Implications for voluntary sector service providers

Key messages
- Providers need to be clear about what personalisation and person-centred working means for each particular service.
- People who use services have assets, including knowledge and expertise, that should be used to improve services.
- Providers should be willing to look beyond traditional models of support.
- Existing service provision and support should be analysed in terms of how it is delivered and what difference it makes to people’s lives.
- Innovation and continuous improvement should be explored and achieved in partnership with people who use services and their carers.
- Open, co-productive relationships should be built with people who use services, commissioners, the local authority/health and social care trust, care managers and the wider community.
- Clear, measurable objectives should be agreed and used to monitor service delivery and identify areas for improvement.
- All staff training and development should be informed by the principles and values of personalisation and promote person-centred and relationship-based working.
- Radical change should be embraced in all parts of the organisation, not just frontline staff.

Introduction
This At a glance briefing examines the implications of personalisation for voluntary, community or not-for-profit sector providers, particularly service managers.

What are the implications for voluntary sector service providers?
The managers of voluntary, community or not-for-profit sector providers have a critical leadership role to play in establishing personalised approaches to service delivery and monitoring person-centred outcomes for people who use services.

Developing, delivering and monitoring personalised services means that:
- the individual is the primary focus
- there is a commitment to continuously improve services based on the experiences and feedback from people who use them
- resources, including staff, are used flexibly to support people to achieve their desired outcomes
- all staff, not just frontline staff, are supported to think about their roles in new ways, maintaining an unremitting focus on people who use services

‘It is important to recognise that people who use services have assets, including knowledge and expertise, that should be used to improve services.’
• a learning, person-centred culture and listening mindset is cultivated throughout the organisation, with frontline workers supported to develop their reflective practice
• ways of working, particularly policy and planning systems, and governance arrangements, are geared towards promoting cultural change based on customer focus and satisfaction levels.

Managers must work to build co-productive, problem-solving relationships with people who use services, carers, care managers and commissioners, and the wider community. Harnessing the energies, goodwill and talents of everyone involved increases the chances of creating vibrant networks of support and opportunities for social inclusion. This involves thinking radically about what support is available to people using the service currently, how it is delivered and what difference it makes to their lives. It may mean accepting that current support is ineffective.

**Case study 1: Transforming organisational culture**

At the beginning of 2011, Certitude started a process of transforming organisational culture to ensure it could better provide personalised support to adults with learning disabilities and mental health needs. Its work to date includes the introduction of one-page profiles for all staff, an individual service fund pilot in eight services and the introduction of personalised rotas.

**Working Together for Change** is a method for collating and analysing person-centred information, and using this as a foundation for planning change with people. It provides insights into what is working and not working in people's lives, and their aspirations for the future.

Certitude has carried out this process on three occasions – with people involved in learning disability services, with people involved in mental health services and more recently with families of young children with disabilities. By finding out from reviews what is working and not working for people as well as what matters to them for the future, Certitude has identified themes and planned for change with people who use, work in and commission services. When this process was carried out with people involved in learning disability services in Ealing, the top themes that emerged included:

• wanting to meet more people with shared interests
• wanting to be able to choose where to live
• having a range of support staff to choose from
• being supported by smiling, creative and skilled staff
• help to be well and having access to a good GP.

The actions identified to address these areas have been built into Certitude's business plan for 2012/2013.

This approach has been significant in ensuring that the views of the people Certitude supports are directly influencing and leading organisational objectives and change.

The **matching tool** is a way of ensuring a good match between people who use services and people who provide them. Certitude's use of this tool has enabled people to take more control over decisions about who supports them. A group of people who share a house and support team used this tool the last time they recruited to their team. Of the four people who live together in the house, three were actively involved in the recruitment process through interviews and observations. All candidates were asked to complete the matching people tool – describing their personality characteristics, their skills and interests – and to bring this to interview. The four people were clear about what they wanted from their staff. Signing skills were really important, as were staff who were keen on getting out and about and having fun. The tool was useful for exploring in interview whether candidates had the right attributes and this was then followed up through observations, resulting in a successful appointment.

This tool is being used increasingly across the organisation to personalise recruitment and to ensure that people's wants and needs are listened to and acted on from the outset.
Case study 2: Developing multiple communication channels

Choice Support has spent seven years developing communication channels to encourage people who use services and their families/carers to influence service management and development. Three involvement managers, part of a dedicated quality team, support the following activities.

- Thirty-one people who use services work as paid quality checkers, monitoring services using the REACH Standards. Quality checkers send reports to service managers and check that action points are followed through.
- Regional user forums produce accessible policies and procedures on important areas like citizenship, voting, self-medicating, bullying and harassment, and going on holiday. They also serve as local editorial committees for a user newsletter.
- Regional families’ forums are places for creative thinking and sharing. For example, feedback from families’ forums about problems building up circles of support for people with more complex needs led to collaborative work with Plan Federation UK and the setting up of a community connector programme.

- A best practice committee made up of representatives from regional user forums and trustees meets every six to eight weeks, commissions an annual user survey, manages the quality checkers’ work programme and organises a regular national user conference called the Big Meet. The committee is chaired and co-chaired by people who use services. It also feeds back on quality issues to the board of management and senior management team.
- Two trustees who use services sit on the board of management, and representatives from the best practice committee attend the quality assurance subcommittee of the board.
- A pool of trainers with learning disabilities runs courses on safeguarding, health and emotional wellbeing. This helps to create a culture where people are acknowledged as experts, not just as recipients of care.

Case study 1 shows how an unremitting customer focus at every level can be the catalyst to bring about organisational transformation.

