New Model for Learning Disability Day Support Collaborative

National Learning Event

3 May 2022

Improvement Hub

Enabling health and
social care improvement

Agenda

10:00 – Welcome and Introductions

10:10 – Collaborative Phase 3, Ashleigh Spalding (Healthcare Improvement Scotland)

10:50 – Break

11:00 – Perth and Kinross Collaborative Project Team Discovery Work Launch
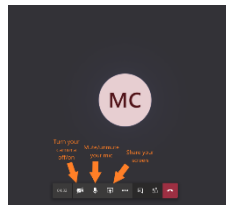
11:55 – Break

12:05 – Commissioning Differently, Human Learning System approach, Des McCart & Karen McNeil

12:50 – Event summary and evaluation

13:00 – Close

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Housekeeping

Mute your microphone and have your video off on entry and throughout the meeting.
To give an update
- o   unmute your mic
- o   turn your video on

and then
- o   mute your mic
- o   turn your video off

A more detailed electronic follow up survey will be sent via email to help us plan for future sessions.

We will use Slido for any questions or comments. Please download the app or use the webpage: www.slido.com
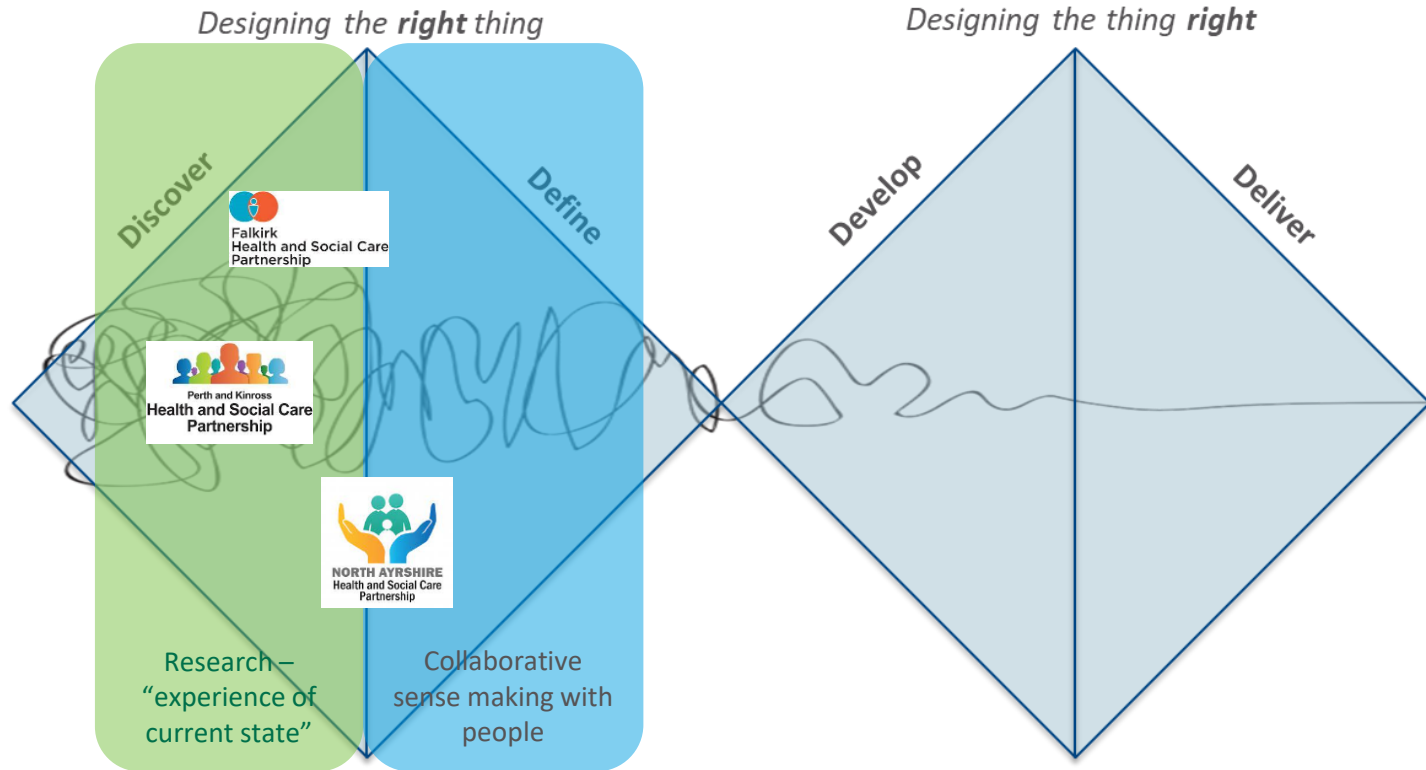Enter the meeting code: **#542759**

Technical support please contact:

his.peopleledcare@nhs.scot

Ashleigh Spalding,
Improvement Advisor,
Healthcare Improvement Scotland, ihub

The Collaborative Approach

Designing the **right** thing

Designing the thing **right**

Discover

Define

Develop

Deliver

Research – "experience of current state"

Collaborative sense making with people

Falkirk Health and Social Care Partnership

Perth and Kinross Health and Social Care Partnership

NORTH AYRSHIRE Health and Social Care Partnership

Scottish Approach to Service Design, Scottish Government
The Process of Design Squiggle by Damien Newman, thedesignsquiggle.com

You said…

How would HSCPs and other organisations who are not part of the core collaborative teams, like to be involved in future work?

