

Reflections from the Building Positive Futures Programme

A values-based approach to sector led improvement



Foreword

ADASS in the East of England are very committed to the delivery of the Regional Building Positive Futures Programme, and see it as a key means of hearing about and developing innovative communitybased support. As a region, we recognise that if we just concentrate on the here and now, we are not going to resolve market capacity issues in the long term. We need to be forward thinking and start to grow areas of work which are already working well across the country as well as new ideas and initiatives to widen choice and control for the people who draw on care and support. We know that people want to lead a good life and this means in a place they call home, with people and things they love, in communities where we look out for each other, doing what matters.

The Building Positive Futures Programme has been running for nearly two years and has enabled significant shared learning from not only within the region but more widely also from national leaders and organisations. We are especially grateful to the expert communitybased organisations and people who have shared their experience of care and support during our learning journey. We continue to put people who access care and support at the heart of everything we do and know their experience can help to shape a better future.

Over the last year, we have been pleased to see local authority co-production work grow in the East of England. For example, the use of the Working Together for Change co-production methodology; growing adaption of the Think Local Act Personal Making It Real I Statements; building strength based approaches to care and support, the increasing work on individual service funds; understanding more about self-directed support in general including learning about support brokerage; exploring community connections; shared lives opportunities; working in partnership with health on community initiatives; developing our economy; increasing micro-enterprises and learning from assistive technology to improve independence and safety. All of which have been extremely helpful for our region to learn and grow.

The Regional Sector Led Improvement Programme continues to be committed to funding, supporting, and building upon the Building Positive Futures programme in 2022/23 and look forward to seeing the impact in the coming years. We hope you find the report interesting and useful to local work.

Tandra Forster
Eastern ADASS

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Introduction

The East of England Regional Building Positive Futures Programme (RBPF) has been running since December 2020. A link to last year's report can be found here: [Last years RBPF report](#) along with various examples of emerging and changing practice reports across the East [Publications on a page](#).

This year's report work spans from April 2021 to March 2022. The programme focuses on a values-based approach to sector led improvement which is helping to grow and drive innovation at a local level.

The programme has come about during the COVID19 pandemic, with most teams working virtually and not meeting face to face, and aims to refocus energy and build motivation around core Adult Social Care Practice in relation to co-production, increasing choice and control in the market and building community-based innovations. The programme has been managed through the Regional Personalisation and Prevention Network.

The series of low cost (to the region) 2-hour virtual action learning groups is intended to complement the regional sector led improvement programme and the wealth of other networks across the region with links to other network activity.

Reminder of programme stipulations

At the start of the programme, ADASS East of England Adult Social Care set out some stipulations which we thought were important to follow, such as:

- 2-hour virtual learning groups
- No agenda but clear learning outcomes
- Facilitated by an expert external organisation
- Around 20-40 people to keep it manageable but meaningful online
- Cascading the learning from those who attended to other colleagues within their local areas
- Every local authority to have at least one representative (where possible)
- Learn from practice outside of the region as well as across the region
- Provide some practical space to discuss challenges, barriers, successes and opportunities
- Flag national resources which can help local improvement work
- Provide lived experience from people who are accessing care and support
- Provide a media programme of videos whereby the learning can be seen in local areas at relevant times for local improvement work

Action learning groups for 21/22

During December 2020 to March 2021, there were six action learning sets run. During the full year of 2021/22, there have been a further 13 learning sets with a total of over 300 people benefiting across the year. The sessions were as follows:

April 2021

Digital in action, the how and why digital should be part of our social care toolkit
TSA

May 2021

Supporting connections with purpose and meaning
Community Circles

June 2021

Economic Development
Power to Change
COVID19 Learning
SCIE

July 2021

Personalised Care Programme
NHSE/NHSI
Social Prescribing
NHSE/NHSI

September 2021

Mental Health Transformation and Integrated Care
SW for Better Mental Health and NHSE/NHSI

October 2021

Golden Age of Pirates and co-production
Curators for Change

November 2021

Working Together for Change
Simon Stockton

December 2021

Assistive Technology
TSA

January 2022

Support Brokerage
Imagineer

February 2022

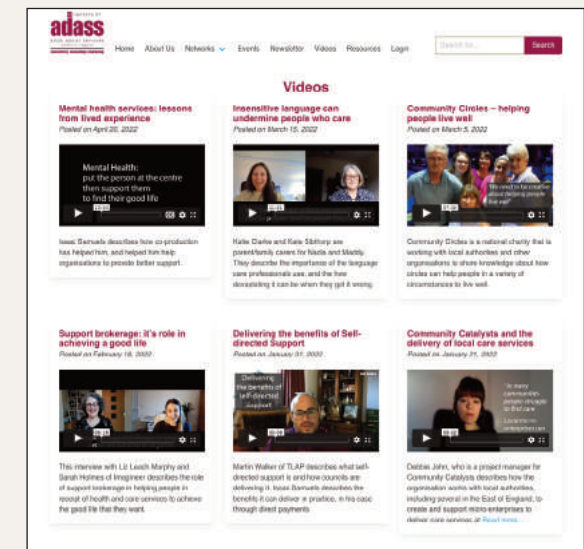
Strengths based approaches
Shared LivesPlus and HomeShare

March 2022

Buurtzorg
Public World

Media programme

The programme has also provided some video clips in collaboration with CLGdottv.com which are being used to improve local practice, and grow and spread innovation. They have been widely shared on Twitter and LinkedIn. We will continue to build on this resource over the coming year.



Videos can be found [here](#).

