

Putting people at the heart of social work:

Learning from the Named Social Worker Programme

31 JULY 2018 - WEBINAR



This programme was initiated by the Department of Health and Social Care and delivered by Innovation Unit and SCIE.

 **Innovation
Unit**
New solutions
for thriving societies

 **scie** social care
institute for excellence

AGENDA

12.30

Welcome

Chloe Grahame, Innovation Unit, NSW delivery partner

12.40

Introduction to the NSW

Lyn Romeo, Chief Social Worker for England, DHSC

12.50

Lessons from the programme

Chloe Grahame, Innovation Unit, NSW Delivery Partner

13.05

What we did, Q&A and discussion

Local authorities who took part in the programme

13.45

What this means going forwards

Tony Hunter, Chief Executive, SCIE, NSW delivery partner

#namedsocialworker

WELCOME

CHAT QUESTION

What do you want to get out of this webinar?

If you could take away one thing what would it be?

INTRODUCTION TO THE NAMED SOCIAL WORKER

Lyn Romeo, Chief Social Worker for England

LESSONS FROM THE PROGRAMME

Chloe Grahame, Innovation Unit

POLL QUESTION

Are you interested in adopting a named social worker approach in your local area?

- a) Yes - we're already doing this
- b) Yes - we're keen to get started
- c) Yes - we'd like to, but don't know where to start
- d) No - we're happy with how we're doing things already
- e) I don't really know what it is/ I'm here to figure that out

1. WHY A NAMED SOCIAL WORKER

Too many people with learning disabilities, autism and mental health needs are not leading the life they want to live.

- People with learning disabilities have disproportionately poor outcomes despite the high cost associated with their care.
- We hear stories of people spending too much time in settings that both restrict their freedom, and are far away from their families and friends.
- We know that the experience of young people growing into adulthood can be challenging and that services can struggle to put long term care and support in place.

On top of this, services and systems intended to support people are complex and high pressured, meaning it can often be hard for professionals and system leaders to imagine what a radically different way of working might look like - and achieve.

“*It is not that we don't know
'what good looks like'.*”

- Sir Steven Bubb,
Time for Change

The Named Social Worker Programme was an opportunity to test what it would mean to put 'what good looks like' into practice.

- The Department of Health and Social Care initiated the programme and funded 9 local authorities to participate.
- It aimed to understand how having a named social worker could help achieve better outcomes for people as a direct response to the 'No Voice Unheard' consultation.
- A 'model' wasn't prescribed - sites developed approaches that would build on their contexts, tackle local challenges and support specific groups of people.

It asked the question - 'what is the best contribution that social work can make to improving outcomes for people?'

The programme tested what it would mean for the social worker to be the lynchpin of support for people with learning disabilities, whilst also recognising the crucial role of other actors within the system in achieving these goals, including:

- Local self advocacy groups
- Commissioning
- Health professionals and services
- Voluntary and community sector
- Existing transformation programmes such as Transforming Care
- Governance bodies

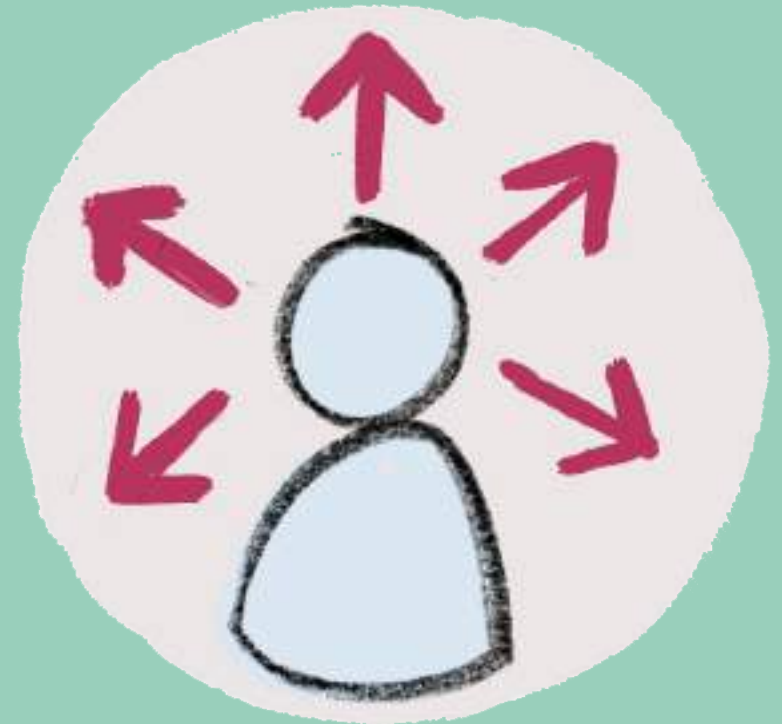
The nine sites developed approaches that would support people in two different circumstances:

- people who are in or at risk of being admitted into in-patient settings
- people who are approaching adulthood, often with significant changes to the services and people supporting them, referred to as the 'transitions cohort'
- other people requiring varying levels of support



A named social worker is:

1. A trusted supporter of people and their families, with a real, consistent relationship.
2. A dedicated case worker and coordinator, making the best future a reality.
3. A professional voice of challenge and advocacy, representing the person's wishes at all times in all places.



