

29 March 2021

Agenda Item: 5

REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND HEALTH

STRENGTHS-BASED APPROACH PROGRAMME

Purpose of the Report

1. This report informs Committee of the work Adult Social Care and Health department is undertaking to develop and implement strengths-based approaches to support people to achieve their desired outcomes in order to lead their best life.
2. The Committee is asked to consider whether there are any actions it requires in relation to the issues contained within the report.

Information

Background

3. Following approval by Committee in January 2020 of the Adult Social Care cultural change work, the Principal Social Worker began further development of the Strengths-Based Approach programme with a focus on practice development.
4. The Principal Social Worker had undertaken research across other local authorities who had successfully embedded strengths-based practice. Those authorities that had focused on Three Conversations, community asset development and Family Group Conferencing had evidenced better outcomes for people.
5. One of the key messages of the Care Act is to use a holistic approach when working with someone, identifying their strengths and capabilities and what might be available from within their community to support them.
6. During the staff roadshows in January 2020 Adult Social Care staff were asked to identify key issues about strengths-based practice; staff said that they:
 - are frustrated with bureaucracy and processes
 - want to spend more time with people rather than on computers
 - want to be trusted by their managers
 - want to have real conversations with people that really make a difference.

7. In developing a strengths-based approach for Nottinghamshire, the Principal Social Worker spoke to people with lived experience in the Council's Coproduction Steering Group. Members of the Steering Group are now supporting the development of the Council's strengths-based approach. A person with lived experience said:



Hello I'm Marion, married to John who has been having support for about 17 years. When we've had contact with social care we've found the experience varies hugely according to the personality of the person visiting. We are worried when people visit that we might say something wrong and it might prejudice what help may be available. On one occasion a social worker came in, took time to get their computer ready, then they led the conversation, there was no eye contact and it didn't feel like they were really listening to us. We want to be reassured that the person visiting is really listening to John and me and supporting us with a way forward.

Three Conversation Approach

8. The Three Conversations approach is a paradigm shift in how to deliver adult social care from a deficit model to a strengths-based model, fostering collaboration with partners to make the whole system of community based support work differently. Providing a more holistic and positive experience for the people the Council supports, as well as for social care staff.
9. It seeks to replace the 'contact, re-ablement, then assessment for services' culture with a new approach based on the assets, strengths and capabilities of people, families and communities. It is built on the assumption that if you collaborate with and allow people to be co-designers of their support then their positive outcomes go up, and their use of health and social care resources goes down. This has been evidenced where this approach has been used in other local authorities. At the heart of the approach are the three distinct conversations used to understand what really matters to people and carers, what needs to happen next for them, and how the Council can be most useful.

- **Conversation 1: Listen and connect**

Conversation 1 is about listening hard to people and their families to understand what is important and working with them to make connections and build relationships in order to help them get on with their life independently. Conversation 1 is not about whether the person is 'eligible', but it does meet the 'prevent, reduce, delay' requirements of the Care Act.

- **Conversation 2: Work intensively with people in crisis**

When something needs to happen urgently to help the person regain stability and control in their life, Conversation 2 is used to understand what is causing the crisis, put together an 'emergency plan' and stick with the person to make sure that the changes happen quickly, and ensure that the plan works for them.

- **Conversation 3: Build a good life**

Exhaust Conversations 1 and/or 2 before moving on to Conversation 3 – and often it does not get that far. But for some people, longer-term support in building a good life will be necessary. Conversation 3 is about understanding what a good life looks like to them and their family, and helping them to get the support they need organised so they can live the best life possible.

10. The aim of this approach is to produce a different culture, practice and behaviour in the department with a focus on reconnecting people to communities and not planning long term care when someone is in crisis.
11. The Three Conversations Approach also focuses on working together with carers, on the understanding that a good plan for carers often means a better outcome for people, which develops a Whole Family Approach, a key principle of the Care Act.

An example of practice using a Three Conversation Approach is Mrs B, a 78 year old woman living in very poor conditions with no family, a tendency to hoard and a rat infestation. Under the deficit model way of working, an admission to residential care would have been sought. However, instead, the social worker spent time with Mrs B, and in an atmosphere of constant reassurance worked with Mrs B to 'create a clear space on the floor'. The relationship between the two of them led to Mrs B feeling that she was getting her quality of life back. She said that she looked forward to seeing the social worker, where they actively engaged in filling black bags whilst talking. They also explored other community connections. In this instance, the company of the social worker, in the context of the Three Conversations approach, served to open the door to a range of additional possibilities.

