

Working Together for Change in Essex

January 2023

Sensory Workshops

Essex County Council volunteered to trial a process called **Working Together for Change** as a way of building local capacity for co-production.

The project was match funded by Regional ADASS and supported and facilitated by Simon Stockton, and Ali Smith from the regional Count Me In programme.

The first of these process was used to understand what matters most to people who use sensory services in Essex and to use that understanding to improve their lives

- To inform the review and development of sensory services across the county and ensure services reflect the priorities of local people with sensory loss
- To develop our learning in using Working Together for Change (WTfC) and understand how best to apply it in our local context
- To train up a minimum of 6 people as facilitators for the process
- To share the learning with the region and contribute to the building of a community of practice for WTfC



Step 1 - Prepare



Agree when, where and how we will hold the workshops. Decide who needs to be involved to ensure conversations are meaningful and involve all elements of the current pathway.



Agree questions that need to be asked. Decide who will gather the data and who the target people will be.



Create working group to assist with data gathering, and those who will train as facilitators for the workshops.

Step 2 - Collect



Share questionnaire via local partners to gather data



Contact those who have indicated happy to discuss the questions.



Assemble data on spreadsheet to be shared ahead of workshops.

Step 3 - Theming of the Data

We themed the responses together to make the I/We statements below, the ones marked in bold are the ones we decided to work on.

Working well

- I can get the equipment and adaptations I need
- Support is easy to access for me
- Services work well together
- I was able to easily access information
- I was treated with respect and I felt valued
- My world has opened up
- I have someone to talk to Body

Not working well

- **I have a long wait to access health and sensory services**
- I don't know who to contact
- **I need extra help / ongoing support**
- Good assessment – poor follow up
- **I wasn't aware of available services**
- I can't get access to local support
- **I am not getting help early enough**
- I feel on my own
- The community isn't aware of my needs
- I didn't feel valued or treated with respect

Important for the future

- I want to be kept updated
- I would like better communication
- I would have liked to have known earlier
- I want timely access to services
- I am happy!
- I would like additional support
- We would like new opportunities

Step 4 - Understand

We thought about why these themes might be happening

Top voted **Not Working** theme

ROOT CAUSES

I have a long wait to access health and sensory services

Sensory – national shortage of ROVIs and demand outstripping resources. Lack of resources to employ more ROVIs.

Sensory services side-lined
- not being prioritised
- lack of awareness
- Less career choice
Need to reimagine sensory pathway

Health lack of uninformed (joined up) commissioning
- Covid
- Post pandemic not all services are back
ECLOs not in every clinic

I need extra help / ongoing support

Time spent on translation – BSL
Older demographic struggle with tech
No family support

Support needed throughout sensory loss journey
Lack of resources
Limited resources / high demand

Resources used outside remit e.g. social care needs
income restrictions
Resources management needs improvement

I wasn't aware of available services

Size and scale of Essex
Number of providers and process makes it difficult to understand what's out there

Lack of links with ICB's and new alliances at first point of contact

Lack of consistent messaging from new service spec shared with all partners

I am not getting help early enough

Misconceptions and taboo
- Lack of awareness of services and the offer from frontline services
- Waiting lists

The way information is presented
Disconnect between support for sensory loss and support for mental health impact to sensory needs

Lack of self serve information
- Don't know how to process, not knowing services are out there unless told by that point crisis response support put in place

Step 5 – Identify success

We finished day one by thinking about what success would look from different perspectives if we fixed the key not working themes

Top voted Not Working theme

I have a long wait to access health and sensory services

1

I need extra help / ongoing support

2

I wasn't aware of available services

3

I am not getting help early enough

People and families

I can look after myself, my health, my home and my family and live my best life. I can make the best use of the sight and hearing that I have

I feel that enough time was spent helping me. I did not feel rushed. I felt able to ask all the questions I needed to

I was aware of all available services and how to access them easily. This gave me confidence and increased my independence

Being better prepared
Foresight
Maintaining independence
Awareness within the family to have conversations

Commissioners

We will ensure meaningful services are commissioned to enable people to lead the lives they want to live!

