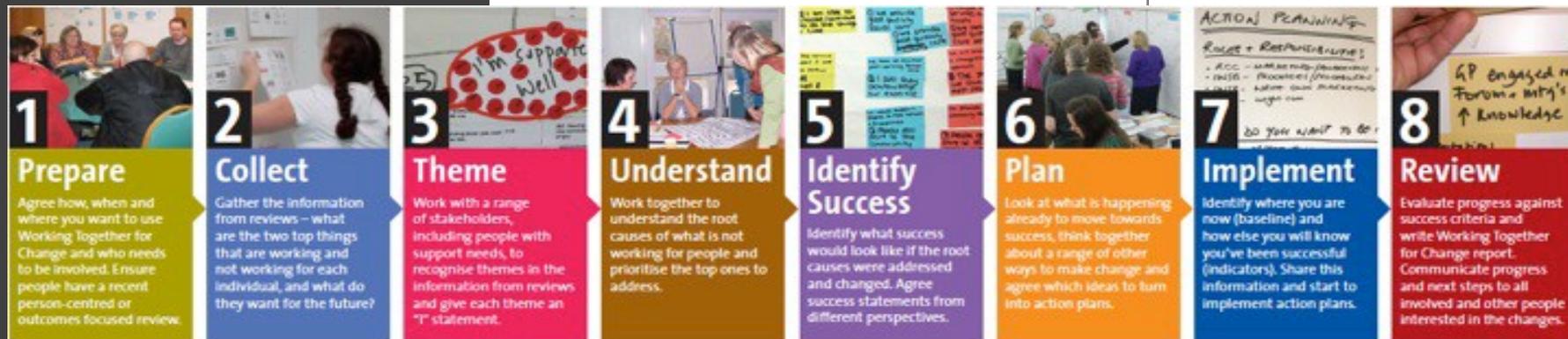


Working Together for Change

- Central Bedfordshire
23rd & 30th April 2021

- *Working Together to understand what matters most to Carers in Central Bedfordshire, and to use that understanding to improve carers lives*



Our six aims for the project were:

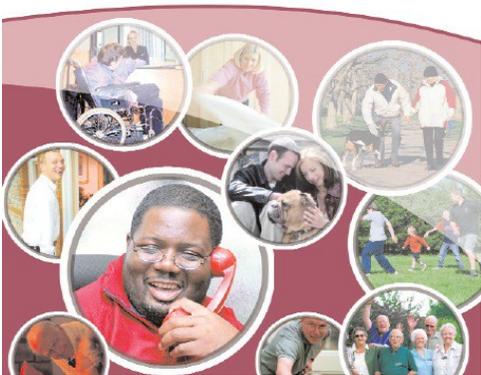
- ✓ To test out new approaches to coproducing at a strategic level with local people
- ✓ To directly inform the development of a Central Bedfordshire carers strategy using person centred data in aggregate form to ensure the new strategy reflects the things local carers people want and need
- ✓ To consolidate and strengthen relations with key voluntary sector partners, providers and local carers themselves
- ✓ To give voice to a commitment to co-design the future of carers services together with local carers and organisations that serve and represent them
- ✓ To identify quick wins which can help improve the lives of local carers in the short to medium term
- ✓ To build capacity to use the process again in different contexts with the same aim of strategic coproduction

About the project

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

The project was funded by Regional ADASS and supported and facilitated by Simon Stockton and the regional **Count Me In** programme.

Working together for change:
using person-centred
information for commissioning



Working Together for Change

Citizen-led change in public services



About the methodology

- Working Together for Change is a simple 8 stage recommended process for coproducing change
- It was published as best practice guidance for commissioners in 2009 by the Department of Health and been used widely by commissioners and providers ever since
- It is highly scalable and can be used in different contexts to co-produce change and improve strategic decision making



How we used the process



Stages 1&2

We collected information from interviews and questionnaires with 35 carers about what was working well in their lives, what wasn't working well and what was important to them in the future.

