



Partners in Care and Health

Community Capacity Building in the Adult Social Care Context Webinar

Thursday 07 December 2023 – 11:00AM – 12:15PM Partners in Care and Health





The Local Government Association and Association of Directors of Adult Social Services are Partners in Care and Health (PCH) working with well-respected organisations.

PCH helps councils to improve the way they deliver adult social care and public health services and helps Government understand the challenges faced by the sector.

The programme is a trusted network for developing and sharing best practice, developing tools and techniques, providing support and building connections.

It is funded by Government and offered to councils without charge.

www.local.gov.uk/PCH





Partners in Care and Health

Cath Roff MBE Project Director Social Care Transformation, Adults and Health, Leeds City Council

Community Capacity Building in an Adult Social Care context

Cath Roff

Project Director: Social Care Transformation, Adults and Health, Leeds City Council



What is ABCD?

"ABCD is a neighbourhood-based community building approach that uses community organising methods to identify, mobilise and strengthen the capacities or asset of individuals, families and communities".

John McKnight



Why ABCD in Leeds

- Leeds City Council's priorities and values
- Diverse Third Sector and investment in Third Sector infrastructure
- Strong foundation of community development
- Strength based approach to social care





The Leeds ABCD Model

DISCOVER

CONNECT

MOBILISE



Discovery conversations

Asset Mapping

COMMUNITY CONNECTORS

Connecting People
Connecting Assets
Connecting Ideas

COMMUNITY LED INITIATIVES

Small Sparks Leading by stepping back



Leeds Beckett University:

Evaluation of Leeds ABCD (July 2021)

Evaluation framework

- People and communities are better connected and more resilient
- Communities identify and work to bring about the changes they want to see
- People have good friends
- People live happier, more independent lives for longer

Social return on Investment

 Between £5.27 and £14.02 of social value returned for every £1 invested



Key findings

- 1. There is **strong** evidence that ABCD works in different communities and contexts
- 2. There is **promising** evidence regarding the Community Connector role
- 3. There is **strong** evidence on strengthening local groups and new community activities.
- 4. There is **promising** evidence of friendships, with a plausible causal chain from foundations to meaningful relationships.
- 5. There is **strong** evidence for better social connections.
- 6. There is **strong** qualitative evidence on the typical pathway to community change with clear links between early asset-based conversations with later community action.
- 7. There is **promising** evidence on community change.

Theory of change model

ABCD Activities/inputs

- Community Builders
- · ABCD training
- Based in neighbourhood organisations
- Community Builder network (LCC)
- Small Sparks funding

- Identifying & mobilising assets
- Strengthening social connections
- Working with individuals
- Building community ownership and action

Mechanismshow ABCD works

Outcomes

- People have good friends
- People & communities better connected
- Communities work to bring about local changes
- Other outcomes

Supporting people and neighbourhoods to thrive

Goals

Context

Diverse

areas

needs

pathfinder

Local assets

Socioeconomic

Key Ingredients for Success

- Leadership support
- Culture of permission/innovation
- Willingness to cede control/accept risk



Four level approach in Leeds

- 1. Grassroots/ community level
- 2. Practitioner level
- 3. Service level
- 4. Whole system level



Working on a whole system

- ABCD supports Leeds Best City Ambition
- ABCD Steering group
- Asset Based Leeds City Council Staff Learning Network
- ABCD Training and Learning Collective
- Building our relationship with the Third Sector in Leeds
- ABCD plan on a page

Contact

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Partners in Care and Health

Gill O'Hare

Community Development Manager
Implementation Lead – Communities Together
(Community Led Support)
Implementation Lead – Community Catalysts

Adult Social Care, Health Integration and Wellbeing Stoke-on-Trent City Council

Gill O'Hare

Community Development Manager
Implementation Lead – Communities Together (Community Led Support)
Implementation Lead – Community Catalysts
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Communities Together Stoke-on-Trent

Communities Together Stoke-on-Trent is being run as part of the national Community Led Support Programme. (https://www.ndti.org.uk/)