2. THE PILOT PROGRAMME

The Named Social Worker Programme ran over two 6-month phases between 2016 and 2018

- **£1 million+** invested by the Department of Health
- **9 local authorities** piloted a named social worker approach
- **200+** people were supported by a named social worker
- **25+ named social workers** building strong relationships and believing in the people they support
- **800+ people** engaged with the Named Social Worker learning community

9 pilots explored what a named social worker approach would mean in their local contexts.

PHASE 1 SITES

Calderdale:

Calderdale sought to establish relationships where power and control meaningfully shifted to the individual, by putting Human Rights at the heart of everything that social workers were doing and challenging decisions made by other professionals.



Camden:

Camden adapted their NSW role from the Independent Reviewing Officer role in children's social care. The NSW aimed to hold the system to account, model best practice and identify opportunities to do things differently.



Nottingham:

Nottingham used the pilot to understand gaps in the system (such as the causes of hospital admission) in order to shape and enable better support to individuals prior to crisis point.



PHASE 1 + 2 SITES

Hertfordshire:

Hertfordshire situated the NSW as a connector between the individual and other professionals with a strong focus on peer support between professionals. They continued to implement their approach over the two phases, with named social workers embedded in community teams.



Sheffield:

Sheffield focused on developing professional and meaningful relationships between named social workers and their families that go beyond support at crisis point. In Phase 2, the named social workers became the core of the newly created Future Options Team.



Liverpool:

In phase 1, Liverpool focused on developing new practice around assessment of in-patients and supporting them to return to their communities. In Phase 2, NSWs worked with colleagues in children's social care and other agencies to apply the NSW practice to assessment and planning for transition for young people in out of area placements.



PHASE 2 SITES

Bradford:

Named Social Workers in Bradford led a process of culture change that aimed to make citizens' human rights the focus of social work, including the development of a competency framework for advanced practitioners.



Halton:

Named social workers built long-term relationships with young people moving towards adulthood, using creative and person-centered approaches; doing whatever it took to support the young people to achieve their goals.



Shropshire:

Shropshire identified a cohort of young people based at one of its local Special Education schools who volunteered to be part of the pilot. It worked closely with both young people and parents to plan together for a better journey towards adulthood and to inform a better design for transition services in Shropshire more widely.



Innovation Unit and SCIE were the delivery partners for the programme

On behalf of the Department of Health and Social Care, Innovation Unit and SCIE led the delivery of the Named Social Worker programme.

Innovation Unit is a not for profit social enterprise that grows new solutions to complex social challenges and are committed to taking solutions that work to scale.

chloe.grahame@innovationunit.org
william.roberts@innovationunit.org

SCIE improves the lives of people who use care services by sharing knowledge about what works.

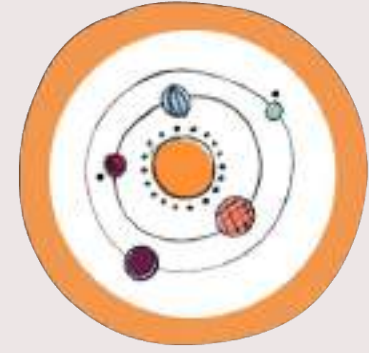
Ewan.King@scie.org.uk



3. WHAT A NAMED SOCIAL WORKER DOES

What a named social worker does

Being a named social worker is about much more than having a worker allocated on a case management system, this was true whatever the model. Named social workers really get to know people and take responsibility for supporting them to achieve their ambitions.



**We really get to
know people,
and believe in them.**

We take the time to build trusting relationships with the people we support before things get to a crisis point. We understand what matters to them, build a plan together, and do whatever it takes to bring this to life.



We are confident using our judgement to take the best course of action.

We think and do 'outside the box', always on the lookout for new ideas and approaches. We build our confidence by working with others with different expertise and experiences and in dedicated learning spaces such as supervision.



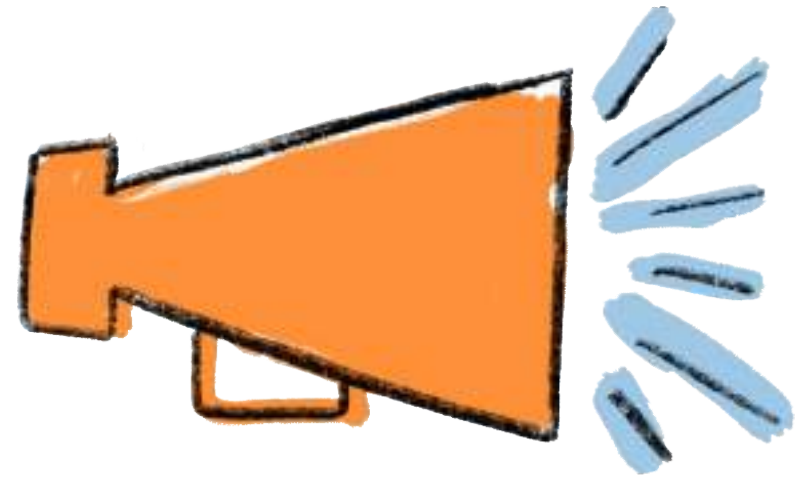
We have deep knowledge, skills, and expertise in working with people with learning disabilities, autism and mental health needs.

We have a core set of skills and tools that allow us to work meaningfully and creatively with people who have different communication needs and preferences. We also understand and use the legislation so we can advocate for people with confidence, particularly the Care Act, Children and Families Act, Mental Capacity Act and Human Rights Act.