"This type of event is useful but I feel in order for the key areas to be achieved there needs to be strategic involvement from those organisations too"

"Community of practice, links with work other National work like Self-directed Support, role of COSLA in sharing practice, links with Social work Scotland, Commissioning"

"The barriers experienced are similar, what works well is similar. I would like to continue to hear about the work"
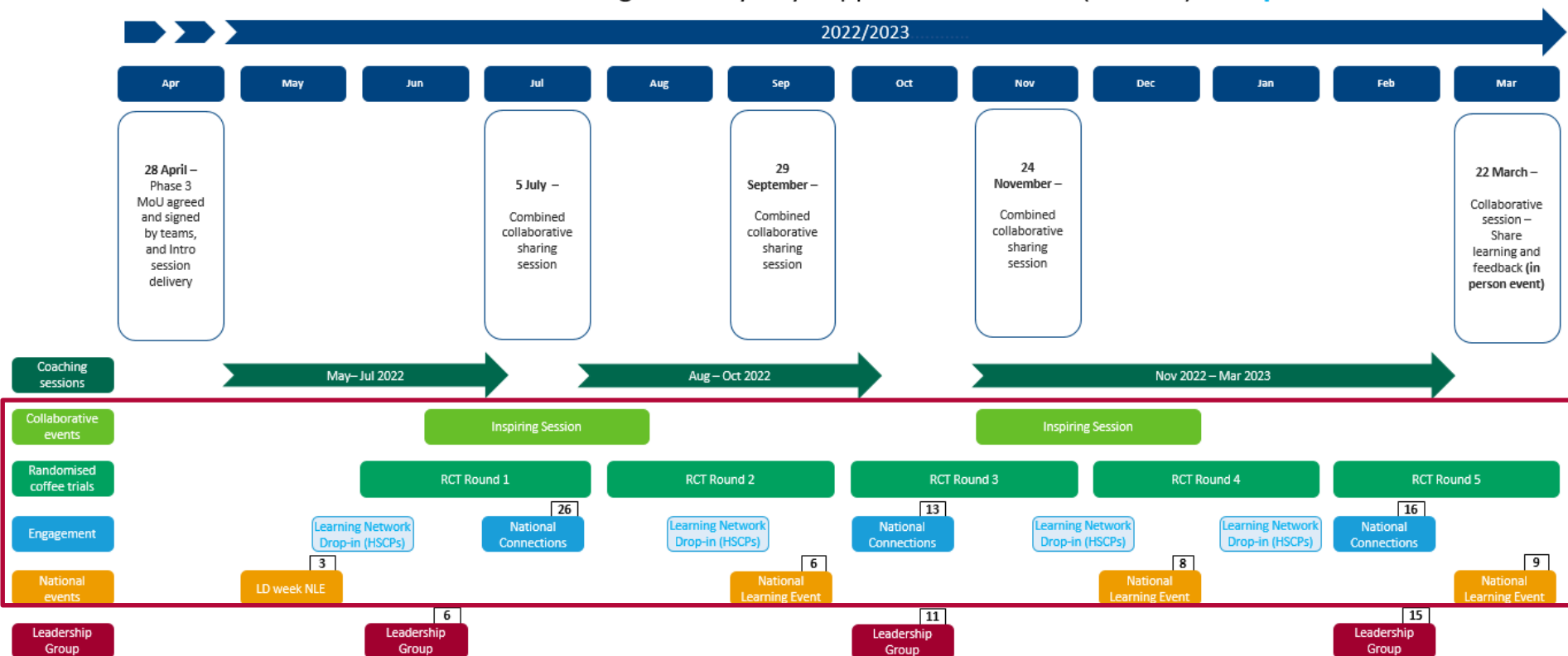
Strategic Involvement

Accessibility   Navigating Uncertainty

Sharing Learning   Access

Capture complexity   learning outputs

Networking opportunities

Learning from Phase 2

Number of organisations involved in the Collaborative over Phase 1 & 2
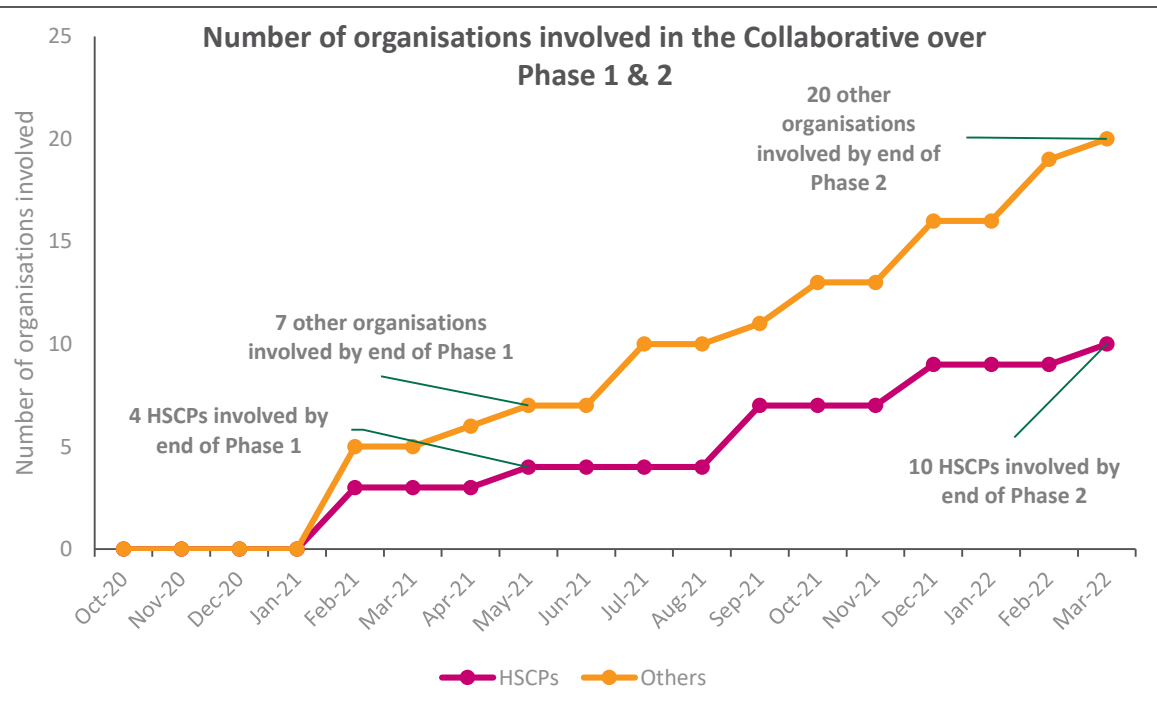
- Less HSCPs have been actively involved in the Collaborative than other organisations.

- PAMIS connection with Phase 3 Collaborative teams.

- Space for sharing learning offers reassurance, motivation, and support for those trying to deliver change in the system.