I am confident people are receiving a quality service regardless of how long it takes to deliver

Commissioners promote the consistent messages withing the service specification, are focussed on quality and coproduce with stakeholders to design and evaluate

Dependent on funding building sustainability
Long term impact
Preventative & local focus
Should services be bought

Providers

We will provide support in the right place at the right time

We have enough staff and resources to meet a growing demand and ongoing support

Staff are trained to recognise sensory loss, are aware of what services are available to support that individual and know who to signpost / refer to due to positive relations

Preventative / holistic / personalised / include family / font of information / key to other information / accessible

Step 6 - Plan



Mapping

For each of the themes, we then looked at what we already had in place within the current service



Success

Having identified what success might look like, we had to come up with 9 ideas of how we might achieve that for each theme – 3 traditional, 3 community ad 3 radical



Voting

We then voted on all the proposed ideas, with those scoring the most votes (likely to have the most impact) then being plotted on to an effort v impact grid



Plan

From the grid, we picked the 3 most impactful ideas to create a plan for going forward

Not Working theme

1

I have a long wait to access health and sensory services

What do we have in place already?

- Rehab delivery
- Mental Health support (low level)
- Facility for sensory and VCs to join up
- Sensory Action alliance
- Sensory champions – training and awareness
- Support for employment
- Essex sensory community partnership – single point of access
- Local eye health network – links with primary health – not active at present
- ECLO – not at Broomfield!!
Need roadmap L – who does what – who is paid to do what
- ECC trusted assessors to work with VCS to issue assistive equipment
- Referral into Millbrook
Equipment catalogue to include more equipment for sensory needs

What success would look like

People and families

I can look after myself, my health, my home & my family & live my best life.
I can make the best use of the sight & hearing that I have

Commissioners

We will ensure meaningful services are commissioned to enable people to lead the lives they want to live!

Providers

We will provide support in the right place at the right time

Potential ideas and solutions

Radical

Sensory Action Alliance to be funded to act as lived experience led service

VCS trusted assessments
Turn signposting / pathway on its head!

A joined up pathway

Traditional

Use negotiation / influencing power to get health to be accountable to deliver their part of service

Bring sensory services in house – EOC and grow own rehab specialists via apprenticeships and training

Increased funding to ensure sensory is prioritised in Essex – grow our own rehab specialists - apprentice training

Community

Identify community assets and fund them to support the community

Outsource to CVS

If health cannot deliver, health to fund using community assets

Not Working theme

2

I need extra help / ongoing support

What do we have in place already?

- Interpreting in place i.e. RAD and other providers and APPS
- HHE support people to use tech in various ways to suit the needs of the user
- Sight loss charities offer this support – ECL / Deaf Blind UK / RAD
- Deafblind UK bespoke support
National charity resource i.e. RNIB & RNID
- Older people's charities including sensory charities
There is a sensory pathway
- Funding in place for sensory loss services
- Essex sensory community bridges the gaps between themselves and other provision

What success would look like

People and families

I feel that enough time was spent helping me. I did not feel rushed. I felt able to ask all the questions I needed to

Commissioners

I am confident people are receiving a quality service regardless of how long it takes to deliver

Providers

We have enough staff and resources to meet a growing demand and ongoing support

Potential ideas and solutions

Radical

Increase number of interpreters available

Home visiting tech solution hub
Compulsory for all providers to join SAA and have champions

Increasing provisions of existing services x100!!

Traditional

Extend existing offer

Link people to tech classes

Connect people to local services

Community

Raise awareness within community about sensory loss and career paths, volunteering opportunities and routes to represent their communities

Connecting tech experts within the community

Connecting people
- peer networks
- volunteer network
- peer champions

Not Working theme

3

I wasn't aware of available services & I am not getting help early enough

What do we have in place already?

- Dedicated front door to service
- SPA / EWS locality teams
- ECLO's at some eye clinics
- Social media networks / support group / national & local IAG
- Infor at clinics not accessible
- Amazon!
- Provider support directory
- Live well link well
- National charities
- Local charities – ESC
- Social Prescribers
- Community Agents
- Partnership working
- Sensory Action Alliance – first in country!
- Sensory champion training and program
- Equipment support
- Joint working
- Large amount of community assets
- Deafblind UK Commendation National Award

What success would look like

People and families

I was aware of all available services and how to access them easily. This gave me confidence and increased my independence. Awareness and support within the family, Being better prepared

Commissioners

Promotion of service within the service specification. Focus on quality & coproduce with stakeholders to design & evaluate, building sustainability for long term impact
Preventative & local focus