Planning and Engagement

12. A strategic partner called Partners 4 Change has been commissioned to support implementation of the Three Conversations Approach for Nottinghamshire. The partner was selected to give independent challenge and support to practice change, which is considered in best practice to be a key enabler to cultural change. Partners 4 Change has supported the development of the Three Conversation Approach in 41 local authorities.
13. A 'Making it Happen' group was established by the Principal Social Worker that involved people with lived experience and Council staff. The group developed Adult Social Care's 'story' to share with teams and partner agencies to achieve the following plan:

Strengths-based Approach:
Working together with people and carers, enabling people to achieve what is important to them to live



14. Staff communication and engagement sessions were arranged via staff roadshows, attendance at team meetings and practitioner forums. An invitation was issued to staff to get involved with this work and to become an Innovation Site where this approach will be developed. Innovation Sites bring people together to develop practice and create a continuous cycle of improvement, as detailed in **paragraph 16**.
15. A Strengths-Based Approach community of practice was also established by the Principal Social Worker. A community of practice is a group of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly. Adult Social Care wants to develop this way of working as part of the strengths-based approach and culture change work.

Innovation Sites

16. The Three Conversation Approach will be developed through Innovation Sites, across Ageing Well and Living Well services. The Innovation Sites are being codesigned with teams to define the cohort of people they will work with in this different way. As an example Living Well Newark Community Team is working with people from a specific postcode for their Innovation Site.
17. Staff in the Innovation Sites will be supported to have meaningful conversations with people, that focus on the person's strengths and on achieving their person-centred outcomes. Staff in the Innovation Sites will develop ways of recording their work in a proportionate way

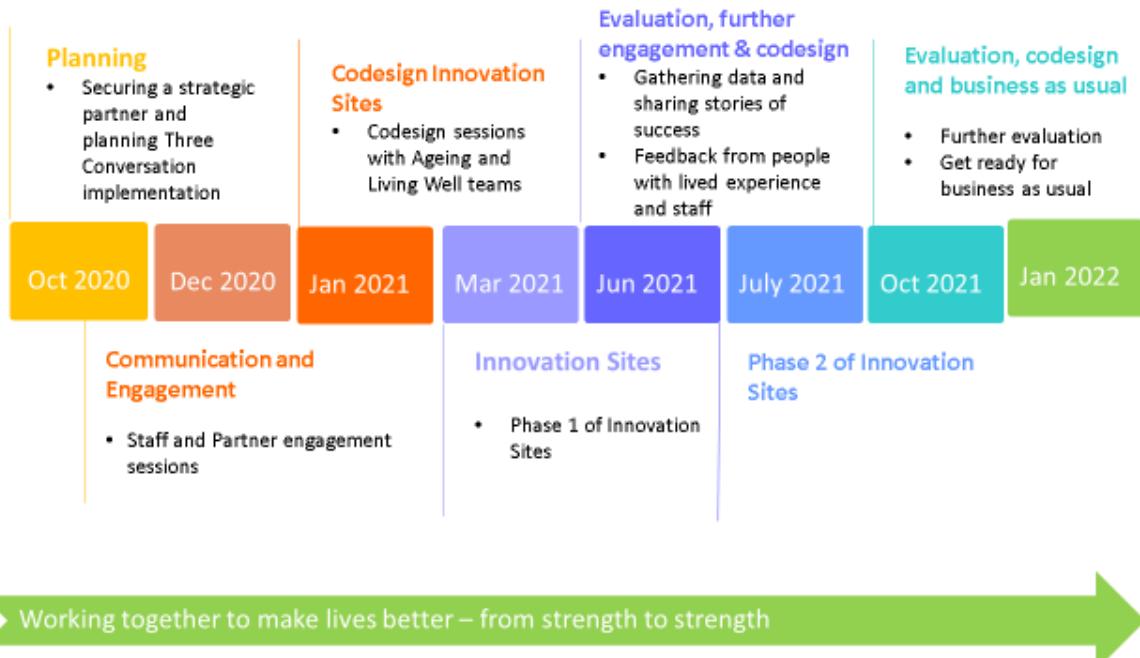
according to the Care Act. Staff and managers will lead the change and work of the Innovation Sites, supported by the Principal Social worker and Partners 4 Change.