Healthcare Improvement Scotland | ihub

Timeline - New Models for Learning Disability Day Support Collaborative (Phase 3): 26 April 2022

2022/2023

Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar

28 April – Phase 3 MoU agreed and signed by teams, and Intro session delivery

5 July – Combined collaborative sharing session

29 September – Combined collaborative sharing session

24 November – Combined collaborative sharing session

22 March – Collaborative session – Share learning and feedback (in person event)

Coaching sessions
- May– Jul 2022
- Aug – Oct 2022
- Nov 2022 – Mar 2023

Collaborative events
- Inspiring Session
- Inspiring Session

Randomised coffee trials
- RCT Round 1
- RCT Round 2
- RCT Round 3
- RCT Round 4
- RCT Round 5

Engagement
- Learning Network Drop-in (HSCPs)
- National Connections [26]
- Learning Network Drop-in (HSCPs)
- National Connections [13]
- Learning Network Drop-in (HSCPs)
- Learning Network Drop-in (HSCPs)
- National Connections [16]

National events
- LD week NLE [3]
- National Learning Event [6]
- National Learning Event [8]
- National Learning Event [9]

Leadership Group [6]
Leadership Group [11]
Leadership Group [15]

Additional: Monthly check-in calls/meetings with Project Team Leads / Quarterly Sponsor calls/meetings

Note: Dates are subject to change, anticipate all will take place virtually as of April 2022, subject to ongoing review

Sharing Learning

	Proposed Changes	Potential Impact
Inspiring Sessions	• Open up to all HSCPs, and providers	• Increased access to learning opportunities
Randomised Coffee Trials	• Open up to whole NMLDDSC stakeholder list	• Increasing networking opportunities
National Connections	• Open up to whole NMLDDSC stakeholder list • Participants drive agenda	• Increasing networking and sharing learning opportunities • Increased opportunities for stakeholders to contribute
Learning Network Drop-in (HSCPs)	• Rapid information and sharing of learning for HSCPs (service managers, frontline staff, commissioners)	• Identification of emergent good practice • Identification of wave 2 testing
National events	• Participants influence topics	• Increase opportunities for HSCPs and providers to contribute

Your thoughts…

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What of our suggested stakeholder events would you want to be part of?

ⓘ Start presenting to display the poll results on this slide.
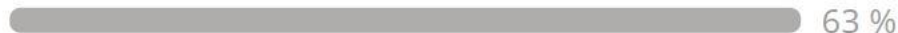
slido

What of our suggested stakeholder events would you want to be part of?

0 3 2

Inspiring Sessions

84 %

Randomised Coffee Trials

63 %

National Connections Group and Drop-in sessions

78 %

National Learning Events

84 %

What impact do you want our stakeholder events to have in Phase 3?

`0` `1` `9`

Sharing Vision   Resilience

System wide, beyond LD circles   Shared Vision

delivering across the system

Clarity Systemic inclusion   Sustainable

To inspire some changes and improvements to servic

Sharing learning

You said…

How would HSCPs and other organisations who are not part of the core collaborative teams, like to be involved in future work?
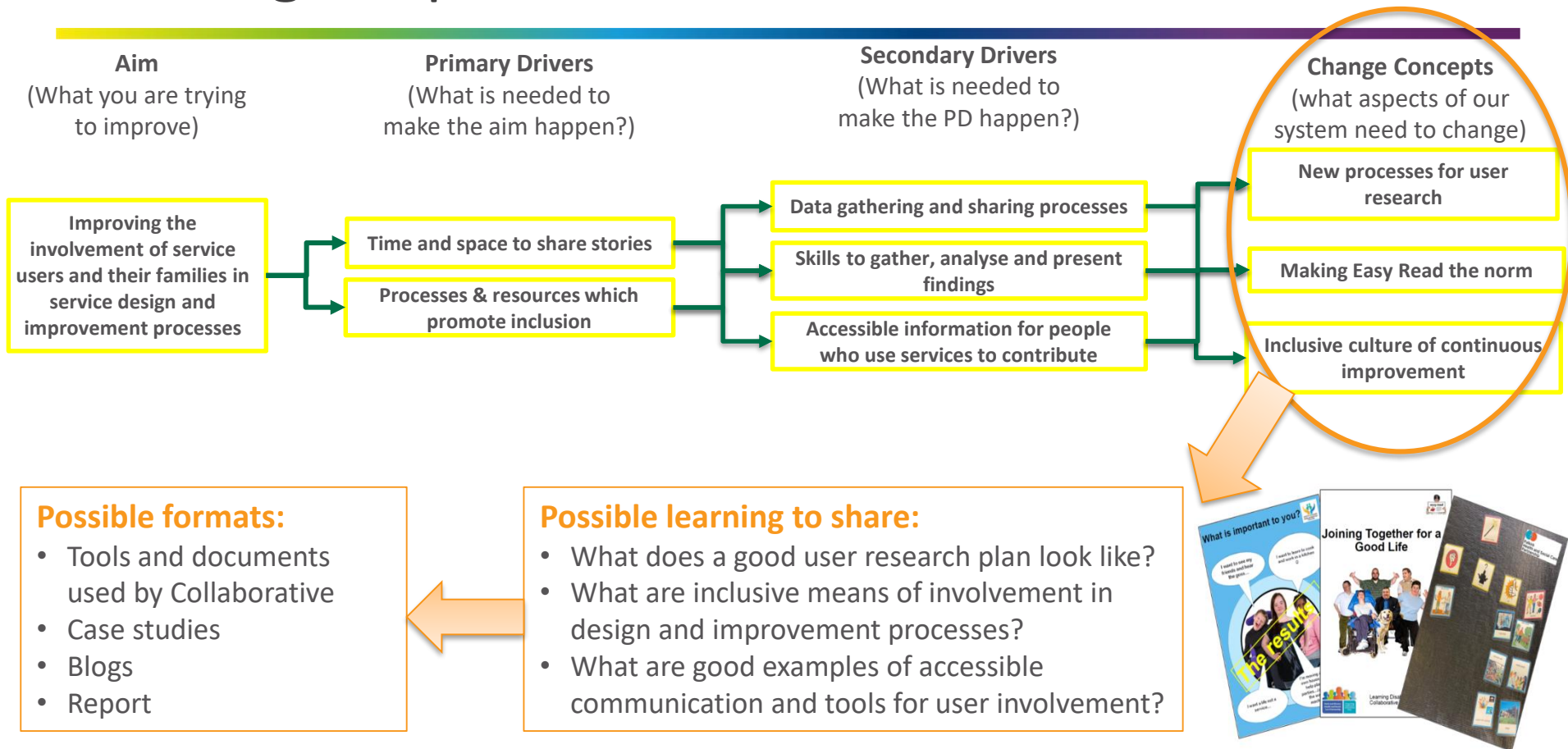
"It would be helpful to have a toolkit that takes all the learning from this work. It's not a one size fits all but key processes and tools could be selected that best fit. "

"Profile of LD and range of complexity, diversity for individuals and families needs to be consistent and broader. Guidance for service evaluation to inform current Agendas."