Providers

Staff are trained to recognise sensory loss, are aware of what services are available to support that individual and know who to signpost / refer to. We will provide support in the right place at the right time

Potential ideas and solutions

Radical

All age equipment funding
All age approach and education

Sensory centre of excellence
Sensory Bus

Include sensory in all commissioned contracts

Traditional

Getting representatives from a wide range of teams – silo working

Tweaking contracts to reflect demand

Buying service to provide early help to people who have a sensory impairment

Community

Social Media and volunteering hub

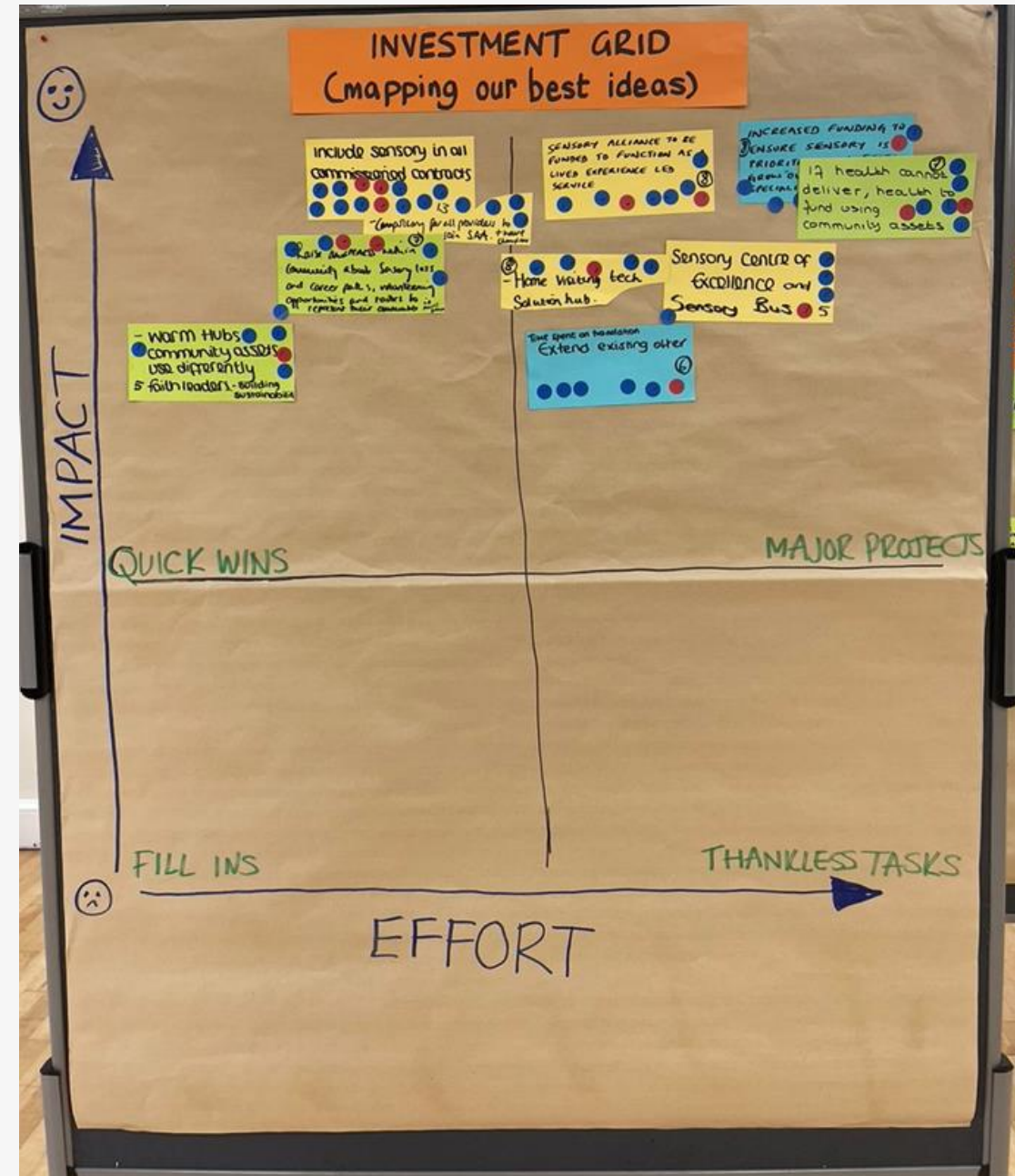
Warm hubs
Community assets use differently
Faith leaders – building sustainability