Stages 3-5

On day one of the workshop we themed this information and spent time identifying the not working themes which we thought were having the biggest impact on the largest number of carers in Central Bedfordshire. We tried to understand why those things were happening and what the impact would be if we could improve things.

Stage 6

On the second day of the workshop we thought about what changes would make the biggest difference and what we could do in the short term that could help improve the lives of local carers.

Stages 7&8

Our next challenge is making sure the plans we made bear fruit and that we use the information from the process to inform our local carers strategy.

Who attended the workshops?

We invited a mix of people to join the online workshops and help us understand the data we collected and decide how to use it. A small group of staff helped to facilitate the groupwork and capture information to feed back

16 people attended including

- 4 carers
- 9 staff from Central Bedfordshire Council
- (including staff with lived experience as a carer)
- 3 people the main local voluntary sector groups

The workshops were facilitated by Simon Stockton from the *Count Me In* Programme and Ali Smith an experienced facilitator and carer

From the information carers in Central Bedfordshire shared with us about what was ***working well in their lives*** we identified the following themes:

- I am getting (good) support from local service providers
- Working from home has given me more time and flexibility and reduced my stress
- I really value the relationship with family and friends. They help keep me well
- I really value managing my own time rather than have it dictated to me
- I'm getting good support from my local GP (and other) health services
- I am able to do the things that keep me well
- I appreciate being able to have a break from my caring role



We thought about why the most pressing *not working* themes might be happening and identified these root causes

Top voted
**Not
Working**
theme

ROOT CAUSES

The organisations are not engaging with me. I don't feel heard, listened to or supported

Number of organisations involved and data sharing

Navigating through services, focus on cared for not necessarily carer

No single point of contact, and need good relationships between contacts

Not getting the support that works for me – support dictates what they will and will not do. I feel I'm not getting the support I need when I need it

Non-standard assessments, processes and delays in reviews – lack of continuity and differences in knowledge of social workers

Carers don't know where to begin when loved one first diagnosed and do not understand some of the terminology

Feel like agencies aren't listening and the carer and cared for aren't a priority

I'm feeling stressed and worried about my mental health and wellbeing

Not really listening to the carer, not being smart in determining what is needed to support the carer

Solutions not made attractive to the carer. Not knowing what all the opportunities are and available in the local area

Stigma associated with being a carer and stigma associated to mental health

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

Not Working theme

I'm feeling stressed and worried about my mental health and wellbeing

Not getting the support that works for me – support dictates what they will and will not do. I feel I'm not getting the support I need when I need it

The organisations are not engaging with me. I don't feel heard listened to or supported

Carers and families

The difficult situation would feel more manageable.

I am listened to and my knowledge and understanding about the person I care for is valued and heard, and transition to respite/activities is a positive experience

I only have to tell my story once, and have access to someone who I can build a relationship of trust and a go to. Not necessarily a qualified social worker, key point of contact

Commissioners

Carers more able to influence the support/services they use and these are known about more widely

Lead on developing digital infrastructure and data sharing agreements to enable information to be shared and that communication/ is a key requirement of contracts

Make sure services are good quality, fair for all and joined up, equitable across Central Bedfordshire

Providers

Carers are listened to and heard and are equipped and empowered to navigate the support appropriate to them and are more able to be effective as a carer.

Maintain ownership of data and use to support carers and help them access right support, maintain relationships and build confidence.

Working closely in partnership with Central Bedfordshire, 'one foot in each camp'

Other issues we heard about

During the conversations on the two days there were other areas identified by carers as not working well. These were:

- The need for different kinds of breaks for carers according to their needs and their caring role
- The struggles with transitions at different life points, particularly the transition from children's to adult's services

We agreed that we will hold one “mop up” session to cover these and any other key “not working” themes that we did not have time to cover over the two days.