18. The aim of the work is to enable people to reconnect and engage with their communities, to build on the strengths that they have to make choices about their lives and increasing use of alternatives to commissioned services such as short and long-term residential care. It also aims to promote staff wellbeing as the Council works with staff to reduce bureaucracy and process driven practice, empowering staff to make decisions and trust their professional opinions.
19. The Innovation Sites run for a period of 13 weeks during which the staff receive weekly support during their Promoting Independence Meetings from Partners 4 Change and the Council's Strengths-Based Approach project team where the focus is on their practice and data gathered to identify outcomes achieved.
20. During the Innovation Sites, staff will also complete community asset mapping within their local area of work. Connect workers and Strategic Commissioning colleagues will work closely with the social care teams to identify gaps in resources and look at how these might be addressed, to develop a continuous cycle of improvement.
21. Teams currently involved in the co-design sessions to become Innovation Sites are Preparing for Adulthood, Maximising Independence Service - North and Mid Nottinghamshire, Living Well Newark and Ashfield Community Teams, Ageing Well Bassetlaw and Ashfield Community Teams and Provider Services – Day Services, Short Breaks and Shared Lives. The first sites will begin in early March 2021.
22. Initial feedback from staff is very positive about the approach; a Team Manager from the Maximising Independence Service said:

'My team really love the Three Conversation Approach and are looking forward to the ability to work in a different way, getting back to the values of why they came into social care'.

Key Activity and Milestones

23. Key activity and milestones are shown in the table below:



Better outcomes

24. In the last four years Nottinghamshire Adult Social Care has seen reduced scores on the national Adult Social Care Survey and Carers survey for quality of life indicators. The focus of the work with Partners 4 Change is on developing practice, improving people's experience of Adult Social Care and producing better outcomes for them. Evidence from other local authorities such as Essex and West Berkshire, who have adopted the Three Conversation Approach, has shown an increase in these quality of life indicators. Other local authorities have also evidenced a reduction in Care Act assessments, reductions in ongoing support such as long and short-term residential care, an increased use of Direct Payments and access to alternative community resources. The development of strengths-based practice is therefore an important foundation to underpin the range of social care improvement plans approved by Committee on 11th January 2021.

25. Evidence, both qualitative and quantitative, will be gathered during the Innovation Sites from people and staff. Feedback forms have been coproduced with people who have lived experience to understand people's experience of the Three Conversation Approach. Stories of success will be celebrated and shared across the department in the Principal Social Worker's practice newsletter.

Other Options Considered

26. Prior to commissioning Partners 4 Change the department did consider continuing to operate the current model of adult social care support, but evidence suggested focusing on a strengths-based approach supports the principles of the Care Act 2014 and has a positive impact on individuals, staff, communities and organisations.

Reason for Recommendation

27. To update Committee with the progress of the Strengths-Based Approach programme.

Statutory and Policy Implications

28. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

29. The financial implications were approved by Adult Social Care & Public Health Committee at the meeting on 11th January 2021, where it was agreed that an additional £100,000 would be made available to ensure the Strengths-Based work is well embedded and to secure continued support from the strategic partner, Partners 4 Change.

RECOMMENDATION/S

That Committee:

- 1) considers whether there are any actions it requires in relation to the issues contained within the report
- 2) agrees to receive an update report in the next six months and that this be included in the work programme.

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Constitutional Comments (AK 04/03/21)

30. This report falls within the remit of Adult Social Care and Public Health Committee by virtue of its terms of reference.

Financial Comments (ZB 22/02/21)

31. The financial implications were approved by Adult Social Care & Public Health Committee at the meeting on 11th January 2021, where it was agreed that an additional £100,000 would be made available to ensure the Strengths-Based work is well embedded and to secure continued support from the strategic partner, Partners 4 Change.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Adult Social Care Culture Change programme – report to Adult Social Care and Public Health Committee on 6th January 2020](#)

[Adult Social Care and Public Health Service Improvement Programme for 2021/22 to 2023/24 – report to Adult Social Care and Public Health Committee on 11th January 2021](#)

Electoral Division(s) and Member(s) Affected

All.

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