"Have easy read materials detailing the work going on so we can share with people we support. Learning from best practice "

Strategic Involvement

Accessibility   Navigating Uncertainty

Sharing Learning Access

Capture complexity **learning outputs**

Networking opportunities

Learning Outputs

Aim (What you are trying to improve)	Primary Drivers (What is needed to make the aim happen?)	Secondary Drivers (What is needed to make the PD happen?)	Change Concepts (what aspects of our system need to change)

Improving the involvement of service users and their families in service design and improvement processes

Time and space to share stories

Processes & resources which promote inclusion

Data gathering and sharing processes

Skills to gather, analyse and present findings

Accessible information for people who use services to contribute

New processes for user research

Making Easy Read the norm

Inclusive culture of continuous improvement

Possible formats:
- Tools and documents used by Collaborative
- Case studies
- Blogs
- Report

Possible learning to share:
- What does a good user research plan look like?
- What are inclusive means of involvement in design and improvement processes?
- What are good examples of accessible communication and tools for user involvement?

Your thoughts…

slido

What format would make our learning outputs most useful?

`0` `3` `1`

Published tools and resources used in the Collaborative

71 %

Case Studies

94 %

Reflective Blogs

42 %

Learning reports

61 %

Other (please tell us in the chat box)

6 %

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How could wider stakeholders, like yourselves, be involved in sense-checking our outputs? 0 0 8

Connecting staff groups

Follow up in person visits to projects

Language needs to be plain english

Survey for feedback

Trialling in services

National events, breakout times for discussion and

Keep simple to include everyone

If we were to put the learning from this process into easy read consistently, what would you do with them? 0 1 1

Share it with users, families and other stakeholde

Share with brder system as exmple of good practice

Share with supported people, parents and caters

share with people who would benefit from these

Network Rep meetings in NN

Share via provider forums

Use when engaging people and staff

Share key examples with customers and families

Want to know more about the service design approach?

- The team can offer an introductory sessions to the approaches and tools we have been using in the Collaborative such as:

  - An introduction to the Scottish Approach to Service Design
  - Applying the Ladder of Coproduction
  - The Individual, Social, Material behavioural model
  - Using a Red & Blue Rules Framework
  - Exploring User Outcomes
  - Creating and using Personas for your service design

- To request more information please complete the Collaborative Enquiry Form.

Break

Perth and Kinross Collaborative Project Team Discovery Work Launch

Gillian Charleson,
Perth and Kinross Health and Social Care Partnership

Paul Booth
Perth and Kinross Health and Social Care Partnership

Perth and Kinross Health and Social Care Partnership

HIS National Learning Event

3 May 2022

The Team

Perth and Kinross Health and Social Care Partnership

Strathearn Building Bridges Inc

Advocates for Real Change (ARC) Scotland

Scottish Autism

NHS Tayside

Perth & Kinross Council

Team-building

Happy Start Up Canvas

Purpose & Vision

To empower people with learning and other disabilities and their parents/carers to "have a life", promote aspiration and integration to others in their community.
To co-design new day activities with people who have lived experiences. Individuals with learning disabilities and learning difficulties are empowered to choose what supports they wish to have withing their communities.

Values

Equality, Inclusion and Aspiration.

Trust, Empathy, Fairness, Integrity, Creativity

Bring people together

People centred.

To give people a voice

Story

Personal story of one team member - I got involved to give a voice to those with LD/other disabilities and their parents/carers. I am professionally involved in the transition process as a Careers Adviser

True Collaboration and Co-design empowering change, embracing choice through coming together

Team-building

Challenges

Time…

GDPR…

Discovery!

Break

Commissioning Differently, Human Learning System approach

Des McCart,
Senior Programme Manager,
Healthcare Improvement Scotland, ihub

Karen McNeill,
Improvement Advisor,
Healthcare Improvement Scotland, ihub

Human Learning Systems: creating outcomes in the real world

Toby Lowe, Visiting Prof of Public Management, CPI - @tobyjlowe

Draft

Overview

Questions:
How can public service help people to create real outcomes in their lives?

How should it be managed to enable that?

- How is an outcome made?