Day 2 Making a difference

The same group of people reconvened for day 2 to think about how to best use the information to make a difference to the lives of local carers.

We thought about what was in place already that could help and then came up with our own ideas about what else could make a real difference using thinking hats to stretch our thinking. We picked the best ideas and turned them into action plans



Not Working theme

I'm feeling stressed and worried about my mental health and wellbeing

Carers and families

The difficult situation would feel more manageable.

Commissioners

Carers more able to influence the support/services they use and these are known about more widely

Providers

Carers are listened to and heard and are equipped and empowered to navigate the support appropriate to them and are more able to be effective as a carer.

What do we have in place already?

- Carers in Beds Service – range of support to help
- Massages and haircuts in schools offered by Cares in Beds and other drop ins for pamper time.
- Local wellbeing services
- MIND services provide help for mental health
- Recovery college courses
- Advice Central – helps people finds support
- Direct payments
- Sitting services through vouchers / Age UK
- Carers grants
- SENDIASS – for people up to 18
- Summer schemes helps gives respite
- Day opportunities (although restricted at present)
- Respite opportunities, short and longer breaks
- Special school places continued over Covid
- Preparing for Adulthood team beginning to work with people from age 14 (Recently restructured)
- Family breaks for the whole family (Few but good)
- Kids in action
- Disability Resource Centre, including employment programmes.
- GPs able to refer to the wellbeing service
- Music therapy & Tibbs Zoom meetings

Radical



Carers app/Tec for wellbeing

Pet days out – visits to farms etc.

Befriending for carers

Traditional



Feedback on the 'you said, we've done'

Carers Festival

Improved web pages

Community



Workshop with Social Workers /Carers

Monthly carers meeting

Family days out

Not Working theme

Not getting the support that works for me – support dictates what they will and will not do. I feel I'm not getting the support I need when I need it

Carers and families

I am listened to and my knowledge and understanding about the person I care for is valued and heard, and transition to respite/activities is a positive experience

Commissioners

Lead on developing digital infrastructure and data sharing agreements to enable information to be shared and that communication/ is a key requirement of contracts

Providers

Maintain ownership of data and use to support carers and help them access right support, maintain relationships and build confidence.

Radical

Traditional

Community

What do we have in place already?

- Support from Carers in Bedfordshire place (there is a small waiting list, phone call, advice)
- Carers assessments in place (some) focused on the carer - dedicated person for carer
- GP coding to support carers (what does this bring?)
- Many services available
- Processes - reviews in place - 3 month, annual
- Carer led support, but carer may not know what to go

Other issues

- Planning for future – ongoing conversation would be helpful
- Not always easy to access information
- Identifying what you need – sometimes don't know what



One data system for all

Gentle layers of support (not too much info at once)

Diverse community activities

Showcasing event

Carers designed assessment/ process / templates

Digital Community Hub

GPS have a linked worker assigned to individuals

Learning from other carers

Common language, carer to carer support

Not working theme

The organisations are not engaging with me. I don't feel heard, listened to or supported

Carers and families

I only have to tell my story once, and have access to someone who I can build a relationship of trust and a go to. Not necessarily a qualified social worker, key point of contact

Commissioners

Make sure services are good quality, fair for all and joined up, equitable across Central Bedfordshire

Providers

Working closely in partnership with Central Bedfordshire, 'one foot in each camp'

Radical



Same social worker for continuity

Team of carer support

Digital carers app

Traditional



Consistency of support vital

Additional staff to cover sickness/holidays

Wider rolling comms on help and support to all residents

Community



Support to good neighbour schemes

Increase to local community support to set up carers cafes etc.

