

Item No: 13

Meeting Date: Wednesday 15<sup>th</sup> May 2024

# Glasgow City Integration Joint Board

Report By:	Gary Dover, Assistant Chief Officer, Primary Care and Early Intervention Karen Dyball, Assistant Chief Officer, Children's Services				
Contact:	Fiona Moss, Head of Health Improvement and Equalities				
Phone:	0141 287 0392				
	Whole Family Support through General Practice				
Purpose of Report:	The purpose of this report is to update the Integration Joint Board on the offer of additional funding for a whole family support and well-being though primary care pilot, and to request approval of the expenditure.				

Background/Engagement:	The Scottish Government Primary Care Division have awarded tranche 3 Whole Family Wellbeing Funding (WFWF) to test, over a two year period, the role of primary care based interventions for children and parents.
	This is a component of wider national WFWF programme alongside tranche 1 and 2 commitments in line with the ambitions of the Children's Services Plan.

Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development.
	HSCP Senior Management Team □
	Council Corporate Management Team
	Health Board Corporate Management Team □
	Council Committee
	Update requested by IJB □
	Other ⊠ The Deep End Steering Group, the Scottish
	Health Inequalities in Primary Care Working Group,
	Children's Services Planning Group, Local Medical
	Committee and Primary Care Strategy Group

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	Not Applicable □				
December detions.					
Recommendations:	The Integration Joint Board is asked to:				
	a) approve expenditure on the Whole Family Wellbeing				
	Funding (WFWF) Primary Care Programme as outlined				
	in the report.				
Relevance to Integration Joint	Board Strategic Plan:				
This relates to all six of our Strate	egic Plan (2023-2026) priorities.				
Implications for Health and Soc	cial Care Partnership:				
Reference to National Health	Outcome 1 – People are able to look after and improve				
& Wellbeing Outcome(s):	their own health and wellbeing and live in good health for				
, ,	longer.				
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Personnel:	This investment will generate employment within GCHSCP				
	and within commissioned organisations. Fixed term				
	contracts and posts will be required for delivery.				
Carers:	This proposal has the potential to support the identification				
Garoro.	of family carers and support wider access to support.				
	or raining our or our and outpers made access to outpers.				
Provider Organisations:	Some elements of this proposal are expected to be				
_	commissioned from the charitable sector.				
Equalities:	This development is in line with the Children's Services				
	Plan <u>EQIA</u> .				
Fairer Scotland Compliance:	This proposal explicitly seeks to address health inequalities				
Tanor Godiana Gomphanos.	in Childhood in a selection of practices servicing patients				
	living in the 15% most deprived areas in Scotland.				
Francis	TAIL P(				
Financial:	All expenditure will be in compliance with the procurement and financial regulations/standing financial instructions of				
	both partner bodies.				
Legal:	None.				
	T				
Economic Impact:	This will generate new work opportunities and skills				
	development in general practices, communities and families over a two year period.				
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Sustainability:	To be determined following the testing phase.				
	1				
Sustainable Procurement and	None.				
Article 19:					

Governance and delivery risks for this new programme including identifying willing practices, potential suppliers, recruitment and retention and family engagement, participation and improved outcomes.				
None.				
This is a				
None.				
Glasgow & Clyde:				
Health Board or Both				
2. Glasgow City Council				
3. NHS Greater Glasgow & Clyde				
4. Glasgow City Council and NHS Greater Glasgow & Clyde				
	including identifying willing practices, potential supplier recruitment and retention and family engagement, participation and improved outcomes.  None.  None.  Health Board or Both			

## 1. Purpose

1.1 The purpose of this report is to update the Integration Joint Board on the offer of additional funding for a whole family support and well-being though primary care pilot; and to request approval of the expenditure.

## 2. Background

- 2.1 The Whole Family Wellbeing Fund (WFWF) is a Scottish Government funded programme established in 2021/22 to improve family well-being during the parliamentary term, reduce inequalities, reduce families needing crisis intervention and reduce the proportion of children living away from their families. Glasgow City HSCP has been asked to support a Primary Care element of the programme.
- 2.2 Glasgow City is home to 72 of the 100 General Practices servicing Scotland's poorest patients, known as 'Deep End' practices. There are over 49,800 children aged 0-14 years of age registered with a Deep End Practice in Glasgow, with over 14,300 patients aged 0-4 years of age.
- 2.3 Funding was originally awarded to GCHSCP (GGCNHS) in May 2023 however the terms of the funding and approval process prevented this being enacted. Following considerable dialogue, the Scottish Government have awarded the funding to GCC as part of their Child Poverty Pathfinder and wider WFWF programme, enabling year two income to be underwritten.