- Learning as the management strategy to achieve outcomes

- An example from Gateshead Council

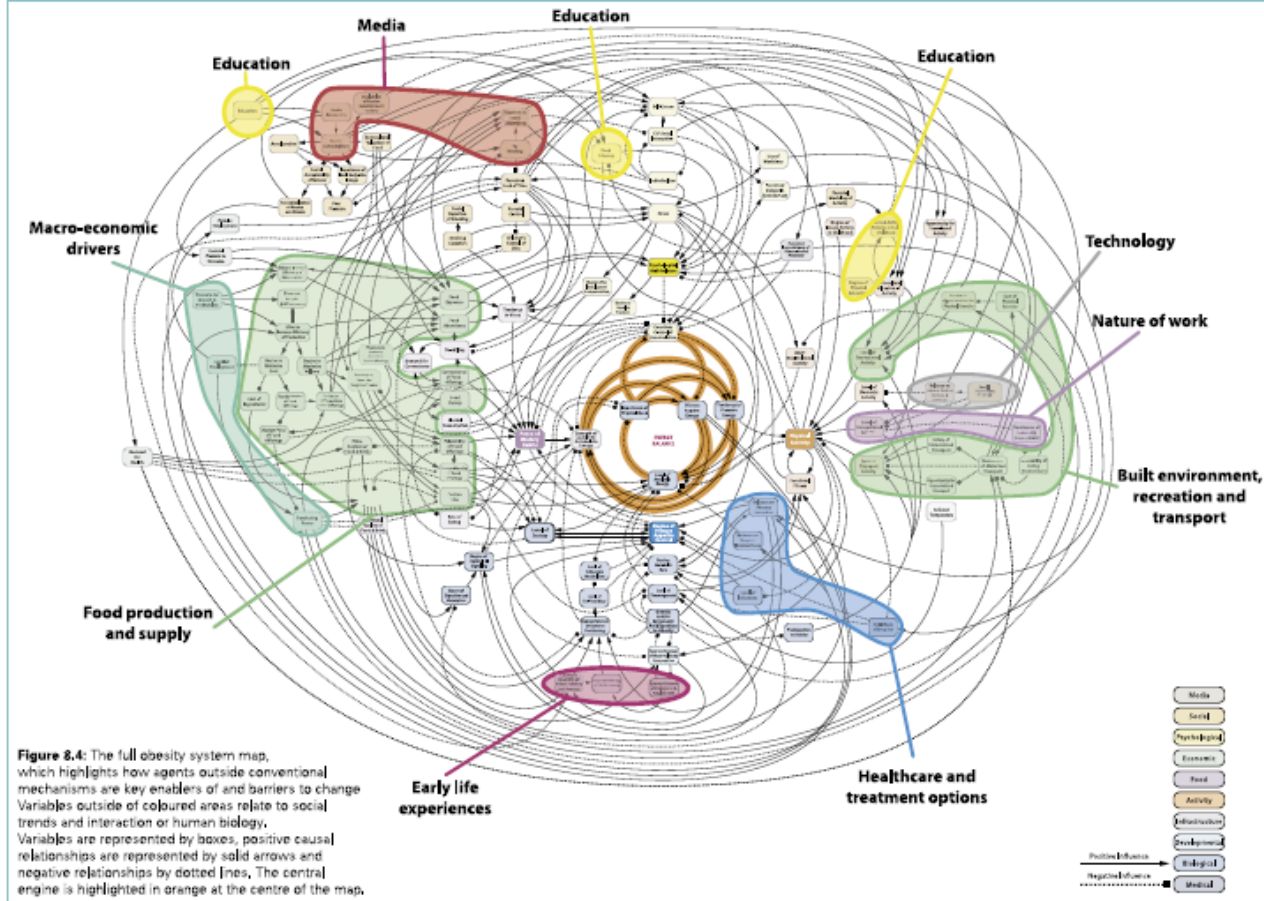- Creating change – the work required

Key message:

If you want to achieve real outcomes, you need to do public management very differently

A shared starting point

The purpose of public service is to help people to create good outcomes in their lives

How is an outcome created?

Figure 8.4: The full obesity system map, which highlights how agents outside conventional mechanisms are key enablers of and barriers to change. Variables outside of coloured areas relate to social trends and interaction or human biology. Variables are represented by boxes, positive causal relationships are represented by solid arrows and negative relationships by dotted lines. The central engine is highlighted in orange at the centre of the map.

Vandenbroeck, P., Goossens, J. and Clemens, M. (2007), *Foresight Tackling Obesities: Future Choices – Building the Obesity System Map*, London: Government Office for Science

Implications for public management

OUTCOMES ARE NOT DELIVERED BY ORGANISATIONS!

The outcomes we desire are emergent properties of complex systems

Implications for public management

A **"delivery" mindset is not helpful** for creating outcomes

You cannot contract an organisation/programme to "deliver" an outcome

Contracting and performance managing for outcomes holds people accountable for things they cannot control

Setting outcomes targets creates "gaming"

VIRPI/BUSINESSILLUSTRATOR.COM

How is a desirable outcome created
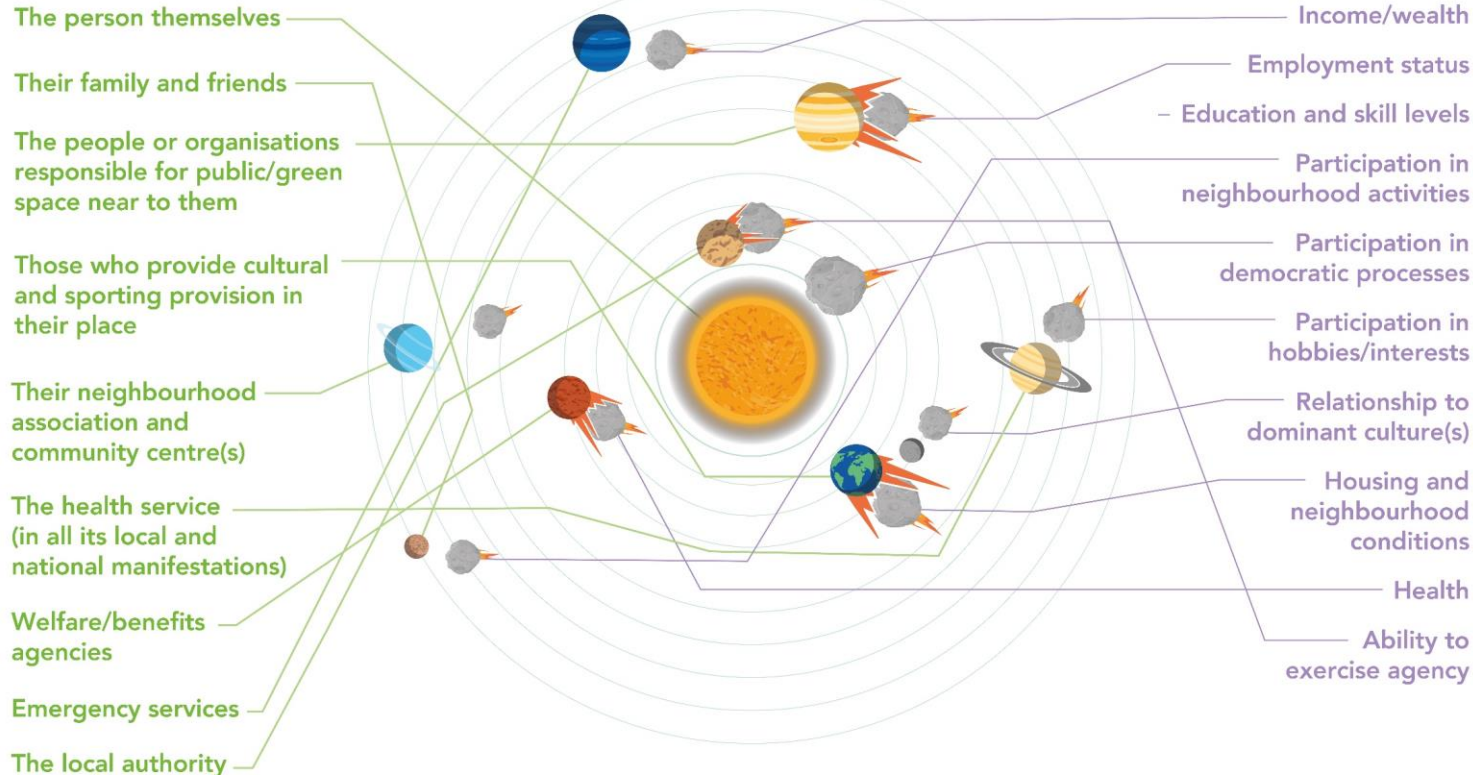in each person's life?