Fridge magnets for businesses etc. of who to contact if worried about anyone

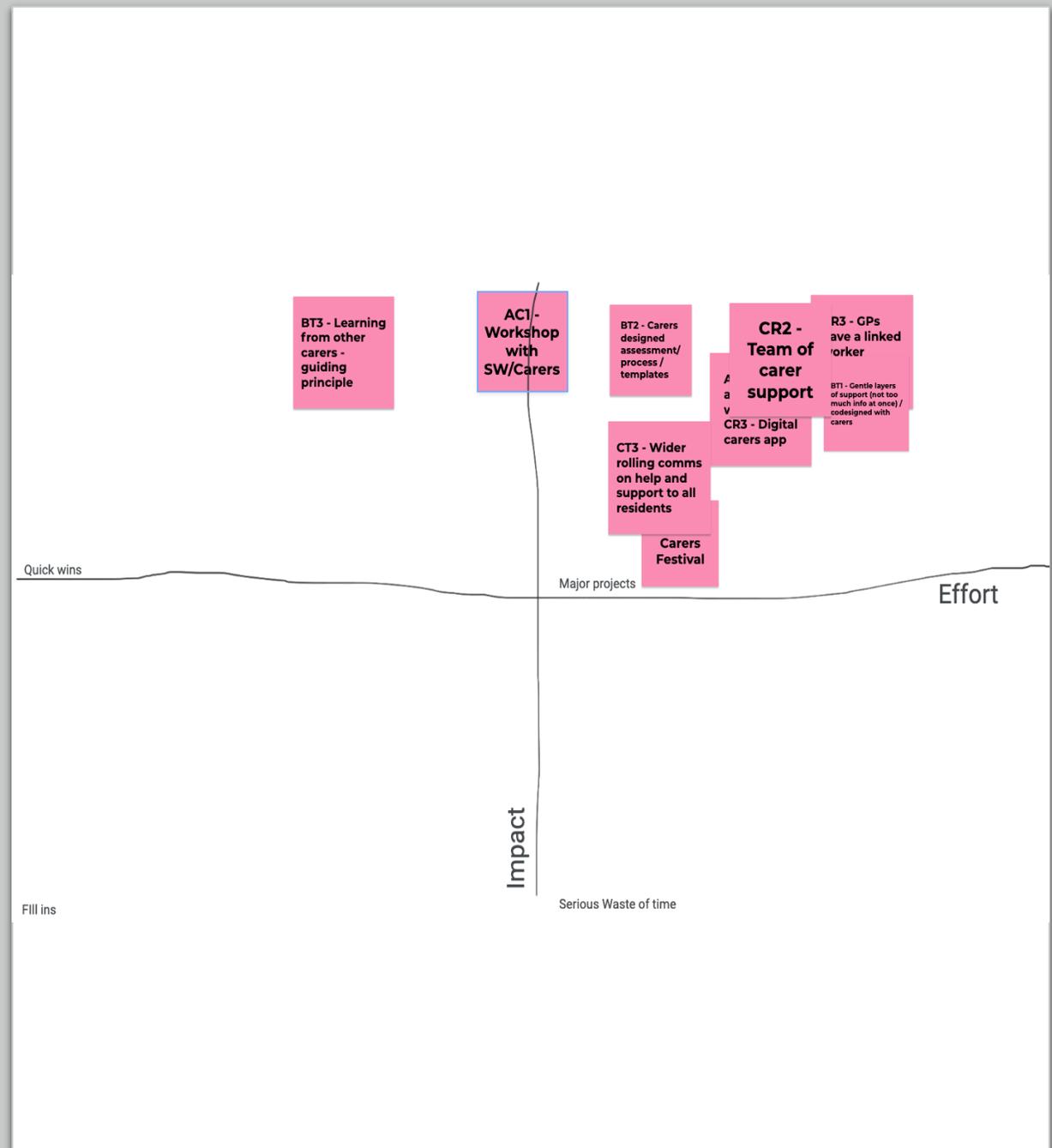
What do we have in place already?