Case study 2 shows the importance of good communication with people who use services when developing personalised services.

What should voluntary sector service providers do?

- Be clear about what personalisation means, so that everyone has a shared understanding of the principles and practice.
- Find ways to communicate with people they support and listen to what they have to say, no matter how difficult that may be. Many people who use services have never been asked for their opinions and when asked for the first time are not quite sure what to say. This is not because they don’t know what they want, but rather that they are not clear about how and where to express their views. A personalised service invests time and resources in giving people opportunities to communicate, and ways to influence the organisation.
- Develop with people who use services, their carers, families and friends, staff and advocates, an explicit statement describing what a personalised service would look like and how it would work in practice. This is sometimes called a personalisation vision statement.
- Review current approaches to service delivery in the light of this statement, identifying what attitudes, practices and/or systems need to
change or be developed. Particular attention should be paid to quality monitoring systems. Ask people using the service to carry out this review for/with you, along with independent expert support if necessary.

- Review how people who use services are involved in staff recruitment and deployment, and wider decision-making about how the service operates. The use of independent advocates, peer support and training for people who use services in selecting staff can assist this process. Some organisations are now using values-based recruitment techniques – trying to match the personal values of job applicants with the values of the organisation.

- Ensure all staff development is rooted in the principles of personalisation. A learning environment with the aim of continuous service improvement needs to be systematically planned, promoted and evaluated. Service user and carer satisfaction surveys, staff training plans that are shaped by service user experiences and user-led training are all important.

- Ensure all management and organisational systems reinforce and promote personalisation and customer focus. This includes financial management, human resources, administrative support and planning systems. Service user and carer participation in evaluation, governance and decision-making needs to be central to and embedded in policies, structures and attitudes as a fundamental part of continuous service improvement.

- Develop outcome-driven service improvement plans, based on user feedback with clear targets, milestones and success measures, and regularly monitor them. Develop multiple communication channels to capture everyone’s experience and use this feedback to evaluate how you are doing. Regularly discuss progress with all stakeholders, including the regulator.

Personalised social care support is a means to an end: people are supported in ways that they choose for themselves in order to live independent, fulfilled and dignified lives as equal citizens. This means engaging with and being valued by your local community, for it is through respectful contact with friends and neighbours and by engaging with communities that wellbeing is increased and people are

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**Case study 3: Supported living networks**

Billy is a man in his late forties with learning disabilities. He found himself living alone following the death of his parents. This was a difficult period for him and his home was broken into 10 times in three months. Until the death of his second parent Billy was unknown to services. He then received 20 hours of support per week. Social services referred Billy to KeyRing, and he became part of a KeyRing supported living network. Within two months of joining KeyRing all additional support was dropped.

The network is made up of 10 ordinary homes. People who need support – KeyRing members – live in nine of these. They help each other out and meet regularly. A volunteer, who helps members with things like reading bills, forms and letters, lives in the 10th home. The volunteer also supports members to get involved with what’s going on in their neighbourhood. The network that Billy joined gave him a group of people who would look out for him and also rely on him.

Gradually his confidence began to grow as he felt safe and valued. KeyRing’s volunteer identified that Billy’s ‘green fingers’ could be very useful to the community and she supported him to make contact with a conservation group. Other network members decided they wanted an allotment, so Billy was able to help there as well.

Nowadays, it is difficult to provide a full overview of Billy’s life because much of what he does is organic and spontaneous. We do know that someone returned home following a stay in hospital to find their garden in bloom because Billy had planted it for them; that he often goes on holiday with a network friend; and that he gets together on a weekly basis to share a meal with others in his community. We also know that he finally feels secure in his home. Before joining KeyRing the only people that Billy called friends were floating support staff. Six years later, there were 30 guests at his birthday party.
more likely to feel valued. This is true for everyone and is illustrated in case study 3.

**Further information**

- **Dimensions**
  New advice for providers to personalise support in traditional services
  [www.dimensions-uk.org](http://www.dimensions-uk.org)

- **Choice Support**
  Quality Checkers
  [www.choicesupport.org.uk](http://www.choicesupport.org.uk)

- **Find Me Good Care**
  Find Me Good Care helps people to make choices about care and support for themselves or other adults in England.
  [www.findmegoodcare.co.uk](http://www.findmegoodcare.co.uk)

- **Helen Sanderson Associates**
  Matching tool
  [www.helensandersonassociates.co.uk](http://www.helensandersonassociates.co.uk)

**MacIntyre**
Great Interactions
[www.macintyrecharity.org](http://www.macintyrecharity.org)

**SCIE**
*Getting personal: measuring providers’ progress towards personalisation*
[www.scie.org.uk](http://www.scie.org.uk)

**Think Local, Act Personal**
*Working together for change: using person-centred information for commissioning*
Making it Real
[www.thinklocalactpersonal.org.uk](http://www.thinklocalactpersonal.org.uk)

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**What is personalisation?**

Personalisation means recognising people as individuals who have strengths and preferences and putting them at the centre of their own care and support. The traditional service-led approach has often meant that people have not been able to shape the kind of support they need, or received the right help.

Personalised approaches like self directed support and personal budgets involve enabling people to identify their own needs and make choices about how and when they are supported to live their lives. People need access to information, advocacy and advice so they can make informed decisions.

Personalisation is also about making sure there is an integrated, community-based approach for everyone. This involves building community capacity and local strategic commissioning so that people have a good choice of support, including that provided by user-led organisations. It means ensuring people can access universal services such as transport, leisure, education, housing, health and employment opportunities. All systems, processes, staff and services need to put people at the centre.