**Each person's life is a unique complex system
that creates outcomes**

Actors and factors which could constitute someone's "life as a system" that creates the outcome of wellbeing (or not)

Actors **Factors**

Actors:
- The person themselves
- Their family and friends
- The people or organisations responsible for public/green space near to them
- Those who provide cultural and sporting provision in their place
- Their neighbourhood association and community centre(s)
- The health service (in all its local and national manifestations)
- Welfare/benefits agencies
- Emergency services
- The local authority

Factors:
- Income/wealth
- Employment status
- Education and skill levels
- Participation in neighbourhood activities
- Participation in democratic processes
- Participation in hobbies/interests
- Relationship to dominant culture(s)
- Housing and neighbourhood conditions
- Health
- Ability to exercise agency

How can public management respond
to this reality?

Learning as a management strategy

How could we help someone who experiences chronic pain?

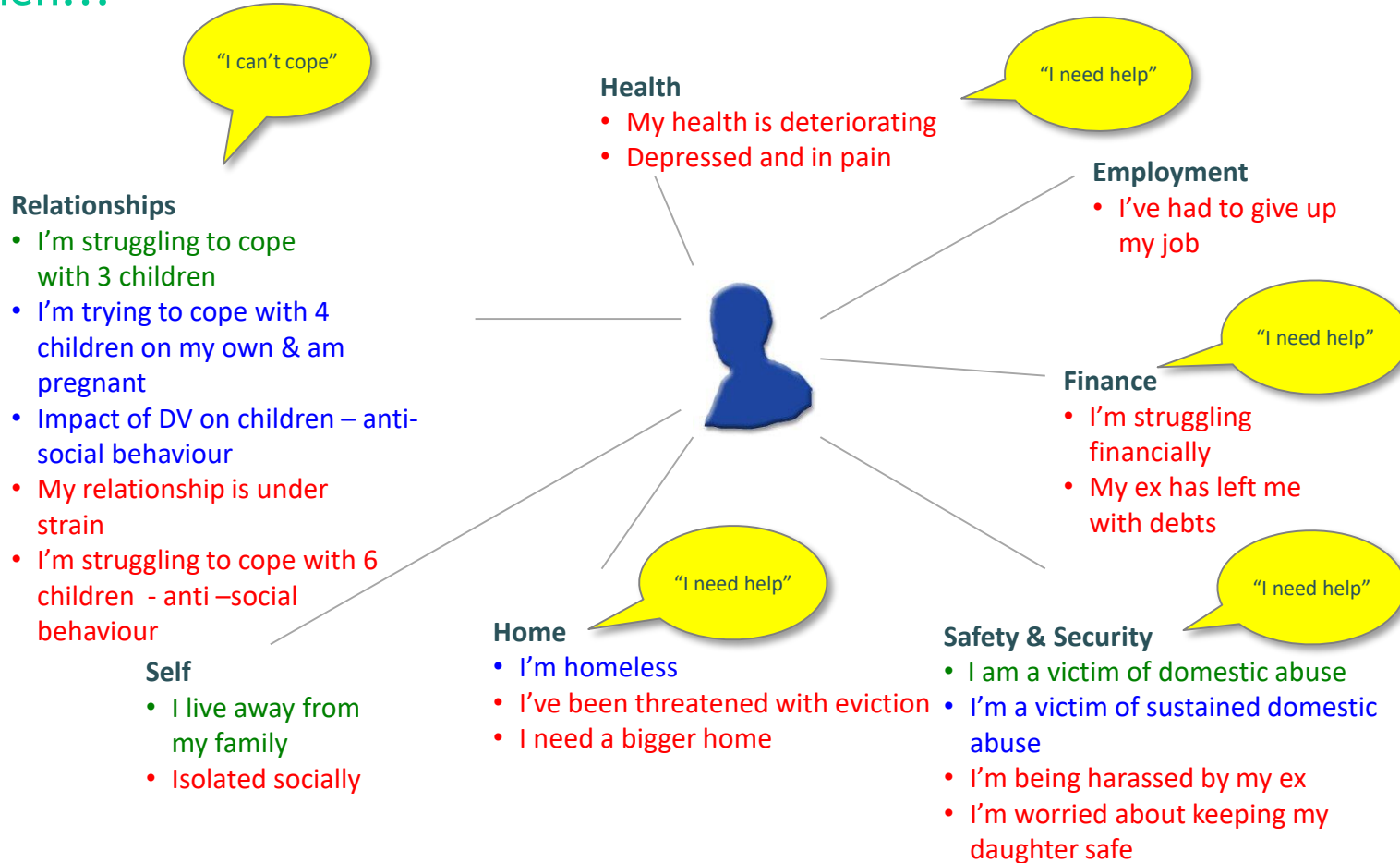# Running a Learning Cycle with each person = Bespoke public service
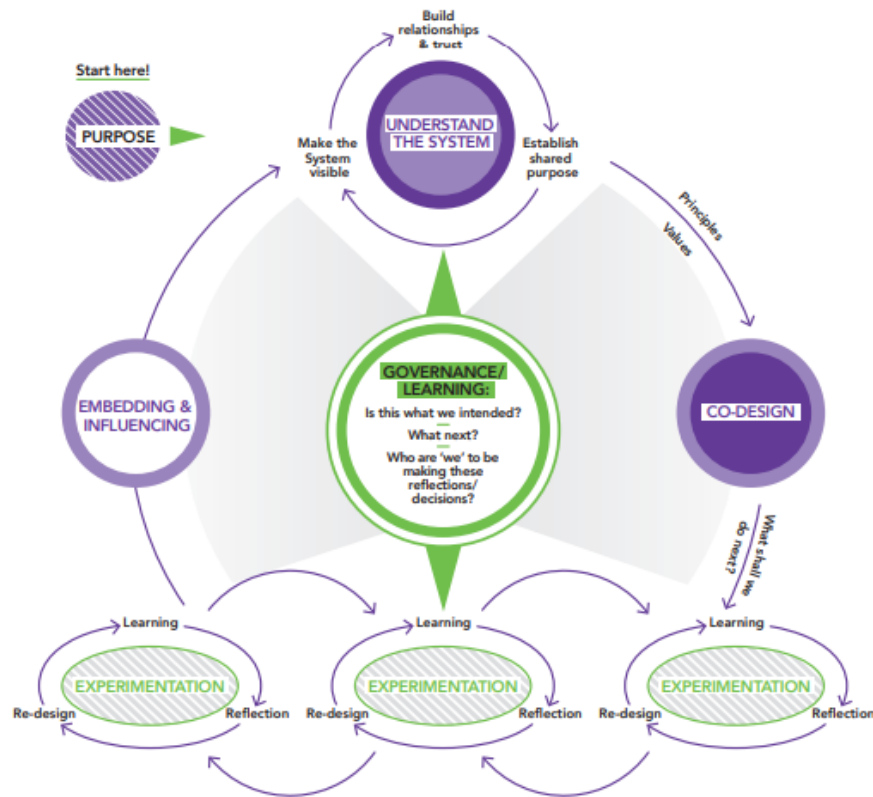
How can public service be **better and cheaper** if it adopts this co-learning relationship to create outcomes?