Working differently with local communities to build on what is already in place

We used an impact vs effort grid to review our ideas and choose the best ones to take forward now

The full list of ideas we chose to map on the grid were:

- Include sensory in all commissioned contracts / compulsory for all providers to join SAA and have champions
- Raise awareness within community about sensory loss and career paths, volunteering opportunities and routes to represent their communities
- Warm hubs
 - Community assets use differently
 - Faith leaders – building sustainability
- Home visiting tech solution hub
- Sensory centre of Excellence and Sensory Bus
- Extend existing offer
- If health cannot deliver, health to fund using community assets
- Increased funding to ensure sensory is prioritised in Essex – grow our own rehab specialists - apprentice / training and improve IAG
- Sensory alliance to be funded to act as lived experience led service



Then we ended the day by drawing up action plans for three of the best ideas using the following template

- What are you aiming to achieve and what issue does this relate to?
- Who will lead the work and who else needs to be involved?
- What can you do next week to kick start things?
- Where do you want to be in 3-6 months
- How will you know you're making a difference?
- How can you keep people engaged and informed about your work?

A hand-drawn template for an action plan. It features a green border and two red pushpins at the top. The title 'ACTION PLAN' is written in large blue letters. Below the title is a table with four columns labeled 'WHO', 'WHAT', 'WHEN', and 'HOW' in red. The table has three empty rows for writing.

WHO	WHAT	WHEN	HOW

The 3 plans we developed using this template are captured on the following slides

- Group A – Include sensory in all commissioned contracts / compulsory for all providers to join SAA and have champions

What are you aiming to achieve and what issue does this relate to?	We want sensory in all commissioned contracts and a commitment to join the SAA
Who will lead the work and who else needs to be involved	Ruth (commissioning) procurement MLM leads / team commissioning leads, Councillors
What can you do next week to kick start things	Brief MLM leads and commissioners. Identify key stakeholders. Link in with supported employment and IPS. Speak to social value team
Where do you want to be in 3-6 months	We'd like all new contracts being issued with a sensory pledge
How will you know you're making a difference	Uptake of SAA Training Social value reporting increased awareness and increase in sensory referrals Contract register/ monitoring and KPI ? MI info EQUIA monitored and checked
How can you keep people engaged and informed about your work	SAA continue to feed info through Agenda items for Councillors Mandate it becomes Business as Usual

- Group B – Sensory alliance to be funded to act as lived experience led service

What are you aiming to achieve and what issue does this relate to?	The sensory alliance is aiming to achieve a more sensory friendly Essex
Who will lead the work and who else needs to be involved and	Ruth Pye and Chris Martin
What can you do next week to kick start things	Meeting Chris Martin
Where do you want to be in 3-6 months	3 months – Action plan devised and funding route identified. 6 months - commencing
How will you know you're making a difference	Decreased volume in organisations signing up. Increasing number of people with lived experience involved. More people within the sensory alliance.
How can you keep people engaged and informed about your work	Via the sensory champion newsletter. Marketing strategy targeting Health and Social Care, Business, Community, VCS and wider public

Group C – Increased funding to ensure sensory is prioritised in Essex – grow our own rehab specialists - apprentice / training

What are you aiming to achieve and what issue does this relate to?	Reboot, future proof sensory service. Fulfil the aims of coproduced model - <i>“People in Essex with sensory impairment are able to lead the lives they want”</i>
Who will lead the work and who else needs to be involved and	ECC Commissioning – Raj, Jess Stewart Procurement – Justin, Lorna ECL – Faye VSC – Essex sensory community
What can you do next week to kick start things	Meet with ASC leadership (Chris Martin, Councillor Spc) Date next week – alert LT Present initial plans and costings i.e. the case for support
Where do you want to be in 3-6 months	3/12: Clear sense of direction (funding) 6/12: Clear specs and paper of new contract
How will you know you’re making a difference	KPIs, W/L data, Sensory Partnership Group reports (SMART)
How can you keep people engaged and informed about your work	Sensory Partnership Group and Essex County Council meetings 2 year review and workshops to evidence progress Comms via social media

Other things people told us about during the workshops. The following things were some of the additional points people wanted highlighted