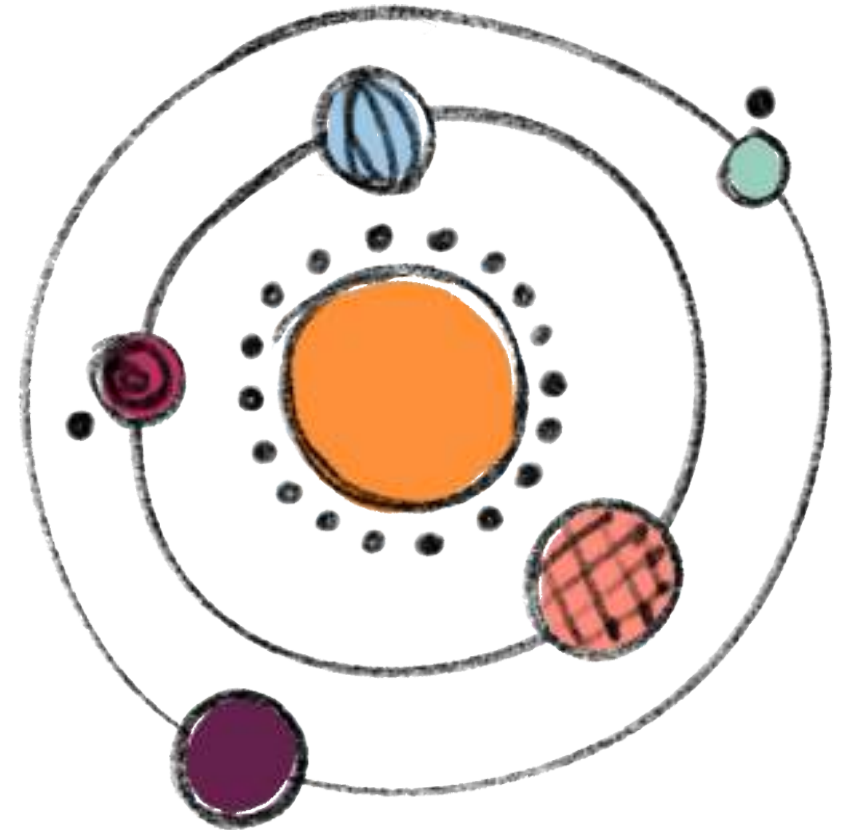
**We advocate for people
in pursuit of their goals
and ambitions.**

Embracing the social model of care, we use our real understanding of the person to advocate for them within multidisciplinary settings. We will work in both collaborative and challenging ways with our colleagues to ensure that services join up and keep the things that matter to the people they support at the heart.



**We connect the dots
between people, services
and the community.**

**We create the conditions for the
person to succeed by making their
local system work together in pursuit
of their goals, working closely with
commissioning and local services,
community, people
and families to make plans become
reality.**





*You can take a longer view, and not just 'stick a plaster on' the issues. **You have time to think through their aspirations, how best to support them to be independent in the long term, not just for the next year or so.***

- Named social worker

*People have more support around them, and social workers can build relationships with the people on the wards. In turn, **they build confidence in you.** There is more collaborative working with health teams.*

- Named social worker



4. THE DIFFERENCE IT CAN MAKE

EVALUATION:

#namedsocialworker

The programme level evaluation focused on 3 core outcome areas. Evidence was both submitted by sites and collected by the evaluation lead. York Consulting conducted a predictive financial return on investment analysis (FROI) of the programme. Despite the short timeframes, there are strong indications of the impact the approach can have.



A good life
enabled by the right
kind of support



Equipped
and supported
social workers



A more effective,
efficient and
integrated system

People felt they had someone who was really there for them who is helping them live the life they want, with a number of examples of significant progress made towards their goals.



People felt they had someone who was really there for them who is helping them live the life they want, with a number of examples of significant progress made towards this.

- High levels of satisfaction reported including people feeling they now had a trusted person in their life who would listen to them and act on their behalf.
- Evidence that people have been better able to live the lives they want including faster and smoother discharges, restrictive decisions overturned and greater stability of placements.
- New packages of support in place that better meet people's strengths, aspirations and needs and those of the people around them.
- Increased and meaningful opportunities for people to shape their plans, often through creative methods that were shaped around the person's communication needs and preferences.



My social worker is there for me.

