

Coventry City Council

To: Scrutiny Co-ordination Committee

Date: 10th May 2017

Subject: Ignite Programme – Progress and Early Lessons

1 Purpose of the Note

- 1.1 Ignite is a five year programme funded by the Early Action Neighbourhood Fund, with additional funding from Coventry City Council, and aimed at transforming public services. It is being delivered by Central England Law Centre and Grapevine Coventry and Warwickshire. The Fund was set up by a group of grant makers who want to show national and local government how acting early on problems can save public money now and later on. Its goal is to drive change in how mainstream public services are planned, funded and delivered, away from crisis and towards earlier and more effective 'root cause tackling' action.
- 1.2 This note introduces initial progress and learning from the programme, which is included in the update report at Appendix 1, produced by Central England Law Centre and Grapevine Coventry and Warwickshire.

2 Recommendations

- 2.1 Scrutiny Co-ordination Committee is recommended to:
 - 1) Note the update report at Appendix 1, progress to date and early lessons
 - 2) Make any appropriate recommendations to the Cabinet Member Community Development and Cabinet Member Children's services

3 Funding and responsibilities

- 3.1 Central England Law Centre and Grapevine Coventry and Warwickshire secured the funding and are responsible for implementing the programme. Partnership working arrangements were established at the outset the bid development and have been maintained throughout implementation of the programme, through membership of the Ignite Programme Board and events or briefings on progress, including to the Early Action Partnership Board and the Connecting Communities Board.
- 3.2 The grant awarded by the Early Action Neighbourhood Fund _for £1,500,000 for a five year period, which, as a result of restrictions in the overall funding nationally, meant the local bid had to be scaled down by £400,000, meaning that crucial elements of the programme would of been removed over the course of five years.
- 3.3 In recognition that the Ignite Programme has great potential to aid public services to shift services away from crisis level interventions through tackling root causes early on, an additional one-off resource of £320,000 via Public Health Grant was provided in March 2015 to help meet the shortfall and to fund activities that are central to delivery, which include:
 - Expansion of the Ignite programme additional funding to increase the reach and impact of Ignite so that there are sufficient Ignite workers to involve services in the programme that can aid early action, for example, drugs and alcohol

services, mental health services, police, educational psychology and youth offending services.

- Development of an Early Action and Resilience Centre to develop city-wide capability to embed an asset-based acting early approach in local services.
- 3.4 The Public Health resource is monitored through reports submitted to the Ignite Programme Board, membership of which includes senior officers from Public Health and Children's Services.

4 Scope of the Ignite Programme

- 4.1 Ignite aims to build capability and resilience in those who are most vulnerable and to tap into their strengths and the strengths within their communities and networks to help them move forward, build aspiration and be ready to take opportunities. The approach is based on a belief that the human relationship between the service provider and service user is key to transformation, and that communities can play a key role in tackling complex human problems.
- 4.2 Ignite is working in Willenhall inside two public service 'pathfinders' for change. These are Children's Services and Whitefriars Housing Management Service. The work is focusing on people facing multiple and complex disadvantage, but the learning from the work of the programme should be applicable to all people-based services.
- 4.3 Ignite has been 'active' for 15 months but the work inside the pathfinders began in earnest in September 2016. It is too early to report significant learning but Ignite has established a website http://www.cnccoventry.org.uk/ where it will share its learning, and it is working to encourage others with similar new approaches and ideas to share them via the website and via formal and informal events. Ignite hope that this will promote good practice and inspire curiosity in others to find more effective ways of running people-based services that put community at their heart and that are empowering.

