



Report of: Shona McFarlane, Chief Officer Access & Care Delivery, Adult Social Care

Report to: Outer East Community Committee; Crossgates & Whinmoor, Garforth & Swillington, Kippax & Methley and Temple Newsam

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Date: Tuesday 2nd October 2018 To note

Outer East Community Committee Briefing Neighbourhood Teams – September 2018

1. Purpose of report

1.1. This report updates on the progress with Strengths Based Social Care across the city and draws attention to local features of this new approach to service delivery.

2. Strengths Based Social Care (SBSC) Model – An Overview

- 2.1. The new strengths-based model establishes a way of delivering adult social work practice that is:
 - Values driven
 - Community focused in achieving outcomes
 - Empowering of staff
 - A partnership with local people
 - Builds on the asset based approach already in place in Leeds
- 2.2. The new model moves away from the focus on eligibility and assessment towards a strengths-based and person-centred approach.
- 2.3. With SBSC, the starting point is always to look first at what someone can do rather than what they can't do; a move away from "what's wrong" to "what's strong".
- 2.4. After an initial conversation with a customer to understand their concerns and see what they have tried already we try to get them to the right place to help them.

- 2.5. That 'right place' may be a pre-booked conversation with one of the social work team at a local community venue, but it may be some peer support or a community group.
- 2.6. Social Workers have designed new tools to reduce bureaucracy and enable transparent conversations with customers that focus on the individual and the outcomes they desire.

3. Main issues

3.1. New ways of working

- 3.1.1. During the initial call customers have more clarity around their options and The What's Out There Guide has been designed to enable call handlers to connect customers to beneficial services in their community.
- 3.1.2. A Rapid Response team is now in place to stabilise all crisis situations with a focus on make safe, short term work.
- 3.1.3. Customers can now also book a community appointment with a Social Worker in a Talking Point; the average wait is currently 10 days.
- 3.1.4. Each Neighbourhood Team has a community-based Talking Point where customers can meet Social Workers and see the range of options open to them in their local area.
- 3.1.5. At the Talking Point and in place of home visits and lengthy assessments Social Workers and customers can now have a series of conversations based on what the customer wants.
- 3.1.6. Social Workers have re-designed paperwork to record conversations so it is easier for customers to understand and less bureaucratic to complete.
- 3.1.7. This also empowers Social Workers to spend more time with customers and understanding their local community.
- 3.1.8. Teams now meet to 'peer review' their work before submitting support plans and this increases team knowledge and understanding and introduces creative solutions.
- 3.1.9. New ways of working are being embraced and the approach is being applied across different services within Adults & Health and with our Health partners across the city.

3.2. Local Progress & impact

- 3.2.1. Customers have told us that it is "nice to just have a conversation" and feedback is being gathered as part of the ongoing evaluation work.
- 3.2.2. Each NT offers on average 4 TP appointments per week with an average wait time of 10 days.
- 3.2.3. More people are having their needs met in a way that doesn't require traditional services but enables them to live life the way they choose.

3.2.3.1. Kippax Neighbourhood Care Management Team

- 3.2.3.2. Social workers have been having better conversations due to the more fitting paperwork.
- 3.2.3.3. Paperwork is much more proportionate and customers find it easier to understand.
- 3.2.3.4. Talking points have allowed the team to pick up referrals more quickly and social workers can see more people in a day at Talking Points.
- 3.2.3.5. Social Workers keep cases for clients at talking points ensuring more continuity of support
- 3.2.3.6. There has been more linking together of teams, e.g. through staff networks and champions. This has allowed better cooperation between teams.
- 3.2.3.7. More usage of community venues has led to better signposting and links to activities for customers.

3.2.3.8. Seacroft Neighbourhood Care Management Team

- 3.2.3.9. The team has really appreciated the new paperwork, as it has allowed them to engage in better conversations with customers. By stripping out needless box ticking questions, the conversations keep focused on what the customer really wants to discuss, and helps keep the recording based around that too.
- 3.2.3.10. Talking points have been really helpful in seeing people more quickly. Customers are put at ease by the community venue, and being in a single location helps social workers to see up to 5 people in a day. The community venue also helps in planning signposting and linking customers in to local activities.

- 3.2.3.11. Champions from the team have linked in with relevant groups such as the Extra Care group and integrated monthly meetings, to help find creative solutions for individual cases.
- 3.2.3.12. Peer Review has been set up to help spread knowledge within the team, with social workers being given an opportunity to comment and make suggestions for cases.

4. Conclusion & next steps

- 4.1.1. Strengths-based Social Care places the customer at the heart of conversations which now involve our community partners.
- 4.1.2. A quality performance framework is in place to ensure consistency across the city and to monitor the impact from a customer, quality and financial perspective.
- 4.1.3. The approach is currently being evaluated with the assistance of nationally renowned academic John Bolton and initial findings are due later in the year.
- 4.1.4. As new ways of working embed the approach is being explored with providers and partners across the city.

5. Recommendations

- 5.1. That Elected Members note the above update.
- 5.2. That Elected Members note the desire to return to the Community Committee Chairs Forum with a summary of this round of updates.
- 5.3. That Elected Members consider how we further build relationships between Adults and Health and local communities and benefit from Members' expert local knowledge.