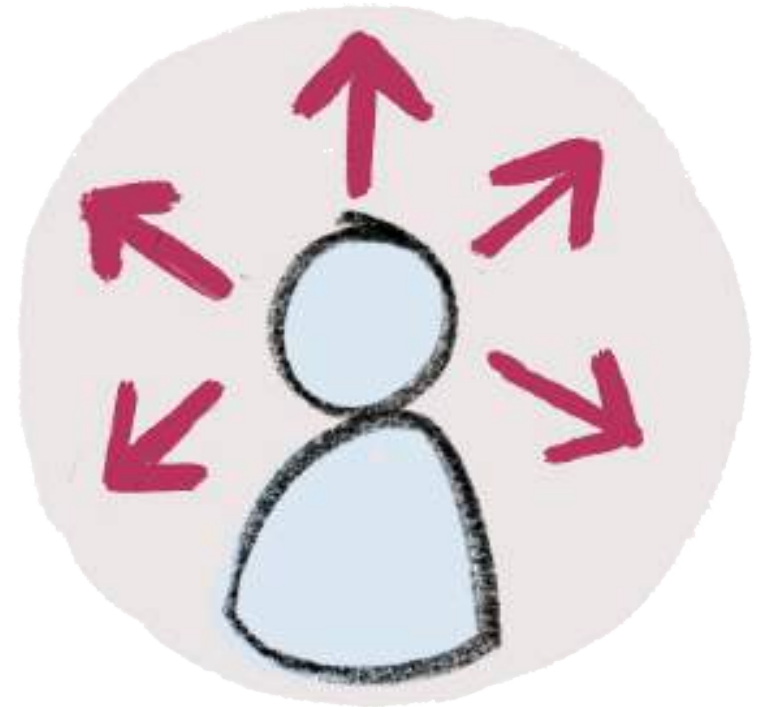
- Young man who was supported by a named social worker

90% of our cases found that the person either had capacity or was objecting to a placement. 20 cases are now progressing through the Court of Protection to lessen the restrictions the person is experiencing.

- Named social worker (site evaluation)



Social workers felt more confident, skilled and knowledgeable using their judgement to advocate for and support people.



Social workers felt more confident, skilled and knowledgeable using their judgement to advocate for and support people.

- Consensus across all sites that the pilot had enabled them to do 'good social work' in a way that they hadn't been able to do within their previous roles.
- Social workers' confidence to meaningfully engage the people they are working with and those around them to deliver a person-centred plan increased from 47% to 94%.
- Social workers' confidence to constructively challenge other professionals and services increased from 43% to 88%.
- Social workers reported that they were more satisfied with the work they were doing than they had been previously.

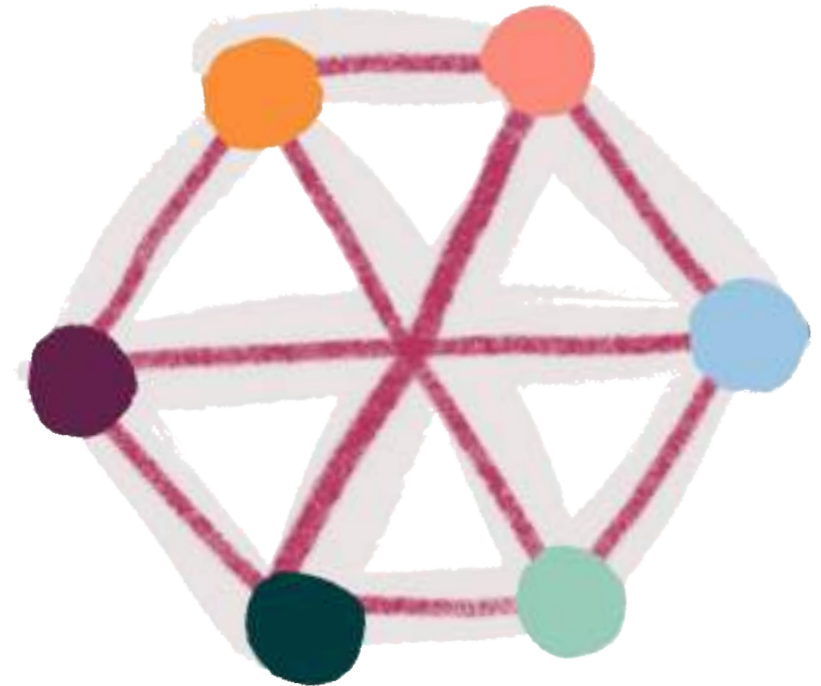


*I have loved working on this pilot as I feel it has given me **permission to work the way I feel I should be working**... Having more time to focus on the person and know what works for them as an individual, **getting it right for them**, gives great worker satisfaction as well as better outcomes for the individual and their family*

- Named social worker



Better coordination of care and a more intensive support offer has improved outcomes and reduced the cost of a number of care packages. Better longer term outcomes are predicted to achieve longer term savings.



Better coordination of care and a more intensive support offer has reduced the cost of a number of care packages and is anticipated to result in longer term savings.

- Evidence of reduced costs for packages of care for people supported by a named social worker.
- A predicted financial return of investment that was positive across all sites, with an average of £5.14 saved per £1 invested. The benefits would sit across partners such as health and police, with the largest benefits being seen by the local authority.
- Better cross-service coordination on cases, particularly those where individuals have spent a large number of years in institutional settings.
- Supporting and complementing other strategic developments and policy areas locally.

