficiency

FNP in Hull is all about relationships. We maintain professional and therapeutic relationships with our families. This keeps everyone safe in environments that are beneficial to baby, and encourages the personal development of mother and sometimes dad. Laura Pickering - Family Nurse Supervisor, City Health Care Partnership CIC





Social Value

Evaluation shows that mothers participating in FNP:

- initiated breast-feeding at a high rate coped better with pregnancy, labour and parenthood
- had increased confidence and aspirations for the future
- returned to education and took up paid employment felt positive about their parenting capacity and reported high levels of warm parenting

It was also noted during this study that fathers' involvement was heightened and safeguarding issues were identified early to the child protection system. In addition, FNP children were seen to be developing in line with the general population, which is very promising as this group usually fares much more badly. Family nurses were very positive about the programme, saying it gave them the chance to learn new skills and work intensively with clients.

In a climate of austerity and the political focus on health-care spending, there is division about FNP's value for money, but it is clear the benefits will happen upstream. The long-term benefits of improved parental attachment will not be seen in the measurement of short-term health benefits. The impact FNP has on society may not be felt until the next generation. Andrew Burnell, CEO, City Health Care Partnership CIC



The SROI Calculation

There are seven lines in this SROI Impact Map:

- 1. The results of a value exercise undertaken amongst young parents that access the service
- 2. The cost of a similar postnatal support service available privately
- 3. The value of a child's 'school readiness'

1. 4. 514

4. The average saving of the social services costs associated with a child going into care

5. Value of a teen mum who gets back into education, employment or training
6. The savings in police, local authorities, criminal justice and NHS costs associated with a domestic violence incident

7. The savings to local authorities for an individual with mental health issues

Case Study : Leah's story

Leah was recruited to the programme at 16. The father of her baby was in prison for assaulting a man in the street. Leah wanted to be in a relationship with him.

Leah was living with her mum who was separated from her dad, a perpetrator of domestic violence, but she wanted to live in her own property. There was a history of heavy cannabis use in the family and Leah had not been in school for three years. Leah engaged with FNP, Social Care and T.P.S. She was allocated her own flat and when her partner was released from prison they began living together.

There were many challenges in the postnatal period; relationship difficulties, alcohol and drug use and domestic violence were preventing Leah from being the sensitive and responsive parent she wanted to be. Leah's partner served another prison sentence for violence against Leah and on his release, Leah's baby was made subject to a child protection plan. Both Leah and her partner worked with services and completed necessary courses whilst adhering to the plan for their baby. Leah engaged with programme materials to think about safety and risk in relationships, and the impact of DV on her son. They made good progress and after 3 months their baby came off the child protection plan. They are now living together as a family and they no longer have a social worker. Leah is in tune with her toddler who is a happy little boy who is developing well. Leah is developing a CV with the support of her Family Nurse as when her son attends nursery at 2 years she would like to work part time. Leah does not have formal qualifications, but over the last two years she has developed many skills. She is considering attending basic Maths and English classes.



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