

## Working with a Community Interest Company to improve outcomes for families with chronic needs – The Swindon Life Programme

Details in this case study are taken from an interview with Sue Wald, Director of Strategy and Commissioning, Children’s Services, Swindon Borough Council and NHS Swindon and Ceri Willmott, Managing Partner – Life HQ

### Summary

A case study that focuses on the development of the Life programme by Swindon Borough Council and its partners. The programme focuses on families with chronic and multiple needs who are intensive users of public services and resources, supporting them to build the capacity to change their lives.

Instrumental in this development is [Participle](#), a social enterprise that was originally commissioned by Swindon partners in 2008 to help to develop a new approach to these families. Participle has now set up a Community Interest Company called [Life HQ](#) to support the scaling of Life to other regions. Part of the approach has also been the development of the Lifeboard, an online tool that supports the relationship between families and Life workers, helping to reduce bureaucracy and enable family members to track their own progress; this has been funded through [NESTA](#)<sup>1</sup>, a charitable foundation.

The Life programme provides ‘a catalyst for fundamental change in paradigm and a shift in the way public services are delivered in Swindon’. It has led to a challenging but very **different way of working**, the creation of a **new set of values and beliefs** which are now embedded in the work culture, and has provided the **catalyst for broad, structural and systemic change across all agencies** which will be fully implemented by 2012. It supports [ONE Swindon](#) (the Swindon Strategic Partnership) in its vision of ‘no families living in crisis’ in Swindon in the future and in building ‘**a truly innovative, integrated service for all families**’<sup>2</sup>.

This case study example highlights the necessity for a **shared commitment to making change work** plus **senior leadership ‘buy in’** and support throughout the process. This is essential to drive through the agreed change, meet the challenge and provide a ‘protective layer’ and reference point when dealing with change at an individual or professional level. **Key leadership behaviour characteristics**<sup>3</sup> are demonstrated in this case study, including being open to possibilities; the ability to collaborate; demonstrating a belief in teams and people; and personal resilience and tenacity.

<sup>1</sup> The National Endowment for Science, Technology and the Arts - an independent body with a mission to make the UK more innovative.

<sup>2</sup> Swindon Borough Council (2011). Ask Community Budgets Swindon report.

<sup>3</sup> National College for Leadership and C4EO (2011). *Resourceful Leadership: how Directors of Children’s Services improve outcomes for children.*

## Background – how did the programme evolve and what was new?

In 2008, the need for a new approach to families with chronic needs<sup>4</sup> was recognised by the Swindon Partners (originally Swindon Borough Council, NHS Swindon/Primary Care Trust (PCT), the police and probation services).

Swindon Borough Council and NHS Swindon (Swindon PCT) already had joint services in place for adult and children's services. Two hundred members of staff providing children's health services<sup>5</sup> had been seconded to Swindon Borough Council. Health and local authority staff were jointly managed in four integrated locality teams and an integrated service for disabled children. These arrangements had already produced improvements such as a reduction in the number of teenage conceptions and a reduction in the number of young people not in education, training or employment.

However, families with the most complex needs had been identified as being over-represented in the borough (particularly families where there were children in need and young offenders). The Council made a strategic commitment in its Children and Young People's Plan (CYPP) to prioritise these families and to develop a new approach for supporting this group. At the same time, support was championed by the leader of the Council and chief Executive who are both passionate about changing the lives of families, particularly where there are issues of anti-social behaviour. Equally, the Chair of the Strategic Health Authority, who was impressed by the work of the social enterprise company Participle in dealing with older people, expressed a desire to introduce this company to the Swindon Partners. Participle brought a different philosophy to Swindon, believing the public sector's role should be one of increasing the capacity of families and communities to help themselves, thereby reducing their dependency on public services. The aim was the co-creation of a new way of working based on a new set of values: compassion, creating independence, and empowerment.

## The process – who, what, when and how?

Swindon Partners commissioned [Participle](#) to assist with the project, which was to develop a new approach to working with families in chronic crisis. The first phase comprised: a literature review; an ethnographic research phase; sharing of insights from the research phase; working with families to build a team and prototype a new service; the development of a model and set of tools for working with the families (the Life approach); supporting the establishment of the team, providing mentoring to the manager and the delivery of training to staff. Phase two, also completed by Participle, then involved: continue the co-creating of tools for working with families, developing a wider network of staff working in new ways through a Life Forum, the development of an evaluation and costing framework; developing and providing additional training to a wider group of staff ; and providing additional support and coaching for the Life team.