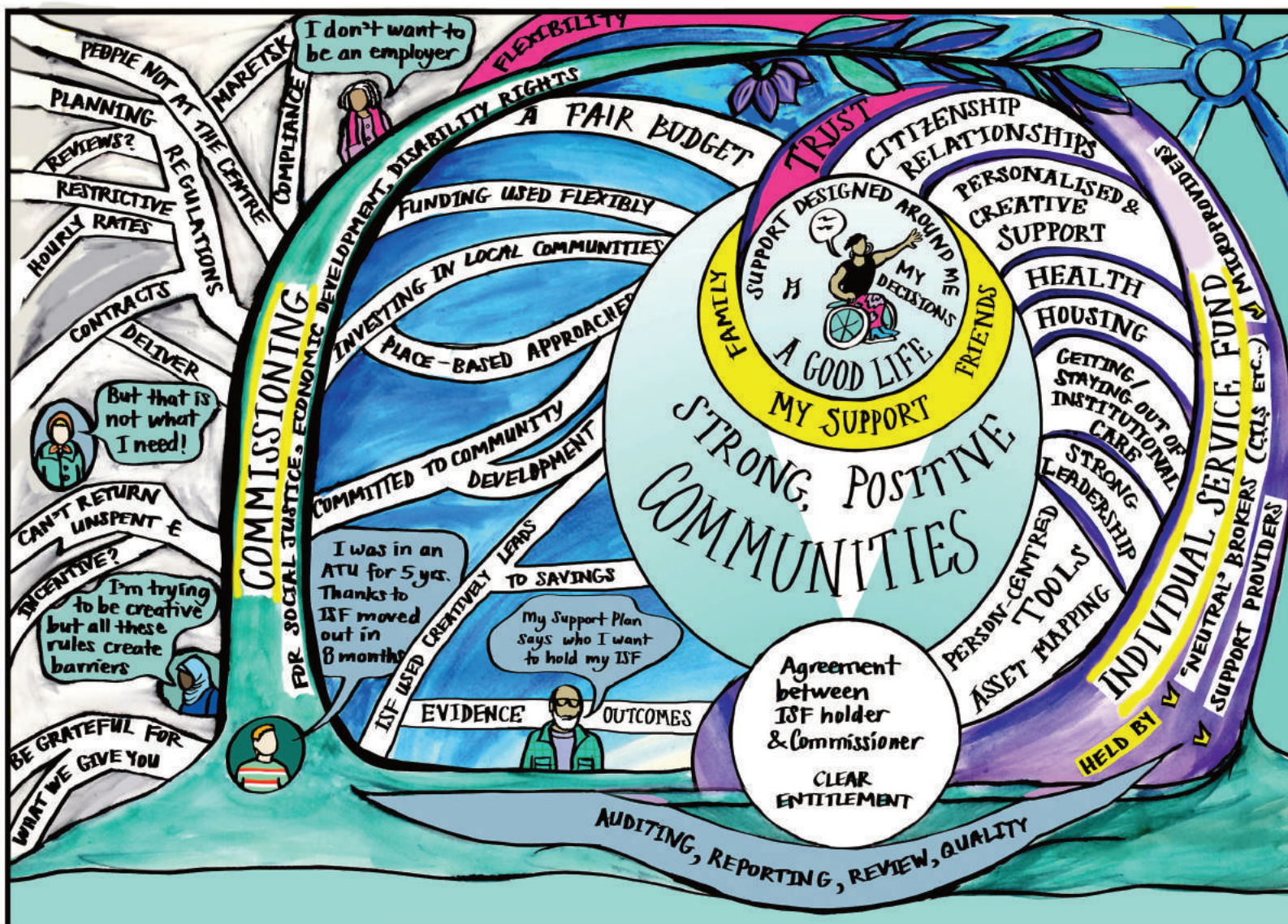


Emerging and changing practice reported as part of the programme and wider work

A number of councils have provided emerging and changing practice examples which show work being undertaken in relation to personalisation, co-production and building community innovations. Although it is too soon to recognise the full impact of the Regional Building Positive Futures Programme, many of the examples put forward are about work already developed over a number of years that we will be building upon.

HOW CAN WE GET MORE PEOPLE BENEFITING FROM FLEXIBLE SUPPORT?

INDIVIDUAL SERVICE FUNDS TRANSFORMING COMMISSIONING



East of England Building Positive Futures Programme, ADASS and TLAP. Online, 2020-2021. Graphics by www.penmendonca.com @MendoncaPen
This graphic includes work presented by the Centre for Welfare Reform and colleagues

Individual Service Funds in Peterborough City Council and Cambridgeshire County Council

The Care Act states that a personal budget can be deployed as a managed account held by a third party. This is known as an Individual Service Fund (ISF). Processes were put in place to implement ISFs in East Cambridgeshire and Peterborough, with a countywide rollout expected to follow in 2023.

An ISF provides an alternative to a managed provision from Adult Social Care or a direct payment. It is a monetary payment, paid to an organisation (an ISF Provider), in order to plan and meet an individual's eligible care and support needs. ISFs support the principles of personalisation, strengths-based practice and self-direction. Individual Service Funds offer increased choice, flexibility and control to those who may not feel comfortable directly employing a Personal Assistant or managing a Direct Payment (DP). People who access care and support (or their representative) can:

- Choose their Provider. If the Provider is not already on the Council's list of ISF Providers, the Provider can apply to join at any point.
- Work with the Provider to use their ISF in a flexible way to meet outcomes and support needs in a more creative way.
- Use their ISF to pay for support from different organisations and/or to employ a Personal Assistant.

The councils approved the implementation of Individual Service Funds in East Cambridgeshire and Peterborough (first referrals expected in July 2022, following a tender due to go live by April 2022).

The intended outcome of implementing ISFs is to offer people greater personalisation, choice, control and flexibility, initially in East Cambridgeshire and Peterborough and subsequently across Cambridgeshire, whilst meeting the statutory obligations and complying with best practices in terms of safeguarding and quality of care.

With support from Self-Directed Futures Ltd., the councils were able to provide training workshops to their Social Workers and interested Providers to allow them a better understanding of ISFs. The feedback that was received through training workshops was very positive and welcoming. This also allowed us to foster closer relationships between practitioners and potential Providers. It is expected that through the implementation, the uptake of self-directed services will begin to increase.

In June 2021, the Joint Commissioning Board approved the implementation of Individual Service Funds in East Cambridgeshire and Peterborough, with support from Self Directed Futures. Individual Service Funds would provide an alternative to DPs, taking away the pressures of managing payments and directly employing PAs. The first referrals for ISFs are expected to be in July 2022.

Internal and external stakeholders engaged in meetings to input and suggest visions of best practices, issues, risks, recommendations and support requirements. This process included conversations with members of the Partnership Boards of people with lived experience of accessing health and care services, run by the local Health-Watch.

Furthermore, eight co-creation events were held in October 2021 under the Care Together Programme (a place-based approach to commissioning services that support people to live happily at home for longer in East Cambridgeshire), and these allowed members of the public to identify

issues, barriers, opportunities and solutions. Based on analysis of this input, commissioners were able to identify a work-stream supporting access to self-directed support.

The conditions for success were:

- Building relationships between Commissioning, Social Workers and Providers
- Good relations with DP Support Services
- Factsheets with in-depth explanations of ISFs for practitioners

Some of the barriers were:

- Delays due to some governance committee meetings that only take place quarterly
- Availability of practitioners who have heavy caseloads to take part in extensive training on the concepts and tasks associated with ISFs
- Potentially, the workforce capacity issues that all social care providers are facing could impact on willingness or ability to accept call-offs for provision of personalised care and support planning under an ISF agreement.

For more information...