Example from Redditch Council,
via John Mortimer: https://www.improconsult.co.uk/

What did public service know about 'R' & when...

In 2001 In 2004 In 2008

"I can't cope"

"I need help"

Health
- My health is deteriorating
- Depressed and in pain

Employment
- I've had to give up my job

"I need help"

Relationships
- I'm struggling to cope with 3 children
- I'm trying to cope with 4 children on my own & am pregnant
- Impact of DV on children – anti-social behaviour
- My relationship is under strain
- I'm struggling to cope with 6 children - anti –social behaviour

Finance
- I'm struggling financially
- My ex has left me with debts

"I need help"

"I need help"

Self
- I live away from my family
- Isolated socially

Home
- I'm homeless
- I've been threatened with eviction
- I need a bigger home

Safety & Security
- I am a victim of domestic abuse
- I'm a victim of sustained domestic abuse
- I'm being harassed by my ex
- I'm worried about keeping my daughter safe

50

How did public service respond?

What 'R' said she wanted:

- "I need help with housework and…"

- "..gaining access to the upstairs of the property."

- "The two things that would have such a profound effect on mine and the children's lives.

What 'R' received:

- 2 x Anger Management Courses for 2 boys.

- Triple P Parenting Programme.

- Help cleaning 1 bedroom.

- Toilet frame, Perching stool & Bath board (for a bath she could not access).

- Children taken into care

How did public service respond?

Cost of what 'R' wanted:

Cleaner, 10hrs/wk for 4 years	£14,560
Move to suitable property (current home unsuitable for adaptation)	£1,200
Stair lift	£5,000
Total	**£20,760**

Cost of what 'R' received to 2009:

- TOTAL: costs of 'service' offer to R: **£106,777** (not incl care costs)
- Projected total (incl care costs) by 2022: **£780,000**

- **£780,000 spent not helping people, achieving poor outcomes for children and family**

Learning as a management strategy at different system scales

Questions for "organisation" system scale:

"Learning from" questions:
- What patterns do we see from across all the "person's life as systems"?
- What policies do we need to change to enable change for people?
- e.g. do we need to change how equipment is allocated?
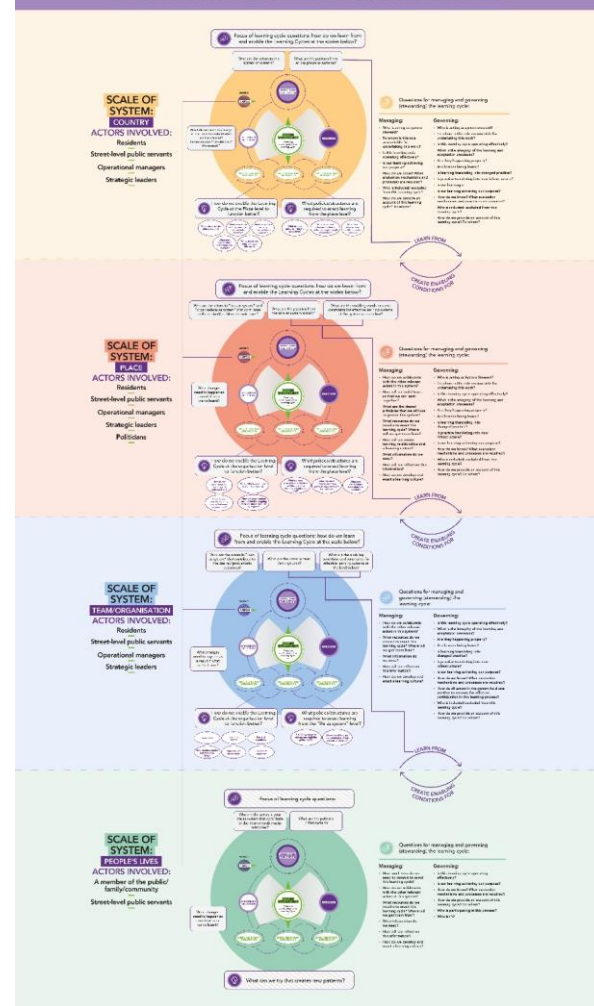
"Enabling" questions:
- What are maximum case loads for workers?
- What information systems do we need?
- What shared reflective practice spaces?
- What staff capabilities?
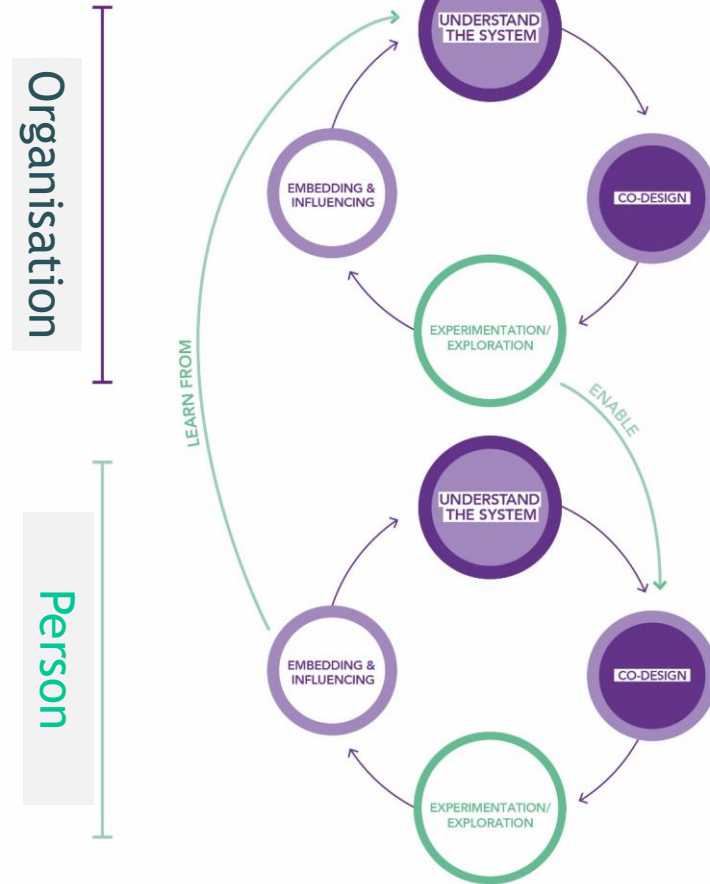
A connected "stack" of Learning Cycles