- Thinking differently – sensory engagement
- How to make engagement truly accessible
- Essex has largest proportion of sensory people in UK. Whatever any other county is doing we should be doing more
- Always the need for one to one human contact
- We must have priority countywide – not postcode lottery
- Element of self service – elderly age related sensory loss not necessarily know to services
- Hospital staff!
- Set up lived experience committee for Essex of sensory reps who can mentor more people to grow confidence and join committee. New blood!
- Specialist social worker for deaf people. I am aware there is only one
- Council website accessible to deaf people – BSL
- External organisations not aware of deaf people's access e.g. provide BSL interpreter




All Age Autism Partnership Board – Working together for Change virtual process

In November we held two Working Together for Change workshops with the aim of reviewing the impact of the All Age Autism Strategy and Partnership Board.

Working Together for Change is a structured approach to joint working to review experiences and determine priorities for change. Both sessions were well attended by both partners and people with lived experience and using information gathered through a pre workshop survey we spent time discussing what people felt was working well and not working well about the strategy and partnership board.

We were then able to work together on theming and prioritising these. The workshop explored the root causes of the things that people said aren't working well, before producing some 'what does good look like' statements and developing action plans to get to these.



Day one – What's not working well



Group A – Improve the way the board is governed and how it works – more inclusive



Group B – Co-Production: active involvement of stakeholders to deliver on the agreed action plan



Group C – Stronger representation, engagement and partnership across children and adults to be truly all age



Group D – Less talk, more action focus on outcomes and get rid of red tape



Day two – Action Planning

GROUP A

D1: break down the beaurocracy, more flexibility of systems and processes. People don't always fit into boxes.

ATION PLANNING

1/ WHAT ARE WE PLANNING TO DO AND WHAT ISSUE ARE WE AIMING TO MAKE A DIFFERENCE TO?

1. Understanding the barriers (people, processes, funding, culture, cross organisational), what the problems are and in what services these happen.

2/ WHO WILL LEAD THE WORK AND WHO ELSE NEEDS TO BE INVOLVED?

2. 2) Anya, (partnership Board), partners other agencies that are not there.

3/ WHERE DO WE WANT TO BE IN 3 - 6 MONTHS?

3) Communicate with the board, talk to people (interviews) and understand the issues. Talk to the partners too. Mapping.

4/ WHAT CAN WE DO IN THE NEXT WEEK TO START THINGS MOVING?

4. Start to look at the info we already have, theming and utilising that.

5/ HOW WILL WE KNOW WE ARE MAKING A DIFFERENCE?

5) People will have a better experience of services and community living.

6/ HOW WILL WE KEEP PEOPLE INFORMED AND ENGAGED IN THE WORK AS IT DEVELOPS?

6) Bring it back to the board, communication channels via other orgs too.

GROUP B

C9: Hold roadshows/
market stalls in the
schools/ hold
partnership boards
in schools

ACTION PLANNING

**1/ WHAT ARE WE
PLANNING TO DO
AND WHAT ISSUE
ARE WE AIMING TO
MAKE A
DIFFERENCE TO?**

1. Trying to improve attendance, promoting the work we do. Opening real life opportunities to young people. True All Age approach. Supporting around transition. Employment specific, benefits etc!

**2/ WHO WILL
LEAD THE
WORK AND
WHO ELSE
NEEDS TO BE
INVOLVED?**

2. George to lead, involving group members. Link with Ruth around PSI work. Kierran Pierce and Multi Schools Council, EFF Family champion leads, SEND colleagues, Preparing for Adulthood team, people with success stories.

**3/ WHERE DO
WE WANT TO
BE IN 3 - 6
MONTHS?**

3. Within 6 months we have an event organised with a strong 'guest list' of people who can make a difference. A good variety of people. Creative options.

**4/ WHAT CAN
WE DO IN THE
NEXT WEEK
TO START
THINGS
MOVING?**

4. Linking in with schools to find out what is already in place and where we can join in. Such as a Castledon college in Wickford. Linking in with Kierran Pierce and the MSC. Linking in with Doucecroft and Marketfields. Coming up with a guest list for the event?

**5/ HOW WILL
WE KNOW WE
ARE MAKING
A
DIFFERENCE?**

5. Success of the event - feedback - someone has a job etc as a result of the event - real evidence of change. Exit poll/impact poll. CYP/families/professionals feel better represented at the board.