The phase 1 literature review had identified some existing work in this area, using the Family Intervention Project (FIP) philosophy introduced by the Labour Government and, in particular, a pilot study in Dundee. It was clear from the evidence, however, that much that had been good in the

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<sup>4</sup> Families exhibiting multiple, complex risk factors and intensive use of public services and resources.

<sup>5</sup> Staff include health visiting, school nursing, speech and language therapy, paediatric therapy, nursing for children with complex needs, child health administration.

Dundee approach had become diluted or 'lost in translation' when the model was scaled up. Further insight from this work identified that, of the money being spent on families at that time (up to £250,000 per annum), little of this was being invested in building capabilities or opportunities, or in building the kinds of networks that would enable families to live the life they wanted to lead.

To develop its new approach and fully comprehend the reality of the lives of the families they were trying to support, a small team from Participle rented a council house in Swindon for six months and lived alongside them. These were families in chronic crisis demonstrating up to ten or more risk indicators, which included: children on child protection plans; children in need (supported by a social worker); poor achievement at school; exclusions; poor attendance; young offenders; looked after children; domestic violence; parental mental health; special educational needs/disability; anti social behaviour and substance misuse.

Families were identified where the dynamics in terms of their relationships with the professionals dealing with them were 'stuck' and no progress was being made. This process enabled the Life team to develop a theoretical basis for understanding change, which could be applied to each individual in the household. A simple [model of change](#) was developed defining the different five stages of progress with the family: closed to change, stuck, open to change, moving forward, or proactive. This model could then be used by staff to plot and assess the level of support and resource that would be appropriate to support the family. Clearly, resource needs to be used wisely as an investment, particularly in the current economic climate and the challenges that produces. If a family is completely closed to change, then the Life team needs to understand how best to approach that family in order to connect with them meaningfully and help them out of stasis.

The Life team involved in the project is managed by Swindon Borough Council and comprises a Programme Leader; a Life manager plus an assistant team manager; six full time Life workers (with a mix of housing, children's services, police and health backgrounds); an administrator; and an analyst.

Between April 2009 and March 2011, the Life team was fully established, new ways of working implemented including a costing tool to estimate savings and improvements in outcomes and 47 family members were supported during those two years.

This first stage of development of the programme (work stream 1) concluded in May 2011.

In April 2011, Swindon also became a Community Budget area for families with complex needs. The Life programme together with Swindon's approach to integration between the NHS Swindon and the local authority form the basis on the approach.

The Life approach and work with Participle also provided a catalyst for a number of other developments in 2010. The Family Nurse Partnership programme, jointly funded by NHS Swindon and Swindon Borough Council, started also based on a model of co-creation and building capacity with young parents. Social work services introduced training for staff on 'Strengthening Families, Strengthening Communities' which builds the ethos of working closely with parents and building capacity in the child protection process.

All of these areas of work now come together in two further work streams planned to be complete by October 2011 and April 2012 respectively. Further details about the Life programme, its areas of

focus and implementation plus future plans can be found in the [Ask Community Budgets Swindon](#) report<sup>6</sup> (see Appendix A plus pages 6-8 of this report).

In March 2011, [Life HQ](#) was set up as a Community Interest Company to support Life initiatives in other regions. Participle and Swindon Borough Council secured funding of £1.2 million to develop this programme in six other local authority areas.

To hear more from the family participants and Life team, see the [videos](#) about the Life programme.

### **The new approach**

The Life approach is a programme focused on developing people's capabilities and opening up new opportunities and possibilities to families in crisis. It is not about being directive, but about enabling and empowering families to open up about issues, about what they want to happen in their lives, and trying to get to the root of the problems holding them back. It is about creating a space where they can talk about what they aspire to and giving them the right support to build their capabilities and connections and to know how to access the kind of resources they need to make their aspirations real.

In the programme development stage, 12 families were involved in the initial research, four families in building the prototype, and hundreds of staff in designing the programme. The focus of the design was on:

- building something radically different that would produce outcomes wanted by many families, their neighbours and the wider community;
- providing greater chances for long term sustainable outcomes in health, education, future prospects and stability for families;
- finding a way of using government resources as an investment in people's lives, rather than as a risk management system.