5 Progress and Early lessons

- 5.1 Early findings from the Ignite Programme at year 1
 - Increasing money in the system is critical- if people are living in poverty without the right advice and support their lives are getting progressively worse. It is wrong to assume that the DWP have done the right thing that the person is just stuck with their lot
 - Uncovering root causes improves the ability of people to achieve outcomes and saves service time- where we are working on the wrong problem at the wrong time we won't affect a change that secures the outcome we need.
 - Need to create a culture of support not suspicion help people to understand what they need to do
 - Build confidence to work with households when we are worried, rather than reporting or referring them on- build a relationship that focuses on what could happen in a positive way rather than monitor the negatives
 - When we see something that causes us concern be genuinely inquisitive about why someone might have found themselves in serious difficulty and what help we might be able to offer.
 - The earlier the help can be offered the more positive the relationship
- 5.2 *Communities doing more for themselves*

- 5.3 Ignite is starting to learn and show how we might move away from public services being the only resource and solution during difficult times. Operating in a locality means we can spot and understand problems as they emerge, as well as who could help, right at the start. It allows us to mobilise non-service solutions in response to a problem including from within the individual themselves, the family network and neighbourhood.
- 5.4 Currently services are provided in response to crisis. Professionals rally to resolve the immediate issue in a way which masks both the root cause and any skills or assets the individual might have in understanding their own problem and working on it. The role of the individual is to comply with what the service requires of them in fixing the problem. Professionals with little time to form the right relationship and who don't know anything about a local area struggle to unmask the real problem and mobilise long lasting solutions. But Ignites pathfinder activity within Whitefriars and Children's Services, within Willenhall is showing us how this can happen.
- 5.5 Case Study CA (see Appendix 1) highlights how building relationships before crises supports everyone in understanding the real problem and what can best support people in overcoming difficulties. It exemplifies how working together to uncover strengths can really improve the outcomes everyone wants to achieve.
- 5.6 We need more time and space to understand how the Willenhall community can contribute to thriving given its adverse social and economic climate. Poverty cannot be ignored. Addressing the detrimental material circumstances of households means individuals and families are more stable and resilient against future setbacks. But the effects of living in poverty and deprivation are not a focus for most services.
- 5.7 Case study AC (see Appendix 2) demonstrates the importance of improving local connectedness to build resilience and move people beyond their difficulties. It also reiterates the need to work on the right problem and to be honest about what is possible
- 5.8 The multiple and complex needs and the interconnectedness of problems experienced in Willenhall gives rise to a feeling from some professionals that often people are beyond help. In fact Ignite clients are making slow but steady progress. In our experience you have to be in a close relationship of trust to foster (and witness) this kind of progress. We have been able to demonstrate to professionals that it is possible and to suggest ways in which they might reshape their working practice as a result.
- 5.9 Successfully building connections to people and places is the only way to transforms lives services do not and cannot sustain people long-term in the way that communities and people can. Ignite is beginning to demonstrate how community can be part of the solution.
- 5.10 Causes Not Consequences has been set up as an online home of Ignite and as a focus for events that help spread the practice of acting early on root causes throughout the local workforce and amplify the reach of Ignite's learning. A secondary aim is to build and foster community of people who want to change how services are delivered and need met.

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Name and household circumstances (include any baseline data on capability or networks)

CA. Whitefriars flat for a few years in great condition and nicely decorated. CA is very house proud and having it nice is important to her. She has a number of manageable debts with payment plans that she keeps to. Living with two of her three sons (one aged 3 and one about 4 months old). Damages to property- almost all doors have holes punched in them- she is paying for these again as a debt added to her rent at a cost of about £100 per door. CA has a partner and they have a volatile relationship.

Currently CIN since Dec 2016 following DV incident, continued concerns about violent relationship. No concerns re parenting.

Reason for involvement: State that what service workers reasons were. State what Ignites reasons were

Neighbourhood Officer wanted us involved because: they wanted extra support around managing the mould and how it was being looked at by Whitefriars this was resolved quickly. We continued to be involved because CA showed signs of vulnerability which later escalated to Social Care involvement and continues to be unstable (threatening to go up and down the CAF-CIN-CP ladder) and we felt our methodology and relationship gave us a chance to see if our involvement could manage this better.

What did we do

CA had already contacted an independent Solicitor when we became involved. However after discussions with the Neighbourhood officer regarding how the mould was affecting the health of the family we contacted Whitefriars Repair Team and consequently WF did the repair earlier than first quoted (something like June/ July as opposed to October). No further problem with the mould but we noticed some problems the Damage to doors related to DV incidents which indicated vulnerability.

Supporting with managing feelings and negotiating through getting upset before it escalates into argument- police called, etc

Introducing CA to breastfeeding Lead in Coventry.