Please contact shairbano.shaukat@peterborough.gov.uk or leneva.nwachukwu@cambridgeshire.gov.uk

Or visit the council website:

www.cambridgeshire.gov.uk/residents/adults/organising-care-and-support/paying-for-care/individual-service-funds

Transforming in-house Adult Social Care provision using a strengths-based approach in Thurrock Borough Council

Thurrock Council has transformed its in-house ASC provider services to provide an operating model based on the principles of strengths-based working.

Thurrock has a well-established Adult Social Care and Health transformation programme (known as Better Care Together Thurrock). The programme aims to develop an integrated and place-based health and care system – focusing on preventing, reducing and delaying the need for health and care intervention. A significant element of this is shifting from traditional service-focused operating models that work in isolation and act on crisis, to integrated operating models that operate around the person, close to where they live and focusing on delivering what matters most to the individual. Achieving this vision requires a radically different way of thinking and operating. The rethinking of the traditional 'homecare' model is a significant aspect of this work.

Thurrock has two Wellbeing Teams in place, designed to test a very new approach to delivering care in the home. These Teams are self-managed and focus on identifying strengths and using community assets to help deliver what matters most to people. These Teams have been in place since 2019.

The current model of delivery incorrectly assumes that not everyone has the capacity to be 'reabled' or that reablement is time limited. In reality, almost everyone has some reablement capacity, which may require only a few days or can continue for many months or even years.

The current pathway can mean people who access care and support are 'handed over' from one provider to another, sometimes a number of times, before finally settling with a permanent home care provider. This can be

confusing and unsettling for the person and is not conducive to enabling the person to make decisions around their care. The approach is also extremely inefficient with high levels of bureaucracy and 'failure demand'.

Whilst the majority of adult social care provision in Thurrock is externally commissioned, it does retain a number of directly delivered care services including one residential care home, day care, and reablement and domiciliary care services.

In line with the vision and aims set out within Thurrock's transformation programme for health and care, the council wanted to test and apply the principles underpinning the Wellbeing Teams approach to in-house provision.

This resulted in a restructure that established a single provider with carers to support both reablement and personal care. From day one this support was holistic and tailored to the individual.

The first stage of the transformation was completed on 28 February 2022 and involved a complete restructure of the service.

The service now has a new name "Caring for Thurrock" which was chosen by staff members.

It is now divided into two areas – Community and Residential – which consist of 12 separate teams supporting smaller groups of people who access care and support. The teams providing support to people in their home are locality based and focus on doing what is required to deliver

outcomes rather than time-based tasks. The teams are testing self-management, as well as the role of trusted Provider, by conducting reviews and also managing any increases or decreases in care.

There is no longer a separate Joint Reablement Team and Thurrock Care at Home, instead the community service offer has increased to include reablement opportunities across the whole service. In recognition of the change to the role of carers, staff providing reablement care and support are now called Independence Support Workers or ISWs in short.

Through work carried out prior to the delivery of Wellbeing Teams, we know that people using support services want that support to be tailored to them, and flexible enough to help deliver what is important to them. We also know the staff want the time to get to know the people they work with and to help them to achieve their individual outcomes. We also know that carers wish to be acknowledged for the professionals that they are, and to be seen as such. The sector has a significant recruitment and retention issue and the market is consistently fragile.

Staff were consulted significantly throughout the restructure process.

Staff, as well as the individuals the council supports, will be consulted again as part of measuring whether the changes made have been successful.

What were some of the barriers?

- Existing process structured around 'time and task' was not easy to unpick
- Injecting flexibility into an inflexible operating model
- The ability to take a 'leap of faith' – much of what the council is testing is relatively new and untested
- During COVID19, the ability to keep the momentum of change going and deliver a model robust enough to withstand future risks
- Changing existing working culture, which is why the council is developing change in a phased approach

What were the conditions for success?

- Enabling staff empowerment and freeing them up to make decisions and to be able to test and experiment with ideas and solutions
- Encouraging people to 'get it wrong', the council recognises that testing new approaches will inevitably mean making mistakes and it is key that when mistakes are made, there is no collapse into the 'old' way of doing things
- Focusing on delivering what matters and being able to challenge and change processes that are not consistent with that aim
- Being clear about what 'success' looks like from the individual's perspective
- Leaders being prepared to take a risk and backing up staff who do likewise

For more information...

Please contact Dawn Shepherd, Strategic Lead for Provider Services, dxshepherd@thurrock.gov.uk

Micro-enterprises development in Cambridgeshire County Council

To meet demand both now and in the future, Cambridgeshire County Council recognised there was a need to commission, stimulate and support development of an alternative to traditional homecare agencies. The development of care 'micro-enterprises' forms part of the strategic vision to ensure a variety of choice is available to the people of Cambridgeshire.

The Cambridgeshire and Peterborough Vision for Homecare in the Future resulted in the development of a Strategic Vision to address sustainability, market capacity and workforce (recruitment, retention and diversity). As part of this work, it was identified that the stimulation of a buoyant micro-enterprise market would complement the traditional homecare sector and provide more choice and flexibility to Cambridgeshire's communities.

'Care Together' is a county-wide programme which aims to support people to live in their own homes and communities for longer. The programme signals a switch from social care based on large county-wide contracts to one in which people living and working in their own communities will be empowered to support older and vulnerable people. This will help residents to stay in their own homes and reduce the risk that people will need to leave home to go into residential care or hospital.

One of the key innovations of the Care Together programme is to develop a buoyant Care Micro-Enterprise market. Working in partnership with Community Catalysts, the Council aims to develop a vibrant Care Micro-Enterprise marketplace that sees individuals or organisations supporting small local businesses to provide care and support for older people in their communities, helping develop locally based support, creating local employment opportunities, and enabling more people to meaningfully make a difference to the communities they live and work in.

Several co-creation events took place in October 2021 as part of the place-based Care Together programme, allowing members of the public to outline what was important to them in terms of access to resources and services that will enable them to feel safe and supported within their own homes and communities, as well as to identify any issues or barriers to remaining happy at home for longer.

Further to the co-production element of the project, discussions were also held with colleagues from other local authorities who had successfully developed micro-enterprise marketplaces. Discussions with Thurrock Council, Essex and Central Beds were helpful in shaping the development of the Cambridgeshire approach.

Some of the barriers included:

- A buoyant employment marketplace means it isn't an attractive proposition for people to establish their own micro-enterprises
- Lack of funding to new organisations or sole traders to support establishment costs

Some of the conditions for success included:

- Clear resourcing and support from the local authority to create a micro-enterprise marketplace
- Working with Community Catalysts to ensure that micro-enterprises are supported from the outset with business support specific to the care sector
- Engagement with Social Care teams

For more information...