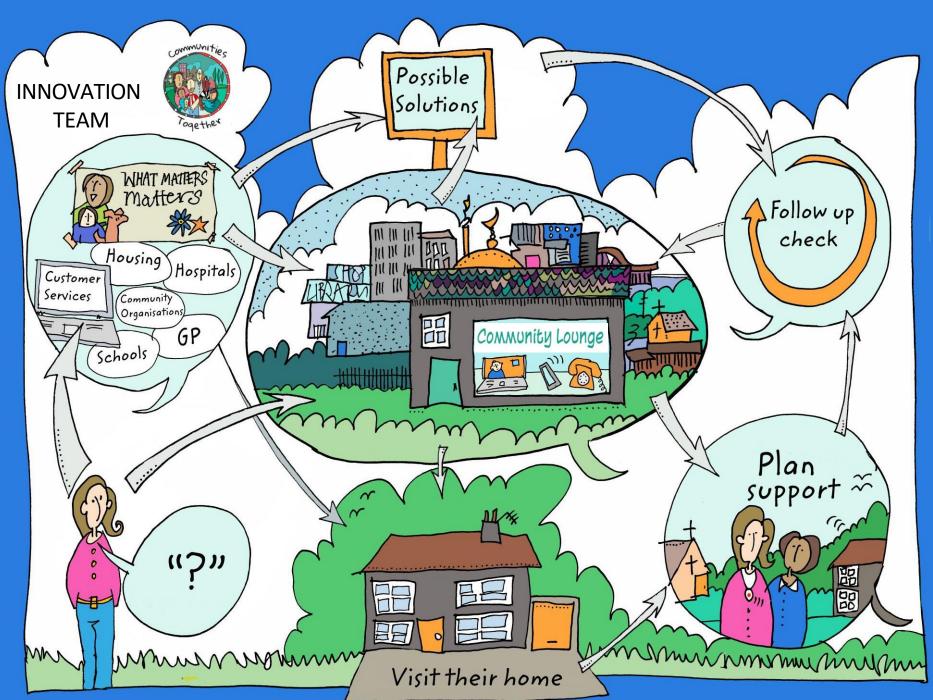
The approach:

A network of over 30 organisations from the public, private and voluntary sector working in partnership with their communities to design and deliver different ways of working which maximise the strengths and community connections of people locally.

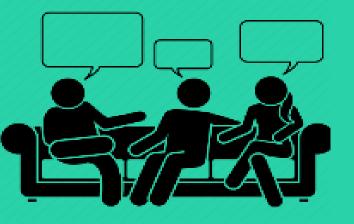


- An approach/ a way of working that combines strengths based support and care with a focus on community assets
- Whole system brings teams, agencies and organisations together to share collective skills and resources to ensure people get the support and care they need easily and quickly
- Disruptive cuts through silo working and requires change to established habits
- Coproduced at a local level bringing teams and organisations together to design new ways of working that builds on their collective strengths
- Requires trust across those various teams and agencies in order to reduce bureaucracy and process and to focus on best outcomes and experience for the person
- Evidence based doing the right thing works for people, for staff and for organisations





What support will the Community Lounge provide?



POP UP

Physical Health Supports.. Diabetes/Blood Pressure/ Foot checks/Pain Management Clinic/Pulmonary Rehab in the Community

Community Lounge

Pop in for a chat...

Where:

When:



We can help with:

Shopping/ Loneliness/ Shopping/ Loneliness/ Carer Access to Social Isolation Support

Lifestyle Housing

Accessing Community **Activities**

Employment Transport/ Opportunities Travel

Financial Support

Equipment/ Mobility Hearing Assistive Technology

Communit.















Primary















Local advice and support available for you and your family

For more information contact, Locality Connector on

Visit www.communities-together.co.uk for more information

What's happening locally

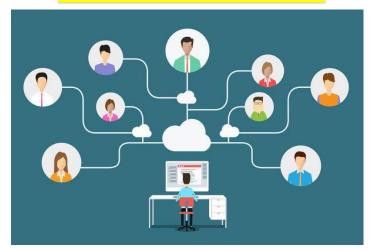


...a place-based approach to achieving change in health and social care services, through working closely with local communities and wider partners in the voluntary, community, business and public sectors. (Localities chosen based on social care demand and readiness for lounges)



How it works...