## 3. Whole Family Well-being Fund through Primary Care Pilot Programme

3.1 In January 2023, the Health Foundation published Scotland's 'Marmott' Report evidencing that relative and absolute inequalities have widened for a wide range of measures affecting children in Scotland. The report highlighted the

accumulative impact of severe multiple deprivation over the life course and called for urgent 'practical collaborations' that could address structural and personal resilience to enable families and children to thrive.

- 3.2 Everyone's Children (the cities third sector network supporting families and children which is co-ordinated by Glasgow Council for the Voluntary Sector) were simultaneously completing the Glasgow Promise Project involving the third sector and families in determining what 'good' family support could be locally. They engaged 123 services across 78 organisations delivering support to families and consultations with families (based on 387 in-depth interviews with children, young people and parents across Glasgow), co-producing the final recommendations and report (GPP Consultation Report (gcvs.org.uk)).
- 3.3 Families and those supporting them wanted more support, earlier support, and fewer barriers to access, better communication between services and professionals and more information on services that are available. Particular issues raised included:
  - Mental health (for parents, young people and children)
  - Poverty, cost of living, food and fuel poverty, money advice
  - Complex needs, Additional Support Needs (ASN), Autism Spectrum Disorder (ASD), disability, respite, transitions
  - Early intervention, preventative work, local services,
  - Support for BME communities, asylum seekers and refugees
  - Employability and skills development
  - Dads only provisions
- 3.4 A selection of family case studies (18) were drawn from Community Link Workers to also inform the proposal. These demonstrated:
  - the complexity of the health, relationships and living situations families were facing and the accumulative impact of these
  - isolation many had no contact with anyone, or only the person they cared for, quite often a child with a disability
  - the disconnect with services, the challenges to get and stay in services, particularly mental health services
  - barriers of language, residency status and poverty.
- 3.5 Preventative holistic family support is essential to deliver the transformational change in health inequalities required in Glasgow. During discussions within GP forums in Glasgow, about the development of the Whole Family Well-being Fund (WFWF), there has been a strong message that we need to simplify our support processes and offers at a family level and put in place the now well-evidenced mitigations and protections for children growing up in poverty.
- 3.6 This programme will focus on developing practical collaboration within practices servicing the poorest patients to make every family contact count, addressing the structural and personal aspects of disadvantage, and pro-actively engaging families on practice lists to wrap around wider mitigations and well-being services.

- 3.7 This programme will bring coherence to the primary care-based offer for families through dedicated family well-being capacity, and support wider coherence through the range of services of known need, family feedback and the emerging family support networks. The programme tests ways of strengthening more integrated support for patients with family complexity affecting their primary care presentations within deprived practices.
- 3.8 This intelligence informed the submitted proposal, subsequently awarded, which;
  - Creates capacity to support general practice to pro-actively engage their registered families, bridging families to the range of supports and preventative services available and acting as a family 'link/support' worker
  - Supplementing mitigation services where there is limited availability currently (e.g., enabling family access in relation to trauma, poverty and language services)
  - Expanding evidenced well-being services to complement current provision (e.g., the thrive under five holistic well-being programme that supports nutrition, food insecurity and an active childhood and the youth health service)
  - Involving families enabling local collaboration to supplement groups and activities available to families within the practice
  - Learning and evidencing change. Putting in place a comprehensive package of research evidence generation and collective learning through the programme.
- 3.9 Mitigation Services. Three key developments will supplement existing provisions for participating families:
  - English as a Second Language (ESOL). The Scottish Government has awarded health inequalities payments to practices servicing the most deprived patient populations over the last two years. Evaluation of this investment has highlighted the very significant language barriers to the provision of care and some of the ways in which general practice has attempted to address these. The WFWFPC pilot includes a part-time ESOL liaison worker and tutor costs to provide ESOL provision for the families in the practices who require this. It is anticipated that engaging with the children's health and care system will be incorporated into this bespoke ESOL offer to enable families to navigate these systems and form friendships in the ESOL classes.
  - Trauma responses. In 2020 GCHSCP published the findings of an exploration of the trauma sensitivity of general practice. Exploring trauma in general practice (Glasgow). "You're worried about asking too many questions because it might open up a Pandora's Box that you don't have time to deal with and you're not really trained to deal with their issues anyway." GP. One of the key predictors of adult mental illness is exposure to childhood adverse events. WFWFPC will provide access to tailored trauma support for the parents/carers of children to support them to protect themselves and their children from further trauma exposure.

