Community Solutions

Showing the impact

Community Solutions brings together several complementary areas of work developed through a partnership between Outside the Box, the innovation hub at Healthcare Improvement Scotland, Nesta and other organisations.

This is one of a series of publications describing work that happened between 2019 and early 2021. You will find more information here.

> " Understanding what community services achieve leads to more people getting support from them. Everyone benefits when there is more choice "

Why it matters

Community solutions have always been important as part of and alongside public sector responsibilities and services. Together this leads to people having better access to support and more choices in the care and support they use, and so having solutions that work for them. Over the past year the contribution of community-led activities has been even greater, as groups responded quickly to the needs created and highlighted by Covid, but this was building on many years' experience and learning.

People in Scotland are looking for ways to improve our social care system, to enable more people to get the support they want. The limited range of social care providers is a particular challenge in many rural areas, and people there often have limited choice and at times may not be able to get any social care at all.

The role of community-based services and activities has been highlighted in the recent reviews of how our current social care arrangements work, and we expect that people's choices and experiences around community-based supports will be a big part of plans for the future.

Community-based and community-led services and activities contribute to many parts of our formal social care system and to the informal supports that complement and extend it's impact.

- **Information and assessment** – people finding out about what is possible, getting help with identifying the support they need, and help with the conversations to agree what care and support services the Health and Social Care Partnership will pay for.
- **Social care** – community-based voluntary organisations, social enterprises and small businesses delivering care and wellbeing support.
- **The community supports that are there for many people to use** – often including people who need additional support, but also usually available for others too. This support covers a huge range of activities, giving people choices and letting people find the support that reflects their interests and circumstances.
- **Complementing Primary and Community healthcare services** – this includes
  - Providing activities as part of Social Prescribing
  - Support to people with long-term conditions around self-management
  - A location for community health services our outreach care
- **A shared impact** is that they lead to
  - Reducing, slowing or preventing a person needing higher levels or more formal social care or health care services
  - Promoting wellbeing and better health for individual people and for the community as a whole
  - Reducing social isolation (which is known to be an important factor in increasing poor health and wellbeing and increasing people's need for formal services)

Stage 1

October 2019 - March 2020
The first stage was working with HSCP teams and a range of peer support groups and care/support providers that each worked in a rural location. This was a partnership project with ihub. We planned a follow on stage, to work alongside participants as they adapted new approaches for their areas.

Stage 3

Late 2020 - March 2021
The third stage - current at the time of writing this report - is following up with some of the places and groups we started with, picking things up in more detail, and piloting some ways to help develop more community solutions.

Stage 4

June 2021 onwards
The fourth and next stage will be continuing to work with people who are making changes in how they offer or provide support, and checking out with more people.

Stage 2

April 2020 - March 2021
The second stage has been learning from the community responses to Covid: this was not the follow on from the first stage that was planned for spring and summer 2020, but was what happened. There were several elements:

- Continuing to listen to and learn from groups and networks across Scotland in rural areas and in towns, including the people involved in the first stage of Community Solutions

- Developing Committed to Good Support, which gave specific support to smaller groups as they started or expanded activities to respond to people in their area during Covid: this was part of the overall Scottish Government response. Community groups in touch with local communities and with communities of people who share experience of ethnicity or other circumstances were part of developing, piloting and then using the materials

Showing what community supports do and their impact

Why it matters

People looking for support are more likely to get the combination of support they need, and so have their best life, when they can get access to a range of services and supports.

One of the reasons why staff commissioning social care are sometimes reluctant or cautious about using community groups and micro enterprises to provide support is when they don't know enough about what the service or organisation does and especially the impact their support makes for people getting support.

When we met with community groups and social enterprises many people said they were not sure what the Commissioning Teams and people doing assessments for care wanted to know about their services. Many community services have struggled to explain what they do in a way that reflects their approach and values.