Visit: www.cambridgeshire.gov.uk/council/communities-localism/care-together/community-catalysts

Email: Graeme Hodgson, Commissioning Manager
graeme.hodgson@cambridgeshire.gov.uk or Sunny Singh, Strategic
Development Manager sundeeep.singh@cambridgeshire.gov.uk

Micro-enterprises with Community Catalysts in Central Bedfordshire Council

Establishing internal and external conditions to enable the council to support the development and growth of community micro-enterprises in Central Bedfordshire.

Here are some of the problems being resolved:

Limited choice and control for people drawing on social care support services. Framework providers of home care were unable to deliver care and support in a number of geographical areas (both urban and rural). The solution was to diversify and extend the market to help establish models of care that make better use of community-based resources.

Contribute to improving the sustainability of a sector through service models and relationships that promote mutual choice, control and resilience. Limited supply of adult social care services, especially care and support at home for older people.

Secure the trust and confidence of key stakeholder groups in utilising small, newly established providers to seed and grow a fledging market. Practitioners are familiar with traditional approaches to the delivery of care at home and tend to be reluctant, at least initially, to entrust the care and support of vulnerable customers to newly established, small providers, the majority of which are not formally regulated. Without referrals and a flow of money to new entrants there is no potential for growth.

Here are some of the solutions:

Commissioned a service to develop a new market of small, agile community-based care and support providers capable of offering choice and control to their customers. Testing the hypothesis that offering choice and control to both workers and customers would boost recruitment and retention within the adult social care workforce. Proof of concept with c.

80 micro-providers currently operational within Central Bedfordshire, demonstrating that it is practical to recruit and retain a skilled, values-driven workforce in adult social care, if the conditions are fertile for the pioneers to seed and grow successfully.

Established a change group consisting of council representatives including brokerage, Direct Payments, contracts, practitioners, commissioning, community engagement, economic development and third sector colleagues with expertise, for example in Direct Payments and community building. Networking events and bringing micro-providers and practitioners together has proven valuable in building relationships, mutual trust and confidence, and in enabling positive risk-taking to innovate in the local market development.

A new contract, increasing the number of development workers (from one or two), commenced in April 2022 for a five year period. Demonstrating confidence in continuing to invest in developing and growing this market, now established as a valuable contributor to the sector and the quality of life of local people that need access to good quality, affordable personalised care and support.

Here are a few quotes to demonstrate the value of the work:

"I found Tanisha after input from social services. I was originally using an agency but this felt a little impersonal to me and I didn't deal well with lots of different people and changes – being on the Autistic Spectrum. It would be hard for me to list all the wonderful things that Tanisha does for me on

a daily basis, but to name just a few; she helps me with housework, attending appointments, helps me prepare for my job and maintains my wellbeing overall. Tanisha has never made me feel like I am disabled, she treats me as an equal and encourages me. She has helped me conserve my energy so that I am able to do some of the things I love and even have more positive relationships with friends, my partner and my family. She has removed such a huge amount of pressure for all of us so that we are much more free to enjoy our lives and each other's company. Every time I see Tanisha she is upbeat, happy and dedicated to her shift-which in turn brings my mood up and reduces my pain levels. No job is too big or small for her and it is an honour to have her in my life"

Client feedback *regarding Niche care*

"I decided to set myself up as an independent care provider 6 years ago. After 25 years' experience in care, supporting adults within the community and within various care settings, I wanted to be able to work in a different way. I wanted to spend more time with people and their families who needed continuity. I recognised the need for person-centred care, working with service users and their families to create the right care plan, considering their needs in a holistic way. This is a role I find rewarding and enjoy."

Laura Brown, *Empress Homecare and Companionship*

"We couldn't be more thankful for the wonderful care that Bridget gives. She has been caring for my 82 year-old Mum, who has Parkinson's, for just over a year, visiting her each day, assisting with personal care and supporting her wellbeing. She is also a huge help to my Dad (my mum's full-time carer) helping him with tasks around the house and offering him the chance for some respite rest and time away from the home. Before working with Bridget Mum was visited by carers from a large agency. The positive difference we have seen with Bridget has been enormous in terms of consistency and quality of care, flexibility, punctuality and most

importantly Bridget's caring and loving nature, which means she is able to help Mum in ways that really mean a lot to us. We feel blessed that we found her and she is able to support us all."

Client Feedback *regarding Nkay care*

Some of the barriers included:

Appetite for positive risk-taking

- For practitioners in referring to/ trusting micro-providers
- For micro-providers in having the confidence to start and run their own small business and the desire to work with the council

End to end coordination

- Commissioning a service alone is inadequate, therefore, resource and commitment is needed from the outside to positively progress

Culture shift

- Behaviour change enabling the status quo to be disrupted sufficiently, making space for innovation

Myth busting

- For example, regulated v. unregulated services in terms of personal care

Safeguarding concerns

- Implementation of a simple quality assurance framework has been central to the effective growth and development of micro-providers, instilling confidence in their practice amongst customers, practitioners et al

Networking

- A fundamental aspect of building consensus in values, practice, policies and procedures
- Regular opportunities to connect people for mutual benefit

Communications

- Micro-providers don't have marketing budgets; the council voice is, therefore, central to raising awareness of this market to colleagues and customers alike