Associations ... Innovation Teams



University Hospitals of North Midlands

Midlands Partnership
NHS Foundation Trust
A Keele University Teaching Trust

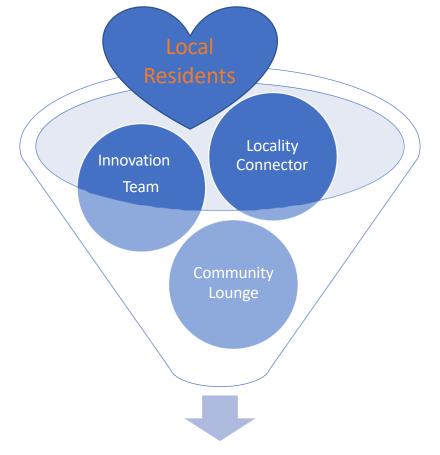












Connections..



Place based Assets



Community Lounges



Locality Connectors

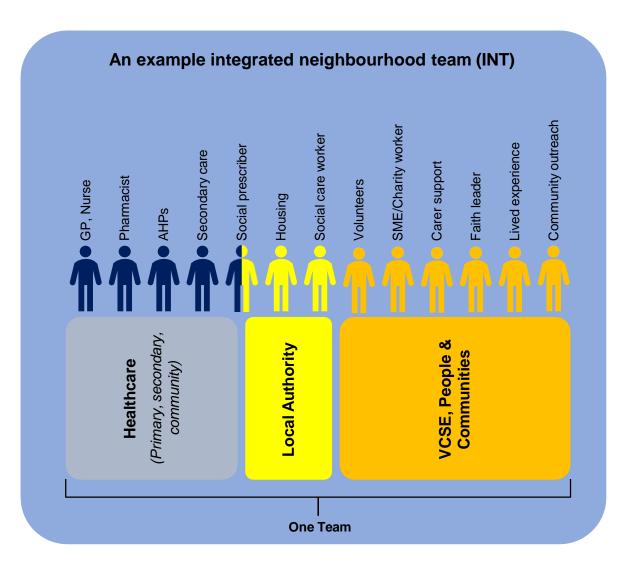
- SOTCC Locality Connectors
- SOTCC Occupational Therapy Team
- SOTCC Social Work Team
- SOTCC Public Health Team
- SOTCC Safer Communities Team
- SOTCC Contact Centre
- MPFT LAP's
- Community Mental Health Teams
- Older Persons City Community Mental Health Team
- Memory Services
- SMI Physical & Mental Health Team
- Vascular Wellbeing Team
- Community Catalysts
- Care Home Liaison Team and Dementia Primary Care Team
- MPFT District Nursing
- MPFT Frailty, Integration and H&W
- PCN MH ARRS practitioner
- Learning Disability Teams LA and Combined
- SOTCC Housing
- VAST

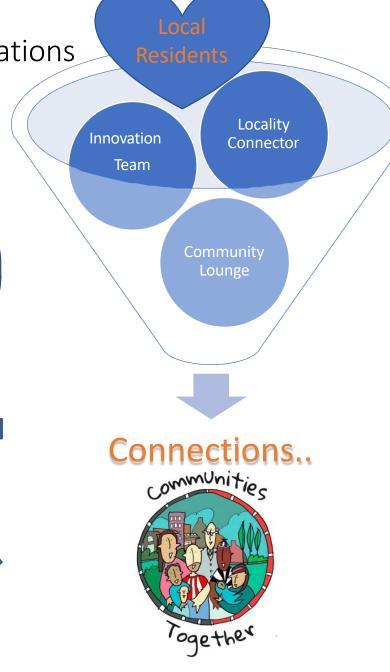
Associations ... Innovation Teams



- Hyper Local Community Organisations
- Trussel Trust Food Banks
- PCN Clinical Directors
- Multiple VCSE representatives
- PCN social prescribers
- Social prescribing providers
- Dept. levelling up rep lead
- Police
- Fire Service
- Private Sector partners
- University Hospital North Midlands
- MPFT Homefirst
- MPFT Cancer Team
- MPFT Parkinsons
- MPFT Diabetic 8 Care Team
- MPFT respiratory team
- SOTCC Changing Futures
- EXPERT CITIZENS
- SOTCC Family Support Hubs
- JET
- DWP
- CHAD
- The Bread and Butter Thing