What we did and heard

We met with lots of social enterprises, peer support groups, community health projects, smaller care and support providers and community groups. Together they are providing a wide range of supports that enable people who need extra support to stay in the place they know and be part of their community, keep as well as possible and have a good life. Often, people getting support are using a mix of community supports and more formal care services.

We also met staff from HSCPs, Councils and other parts of Councils and the NHS who are working in a range of roles around social care and developing or encouraging community-based services. We also met people who use services for themselves or for their family, who want to be able to prevent future problems or poor wellbeing, and to get the support that works for them.

The people we met described the partnerships and relationships that happen with other organisations (sometimes good, sometimes fraught, often with misunderstandings) and with the staff who work in the local area (often much better and mutually supportive). Having better information about what community services do was part of a range of changes that would help the social care system make more use of this important source of support – other changes are needed too (which is why the other parts of the Community Solutions work are happening), but this will be a positive step.

One of the gaps we heard about was people in community services having the skills, confidence and resources to explain and promote what they do. We organised a series of workshops for community groups on different ways to present and publicise what they did. We involved community groups we had met in earlier parts of the Community Solutions work in planning the series – the methods people wanted to learn about and how to organise the sessions to make them work for a range of people. The Example shows what happened.

Another issue for community groups is knowing what to cover when describing what they do for social care commissioners. Approaches that some people found helpful are:

- The principles that underpin the Care Standards and the principles underpinning Self-directed support: there is more in the Example
- Referring to the outcomes set out in the National Performance Framework developed by the Scottish Government that underpins all public sector policies and actions: nationalperformance.gov.scot
- Looking ahead, there are ideas on how to show the contribution community groups and community-based services make to Social Renewal and related policies and approaches, including Community Wealth building, developing the economic resilience of rural areas, and the development of 20-minute neighbourhoods

Features that make a difference and help improve communication here include:

- Commissioners and people who do social care assessment being clear about the information they need, so smaller providers and community groups can provide it
- Departments within the HSCP, Council and NHS talking to each other and being consistent in what information they ask community groups and care services to provide
- Checking in with each other every year or so on what information is helpful and explaining what is available, as new people come in to all the organisations and roles

- Places for people to learn together about communication and evaluation methods and get ideas from other people doing similar activities and services
- Training that works at the pace of the people involved, and repeating it so several people from a community group or provider network can learn the skills
- Opportunities for people to keep coming together and checking out how they can all explain about the impacts of social care and related community support to other people

We also identified ways to increase the impact of the information that community groups, social enterprises and smaller care providers gather:

- Community providers talking to their contacts in the HSCP and working together on what information is needed to reassure people that this is a good service
- Thinking about different ways to reach the range of people they want to influence – such as including the public, senior staff in the Council and HSCP, Councillors and MSPs, other potential sources of support – rather than having one report to cover all of them
- Using the phrases that target audiences such as senior managers and people dealing with overall policy or strategies are looking for, such as the headings in the National Performance Framework, along with the feedback from people getting support
- Make the impacts around preventing future harm or problems more explicit rather than assuming that people will all realise there is a longer-term benefit

Story telling workshops

During January – March 2021 Outside the Box hosted a series of workshops introducing people to ways to showcase what they did and the impacts their work was making.

- Making Biteable clips, which are short animated films: 2-session course delivered by Mind Waves with 12 participants
- Making Zines, which are little booklets that have a simple but very effective structure to show the impact as well as describe an activity: delivered by Mind Waves to 14 participants
- Storytelling: a 2-session course delivered by The Village Storytelling Centre with 15 participants
- Making Podcasts: a 2-session course delivered by Mind Waves with 14 participants
- Magic Moments, which is a very inclusive participative qualitative research method: 1 session, delivered by Outside the Box with 20 participants

Mind Waves is a peer support and peer led organisation for people with poor mental health, that uses digital technology and social media to share positive stories around mental health and wellbeing. Mind Waves

The Village Storytelling Centre is a community arts organisation based in Pollock in Glasgow. They work with a wider range of people and groups at their base and through outreach work, enabling people to tell their stories and building people's skills. The Village Storytelling Centre

Participants came from a wide range of places and roles, including social enterprises, peer support groups, community groups and community activities at housing associations and social care providers The benefit of doing it all online was that people came from towns and rural locations across Scotland and got to work alongside people they would not usually meet.