Country/Region

Place

Organisation

Person

THE LEARNING STACK: LEARNING AS MANAGEMENT STRATEGY AT DIFFERENT SYSTEM SCALES

= **Paradigm shift in public management**

Not just a change in management practice, but a change in the **purpose of management**

From controlling "performance" to enabling action learning.

HLS provides an answer to the 'how' of transforming health and social care

Better (real) outcomes, lower cost.

Who else is doing this?

Over 50 case studies from governments and public service agencies around the world:
https://www.humanlearning.systems/case-studies/

Including:
- Finnish National Agency for Education
- Too many Local Authorities to count (including Plymouth Council, UK Council of the Year 2021)

Questions

How can you see this being applied in:

1 – Day service provision
2 – The commissioning relationship for day services

Want to know more about HLS?

- The team can offer connections with your service through sessions on:

  – An introduction to the Scottish Approach to Service Design

  – Exploring potential HLS experiments

  – Appreciative enquiry in HLS

  – Measuring Differently

  – How to embed a learning approach

- To request more information please complete the [HLS enquiry form](#).

Evaluation

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What kind of organisation do you come from? (1/2)

`0` `2` `7`

Local Authority (HSCP)

████████████████████████████ 78 %

NHS (HSCP)

███ 11 %

Local Authority (not HSCP)

█ 4 %

NHS (not HSCP)

█ 0 %

National organisation

█ 4 %

Third sector organisation

█ 4 %

slido

How would you rate this event?

0 2 7

Score: 4.3

56%

37%

7%

0%   0%

1   2   3   4   5
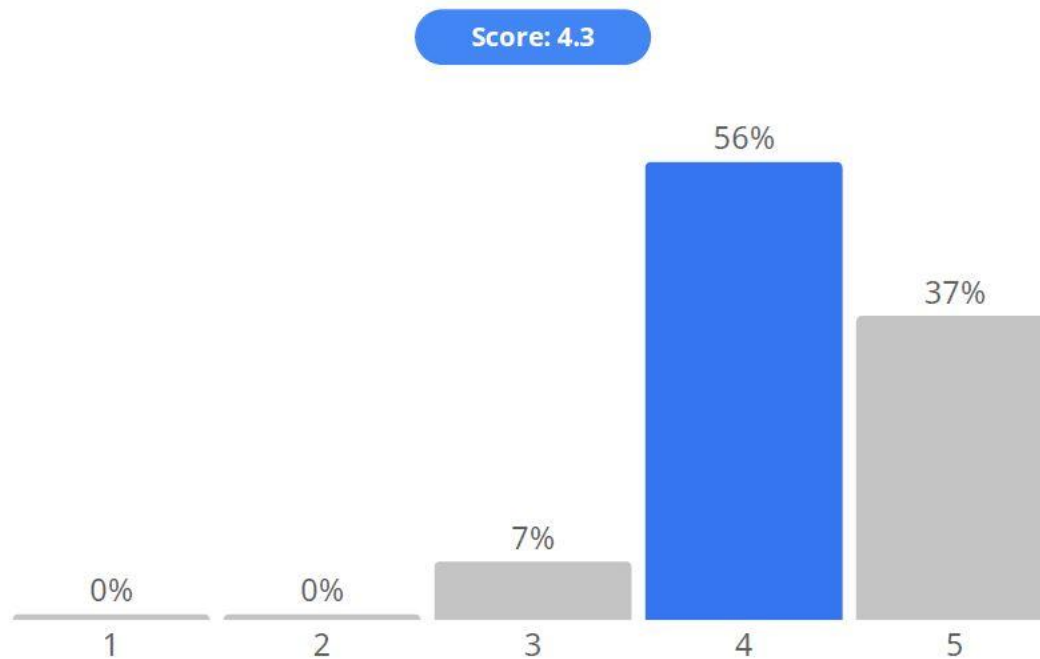
What will you take away from this event?

0 1 9

Sharing ideas and experience

The impact that inclusion can have   Hope

Will read up and find out more information.

the importance of inclusion and service design

to learn more about Human learning systems

the importance of human connection

HLS embed learning approach

Supporting staff to agitate for change

Shared ideas

slido

What could make these events even better?

`0` `0` `9`

- Share slides before session
- sessions are always good with lots of information sometimes struggle to keep up
- More interactive - meeting with others from different areas
- maybe more time before hand to digest the approaches - pre slides
- 3 hour running time is a lot- look to tighten up the agenda, 2 hour maximum
- Difficult to follow slides with lots of info
- More case studies.
- Breakout rooms to help with discussions

- Some break out discussions

Thank you

- To find out more about the Collaborative visit: ihub.scot/learning-disability-day-support-collaborative/

- To enquire about sessions for your service: Collaborative Enquiry Form

- To enquire about HLS: HLS enquiry form

✉ his.peopleledcare@nhs.scot

🐦 @ihubscot