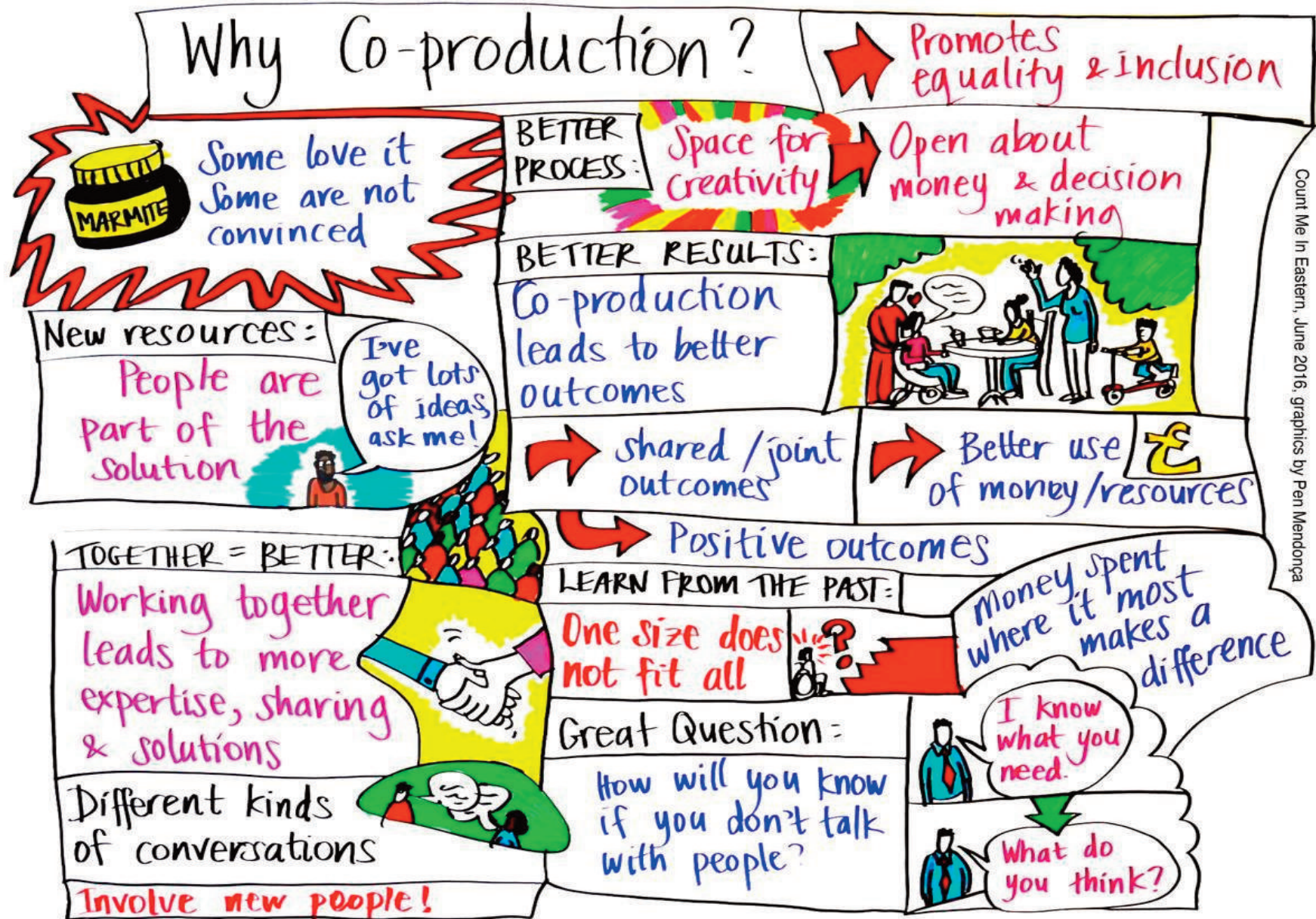
Resources

- A development of a service alone is not a greater enough investment, we need to embrace the potential for innovation and challenge business as usual. This also means, inviting skilled people to work creatively in forging solutions to difficult issues

For more information...

Please contact Ian Hanton, Development and Commissioning Manager, Central Bedfordshire – ian.hanton@centralbedfordshire.gov.uk or Helen Allen, Director of Community Enterprise, Community Catalysts, helen.allen@communitycatalysts.co.uk

Council [web pages](#) – include simple micro-provider case studies deriving from the project



Count Me In Eastern, June 2016, graphics by Pen Mendonça

Developing a local shared approach to co-production in Cambridgeshire County Council and Peterborough City Council

A common shared approach to how co-production is applied to commissioning practice

Stakeholders across the health and social care system within Cambridgeshire and Peterborough wanted to embed co-production into their everyday practice and commissioning. This was because everybody understood that working together on an equal basis in a co-productive way would lead to better outcomes for all stakeholders involved. However, there was a concern that without a shared approach to doing this, guidance and training to understand what co-production is, and the tools to apply the principles of co-production in their daily work, any co-production that might take place would be inconsistent, piecemeal, and would lack endorsement from system partners. Therefore, it was essential that a co-produced shared approach be developed by local stakeholders including:

- Experts by experience representatives
- Voluntary and community sector representatives
- Council staff – both from Adult Social Care practice and commissioning
- Health staff

The co-production work-stream of the Regional Building Positive Futures Programme has helped to inform this work, by showcasing approaches to co-production and highlighting best practice and learning from across the Eastern region and further afield.

To carry out this work it was important to have a partnership group involved that could co-ordinate and facilitate the project activity. The group that undertook this role was the Adult Social Care Forum, which discusses issues about health and social care services in Cambridgeshire and Peterborough. The Adult Social Care Forum looks at key themes raised by experts by experience and uses this information to help improve local

health and social care services, taking action where needed: Adult social care forum and partnership boards – Cambridgeshire County Council.

The Adult Social Care Forum had already a shared annual priority for 2021-22 which was:

Support to embed co-production into council and health activities

This priority had three objectives, supported by an action plan:

1. To raise awareness and understanding of co-production amongst council and health staff
2. Training on co-production to be provided to council and health staff so that they are confident to use co-production in their work
3. People who access care and support, carers and experts by experience are involved in the design, delivery and evaluation

This meant that the Adult Social Care Forum was ideally placed to support the development of a local shared approach to co-production.

In July 2021 the locally co-produced SUN Network Co-production and Involvement Best Practice Guidance was then shared with the Adult Social Care Forum and agreed as the basis of its co-production approach: The-SUN-Network-Co-production-and-Involvement-Best-Practice-Guidance-April-2021.pdf (sunnetwork.org.uk).

However, the Adult Social Care Forum was aware that co-production was being discussed by local partners across the health and social care system in a range of different projects and work-streams and so it was important

to ensure that work was not being duplicated or different ways of approaching co-production developed which could create confusion. Therefore, work was undertaken to try to bring together this local interest in co-production into developing a shared approach.

Two task and finish groups have been set up to take this work forward:

1. Group one

To agree how to apply the SUN Network Co-production and Involvement Best Practice Guidance in Adult Social Care practice within Cambridgeshire County Council and Peterborough City Council

2. Group two

To agree how to apply the SUN Network Co-production and Involvement Best Practice Guidance within commissioning practice and system development across the local health and social care system

The purpose of these task and finish groups is to agree:

- What is in scope for co-production?
- What support will be required to make this happen (for example, training, toolkits, etc.)?
- How to monitor that the agreed co-production approach is happening (for example, a set of standards, checklist, etc.)?
- How to show our shared commitment to making co-production happen (for example, a pledge or a charter)?
- How to report back on progress (for example, an annual 'We Said, We Did' report on how co-production has been used)?
- Who will need to endorse the agreed approach (for example, system sign-off for what is agreed)?

The task and finish groups include representatives from:

- Experts by experience boards/groups/networks
- Voluntary and community sector organisations
- Cambridgeshire County Council and Peterborough City Council
- Local health organisations

This task and finish group work is ongoing, with the aim to complete the main work by spring 2022.