5. MAKING IT POSSIBLE

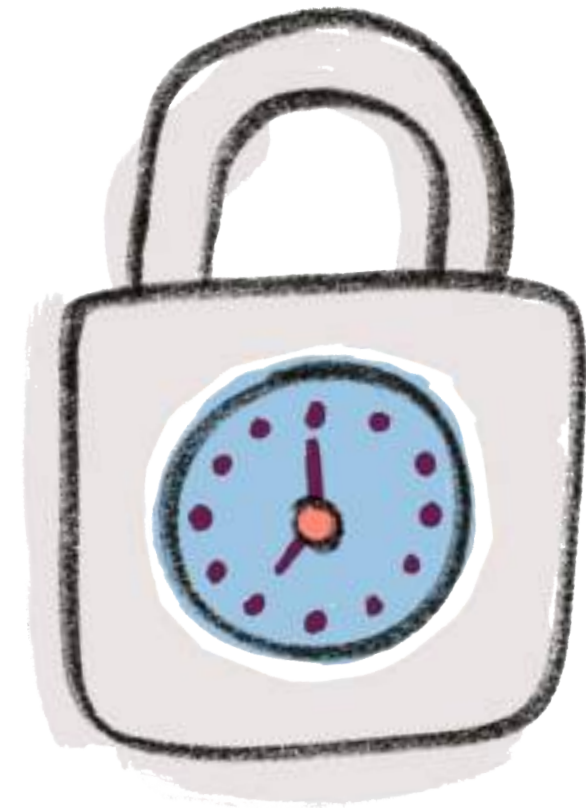
Making it possible

To make the named social worker approach work in practice, a set of conditions need to be in place across the system.



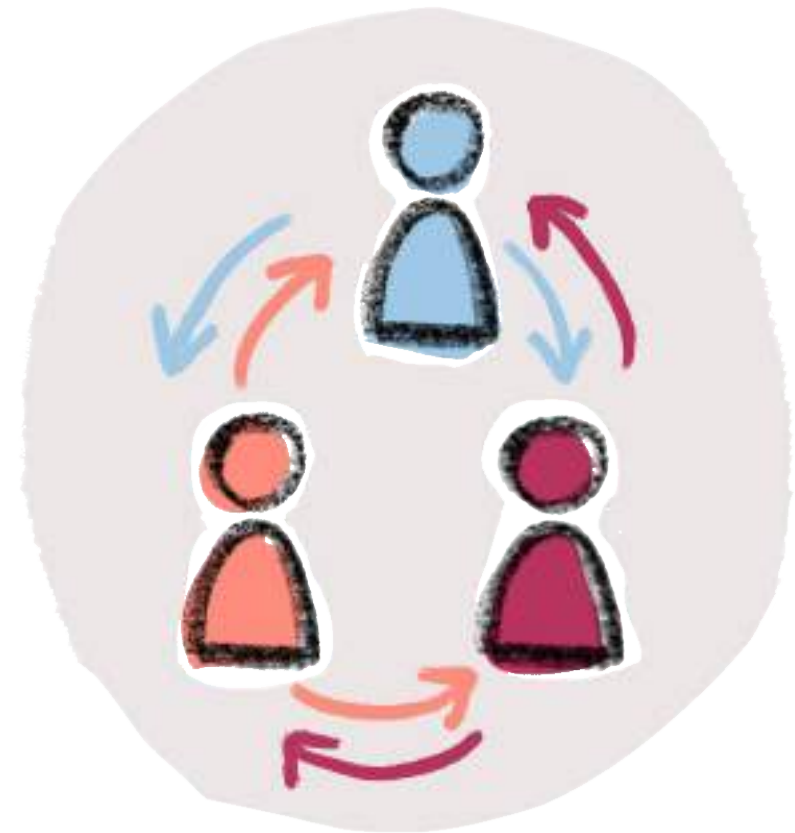
Protected time

Protecting time to work in a more intensive and deliberate way with people and reflective learning to maximise a social worker's impact, is a wise investment rather than an unaffordable luxury.



Peer learning

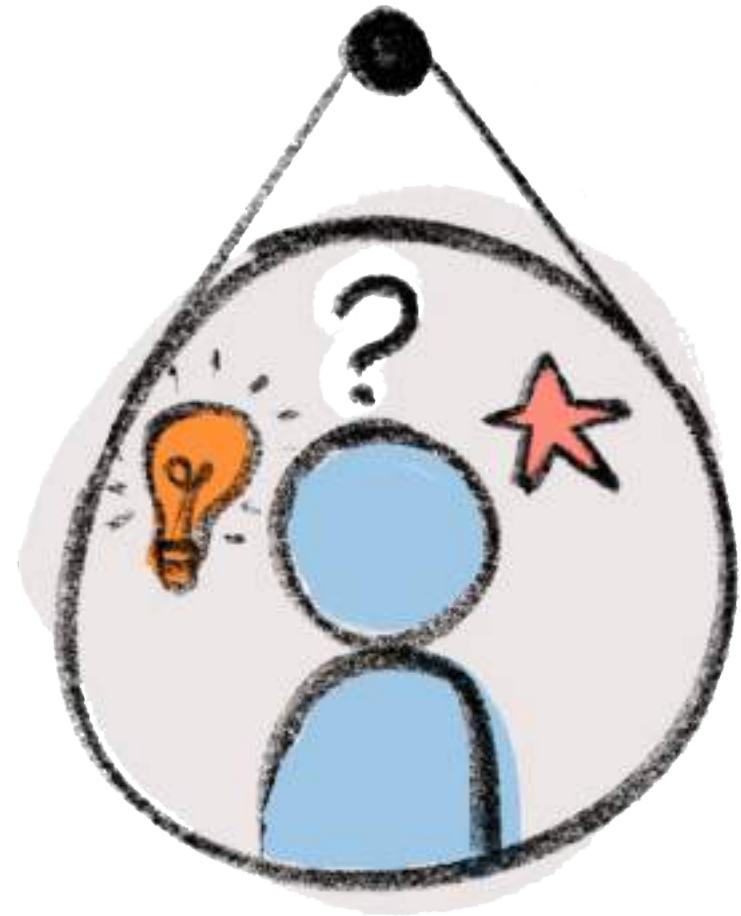
Interactions between social workers can become task oriented, driven by the necessity to deal with high numbers of referrals. Reflective spaces where teams can come together, talk about the people they are supporting and learn from each other and from other colleagues have a huge impact on practice.



