

## Using the Compact as a tool for local collaboration between health bodies and the voluntary and community sector

Bedford - Wednesday 21 January 2015

### Table 1:

#### Opportunities

- Reaching under the radar groups
- Local health outcomes – obesity
- Work closely with children’s centres
- Community workers – knowing the local community
- Working together on service design
- Sharing feedback and intelligence with local Healthwatch
- Collaborate as a sector
- Knowing what the problems are – bringing knowledge, expertise and experience together
- Help decision making about how to commission

#### Difficulties

- How to make referrals to relevant VCS groups
- CCG recognising that improved health outcomes can and are delivered by VCS

### Table 2:

#### Social Prescribing

- Challenges with identifying pathways
- Evidence base for GP’s – difficulty in identifying outcomes
- Challenges of moving from community group to provider

#### Benefits of VCS

- “gold to commissioners
- help to build picture of local needs
- meaningful engagement with voluntary sector saves money in the long run – voice of service users

#### Social Value Act

- more than economic benefit brought by small organisations

### Table 3

- Lack of understanding about voluntary sector
- Worked hard to get County Council involved
- Voluntary sector needs to demonstrate value
- Some areas (geographically) need a refresh on the benefits of the Compact
- Healthwatch capacity varies hugely
- Local Healthwatch should be involved

### Table 4:

#### Why we need the VCS:

- Broader issues that GP’s cannot deal with
- Health & Social Care outlet

**Post it notes:**

- Really good to provoke thoughts and discussions about how to develop meaningful partnership working
- Find out who are local REP for Healthwatch is
- Contact local Public Health lead