**6/ HOW WILL WE
KEEP PEOPLE
INFORMED AND
ENGAGED IN THE
WORK AS IT
DEVELOPS?**

6. Upcoming AAAPB newsletter, agenda at AAAPB. Press release, websites, social media, local press, local MP's - good news stories

GROUP C

Get users
to quality
check
services

ACTION PLANNING

1/ WHAT ARE WE
PLANNING TO DO
AND WHAT ISSUE
ARE WE AIMING TO
MAKE A
DIFFERENCE TO?

1. Having adults, young people and parents/carers with lived experience as 'secret shoppers' to quality check services. Would have to be focussed. A blend of announced and unannounced visits, almost like CQC.

2/ WHO WILL
LEAD THE
WORK AND
WHO ELSE
NEEDS TO BE
INVOLVED?

2. Family and Carers workstream and the leads from each working group so there is a focus. People with lived experience.

3/ WHERE DO
WE WANT TO
BE IN 3 - 6
MONTHS?

3. Identified/ recruited the people who we'd want to be 'secret shopping' and identified training needs. Completed a scoping exercise, having a project plan in

4/ WHAT CAN
WE DO IN THE
NEXT WEEK
TO START
THINGS
MOVING?

4. Research into what services would benefit from being involved. Engagement with people with lived experience around their thoughts. And review of action plans to see where this could fit.

5/ HOW WILL
WE KNOW WE
ARE MAKING
A
DIFFERENCE?

5. Inviting continuous feedback from 'secret shoppers' beyond the first visit and discussion on that at the next group meeting.

6/ HOW WILL WE
KEEP PEOPLE
INFORMED AND
ENGAGED IN THE
WORK AS IT
DEVELOPS?

6. Regular project meetings, relaying progress in the Autism Newsletter regarding feedback and progress. Using social media 'you said, we did'.

GROUP D

B7:
Independently
facilitated
coproduction

ACTION PLANNING

1/ WHAT ARE WE
PLANNING TO DO
AND WHAT ISSUE
ARE WE AIMING TO
MAKE A
DIFFERENCE TO?

1 Suffolk have a good group, ACE.
could we emulate that model and
set up our own group. Address
autism with other conditions such
as ADHD etc.

2/ WHO WILL
LEAD THE
WORK AND
WHO ELSE
NEEDS TO BE
INVOLVED?

2. ??

3/ WHERE DO
WE WANT TO
BE IN 3 - 6
MONTHS?

3. We need to know where our
self advocates are and who wants
to be part of it. Have a co-
produced outline of what people
want and how they want to do it.

4/ WHAT CAN
WE DO IN THE
NEXT WEEK
TO START
THINGS
MOVING?

4. Find out if this will require a
budget, how much is needed.
Identify key stakeholders. Terms of
reference or a start of.

5/ HOW WILL
WE KNOW WE
ARE MAKING
A
DIFFERENCE?

5. The views and ideas from the
group are being taken forward.
Stronger working relationship with
ECC. People with Autism are leading
the way and creating the aspirations.

6/ HOW WILL WE
KEEP PEOPLE
INFORMED AND
ENGAGED IN THE
WORK AS IT
DEVELOPS?

6. Email updates, newsletter etc, use
of social media etc. You said/we did
type of updates and if something
can't be achieved then a reason why
is provided

Challenges – feedback received

- The process was confusing
- Two long days in front of a screen, it was tiresome and draining
- The online workshops didn't feel as supported
- Tasks should have been explained more, these were unclear
- The theming felt very repetitive, could we have done this in advance?
- There wasn't enough discussion about different responses, it was felt that context was missing which would have helped with decision making
- People had a hard time accepting that positive themes can also come up as negative themes that need work
- We learned from the first session and introduced a chill out space for anyone who was feeling overwhelmed, this was something that was used by attendees

Where we are now

- We have taken the action plans back to the Autism Partnership Board for further discussion
 - We have named leads for each of the action plans
 - We have seen enthusiasm from partnership board members regarding the actions
 - We have also had some fruitful discussions regarding a refresh of the strategy altogether, the pandemic has changed many things and so we recognise this needs to be reflected in a new strategy
-
- Going back to the reason we wanted to follow this process for the partnership board, there being some issues with communication and partnership working within the autism space, we are happy to see a shift in approach from partner. The opportunity for Essex County Council to be able to step back and have external facilitators walk us through this process was beneficial to us coming together with the action plans.

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