We completed some charitable grant applications and she was awarded a new washing machine- she is now doing the cooker one herself (with us there if she needs us).

Uncovered more about the way CA interprets what happens to her and manages her emotions and the knock on effect it has on her life.

We learned early on that relationships, distrust, bravado, fear, etc. that might be causing her problems. We worked on this. It is a work in progress as CA has been thinking like this for a long time.

We worked collaboratively with the whole family and managed to involve R CA's partner in some of the sessions we ran with CA, this meant that he was able to use some of the skills discussed himself and commented at the end of session that he could understood CA's perspective a little better as a result

We also were able to inform R about some local opportunities offered by Waites a construction company this would enable R to gain qualifications for a CSCS card, the card would allow him to work on building sites, at the moment this was a major barrier for him in pursuing employment in construction.

We offered a balance of support, listening and trying to understand along with challenging her when this is useful to her (ie, helping her see that she has a responsibility or that she is only looking at a situation form one point of view, etc.). We were also in a position to form a relationship not just based on crisis intervention, this meant that we had a more holistic and real picture of the family.

Results

People are commenting that CA is calmer in CIN meetings, she reports feeling happier.

CA is finding new ways to manage her problems, feelings, emotions and actions. With this and the great care she takes of her boys it means she is probably less likely to need support from a social worker in the future once this case closes.

CA also becoming aware of the impact of her relationship with R on the children, we discussed how although the volatile incidents were not witnessed by the children she was beginning to acknowledge that if this continued this could affect her children.

SW said at the last meeting this can again be considered if progress continues and meetings are so positive.

SW acknowledged that CA was able to make decisions around what type of sessions or workshops worked for her as an individual. At the last CIN meeting S/W agreed to explore whether a more bespoke service around relationship issues and self-esteem could be offered to CA.

CA has developed a better working relationship with social worker and housing officer and is able to see that people are working to ensure positive outcomes for her children

CA is the poster girl for breastfeeding now and was also doing peer volunteering training to support other young mums.

Were we able to fulfil our role as change agents via this case? If so how?

SW has involved us and valued our input. When CA was reticent about redoing the relationship work with a social worker we offered to do some work with her. In doing this we were able to get CA to see the value what the SW wanted also and this is what has happened.

While initiating the work we fed back to SW via email how it was going and she too met with CA and was pleased with what CA appeared to be getting from it. We also fed back, with CA leading at the next CIN meeting so we could review what difference it had made; all commented that CA appeared calmer and less aggressive in the meeting and her friend said she had seen a change in the couple with them sending her 'less angry texts'.

We suggested in that meeting that CA consider doing the work with social care saying it would complement what we were doing.

SW sought our view when considering stepping up to CP in response to another DV report at the house. It was decided to remain CIN. She values our attendance at meetings and has cancelled to ensure we are there.

With WFH after Ignite training had been delivered to various departments it was reported by the Neighbourhood officer that a change to her approach in her interactions with CA resulted in relations between the two improving and being less adversarial.

What are we learning?

Relational working is key- CA said she wasn't really sure about us the first couple of months (when dealing with the mould, presenting issue) but it developed to something more than she expected.

CA has a better understanding of how the system works and how to better work with the system to get to the goal that everyone wants. This has not been a direct route and there have been incidents where the police have been called; most recently as a way to make the boyfriend leave and without violence. This has enabled CA to see how this triggers concerns and changed her involvement with social care and she is now considering new ways she can manage her problem, along with her partner. SW and health professionals have no concerns about the children directly, just the adults relationship (which of course in turn will impact- again CA is recognising this more and more).

The connecting role was feeling difficult as she had dropped out of the two connections made due to being constantly tired as heavily pregnant but she wanted to stay connected to us as it was helping her work through other issues.

Time spent building a relationship and not focussed on a crisis pays off when a problem did occurs as people know we see more than their mistakes and so are more likely to tell us the real story for an issue making it much easier to work with them.

Locality focus and close contact with SW meant when a crisis did occur meant the SW didn't have to build a picture dominant by the crisis. Work was easier to identify and outcomes quicker to be achieved.

Was there competence transfer and capability building within services through this case?