For further details, and to read more on the key new approaches of this practice and the outcomes for the families, please see the [Swindon Life validated local practice example](#) published on the C4EO website and the [Participle case study](#).

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<sup>6</sup> Swindon is one of 16 areas to operate the first Community Budgets from 2011-2012 see [press release](#) dated 22<sup>nd</sup> October 2010.

### Outcome data so far – what was the impact on the families?

Results to date are encouraging and show positive impact. Based on the Life programme work with 12 families (with 47 family members) in 2010 – 2011<sup>7</sup>, the following outcomes were achieved:

- a reduction in domestic violence
- 70% of children have re-engaged with education where this was an issue
- 69% adults are seeking employment or training or in employment
- individuals are seeing help for drug and alcohol abuse
- parents have developed improved emotional support skills
- 10 children have not been taken into care
- 13 children no longer have a child protection plan
- 80% reduction in police call outs
- 6 eviction orders were stopped
- 86% of the number of families have a rent payment plan in place where this had been an issue
- 92% of family members are building a positive relationship between themselves.

In addition, there was a 73 per cent improvement in mental health (where this was an issue); 86 per cent of children had improved school attendance; and 70 per cent of family members had built positive relationships between themselves.

For further insight into the effects of the programme, both on the Life team and the families with whom the team works, please see [feedback](#).

As a Community Budget Pathfinder, ONE Swindon intends to scale up the Life programme to reach 350 families with multiple needs by 2015.

### Overall success factors in the future – how will success be measured?

The vision for Swindon is to have no families in chronic crisis in the future. Overall success criteria have been set for the Community Budgets for 2015 and further detail on these can be found on pages 8-9 in the [Ask Community Budgets Swindon](#) report.

#### Overall success factors

The following overall success criteria have been set for Community Budgets for 2015

- Establish the Integrated Life programme with an identified workforce for April 2012
- Establish a plan to identify and work with all 350 families (5+ risk factors) over the four years through the development of an integrated Life Programme
- Reducing service costs year on year for CB partners through reductions from the baseline costs established for each family joining the approach. Year on year savings will be established from April 2012.

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<sup>7</sup> Swindon Self Assessment of progress against the Children & Young People's Plan 2008-2011 (April 2010 – March 2011), August 2011.

## How was the Life programme funded?

The Life programme has been funded from a number of different sources including the Swindon Strategic Health Authority, which provided funds for initial development work from September 2008 to March 2010. The Swindon Partners, supported by the ONE Swindon Partnership Board which is a wider range of partners equivalent to a Local Strategic Partnership, funds the Life team including management and development; funding for 2011-2012 is £520,000. An additional grant from the South West Regional Council was obtained for the period March 2011 – March 2012, and the Think Family Grant was used to fund the team for the period April 2009 to March 2011. In April 2011, Swindon also successfully applied for £150,000 of Exemplar Funding from the Department for Education to fund the following posts in the Life team for two years:

- two social work posts
- one mental health practitioner post, plus
- an independent evaluation in 2012 of the Life model.

Recruitment for the above posts is taking place in September 2011.

Swindon is seeking to bring together existing financial resources from partners by October 2011 (work stream 2) to ensure that there is time for resources to be agreed by April 2012.

Governance for the Life programme and the Community Budgets is provided through:

- ONE Swindon Chief Officer Group (Swindon Borough Council, NHS Swindon, Wiltshire Constabulary and Police Authority, Probation service, Wiltshire Fire Service and the Great Western Hospital)
- ONE Swindon Programme Board
- Life Programme Board.

Further details are available in the [Ask Community Budgets Swindon](#) report.

## Costs and cost avoidance – how much is saved?

The Life programme resulted in a total of £760,000 of cost avoidance in 2010 (divided between an actual cost saving of £275,000 and preventative cost avoidance of £485,000). Actual cost savings to the Council are defined as children taken off child protection plans, eviction orders avoided, and the reduction in police call-outs, for example. However, preventative costs are described as those children at risk prevented from going on child protection plans and prevention of school exclusion. The costs are avoided but do not yet result in cash savings and overall budget reductions in services. A further £720,000 is estimated to be saved in 2011.