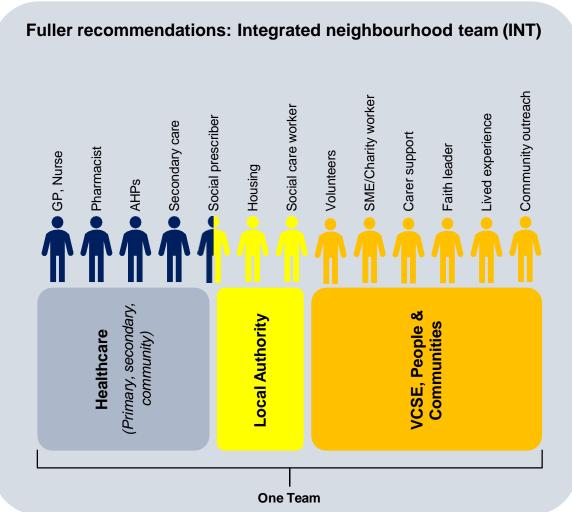
An opportunity to realise the Fuller Stocktake recommendations





Multidisciplinary Teams..





NHS England » Next steps for integrating primary care: Fuller stocktake report

An opportunity to realise the Fuller Stocktake

The three offers

- 1. Improved access to same-day urgent care, including:
 - Providing more choice about how people access care and improving the interconnectedness of urgent care services
- 2. Improved continuity of care for those with complex needs, including:
 - Providing more proactive, personalised care with support from a multidisciplinary team of professionals
- **3.** Reduced health inequalities, including:
 - Helping people to stay well for longer as part of a more ambitious and joined-up approach to prevention

Communities Together

- Reduced Silo working with partners to support co-ordination
- Easier access for advice, guidance and professional learning

- Easier access for advice and guidance
- Smooth transition to specialist services through good conversations and relationships development
- · More communicative, less transactional care
- New alliances with VCSE and Local authority partners
- Supporting communities in new ways through community development
- Increased focussed on wider determinants, prevention and supported self-management

Community Catalysts ...

Help **people and communities** to **use their talents** to start and run small enterprises and community businesses that **support and care for other local people.**

Create good local jobs and keep local money local.

Help people live a good life, **connected with** and **contributing to their community.**

Small Good Stuff | A free directory of community micro-enterprises who offer care and support locally

(234) Our 'Communities Care' work - YouTube





Decluttering Handy Person

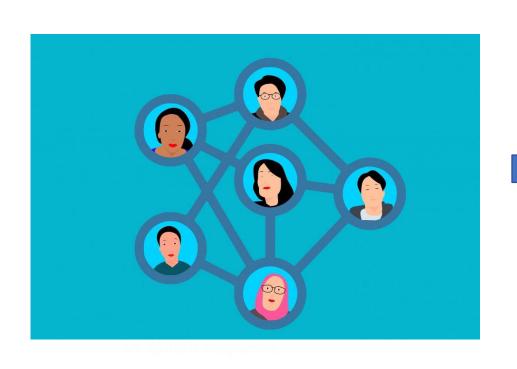
Medication prompts & collection Community Engagement support

Cleaning

Personal Care

Preparation of meals

Attendance at appointments









unlocking potential effecting change

What feels so different and so good?

Shared purpose .. The relationships ... The right people ..

Amplifiers: People giving voice to others and sharing widely





Translators: Multi-Linguists.. speak NHS, Local Authority, VCSE and Human!



