

TRANSCRIPT

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Whilst every effort is made to ensure that the attached transcript is an accurate record of your audio recording, sometimes difficulties are encountered in understanding technical words, people speaking with a foreign accent and in some cases when somebody is speaking from a crowded room with a lot of background noise and from mobile phones.

Where we have had difficulty understanding words we have indicated this as [unclear] with the appropriate time stamp, or simply attempted to spell the word phonetically but followed it with [ph].

[Start of recording]

Narrator: In this programme we look at two inner London authorities where personalisation has led to a radical rethink of what social care provision can be.

Sam Hopley – Chief Executive, Holy Cross Centre Trust:

We simply didn't have enough resources to do our job. So what do we do? Do we stop doing our job, or do we try to find other ways of doing it?

Female Speaker 1: We tore up the commissioning role; we tore up the provider role.

Female Speaker 2: We were dealing with a blank sheet of paper, and in a way that was the most exciting thing.

Commissioning for Personalisation – LONDON

Narrator: In the heart of London lies Camden where great affluence co-exists with great poverty. Here the local authority has begun to embrace personalisation across the board. Not least in its provision for one group of people, relatively high in number, in the borough.

Rebecca Harrington – Asst., Director, Strategic Planning & Joint Commissioning, Camden Council/Camden PCT:

We recognised that our day centres for younger adults with mental health problems were being commissioned in a rather old fashioned way, with how many people would go through the door, and how many types of activity they would do, and so on.

Narrator: When the time came to put the contracts for Camden's three mental health day services out to tender the authority took the chance to reformulate their commissioning process.

Rebecca Harrington: We used to say, we want you to be able to deliver this number of places for this number of people, how much is it going to cost? And we just turned that completely around to be person centred, and say, we want these outcomes, what is your offer? How are you going to meet them?

Narrator: For one local provider who already operated one of the day services the council's request inspired a reevaluation of how they supported people.

Sam Hopley: Traditionally we work with excluded groups of people in excluding ways; we take people out of society and we try to fix them, and then when we think we have sort of fixed them we return them back. We thought about that a lot,

and decided that actually as a process that didn't really work for us.

Narrator: Having already begun to incorporate elements of coproduction in response to the personalised tender, Holy Cross Centre Trust boosted levels of user involvement using a volunteer time exchange.

Emma Main – Director of Services, Holy Cross Centre Trust:

Time banking is where people from all over the community come together, and it includes service users, the general public and staff, and essentially one hour of somebody's time equals one time credit, it is as simple as that.

Narrator: Now at Holy Cross activities from computer classes to a women's group are led by service users. In return for contributing time to help others in this way people get time bank credits, which many spend on training, leading to qualifications which in turn enable them to play an even greater role in the centre's operation.

Emma Main: At Holy Cross Centre Trust we don't just see people as service users, volunteers or staff, we try and see just people.

Ahmed has gone from strength to strength really. He has been working in the kitchen with us.

Ahmed Hashim Ali: I am from Iraq. Because I am an asylum seeker the first time, and not allowed to take any job or do anything until my case has become clear. My time banking, I always use it and take some courses, in food hygiene, in mental health, and I am now an advice and guidance level 3.

Emma Main: Ian has been coming to the centre for just over a year, over a period of time Ian has got much more involved.

Ian Stewart: *Which mad monarch was returned to the thrown with a lot of help from Richard Neville, and the Earl of Warwick, the kingmaker?*

Male Speaker: *They are hard questions aren't they?*

Male Speaker: *Very hard, yeah.*

Female Speaker: He organises a quiz night, and now he runs, twice a week, his own support group.

How is the men's group going?

Ian Stewart: *Lots of men.*

Female Speaker: Can I ask what you talk about, or am I not allowed to?

Ian Stewart: No, it's too ...

Female Speaker: Oh, I will disguise myself one day, infiltrate the mens group.

Rebecca Harrington: The Holy Cross Centre Trust really treats people as resources in their own right, as citizens with something to give back, not just as passive recipients of the services that we choose to give them.

Narrator: Despite winning favour for their outcome focussed approach, the tendering process posed a problem for Holy Cross, since Camden now wanted a single organisation to run all three of its day services.

Sam Hopely: At the time we were a small provider, and logistics have taken over a large contract would have been actually quite problematic for us.

Narrator: Sam and his colleagues tried to get around this by teaming up with two larger organisations Mind Camden and the Volunteer Bureau.

Rebecca Harrington: We got into all sorts of interesting discussions with our finance colleagues about whether we could have a consortium which included organisations which were technically too small to take on a contract of this size. In the end we got to an agreement whereby if you had one organisation, which was sufficiently robust, they could be the lead provider and the others were allowed to be part of the contract and that really helped with the small provider issue because they couldn't have competed by themselves, so we were quite pleased to have found a way around that quite you know, the procurement rules, which appeared quite rigid.

Narrator: The consortium was successful in winning the contract but Sam remains acutely aware of the hurdles facing small providers in getting commissions from local authorities.

Sam Hopely: We probably, at the moment, are providing about forty or fifty thousand pounds worth of business a year to Camden, so we need to raise our indemnity insurance to ten million and that actually costs us £9,000 annually which is heading towards a sort of 20% of the income that we're receiving from that pot of money, which again causes us all sorts of problems as a small provider.