We were not fearful of challenging the status quo because of existing knowledge and relationship so we offered a way of working differently that respected CA and the SW's need to manage risk and safety. The work we are doing is being seen by the social worker in the feedback from CA along with her observations of how she is different. SW has had all of the worksheets that we gave to CA and Partner and understands the approach and what we are trying to do. Our offering to do the 1-2-1 work was not us being an 'extra pair of hands'. It was offered for CA as we felt that we could show a different way of working on agreed problem that better met CA's needs. The SW was involved in this when we fed back at future CIN meetings. SW saw the value of it saying at the time to CA '*These guys have seen you when you're doing real well so they know you better*'.

The more individualised approach was required here we wanted to illustrate working with a couple as well as individually has huge value; each can agree a change but if the partner is not involved it easily falls in to old patterns and cycles of behaviour. The SW current offer was both do an individual (victim or perpetrator) training separately. In this case both are victim and perpetrator.

Was there competency transfer and capability building within the client or household?

Yes CA is now looking at sources of support for household items she needs, she is emotional self-managing more and became a breast feeding peer mentor. We are still working this case.

Did we see risks to our change agent role and how did we manage them?

There were some risks in us taking on a larger role but it allowed us to reiterate the importance of relational working, an individualised approach and how critical getting to root causes is. The social worker was involved in decisions taken and has seen for herself the impact on CA. There is always a balance with maintaining both important relationships- with family/ person and the professional involved.

Appendix 2

Case Study AC

Name and household circumstances

Name: AC

Household details: Bedsit, living alone but with large dog. Un-carpetted and decorated with furniture and bed worn and beaten by the dog. Two children, aged 11 visiting at weekends and staying over. Good family network- sister was there on our first visit and we spoke to AC's Dad on the phone quite often initially. Family supported with money at times and they saw each other at times. No friends in the area even though he had lived there for over a year. Reported 'not being very good on the phone' and appearing to be unconfident with dealing with the phone, bills, online stuff, etc.

Reason for involvement: State that what service workers reasons were. State what Ignites reasons were

Introduction with Neighbourhood Officer. Complaints about noise (dog barking when AC was out). A number of complaints received and he had letters from Noise Abatement that stated there will be court action if one more complaint received; would mean Whitefriars would instigate eviction proceedings. Whitefriars were concerned this was highly likely and he was at risk of eviction.

Housing: The immediate concern was avoiding eviction. We wanted AC to fully understand the importance of what was happening and the process in which it might happen, along with exploring what he could do to manage and avoid eviction.

Money: AC is on a low income, with just basic benefits and some debt repayments in place. Isolation & mood: AC had no local friends or family and spent a lot of time in his flat alone. His mood was often low and he would present as agitated and annoyed at his neighbours. He sometimes appeared paranoid about the things they were doing and the lengths they went to, to spy on him.

What did we do?:

Avoiding eviction:

Initially planned to try to help him to train the dog to get used to being alone- AC a bit resistant saying he had tried all those things. Attempts were scuppered by bad weather and low motivation from AC to try it.

We talked to AC about his options, openly and frankly; including rehoming his dog. He was more open to this than expected and ultimately that is what happened. We worked with RSPCA to rehome him how to get online there.

AC then started bidding on Homefinder independently and going to the library fairly regularly after us introducing him to staff there.

We visited Noise Abatement/ Kilo 2 and met with the manager, not to discuss case directly but in general terms and to understand process and how likely eviction might be.

Managing and maximising money:

We helped with food bank vouchers- going with AC to see what the best things were for him (things he would use)

We spent considerable time looking at maximising benefits but ultimately AC did not want to make a claim for his two children (he reports they have ADHA & autism) citing upsetting his relationship with his ex as the reason. We could then be upfront about what he could expect and the fact that a change in benefits would be unlikely with the circumstances he presents- we did say we can try still.

We supported AC to claim via SSAFA (Armed Forces charity). He was successfully awarded new carpets, cooker, washing machine, bed and new sofa. We supported AC to get quotes and

strongly encouraged him to do more for himself as initially he appeared to sit back and relied on us to do things for him.