Bridgers: Skilled in getting different groups of people to work together









Partners in Care and Health

Dr Jonathan Prunty Research Associate University of Kent









Evaluating the Impact of CLS in England

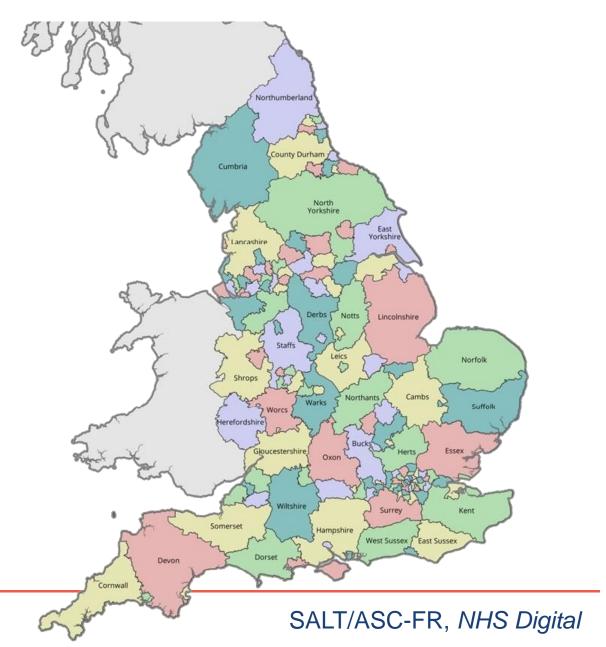
Jonathan Prunty





Our approach: Administrative data

- 149 Upper-tier Local Authorities in England, 16 have implemented CLS
- Compare local-authority data for CLS "treatment" and Non-CLS "control" regions (2016-2022)
- Data: Short and Long Term (SALT)
 Services and Adult Social Care
 Financial Return (ASC-FR)
 - Care requests
 - Care reviews
 - Care expenditure



Hypotheses

- Changing care pathways:
 - Reduced numbers receiving localauthority funded care
 - Increased numbers signposted to alternative services for support
- Improved quality of care:
 - Better ratio of planned to unplanned reviews
 - Improvements due to efficiency savings, not increased spending
- Changes should scale with the number of years post-implementation

Six CLS outcomes:

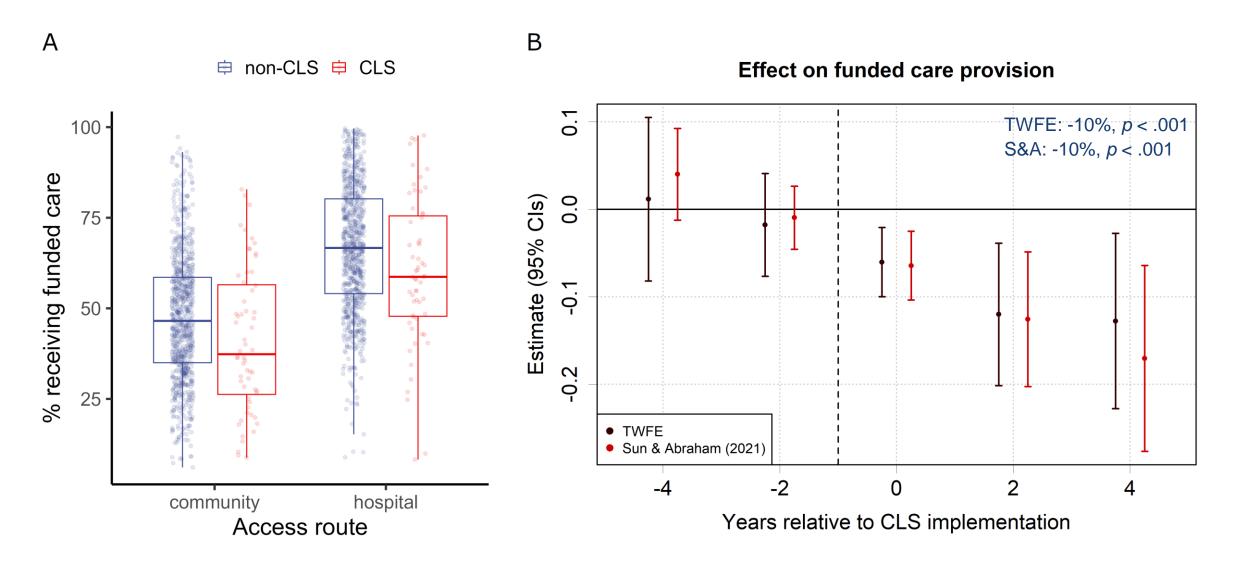
1. Easier, quicker access to the right support for each person An increased presence and use of local solutions and options for support. 3. Local services help people achieve their goals, and they feel happier & more resilient