We asked for feedback from participants on what they have learned and how they will use the methods. These are some of their comments:

"The zine making as well, something I had never actually heard of! But enjoyed learning a different way of telling the stories in the work I'm doing. I'm now thinking of a socially distanced community event where we can use the zine making to get people's views and ideas.

I've got some ideas for how we can use podcasts locally to gather and tell stories and experiences. Because it's just voices, that can be checked and edited with people, and people can prepare for it. I think we will get a good response. Also, I know of lots of people who listen to podcasts whilst doing other things like walking and doing chores.

Thinking about how we collect and share all the key moments around how things have changed for people and then the wider impact for our community. They will be our magic moments. It's the small interactions and differences that result in change. "

Some of the ways participants and their groups or organisations have used these methods are:
- Sharing short film clips through social media to raise awareness about what the services does and reach people who could benefit
- Making short films with people who get support as presentations at workshops and at the launch of the annual report
- Volunteers and people who get support working together on storytelling to show the rang of ways people contribute to and benefit from a service

"Really enjoying these wee workshops, something I would always say I would do, but don't."

"I have learned loads of new ways of sharing information and stories. Its going to make a real difference to how we do things and also how we share."

Voluntary Pledge on the Care Standards Principles

When the Care Standards were updated in 2017 they included an underlying set of principles that applied to all types of care and all situations. At the time people suggested that care services and other activities that are not covered by the care standards could use the principles to support their work.

Outside the Box began piloting the principles with smaller care and support providers and peer support groups in rural areas just as Covid began. We then extended the materials to also work for community groups taking on activities such as delivering food and other supports to people in their community.

The set of materials included:

- A poster showing the Care Standard principles
- We added an extra one on being Local and Connected – this was already there in several of the initial principles, but people thought that making it explicit was important in these new circumstances
- A self-assessment checklist that worked either for the usual supports and services that had been provided before, or could be used just for the different work that groups were offering while there were social restrictions or as a temporary service, or for both situations.
- Notes on how to use this tool, including ways to get someone else to be a critical friend or for groups/micro enterprises to use it as part of peer learning to improve what they do
- Notes on how to follow up the assessment and sources for training to build the skills and capacity of the group or the people involved.
- All the materials are here.

Ways in which people have used the set are:

- Community groups using the poster showing the principles as part of training for new volunteers
- Groups using the principles as part of discussions about working in partnership with other people and organisations during covid – a way to talk about values, what people meant about respect and dignity (and so on) in the context of this joint venture and for the people they would be supporting
- Referring to it in conversations with HSCP staff about the support being offered and how this met good practice
- Plans for networks of micro providers to use it on a peer-assessment basis

Roles and actions for HSCPs

Are you clear enough about what information you need from smaller community providers about what they do and the impacts they achieve? Is it feasible for that level of activity?

Can you make a space for people in communities and health care staff to plan how best to explain the impacts in preventing and reducing the need for Primary or Acute health care?

Can you help with bringing similar training sessions to people in your area?

Roles and actions for community organisations, social enterprises and other support providers

Can you make a space for the HSCP and community providers to talk about what information is needed and how people can gather this?

Can you share training on ways to present information with other people and groups?

Do you have any staff or volunteers who have experience in this, who can mentor and encourage other groups?

> " There is other evidence that good community support saves on health and other public services. I don't think each wee project should be expected to prove it again "

> " What do we really need to know about any service when the clients are already telling us how good it is? "

Outside the Box
www.otbds.org