As mentioned above this project is ongoing, but as noted some of the potential barriers to this work have been:

- A lack of consistency in how co-production has been approached locally until now, so even when system partners have wanted to work in a co-productive way, how this has been undertaken and its effectiveness has been variable
- A lack of a locally agreed definition of what co-production is and the guidance to support best practice around co-production until now (when the locally co-produced SUN Network Co-production and Involvement Best Practice Guidance was adopted)
- The risk of duplication in the work undertaken to develop an approach to co-production or work taking place in a segmented way

In terms of conditions for the success of this ongoing project:

- Local stakeholders will need to continue to support the task and finish group process being undertaken, to ensure that an agreed shared approach is developed
- System partners will need to commit to endorsing the shared approach to co-production that is agreed and implementing the agreed approach within their services

Local stakeholders will need to be able to see the impact of having an agreed shared approach to co-production, for example through moving from 'You Said, We Did' to 'We Said, We Did' feedback on the co-production activities which take place.

For more information...

Please contact Carol Williams, Adults and Safeguarding, Cambridgeshire County Council: carol.williams@cambridgeshire.gov.uk

Co-production and Talkback Engagement Solutions across Milton Keynes Council

A grant has been put in place to act as an advocate and community solutions provider. The aim is to influence real change for people with a learning disability or people with autism. The provider 'Talkback' works closely with the council and the NHS to implement solutions for people with a learning disability and autistic people, with their voices always guiding their decisions.

This is through the blended approach of virtual engagement, surveys and face to face meetings to achieve better results, often at lower costs too.

The key problems that the grant aimed to resolve were as follows:

- Listen to people with a learning disability and autistic people to hear from them what could be better and implement solutions in partnership between Talkback and the council
- Give people with learning disabilities and autism a voice and open two-way communication pathways through removing the blame culture
- Prevent barriers in the community for people with learning disabilities and autism through working with them, the council, the NHS and other providers in the voluntary sector, and support people with learning disabilities and autistic people to access all aspects of the community

Overall, it was felt that the council must find new ways of listening to the voices of people with learning disabilities or autism and hear from more people. Talkback are able to reach more people, examining areas of concern in more depth and forming solutions.

In 2021, Talkback had one grant agreement, to engage with people with learning disabilities and autism to support and develop self-advocacy, participation and involvement across Milton Keynes. Talkback empower people to raise issues and concerns about their lives, their services, or their communities.

The grant provided opportunity for Talkback to work innovatively with the council to address the issues and the key aims for the grant highlighted above. Talkback put in place the following programme to meet the aims of the grant:

Youth forum (LD&A mixed group)

This focused on providing young people with information about how to stay safe in their communities. Talkback linked in with Safer Milton Keynes and PCSOs from Thames Valley Police as well as the Anti-Social Behaviour Team from the council in order to help young people feel safer in their communities.

Talkback MK Community Healthy Living Group

This group was a result of feedback from the COVID19 report (please see below) which highlighted how people with learning disabilities and autism struggle to maintain their health. It looks at ways to eat healthily, engage in physical activity and ways to maintain positive mental health. Talkback has connected with the learning disabilities nurse from Milton Keynes University Hospital.

Experts by experience

Experts by experience review services from an autistic perspective and recommend possible improvements. They have been working with the Campbell Centre (an inpatient mental health unit) to build sensory pods and are currently looking at how the garden could be improved for people with autism. Throughout lockdown they reviewed their auditing tool along with the council's Quality and Compliance Team and are getting ready to review day services and supported living, among others.

Engagement sessions

Talkback focused on engaging people with autism to tell their stories about their experience with accessing treatment for mental health needs. This has included A&E at the hospital, urgent care services and specialist mental health services. By sharing their stories in engagement forums (see below), this highlights the issues that they face without 'pointing the finger' and encourages services to facilitate change.

Engagement forum

Talkback held an engagement forum in November 2021, drawing together members with both autism and mental health needs, as well as staff from Central and North West London Foundation Trust CNWL who provide mental health treatment in Milton Keynes. Talkback's members bravely shared their stories and experience of seeking support for mental health needs. This event has resulted in CNWL planning two autism conferences for their staff in the forthcoming year to raise awareness of autism and support staff to know what adjustments they need to make. Talkback members who took part in the forum in November will be part of this, sharing their stories again.

Talkback also had a second grant agreement to find out how people with learning disabilities and autism had coped with lockdown. This also included their carers. They collated their findings in a COVID19 report for Milton Keynes Council making recommendations for some actions which then resulted in a "You said, we did" report. The actions included:

- Raising awareness of the social care hub on the Milton Keynes website where lots of information is shared relating to changes to commissioned services (e.g. day services)
- Contacting GP surgeries and mental health services to raise concerns
- Contacting the shopping centre and other public spaces as well as public transport providers, to raise awareness of the anguish that not wearing masks caused to people with learning disabilities and autism and to ask that people are encouraged to wear masks
- Linking Talkback up with the Community Learning Department which is exploring what training could be put in place for the benefit of people with learning disability and autism
- Exploring what other support could be put in place for carers should lockdown happen again
- Talkback have regular contact with their members with learning disability and autism to gather their feedback. This has been conveyed to the council, either through a report, emails or regular meetings. The council has followed up on the recommendations made, and kept Talkback informed of the outcomes through a "you said, we did" report. Talkback have in turn, shared this with their members in their groups and have published an easy read version of the "you said, we did" report.

Talkback has had a huge impact on the lives of those with learning disability and autism over the last year by supporting individuals through the pandemic and helping them find ways to adjust. Their members are more aware of ways to stay healthy through their Healthy Living Group. Younger members are better equipped to stay safe when out in their communities through the youth forums provided by Talkback. People with autism will have a more positive stay at the Campbell Centre with a calm space to go in the form of the sensory pods – these have been developed using Talkback's experts by experience. The impact of the engagement forum around autism and mental health is yet to be seen but it is anticipated that this will be far reaching, by educating CNWL staff across

the board (not just mental health services). It is hoped that people with autism will be able to access various areas in health services in a much smoother way with staff having a better understanding of autism. In the future, it is expected that experts by experience will uncover ways to make improvements with other Milton Keynes Council commissioned services now they have an improved tool in place.

Lockdown has been the biggest barrier to being able to gather people with learning disability and autism together and gain their feedback. Talkback has worked hard to overcome this by utilising zoom, making phone calls to individuals and arranging meetings where possible, in smaller groups.

For more information...