- This will be undertaken in partnership with third sector specialist providers.
- Financial Advice and poverty. The programme will seek to enable welfare
  advice provision for all participating families by supplementing Welfare
  Advice in Health Partnership (WAHP) provision in participating practices
  that don't currently have this service and enhancing Healthier Wealthier
  Children provision for the family well-being workers. This will be enacted
  through the existing funding processes (NHS contract and GCC grants).
- 3.10 Prevention Services. A range of evidenced and developmental prevention services are incorporated into the WFWFPC pilot:
  - The pre-school components builds on three already evidenced programmes; the Thrive Under Five (TU5) trial which concludes in May 2024, the Live Well Community Referral programme (Live Well Evaluation) and the early development of reading and playing. TU5 successfully trialled a healthy weight in the early years programme with a combined focus on healthy eating, food insecurity and physical activity in three neighbourhoods in Glasgow (TU5 yr 1 evaluation). This combined cooking and food pantry membership, dispersal of Alexandra Rose vouchers for fruit and vegetables, free activity programmes and other community family engagement activity. The reading and play commitment is based on the early learning from the international Dolly Parton Learning Library (DPLL) programme DPLL Impact Report, trial for looked after children in Scotland and the North East of the city.
  - For primary school age children the piloting of the club budget recognises
    the very strong protective effect of regular club participation has in the
    lives of children. Struggling families will have the opportunity for their
    child to access one club throughout the WFWFPC pilot, be it sport,
    drama, music or arts, with participation requirements met by the
    programme. This will be tested and evaluated as part of the programme
    and administered through Glasgow Life.
  - For secondary school children the programme of supports available through the Youth Health Service (<u>YHS Annual Report 2022/23</u>) will be available for participating families. The Youth Health Service provides holistic clinical and well-being services, including youth work and employability support for young people 12-18 years of age.
- 3.11 The required outcomes of the pilot are:
  - General practice Multi-Disciplinary Teams will be better enabled to work with teams from other statutory and third sector services to plan and provide wraparound support for families in/at risk of poverty, trauma and exclusion.
  - Clearer identification and proactive engagement with families within the participating practices that can benefit from early support, and provide and test earlier intervention responses.

- Creation and deployment of a new Family 'Well-being' Worker role a model of wraparound and proactive whole family support and early intervention support which is rooted in general practice.
- Working towards children and families in selected practices experiencing health and care services that meet their whole family needs - at the right time - with improved wellbeing outcomes.

## 4. Whole Family Well-being through primary care governance

- 4.1. A steering group for the pilot has been established, including membership from General Practice, Children's Services, the Child Poverty Pathfinder team (GCC), Health Improvement, the third sector, the Primary Care division and Glasgow Life and reports into the Children's Services Executive Group. This provides the oversight and recommendations to progress the pilot, recommending the programmes and funding arrangements for management through the integration authority.
- 4.2. This work is of considerable national interest and will be reported through the Deep End Network, the national Primary Care Health Inequalities Reference Group and as part of the wider Whole Family Well-being Fund.
- 4.3. The Local Medical Committee are supportive of the progression of this pilot, noting that opportunities to continue to improve primary care responses to patient needs are particularly welcomed.

## 5. Funding

- 5.1 Specific Scottish Government funding has been awarded to Glasgow City Council for this development of £1.97m for 2024/25 (award letter received on 26 February 2024) and £1.77m for 2025/26 (subject to parliamentary approval). The allocation will be aligned to each of the programme areas in Table 1 as approved with Scottish Government, with management through the Integration Authority.
- 5.2 This programme has been thwarted by challenges created by the nature of the funding award to date. Further delays in confirming funding would mean there is insufficient time remaining to recruit and commission the required services for delivery to March 2026 and the loss of TU5 staff.

Table 1: Financial Allocation

HSCP Service Descriptor		Cost 2024/25		Cost 2025/26	
	Fixed term Bd 7 NHS post to				
	manage programme delivery and				
reporting and liaison with					
Programme Lead	participating practices.	£	49,600	£	74,383
	Fixed term Bd 6 NHS post to				
support practices to retrieve and					
assess patient data required to					
identify and track family					
Practice Analyst			39,920	£	59,881