Reflective supervision

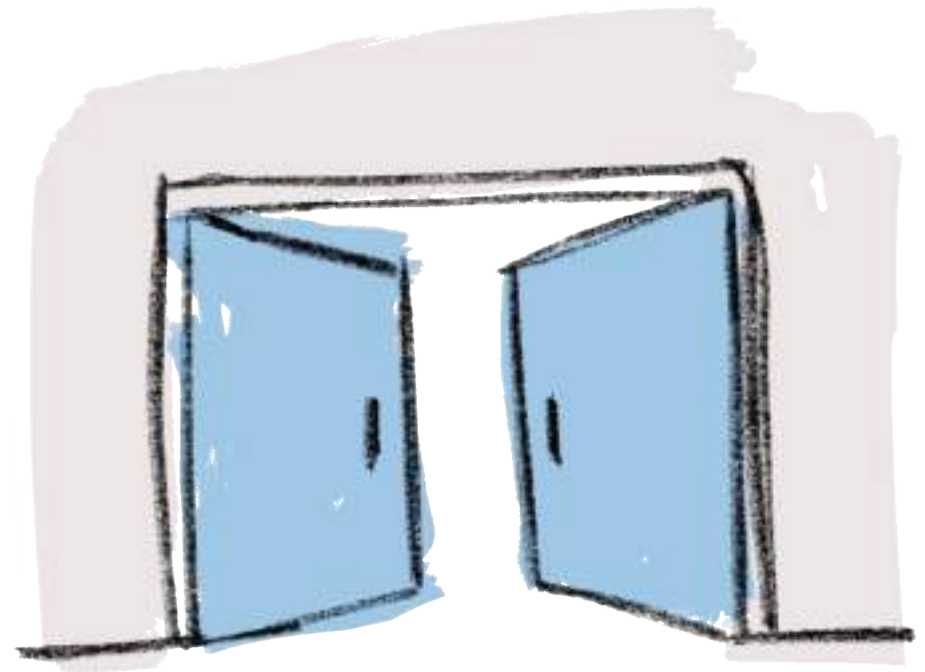
Supervision is a space that is meant to be nurturing and reflective and can risk becoming transactional.

Great social work is enabled by managers that hold a safe space for their staff to deploy the best of their judgement and human skills.



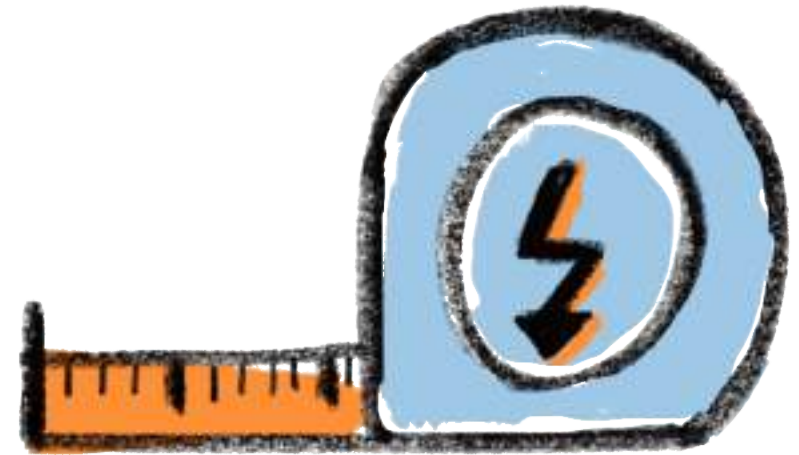
Explicit permission

Although there are relatively few actual red lines, there can be many perceived constraints on practice. Being identified as a named social worker brought with it a sense of permission and a recognised 'status' so named social workers could be more challenging with colleagues in other services and be more creative and ambitious in the support they provided.



Clear measures

Working differently will often require some form of investment, even if it means frontloading resource to get savings further down the line. A clear plan to identify costs and benefits, combined with patience to track impact over time provide valuable ammunition for leaders and managers advocating for change, it also helps services continue to learn and develop in real time.



High levels of ambition at a system level and a recognition of social work's role in achieving this.

Across leadership, practice and commissioning, within the health and care systems, the approach requires a shared commitment to doing better for people with learning disabilities, and investing in social workers' contribution this.



WHAT WE DID

Local authorities who took part in the programme

HALTON



Our Vision is... to develop a new transition service that gives young people, from the age of 14, the best chance of a positive journey into adulthood. The named social worker will build long term relationships with these young people using creative and person-centered approaches to help them map their goals and support them to achieve them.

In phase 2 of the Named Social Worker programme we aim to:

- Involve young people and families to understand what works already (and what doesn't) in order to develop a new approach to working with the young people who are often seen as most challenging and who often end up in out of area residential placements
- Work with young people and those that support them to develop plans that are true to the strengths and needs of individuals and that help them to thrive within their communities
- Support social workers to reflect together on their practice and to develop a better understanding of the skills and behaviours that enable relational working
- Build on a strong foundation of integrated health and social care services in order to ensure that future planning is seamless

Peter's story



Peter's Journey

Life before the Named Social Worker



Peter enjoyed school when he was young.