Find out more at: www.milton-keynes.gov.uk/social-care-and-health/adult-social-care/directory-search/service/175

Or contact Hannah Soetendal: hannah.soetendal@milton-keynes.gov.uk

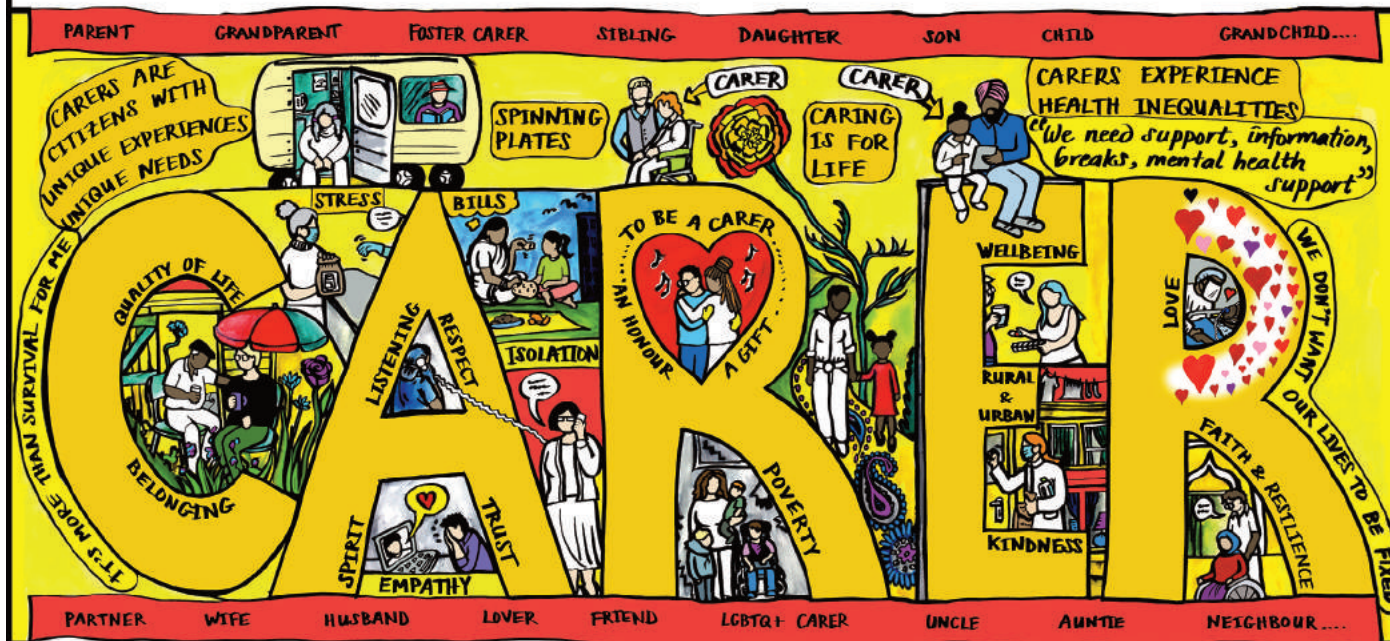
REACHING OUT & EMPOWERING CARERS

CARERS NEED THE RIGHT SUPPORT, IN THE RIGHT PLACE, AT THE RIGHT TIME

More than 500 people put on DNAR orders without consent
More carers have to stop/reduce work
No breaks for carers
36% on Carers Allowance struggle to make ends meet
Carers Employment Allowance inadequate

DURING THE PANDEMIC

Contact with local communities improved, Neighbours support
Lots of work on carers strategies, forums, co-production
Reaching out to carers not known to social care
The Care Act, NICE guidelines used to support carers
Digital solutions: zoom, social media, ipads, videocarphones



What will happen to our loved ones if/when we are no longer able to support them?

Involve carers in Covid-19 recovery planning now!

Long-term care & support at the heart of a
REFORMED, SUSTAINED SOCIAL CARE SYSTEM
Invest in support infrastructure (workforce/markets)
Enable long-term, emergency & contingency planning
Support people to access Self-Directed Support,
Direct Payments, Personal Budgets, Circles of Support

WHAT NEXT? WHAT HELPS? CO-PRODUCTION

Provide good information & guidance, PA register
Look beyond services
Help carers put their needs first, carers assessments
Reach out to faith communities
Invest in carer champions (working with peers & allies)
Use positive messages to lobby for change

Refreshing the Carers Strategy and associated action plans in Luton Borough Council

Much of the work to support carers in the local area is led by the Luton Borough Council contracted provider Carers Central. During the pandemic they switched much of their support to online and virtual approaches whilst continuing with a regular published newsletter that is distributed widely in the local area. Luton is now in the process of updating its Carers Strategy with a group of around 20 partners which is meeting regularly to undertake this work.

The council is conscious that the pressure on carers has been immense during the pandemic and is determined to both hear and respond to the challenges people and providers are facing in positive ways. The support from, and the challenges raised by, the Regional ADASS Carers Network as well as the wide focus on co-production have been helpful in providing ideas and encouraging attendees to think about issues critically.

A series of workshops has been held with stakeholders from across Luton. The work started by reviewing the current carers strategy and then focused on what additional things people wanted to achieve.

The issues that people have highlighted as important are now being considered by group members prior to being formed into an action plan for the next three financial years.

The draft action plan includes the TLAP “I/We Statements” and also focuses on accessible information, roles and rights, and respite for carers.

There has always been active engagement with carers across Luton and people have willingly come together to re-focus on this important issue within the changed landscape. The focus on working together to find practical solutions had always been important to the council as had the principle of mutual respect. These approaches will continue to assist progress in what is a very challenging environment.

Some of the barriers have been:

- Lack of face to face meetings due to the pandemic and clinical vulnerabilities
- Pressure on resources as a result of the impact of reduced airport funding
- Pressure of time on council staff and other stakeholders including a need to focus on the pandemic

Some of the conditions for success are:

- Recognition of the critical role that carers play in supporting vulnerable members of the community
- Long history of stakeholders working closely together to improve services and support across Luton
- Co-ordinating role of Carers Central
- Clear Luton 2040 vision around supporting the community to thrive

For more information...

Please contact Sarah Brown: sarah.brown@luton.gov.uk

Improving outcomes for people who are accessing Mental Health Supported Living in Luton Borough Council

Luton is in the process of procuring new supported living services for people with continuing serious mental health needs. Two key principles of the work are to separate housing and support in order to increase security of tenancies for people and to ensure that people are supported to move towards independence and more purposeful lives.

The current supported living services are typically spot placements where a person's needs require a rapid solution. It is important to ensure that while people are in a supported living service, they are supported in structured ways to move towards independence and a more purposeful life. These outcomes are not being secured sufficiently consistently or rapidly. In addition, costs in this area are consistently exceeding budget.

The Building Positive Futures Programme helps by providing a forum whereby examples of good practice from elsewhere are shared and providing a safe space to explore ideas.

Tender documents have been carefully prepared to include a focus on outcomes. This includes a requirement that Providers will link with the Luton Recovery College where people are supported to learn coping strategies to manage their mental health, work and education skills.