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	To enable bespoke and general				
	family well-being training for the				
Training/Development	practice staff involved	£	12,000		£4,000
	Delivery of the previously tested				
	programme within the				
	participating practice				
	communities. Extension of 3 x				
	0.6wte Bd 6 staff and extended				
	secondment 0.5wte Bd 7 +				
	supplies costs for cookery				
	activities, active programmes				
Thrive Under Five	and food pantry membership.	£	216,000	£	261,000
	Extending YHS provision		·		,
	through recruitment of two staff				
	(1 wte Bd6 nurse and 1wte Band				
	3) and enactment of option 1 of				
	the Multiple Risk and Lifelink				
Youth Health Service	contracts	£	220,000	£	242,120
General Practice Sup	ports and Services				
		1			
	Practice set-up costs of £5,000				
	per participating practice in yr 1				
	and £1,000 in year two to enable				
	the systems, practice team				
	involvement, locum cover and				
Practice Development	induction of family well-being				
costs	support worker		£55,000		£11,000
	Sessional locum cover for the 4				
	GP's participating in the steering				
Deep End Steering	group to design and deliver this				
Group	new initiative		£5,000		£1,000
Provided Supports ar	nd Services				
	Commission provision for 0.5wte				
	-				
Family Well-being	family well-being support				
Support Workers	workers (FWSWs) in each of the				
• •	eleven participating practices.				
(FWSW)	5.5wte staff + management	£	249,000	£	358,543
	Provision of family activities in				
	the neighbourhoods servicing				
	the participating practices,				
	awarded 15months grant from				
	October 2024-March 2026 £44k				
	per practice area, determined				
Community Early	through practice and community				
Community Family	involvement, through extending				
Well-being Services	existing grant fund contract	£	200,000	£	300,000
	Tailored trauma support for the				
	parents/carers of children. This				
	will be undertaken in partnership				
Trauma Response	with third sector specialist	£	90,000	£	90,000

providers through a series of quick quotes (multiple suppliers)  Internal transfer to Glasgow Life to employ a part-time ESOL liaison worker and tutor hours for the provision of family language
Internal transfer to Glasgow Life to employ a part-time ESOL liaison worker and tutor hours for
to employ a part-time ESOL liaison worker and tutor hours for
liaison worker and tutor hours for
the provision of family language
learning classes and peer
groups. Understanding the
health and care system will be
incorporated into the delivery
ESOL design £89,200 £ 95,00
Enhancing Healthier Wealthier
(HWC) Children programme to
enable FWSW referrals for
financial advice provision for
participating families. This will
Family poverty be enacted through the HWC
programme grant process administered by
GCC Financial Services. £ 146,000 £ 168,00
The recently evaluated Live Well
Community Referral Programme
Family will be provided through
learning/Community Glasgow Life for the
referral parents/carers of the
participating families. 1 wte Gd 5 £ 48,527 £ 58,03
Glasgow Life will provide
monthly books and reading
scheme for participating families
with children under 5.
0.3wte GL staff and book
budget, connecting families into
existing library provisions and
Reading and Play early play and learning
opportunities wherever possible £ 36,900 £ 49,20
Children will be able to access
one club (sport, drama, music or
arts +) with costs met through
WFWFPC. Administered through
Glasgow Life, Based on £320 pa
Childrens Club per eligible child + equipment costs.
Budget costs. £290,000  Research and evaluation
programme for the process
tracking, impact on primary care
and family outcomes of the pilot
enabling evidenced and
publishable results. GCC chief
Executives department will
administer this award through the
HDRC legal agreement with
Glasgow University. The
Research and Department of General Practice
Evaluation in GU will deliver this for the pilot £220,000

	period. The payment schedule will extend over the full pilot period and carry forward for this purpose has been approved by SG.				
Total		£	1,967,147	£	1,772,160

## 6. Recommendations

- 6.1. The Integration Joint Board is asked to:
  - a) approve expenditure on the Whole Family Wellbeing Funding (WFWF) Primary Care Programme as outlined in the report.



## **Direction from the Glasgow City Integration Joint Board**

1	Reference number	150524-13
2	Report Title	Whole Family Support through General Practice
3	Date direction issued by Integration Joint	15 May 2024
4	Board Date from which direction takes effect	15 May 2024
5	Direction to:	Glasgow City Council only
6	Does this direction supersede, revise or	No
0	revoke a previous direction – if yes, include	110
	the reference number(s)	
7	Functions covered by direction	Primary care services for children and families at risk of poverty, trauma and
	•	exclusion; family support services, welfare advice services for families.
8	Full text of direction	Glasgow City Council is Directed to implement the spending proposals related
		to the 2024/25 and 2025/26 funding allocations for the Whole Family Wellbeing
		Funding (WFWF) Primary Care Programme, as outlined in Table 1.
9	Budget allocated by Integration Joint Board	The financial allocations awarded to Glasgow City Council by the Scottish
	to carry out direction	Government for this development consists of £1.97m for 2024/25 and £1.77m
		for 2025/26 (subject to parliamentary approval).
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow
		City Integration Joint Board and the Glasgow City Health and Social Care
		Partnership.
11	Date direction will be reviewed	May 2025