4. Local services offer holistic, seamless support (as a result of changes introduced)

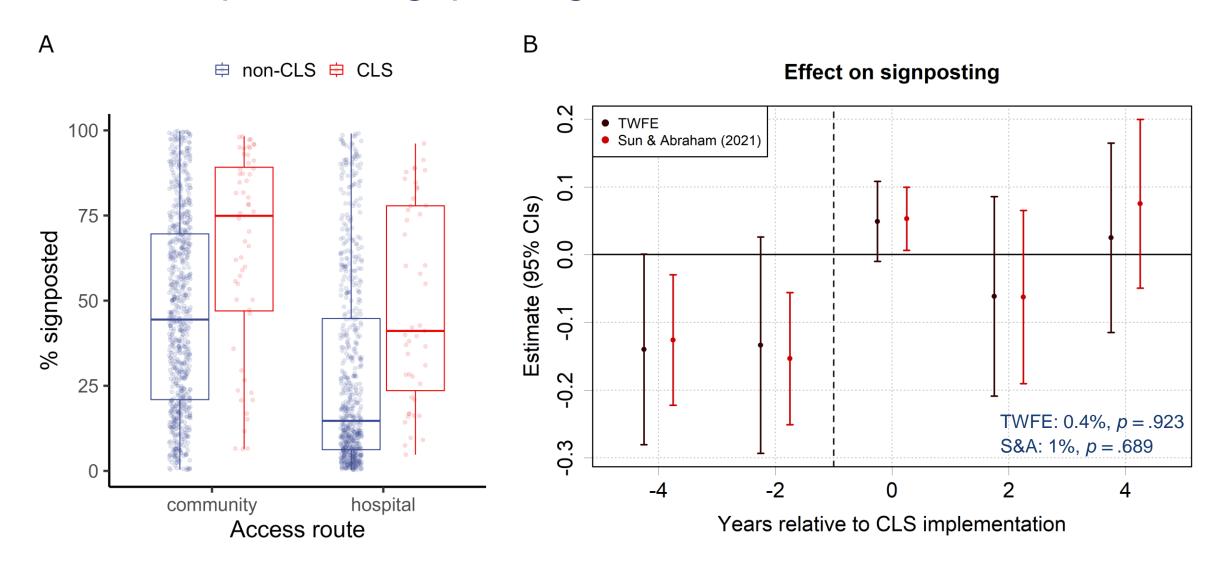
5. Staff delivering CLS are empowered and confident

