Cyflwynwyd yr ymateb i ymgynghoriad y <u>Pwyllgor Iechyd a Gofal Cymdeithasol</u> ar <u>Cefnogi pobl sydd â chyflyrau cronig</u>

This response was submitted to the <u>Health and Social Care Committee</u> consultation on <u>supporting people with chronic conditions</u>.

CC14: Ymateb gan: | Response from: Gwasanaethau Gwirfoddol Morgannwg/ Glamorgan Voluntary Services





Response from Glamorgan Voluntary Services (GVS) to: Health Service Procurement (Wales) Bill

Introduction to Glamorgan Voluntary Services

GVS is an independent charity and has a flourishing membership of voluntary and community organisations active in the Vale of Glamorgan. We help to improve the quality of life of people and communities by supporting volunteers, volunteering opportunities and voluntary groups.

GVS delivers a range of quality services to meet the needs of voluntary groups. We are a one stop shop for the voluntary sector. We champion best practice throughout voluntary organisations so that they excel in delivering their aims and objectives.

GVS empowers voluntary groups, providing many channels of engagement and quality services to enable them to excel at serving their communities. Our role is to provide information, advice and guidance on all aspects of volunteering for both volunteers and recruiting organisations.

GVS Response

GVS welcomes the opportunity to comment on the 'Supporting People With Chronic Conditions Consultation'. We respond to this in our capacity as an organisation which supports the third sector in the Vale of Glamorgan. We are also active partners in many areas of work with the Health Board and with the Local Authority.

For this particular consultation we think it would be more beneficial to consult with third sector organisations who work directly with people with chronic conditions and who understand the current landscape. This consultation has been shared with multiple third sector organisations in the Vale of Glamorgan area and with the 'local co-production forum – working together: supporting people to live well with long term conditions' who are putting together a response.

The third sector is very flexible and able to support the community and statutory services where needed. This fast and flexible service was vital during the height of the COVID-19 pandemic. In regards to supporting people with long term conditions there are many third sector organisations that support service users and statutory services.

However, the pressure on third sector services has increased and has been exacerbated by the pandemic and cost of living. Statutory partners are relying more and more on the third sector which results in more service users needing support. Social prescribing has also become more prevalent which adds to the pressure.

This is causing difficulties as third sector services and organisations are struggling with this increase and struggling to gain long term funding to support their regular services. Without funding or support third sector services that are relied upon will end which will cause a

knock on effect. The people supported will be left to start the process of finding support again, either by returning to statutory services or being passed to other third sector services. Restarting their process will cause fatigue and a deterioration to mental health as the service users have to retell their situation again and again.

It is pleasing to see that the third sector is valued and relied upon but it is not sustainable without support. Projects do not last longer than three years (enough time to establish themselves, make links, support service users and then close down). Some projects are as short as 9 months. This means that the vital experienced staff leave (sometimes leaving the sector entirely) which has a knock on effect to the organisations already struggling to retain staff.

The pandemic and the cost of living have added further strain. This has affected everyone, but there is an increase in people being passed to the third sector (due to statutory services also receiving budget cuts) without funding or support.

The third sector supports the NHS with their services and some organisations support hospital discharge. But again, the infrastructure will not be able to sustain itself if one area closes or keeps changing. It creates more work for statutory services who have to source other third sector organisations/services to fill the same or similar functions. This cycle will repeat itself every 1 - 3 years.

In conclusion, there are many barriers and difficulties with accessing support and although there have been great gains in integrating third sector services, this is not a sustainable model.

GVS hopes that this response is helpful.

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