The council is also supporting the use of a tool called 'Dialog+' where people set measurable goals as to what they want to achieve in the future.

These two approaches will support people to move towards maximum independence in the least restrictive setting as rapidly as possible. Both of these approaches are evidence based and are championed and supported by people with lived experience.

There is a well-established infrastructure of strategic and operational meetings in Luton which includes a wide range of stakeholders, including people with lived experience, who are supporting the implementation of the Long Term Plan for Mental Health Services.

There is an absolute commitment in Luton to focus on making improvements for and with people in this important area.

Some of the barriers include:

- Ensuring that resource is available to focus on this work
- Capital availability and lack of building land in Luton
- Pandemic pressures requiring Mental Health Team staff to focus on day to day challenges
- Need to focus on achieving the long term vision and actions whilst keeping the day to day show on the road

Some of the conditions for success are:

- Clear framework for what we are trying to do set out in the Luton Borough Council Market Position Statement
- Alignment between clinicians, commissioners and wider stakeholder priorities
- Project Manager who has expertise in both Mental Health and Housing
- Short term funding from a variety of sources to fund the project

For more information...

Please contact Mike Dolan: mike.dolan@luton.gov.uk

Social Prescribing with a focus on pathways – Hertfordshire County Council

People who are ready to be sent home from hospital sometimes don't have sufficient support at home which can lead to re-admittance and putting added pressure on the Acute Hospitals.

The Trusts across the Integrated Care Service have provided data on who has been sent home so that they can be contacted by the Hertfordshire and Community Navigation Service (HCNS). The HCNS can connect holistically to support which might be available from the voluntary sector.

In order to effectively benefit from support that is available through the voluntary sector, Hertfordshire County Council has set up a multi-agency project across the NHS, Hertfordshire County Council and the Hertfordshire Community Navigation Service. There are regular meetings in place to provide and share key learning and updates on the project.

The work to date includes agreeing on a data sharing process, which incorporates the data sharing agreement at each level, the data pathway and data feedback. Support has gone live in two out of the three trusts within the Integrated Care System.

Along the way, there were some barriers:

- Engagement – difficulty engaging with all areas of the trusts due to busy workloads/capacity
- Data sharing
- Long term funding
- Turnaround – due to time constraints from the funding, mobilisation was rushed and there wasn't as much planning time as hoped
- Structure – due to the different structures in the trusts it was difficult to identify the relevant contacts/stakeholders

The successes were:

- Improving the wellbeing of the residents supported
- Reducing the feelings of loneliness and anxiety of the residents supported
- Reduced hospital admissions and re-admissions, people able to go home from hospital sooner, freeing up capacity and resources in hospital
- Reducing stress on family carers, and reducing the need to undertake tasks or situations which might increase risk of transmission

For more information...

Please contact Matt Mardle, Project Officer, Hertfordshire County Council: matt.mardle@hertfordshire.gov.uk

Social Prescribing and the Wait Well Project in Hertfordshire County Council

Hertfordshire's Community Navigator Service contacts people who are on the priority waiting lists within the Integrated Care System to support their health needs. This involves data from the selected waiting lists being provided from each Trust (including West Hertfordshire Hospitals NHS Trust, East and North Hertfordshire NHS Trust and West Essex NHS Trust) to the Hertfordshire Community Navigation Service, which then contacts the person to talk about what support might be helpful to them.

Due to COVID19, the waiting list for operations has increased meaning more people are not getting the support they require and that their health could possibly deteriorate whilst they wait. This waiting period can be troubling and can sometimes result in people being unable to have their operation as they are not in sufficient health to proceed.

Working with the Hertfordshire Community Navigation Service and the NHS Trust, an ICS wider approach has been developed in which data from the selected waiting lists is provided by each Trust so that people who need help can be identified and supported to manage their health. This ensures people are in their best state of health when the time comes for their operation, or they get to a point whereby high level support such as an operation is not required.

To utilise the support that's available through the voluntary sector, Hertfordshire County Council set up a multi-agency project across the NHS, Hertfordshire County Council and the Community Navigation Service. Support is provided through voluntary sector agencies. There are regular meetings in place to provide and share learning and updates with specific meetings on key aspects such as data, communications and improvements.

The work to date includes agreeing a data sharing process.

The project is currently working towards the targets of achieving the following successes:

- 300 new referrals across all trusts
- 600 new voluntary sector interventions
- Surveys have shown significant improvements in wellbeing and connectedness in clients who have benefited from the project
- Over 80% of people are satisfied or very satisfied with the support
- Three Primary Care Networks had 120 referrals for Wait Well support

For more information...

Please contact Matt Mardle, Project Officer, Hertfordshire County Council: matt.mardle@hertfordshire.gov.uk

Evaluation of the programme

Although as mentioned, it is difficult over 18 months to see the benefits of a programme across the region, the feedback to date has been very positive.

The benefits...

- “Builds important relationships”
- “Easier to fit in with other commitments when virtual, no travel or travel expenses”
- “Sharing real lived experience stories can change the way we commission”
- “Sharing best practice more widely”
- “Good discussions and easy to share ideas”
- “Helped pull together lots of different types of programmes, rather than seeing them all separately”
- “Easy to network and link with others”
- “Sharing information about organisations”
- “Gives confidence to try out new ideas”
- “Opportunities for diverse geographical contributions”
- “Refreshed a lot of areas for me”
- “Innovative approaches to solving common problems”
- “Huge benefit for people with lived experience to be involved and to learn”
- “Helps to make the case for real change”

Some of the things that people said were useful to their local work:

- “Ensures principles are linked to strengths-based practice programmes”
- “Took away top tips for implementation”
- “Thinking differently about creating opportunities”
- “Understood that it is not right to always default to commissioned services”
- “Want to build Community Circles as a requirement of the ISF programme”
- “This will help people to access better informal help”
- “I can champion the ideas to local teams”
- “Already spoken to my Head of Service about adopting new ways of working”
- “Want to introduce support brokerage in a big way and want to think about a Support Brokerage network”
- “An opportunity to co-create change with local people”
- “Will be rethinking our offers in relation to personalisation”
- “Opportunities to join connecting roles”

Next steps

The 2022/23 programme is already being planned and this includes so far:

April 2022	Putting Individual Service Funds into practice	with KeyRing and SDS Futures
April 2022	Putting people with mental health at the heart of care and support	with Curators for Change
May 2022	Personalisation and Dementia	with NHSE/NHSI
June 2022	Support Brokerage	with a focus on contracting with Imagineer

In addition, across the year we have commissioned

June to December – SCIE to run a Strengths-Based Practice Leadership programme

September to March (with some local work happening in April to September) – Working Together for Change will be implemented in two-three additional local authority areas during the financial year.