- Direct contact with Carers in Beds who signposts or answer question
- Covid vulnerable Person check was great Good neighbour schemes - need to harness and maintain
- Good social worker with a can do attitude. Teams has been helpful to get meetings and social workers /health representatives to get together - want to retain that function but be mindful of having a mixed offer
- Good GP support

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 were:

- Learning from other carers - guiding principle
- Workshop with SW/Carers
- Carers designed assessment/ process / templates
- Team of carer support
- Carers app/Tech for wellbeing / Digital carers app
- GPs have a linked worker assigned to individuals
- Gentle layers of support (not too much info at once) / co-designed with carers
- Wider rolling communications on help and support to all residents
- Carers Festival



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. The title 'ACTION PLAN' is written in large blue letters at the top. Below the title is a table with four columns: 'WHO', 'WHAT', 'WHEN', and 'HOW', all written in red. The table has three rows, with the first row containing the column headers and the subsequent two rows being empty for input. The entire template is drawn with green lines and has two red dots at the top, suggesting it's a card or a page from a binder.

ACTION PLAN			
WHO	WHAT	WHEN	HOW

- Group A – Workshop with social workers and carers

What are you aiming to achieve and what issue does this relate to?	Issues to fix – listening and being heard, inability to access, breakdown boundaries between carers and professionals, learning from each other – not alone in the situation
Who will lead the work and who else needs to be involved	Lead: Tanya Involved: Lorna, CiB to identify Carers, plus carers on CBC books – John Robinson, Social Workers, Autism beds to identify carers.
What can you do next week to kick start things	Formulate a plan Identify the way we will identify the carers to be involved Disseminate the outcome of this workshop to social work colleagues and get them to support.
Where do you want to be in 3-6 months	In 3 months: Have run at least 1 workshop session and have developed a plan for addressing at least 1 issue from the session. Have a plan for other workshops (probably an online session for the first go but plan for face to face)
How will you know you're making a difference	People will take ownership of some of the actions identified as required following the workshop People return for the next session
How can you keep people engaged and informed about your work	Think creatively about how to maintain links with people in the works (Sharna – cheerleader approach)

- Group B – Learning from other carers - guiding principle

What are you aiming to achieve and what issue does this relate to?	Carers voices heard and influences development of services within Central Bedfordshire – skills, experience, generosity harnessed.
Who will lead the work and who else needs to be involved	Lead: Hatty (Harriet) at Carers in Beds – working with and developing Carers Forum (currently meets monthly) involving others – carers, social workers, CCG, Commissioners’.
What can you do next week to kick start things	Review forum agenda and share plan – outcomes and reporting back process (you said/we’ve done).
Where do you want to be in 3-6 months	Forum held, feedback provided and shared via networks, virtually and other means.
How will you know you’re making a difference	Changes in services – reports on activity – outcomes achieved.
How can you keep people engaged and informed about your work	Regular updates, more carers actively engaged in forum, clear tangible changes in services, on-going involvement.

- Group C – Wider rolling comms on help and support to all residents

What are you aiming to achieve and what issue does this relate to?	Recognising you're a carer, carer term not recognised, being kept informed.
Who will lead the work and who else needs to be involved	Health professionals, social workers, comms member, VCS groups and providers carers representative, Children's and Adults services
What can you do next week to kick start things	Review and update web pages.
Where do you want to be in 3-6 months	Look at increase in social media comms and additional social media accounts such as specific twitter account/group
How will you know you're making a difference	We will be able to identify and support more carers by advertising support available and resonating with carers who do not think/know they are carers (may think of themselves as husband/wife/parent – all part of that role)
How can you keep people engaged and informed about your work	Regular updates on social media, newsletters, e-bulletins, recognise stats.

Our commitment moving forward is to:

1. Track and share progress of the action plans
2. Review the process to ensure we can harness the learning and feed into our carer strategy
3. Train a group of people to be able to run and facilitate the Working Together for Change process so we can use it in again in different settings to boost coproduction



Since April:

1. Progress on key projects
2. Carers group established to track strategy
3. Transition work
4. Next phase...Home Care planning & facilitation training
5. And more to come...