With support put in place by the transitions team Peter began to go out again.

He found the arrival of his younger siblings very stressful.



Peter stopped attending school and didn't leave the house for a year.



Getting help from a Named Social Worker



Peter worked with his named social worker to create a package of support that works for him.



After a period of feeling unsettled in his temporary accommodation Peter moved to his own house with a support team in place.



Peter reached crisis. To prevent detention under the Mental Health Act he moved to temporary accommodation with intensive support.

Life today



Peter is accessing the community and seeing his family regularly.

As Peter becomes more settled his support is able to reduce.



Peter meets a girlfriend at a disco he now attends.



Is it better living here or in the flat (the flat was the temporary accommodation Peter lived in)?

"Here" Peter stated, emphasising his point by pointing to the floor of his house.

Peter is now happy living in his own accomodation with support and sees his family regularly.



When asked about the future Peter expressed that he is happy where he is and doesn't want anything to change. He expressed that he likes his staff and refers to them with affectionate names, including 'Aunty'.

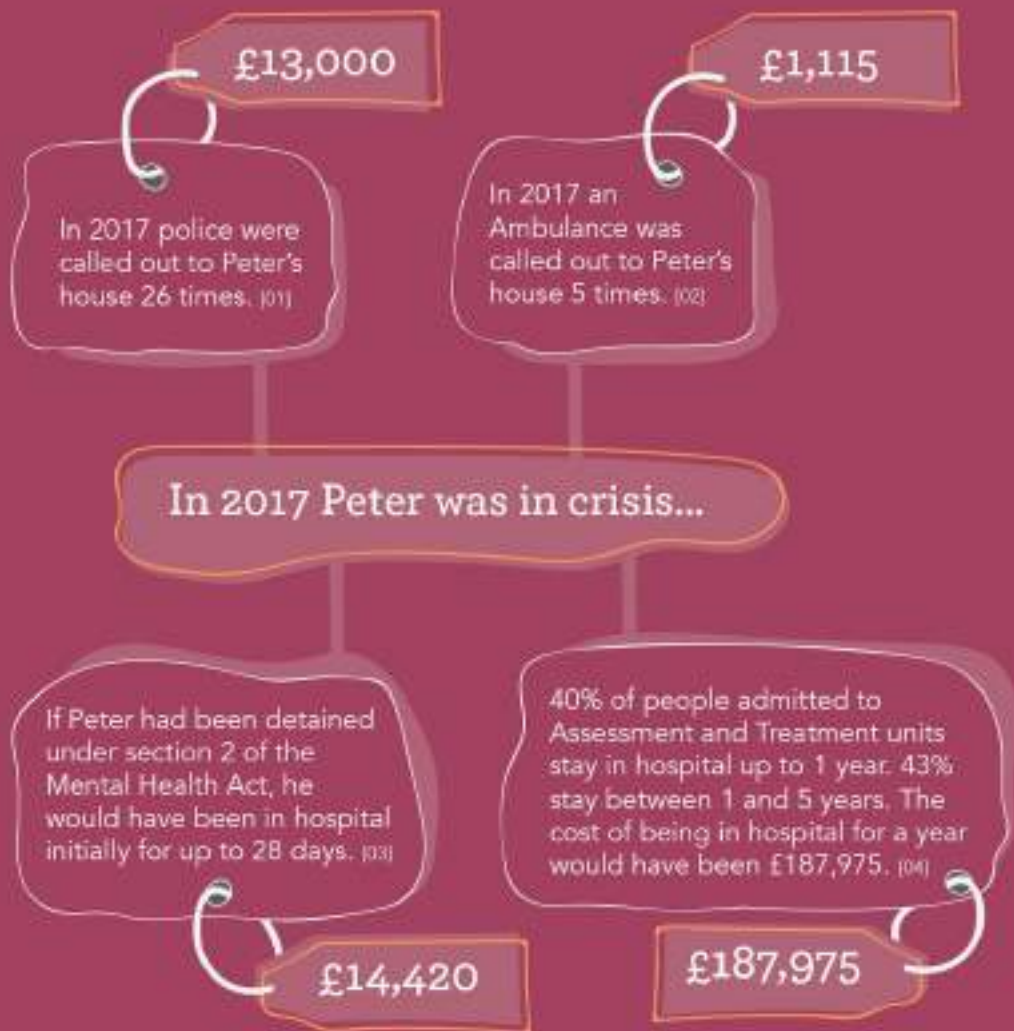
How does seeing your named social worker make you feel?

“ Happy ”

“ *I can't believe the change in him
since he came here*
- Parent ”

”

Cost of care



...in 2018 Peter is living the life he wants in his own home.

Peter's Current support package costs **£2910 per week, £151,320 per year.** The cost has been reducing as he has been adapting to his new home and is likely to reduce further in the future.