6. Better use of local resources (value for money, efficiencies, effectiveness).

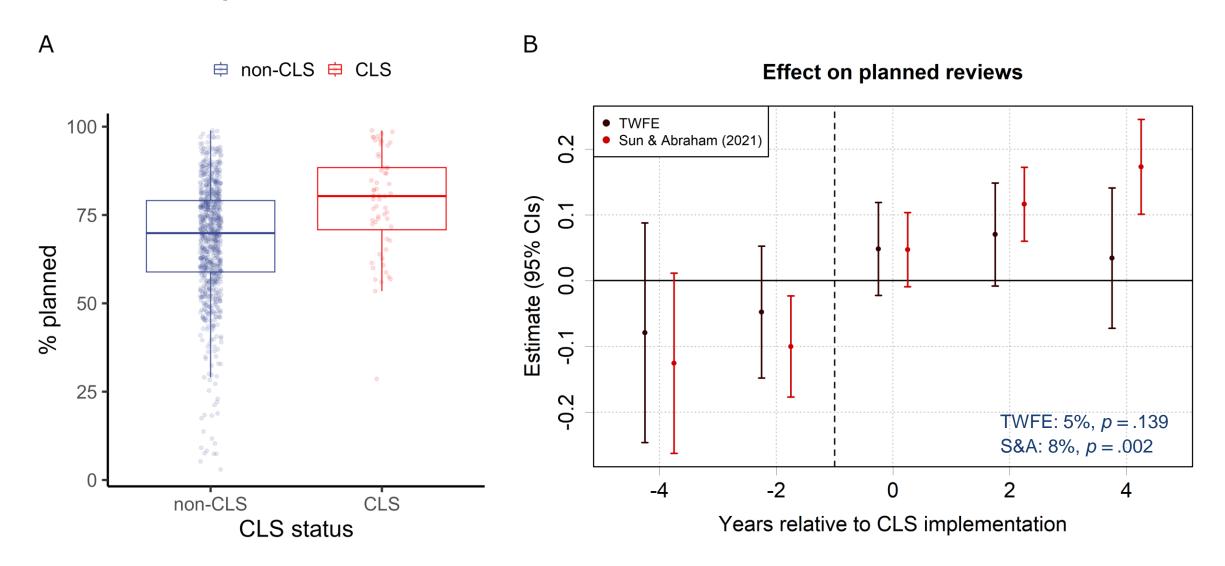
Results: Impact on provision



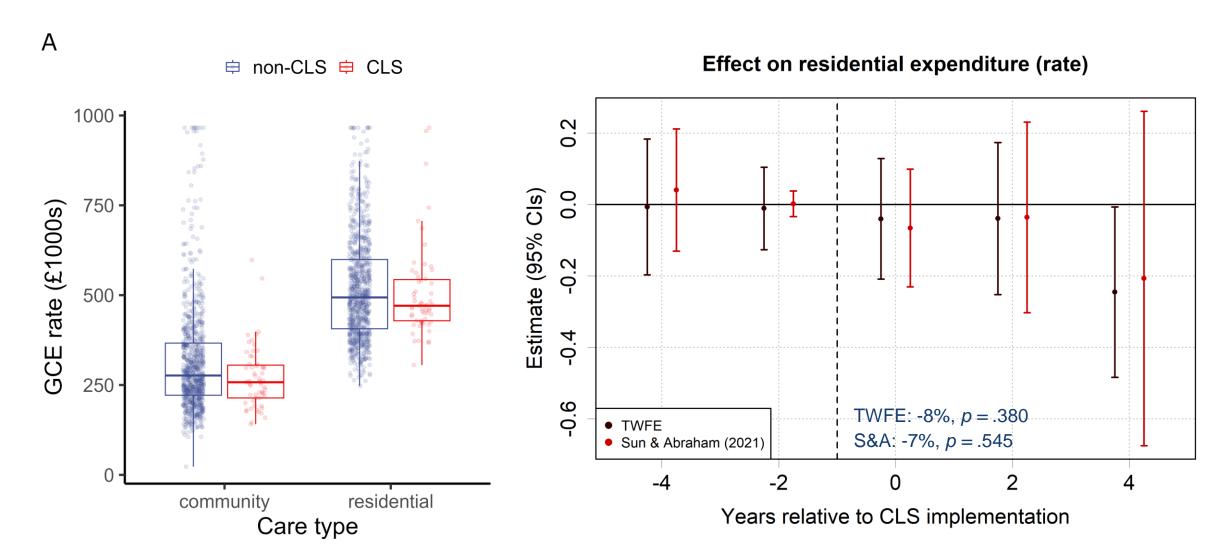
Results: Impact on signposting



Results: Impact on reviews



Results: Impact on expenditure



Research summary

Implementation of CLS led to:

- Changing care pathways:
 - Reductions in funded care provision
 - Larger reductions for older CLS sites
 - Increased signposting to other services \square
 - No overall effect, but clear increase in first 2 years post-implementation

- Improved quality of care:
 - Greater proportion of planned reviews
 - Particularly for more established sites
 - No increase in expenditure rates
 - Non-significant trend toward decreasing expenditure across time









Thank you

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Discussion Q & A





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Thank you Closing Remarks