

Wellbeing Board Strengthening locality Working

22nd February 2022

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Background

- Growing ‘system’ recognition on the importance of prevention and early intervention (getting in early in the life of a problem) in improving outcomes and managing costs
- Some previous work (Health, Council & Police, Fire & Rescue, VCS, Faith) to design a new delivery model (Too Big - Right Time / Wrong Time)
- Emerging models through ‘Community Partnerships’ ‘Reducing Inequalities Alliance’ ‘Act as One’ ‘Children’s Services’ and Department of Health and Wellbeing.
- Mature approach in Dept of Place and Bradford Police Division, but needs a refresh.
- Lots taking place across the system, but not joined up and/or aligned as strong as possible.
- **Recognition by all that this work can’t take place in isolation and significant gains to be made through collaboration – outcomes for people, place and organisations.**

Vision

To build safe, strong and active localities where citizens and local leaders are empowered to work alongside public agencies and partners to address local needs and issues. Working collaboratively and creatively, they utilise local assets, resources and opportunities to enhance community capacity and tackle inequalities.

People are at the heart of service design and delivery, and experience coordinated support within their localities and only need to tell their story once. A stronger focus on prevention and early help promotes better outcomes for local people and helps reduce the need for statutory interventions possible.

Defining Prevention and Early Help

Prevention and early help underpin the locality working approach. When we talk about prevention, we mean **preventing or delaying problems from arising in the first place** so that everyone across the Bradford District – whatever locality they come from – can live a long, healthy, and full life. In turn, Early help is about **tackling problems head-on** when they emerge, intervening early before problems escalate.

At the heart of both Prevention and Early Help is a constant focus on **what's strong, not what's wrong**. We work closely with localities to make the most of their assets, resources and opportunities, empowering citizens and local leaders to work alongside public agencies and partners to address local needs in a collaborative and creative way.

Our Design Principles

- Shift activity ‘upstream’, focusing on prevention and early help. Adopt a whole family approach
- Aim to develop a consistent approach to locality working
- Test and learn methodology to refine the locality working approach
- Local priorities decision-making is driven by a strong evidential base (based on robust data and local intelligence – tackling inequalities)
- Align and support the District Plan priorities, including how we support localities in living with Covid and building a better future
- Invest in developing community capacity and empowering residents to help themselves
- Take account of the needs of individual localities and communities, and how these change over time
- Promote partnership working
- Put the person who needs support at the centre of everything we do and ensure people only tell their ‘story’ once and co-ordinate support around them
- Be delivered in a financially sustainable way.

Dependencies

- Alignment to work of partners
- Systems approach
- Post-Covid delivery (facilities and resourcing)
- District wide strategy and plans
- Work of VCS, community and faith organisations at an area level
- Organisational behaviour and culture change
- Time and availability to delivery within the context of business as usual
- Future budgetary decisions
- Alignment, and where possible, shared governance

Risks

- We all design our own solutions, building in duplication (meetings) and confused governance
- Repeated conversations on similar issues and vulnerable people creates a confused response.
- Information sharing - GDPR and 'dare to share'
- Unnecessary costs
- Overly paternalistic solutions and approaches (we know what's right culture)
- Derailed through lack of confidence and 'leaps of faith'
- VCSE and Faith sectors are not resourced to deliver at designed levels of anticipated intervention

Opportunities

- Real consideration of the wider determinants of health create enduring solutions
- Sharing data, insight and intelligence to improve decision making
- Greater impact delivered by the investment spend
- Low level needs are met within the community, without the involvement of statutory services, promoting greater independence and resilience.
- Residents and communities empowered to address local issues alongside agencies
- Delayed and reduced demand for statutory services
- Democratic leadership and accountability
- Doing with not to.

If successful can help to narrow the gap and reduce inequalities across communities

Example

- Customer Services Face to Face team persistent attender in November with poor state of mental health and declared addiction problems (drugs & alcohol).
- Difficulty accessing personal money
- Placed in social housing after spending 3 years in Blackpool (not sustained)
- Tried to engage her with Bevan House, (on one occasion team walking the person to office - but the person left).
- 16 December Social Worker connected Customer Services to the Care Trust.
- Next found sitting on the doorstep of a Bradford hotel. The proprietor contacted the Police one evening and person was moved on, only to reappear the next night.
- Locality Discussion (All Age Panel) connect to Housing Options, Homeless Outreach Project, Bridge and professional services.

Next Steps

- Developing data sharing platform to identify and focus areas of concern
- Engagement with communities taking place to add 'local insight' and context
- Develop organisational thinking around resource alignment to prevention and early intervention agenda. Some good work started.
- ABCD Partner training offer – starts February 2022
- Council and partner plans in development
- New relationships with partners being formed and strengthened
- Continue to advocate a 'system wide' response.
- Good organisational governance solutions in place emerging, but not currently a 'systems' approach.
- **Combine and/or align (Council, Community Partnerships, Act as One, Reducing Inequalities Alliance). Discussions taking place - accelerate.**

Recommendations

Wellbeing Board to:

1. consider the benefits of stronger alignment and coterminous working, including shared governance.
2. Identify a single SRO that cuts across all programmes
3. identify organisational data leads to help build a single data platform
4. consider any nominations for staff to participate in the ABCD training (commencing February 2022).