Cost Source:

[01] www.neweconomymanchester.com/our-work/research-evaluation-cost-benefit-analysis/cost-benefit-analysis/unit-cost-database

[02] www.neweconomymanchester.com/our-work/research-evaluation-cost-benefit-analysis/cost-benefit-analysis/unit-cost-database

[03] www.pssru.ac.uk/pub/uc/uc2017/services.pdf

[04] www.pssru.ac.uk/pub/uc/uc2017/services.pdf

HALTON

- what helped us to do this



- Intensive, creative support to individuals
- Multidisciplinary team including a nurse and children's social worker
- Shared brain - working together to problem solve
- Commitment to a set of shared principles and ambition for the young people and families we were supporting



Liverpool
City Council

Named Social Work Pilot: Phase One



Martin Lawton, Locality Manager
Lyndsey Constance, Team leader

Named Social Worker Pilot: the context



Liverpool
City Council

- Focused on the 'transforming Care Agenda'.
- Liverpool was a national outlier – 26 individuals in out of area long stay hospitals (November 2016).
- Rethinking social workers relationships and practice with individuals and partners.
- Facilitating discharges for individuals with complex needs and risk profiles, from long stay hospitals.



Named Social Worker Model:



Liverpool
City Council

The aims

- **Assessment:** exploring social work practices and establishing a new framework of assessment for in-patients. Developing a new framework to capture an individual's voice, strengths, aspirations and eligible needs. At the same time involving partners at an earlier stage
- **Relationships:** experimenting and developing best practice in working with individuals and partners from across agencies.
- **Legacy:** building the skills, knowledge and experience of the wider neighbourhood teams to provide high quality social work with people with learning disabilities.



Named Social Worker: Outcome

- Through reflection and understanding on the impact of NSW practice, uncovered core aspects of what makes a **‘good assessment’** and effective **‘relationship’**.
- **Learning together in Liverpool:** Training programme that focused on team leaders to affect positive change. The sessions enabled team leaders to understand the nature of ‘what good looks like’, so that there is a lasting legacy of the NSW role in all community teams.
- Transforming care ‘tracker/risk register’.



Case Study: Stephen

- **History:** Known to services for several years. Complex needs, including learning disability and mental health. Forensic risk profile. Had lived in various types of community settings. A number of admissions. At the time of commencement of the NSW pilot, Stephen had been an inpatient for 2 years.
- **NSW role:** established an effective *relationship*, built on trust and transparent communication with Stephen and key partners. Completed a strengths based *assessment*, building on the assets in Stephen's life and his aspirations. At the same time working with partners to develop positive risk management plans, to optimise community living in a safe and valued way.
- **Outcome:** Stephen was discharged in January 2017. Continues to live successfully in the community. Formal and informal networks of support working well to enhance Stephens independence, well being and optimise assets.



Financial impact



- 7 individuals discharged during pilot with another 5 with agreed plans. At the start of the pilot, Liverpool had a high number of individuals on the national transforming care tracker register, as monitored by NHS England. The reduction in individuals subject to the tracker and significantly improved Liverpool's position nationally.
- Health and Local Authority have adopted a collaborative approach to assessing, support planning to meet need and identified risk.
- 75.6% cost benefit as a result of 7 discharges:
 - Spending before discharges £492,637
 - Spending after discharges £123,257
- Service users have had a more positive experience with tailored community support packages, focusing on outcomes. The consequence being less restrictions on individuals Human Rights (Dols and MHA).



Impact for Liverpool



Aims:

- Ensure the learning and best practice from Phase 1 is embedded in the wider neighborhood teams.
- Extend the learning outcomes from phase 1 to work with young people with complex needs transitioning to adults services.
- Work in collaboration with young people, parents/carers, social workers, partner agencies/services to develop an effective assessment tool that is co-produced and designed to facilitate a positive journey to adult services and adult life.
- Implementation of NSW role in Liverpool
- Asset based assessment and approach

The principles of the Named Social Worker embodies:

- Best practice in social work.
- Acting as a key 'connector' across multiple agencies and systems



Named Social worker Pilot: Phase Two



Liverpool
City Council

Our Vision is ...to develop a new 'transition journey' from children to adult services for a young person, building on their strengths and aspirations, promoting their independence, well being and choice.



CHAT QUESTION

What would you like to know about the named social worker approach?

POLL QUESTION

Having heard all that, are you interested in adopting a named social worker approach in your local area?

- a) Yes - we're already doing this
- b) Yes - we're keen to get started
- c) Yes - we'd like to, but don't know where to start
- d) No - we're happy with how we're doing things already
- e) I still don't really know

CHAT QUESTION

What is the key think that you will be taking away from today?

Was there anything that surprised you?

WHAT THIS MEANS GOING FORWARDS

TONY HUNTER, CHIEF EXECUTIVE, SCIE

THERE ARE A NUMBER OF PLACES YOU CAN GO TO FOR MORE INFORMATION AND TO EXPLORE WHAT IT MIGHT MEAN FOR YOU.

1. Read the reports:

- [Putting people at the heart of social work: lessons from the Named Social Worker Programme](#)
- [Named Social Worker evaluation summary report](#)

2. Use the tools and resources

- [A guide for meaningfully engaging people with learning disabilities](#)
- [Site profiles and resources](#)

3. Get in touch to find out more. Contact chloe.grahame@innovationunit.org

Putting people at the heart of social work:

Learning from the Named Social Worker Programme



31 JULY 2018 - WEBINAR

This programme was initiated by the Department of Health and Social Care and delivered by Innovation Unit and SCIE.

 **Innovation
Unit**
New solutions
for thriving societies

 **scie** social care
institute for excellence