Isolation & Mood:

We paid deliberate attention to AC 's hobbies (painting, making models) and encouraged his interest in this thing that made him happy and had previously led him to socialise (in life and online) with other hobbyists. We deliberately spent time hearing what he had to say and showing interest as we know this is a great way to build rapport and also build confidence in people. We wanted him to feel of value and praised the art he had done (which was brilliant) and asked questions about it (neither of us have any natural interest in the area but we deliberately focussed on to help relationship building).

As we got AC to do more for himself we started to meet him outside at the Hagard community cafe. We introduced him to everyone we knew if they were about so he knew more faces and names in the area. We would arrange to meet him there for a cup of tea and aim to sit with other people at the communal tables. We instigated conversations, pointed out common interests or shared experiences (AC grew up in the area so we often got him chatting to others about what Willenhall was like in the 80's, what they did, etc.)

We attended the Men's Shed social group together and AC continues to so this on his own now.

He was using the Ignite tablet to bid weekly on Homefinder and we took him in to the library to meet Carinna and Geoff who signed him up and showed how to do it. He started bidding independently.

Another frank chat about likelihood of successfully moving to another area into a flat as for a while AC desperate to leave the flat (angry with neighbours and Whitefriars for 'making him get rid of his dog')

Acceptance that he is not likely to get a move any time soon. This was a key moment because on accepting he was here to stay he decided to invest in the flat

We successfully focussed and re-focussed AC on solutions and away from problems often; so steering his focus away from the neighbours to what he had been doing for example. We were able to challenge his thinking about the flat as a place he didn't want to be to thinking of it a home by being honest about the likelihood of being moved and focussing on the positives of staying or at least 'I'm here so I may as well make the most of it' which is what he now feels.

Results

Stabilised tenancy- eviction no longer a threat.

Lessened his isolation and increased social contact and quality. AC has gone from being alone in his flat almost constantly to being a part of his community. When we met him he knew nobody locally. Now he volunteers at the local community centre, setting up tables and chairs for groups, helping in the café washing up, etc. and is also now running the men's group that we took him along to and has lots of ideas of how to make it a success.

His flat is now a home- he hated being there when we first met and was desperate to move. Now it is carpeted and furnished with new or nearly new furniture. He has also started painting and is retiling his hallway with tiles from Poundland. He appears very proud of his flat now.

Capabilities are increased or at least put into practice now as he has more confidence. AC is out and about doing things for himself. He tells us his money is okay and everything is paid by direct debit. He uses the computers at the library if he needs to sort a problem out. He has not asked us for support with something for weeks- whereas before we would regularly have requests to chase things up or something.

I think he seems more confident and more fun. Neighbourhood Officer saw him and commented to him how he looked really well and much healthier. He seems happier and tells us he's 'doing great'.

We consciously asked him to do more (talking on the phone, bidding, etc) as we felt his feeling that he couldn't do those things wasn't really accurate and actually he was fine once he did it; now he is now doing more on his own independently of us or our meetings with him.

I wonder if his expectations of services are more realistic now - he presented often with an irritation that some service hadn't done something and we see this much less now.

What are we learning?

People can do more for themselves- if we believe they can they may start to believe it too.

Being honest (even if it's not great news) is best. Once someone can accept this they can make a decision about how they'll manage things within the system we have. False hopes just stall any other action-- believing I'll get a move means I don't need to think about where I am now.

Shifting focus from negative thinking to solutions can really help- we need to acknowledge the negative stuff of course but not collude in a 'I know it's terrible isn't it' way.

Making friends and contacts increases mood and quality of life having a locality focus maximises the effectiveness of this.

Were we able to fulfil our role as change agents via this case? If so how? Was there competence transfer and capability building within services through this case?

We met jointly with Whitefriars initially then moved to a position of updating verbally or by email. We know this was a missed opportunity and would like, now to revisit with Neighbourhood Officer and see how together we could have worked more effectively with AC so we garner some learning for the system change aspects.

Was there competency transfer and capability building within the client or household?

There was capability building with AC. He is taking more responsibility for things and is happier and more confident.

Did we see risks to our change agent role and how did we manage them?

The greatest risk to our change role here was ensuring people were close enough to our approach to be able to understand it. We could have done more to connect people to our methodology- we have to avoid doing this retrospectively as it not as effective.