At a family unit level, costs of providing the Life programme are around £25,000 per family per year, about £5,000 per individual. Previously, spend would have been £250,000 per family per annum and so has reduced enormously.

Further detail on the savings attributable to the programme is available in Appendix B of the [Ask Community Budgets Swindon](#) report.

## Challenges and barriers

The potential for delay in the recruitment of team members, and in seconding staff to the Life team, were overcome by ensuring senior leadership 'buy-in' right from the start, and support and agreement to actions from, for example, the Group Director of Children's Services and the Director of Safeguarding.

An additional hurdle was the relationship between and the different ways of working of the Life team and those professionals working in existing services such as housing, the anti-social behaviour team, education welfare, and social work services. The Life team concept of offering an open invitation to the families and not approaching families with a particular plan was a difficult concept for some of these professionals to understand, in the context particularly of the statutory duties they had to perform, such as fulfilling eviction orders, compelling children to go to school, or taking child protection action.

## Workforce implications

Swindon has learned that this way of working is challenging for practitioners as it asks each professional to build a new relationship with family members as well as supporting them to build their capabilities. This has required considerable investment in staff training, clinical supervision and one to one support. It has also demonstrated that there is a need to build the personal resilience for each team member to a high level.

These challenges triggered many discussions on how to 'build bridges' between the different professional perceptions and understanding and, as a result, some training was delivered by Participle. This training focused on the Life 'fundamentals' (particularly safeguarding and promoting the welfare of children) and what these mean. In addition, a Life forum meeting was set up; this takes place every quarter to share the various aspects of the different way of working. It is always attended by the Chief Executive, as well as other directors, staff and politicians. In addition to providing the opportunity to champion the change and ethos that has arisen from the Life programme, the forum also enables discussion to help find ways to overcome barriers and push forward the change that is aspired to. Another development has been work shadowing so that individuals are able to understand each other's roles and develop an understanding of different pressures and demands.

## Learning points – what can be shared with others?

Three main learning points emerge from this case study.

### For central government

- Local authorities and their partner organisations need to be allowed some flexibility to develop new approaches. These will extend the evidence base but, to do this, there needs to be some flexible funding available for testing for innovation.

### For others

- A critical element that underpins the whole of the Life programme is a shared commitment to making the process work. In this example, agreement was gained at the beginning of the process amongst the chief officers at the highest level that working with families with

complex needs was an area of common concern that they wanted to address differently. Without this commitment, change would have been unlikely to work.

- The amount of support, encouragement and training that is necessary to build people's emotional resilience in working in this way should not be underestimated; it can be very demanding.
- Willingness of all partners to work with a new organisation such as Participle, which challenges the traditional ways public agencies develop and deliver services and engage with service users. An openness to learn together and to be prepared to accept set back and see them as an opportunity for learning and not failure.
- Recognition that building capabilities among families with complex needs is a long term investment and that there is a need to collaborate effectively with statutory services.

### **Key features and characteristics in achieving success – what is the hallmark of the Life programme?**

A number of distinctive features are evident in the Life programme which could be **key to its success**. Many of these are **linked to key leadership behaviour characteristics** described in the report *Resourceful leadership*' (NCSL, 2011)<sup>8</sup>. First and foremost though, this case study exemplifies the following key features:

- leaders and staff being open to, and opening up, possibilities for change (a small programme has acted as a catalyst to broader structural and systemic change as well as cultural change within Swindon)
- opportunities being created for change.

These are facilitated by:

- a complete 'buy-in' at the highest level and a shared commitment to making change work
- champions and strong leaders with a passion to drive through the proposed changes and lend their support
- an openness to collaborative approaches
- creativity to innovate and a commitment to develop a new evidence base with a focus on improving the lives of individuals
- courage to move things forward, even when things are not going well
- a belief in the team and people and a belief that families can change their lives for the better
- appropriate support and encouragement to ensure that both the project team and the families in the programme adapt to and negotiate change to reach their potential and/or aspirations
- a strong commitment, resilience and tenacity at all levels in the core organisation and partners to achieve the intended change.

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<sup>8</sup> National College for School Leadership and the Centre for Excellence and Outcomes (2011). *Resourceful Leadership: how Directors of Children's Services improve outcomes for children* [online]. Available: <http://www.nationalcollege.org.uk/docinfo?id=144732&filename=resourceful-leadership-dcs.pdf>

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## Further reading/references

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