Narrator: To help small providers over these hurdles, Holy Cross decided to extend the time banking concepts from people trading hours to organisations trading resources.

Sam Hopely: The sector's not very good at sharing stuff, we've got a standard gag really, we've got a very special table tennis table. Why is it special? It's because you've got to have mental health problems to use it. Old people have got theirs, young people have got theirs, [unclear-00:06:56] have got theirs and actually there's, again, there's much more fun to be had in sharing table tennis tables.

What we needed to do is find a mechanism of opening up resources and we settled on something called Camden

Shares. Camden Shares is a way in which organisations can trade resources through a time exchange.

Narrator: Camden Shares now unites over seventy organisations, commissioners are hopeful that by tapping into it in the future they'll be able to give small providers greater access to commissions.

Rebecca Harrington: We're working with Holy Cross Centre in [unclear-00:07:30] on how we can get a system that supports these micro enterprises to be good, efficient organisations that we can trust and that our service users can trust but without drowning them in bureaucratic red tape.

Narrator: A few miles east from Camden, mental health residential care has undergone a similar reappraisal. A conversation between Tower Hamlets' Council and an existing block provider called Look Ahead kick started an attempt to extend the principals of personalisation to a residential scenario.

Sarah Ford: We wanted to be able to do things in that particular type of care setting, that perhaps hadn't been done anywhere else, but we wanted to ensure that the provider remains stable so that meant how did we need to think about the way that we invest in them.

Narrator: What was developed was a core and flexi model, in which about two thirds of the money originally spent on Look Ahead's block contract still goes centrally to Look Ahead in the conventional way but the remaining amount is diverted to the people using Look Ahead services, partly as a credit to use a certain amount of support worker time in any way that they wish and partly as a weekly cash allowance.

Ceri Sheppard: This isn't a personal budget in the conventional social care sense, where people have gone through self-assessment and RAZ [ph] and so on. This is Look Ahead choosing to use its block contract money differently.

Dwain Innis: Hi my name's Dwain, come in.

Narrator: Dwain, who has a hearing impairment has been living in Look Ahead's rehabilitation house for a few months.

Dwain Innis: I was ill and like paranoid, stressed, worried, I was hearing voices, I was shaking bad. When I heard about football I thought 'interesting' since I played with them I've come every week, I never miss training, I've come every week.

Narrator: Dwain has used part of his £30 weekly allowance to finance his football passion.

Dwain: This is my room, all my boots. They're my favourite. This is Tower Hamlets Tigers, in the PMA League - Positive Mental Attitude. I've been playing with them for 3 years, in the first season we won the league.

- Sarah Ford: Some of the requests around support weren't always straight forward in terms of, is this a social care activity, is this something we support, is this something we can support and we had to go through a kind of learning and, I guess, development of ourselves in terms of moving away from our resources, just supporting outputs to actually our resources supporting outcomes for people; outcomes that perhaps seem intangible but their outcomes around wellbeing, their outcomes around confidence, their outcomes around self esteem. All these things make your mental health better.
- Narrator: The second flexi element of the model is that each customer gets a number of hours of flexible support time to use as they wish.
- Karen Bullock: A lot of people come here and have never had to cook for themselves before, so it's pretty much starting right from the basics, how to know when things are cooked, different types of dishes.
- Is that good?*
- Dwain Innis: *Mm, hot!*
- Narrator: Customers get help in making their choice of support worker through prominently displayed profiles of all staff members, including manager, David.
- David Saltson: Most of the customers have used my aspirations as an ice breaker, they come to the office to pick on me because I said I would want, I would love to do bungee jumping and tap dancing and Dwain, for instance, he used to do ballet and he's good at tap dancing, so he was saying he could show me some few steps. So, for instance, that was like a really good opportunity for me to like really engage with Dwain.
- Ceri Sheppard: Rather than maybe more conventionally a support worker will come along with their diary and fit somebody in, it's really about the individual needs and preferences of the individual. That's not always easy for a service that has to operate a rota for example, it has to provide certain cover. So this isn't really an easy option but the impact it has on people's choice and control is so huge that I think that once you try it, then you're never going to turn back.
- Sarah Ford: One of the concerns that came up from the workforce was would they actually get picked to support people, on the other hand some of the staff were concerned that actually too many demands would be made on them, that they wouldn't be able to keep up with requests for a support from individuals but in reality I think it has worked out very well.
- Narrator: Another customer utilising Look Ahead's new model is Stephen.

- Stephen Wright: I've been diagnosed as having paranoid schizophrenia with traits of Asperger's syndrome. I have paranoid delusions, maybe thinking I'm the only person who exists and everyone else like you don't exist, which is very awkward, how can you relate to people when you don't think they exist in the first place.
- Narrator: Tonight Stephen is using some of his flexi support time to be accompanied across east London to begin volunteering for a project close to his heart.
- Stephen Wright: I'm going for training for this voluntary job to help the homeless and I'm very excited, I've never done a voluntary job like this before because I was once homeless myself and I know how it feels to be homeless. I want to like share my experience with these people and so they've got hope when they look at me, that one day they might be like me.
- Narrator: For Stephen and Dwaine, personalisation isn't just about choosing what you want, it's about being who you are.
- Ceri Sheppard: Because, I guess, we started with that blank sheet of paper, we went up lots of different false paths along the way, until we eventually came to the model that worked for that particular service.
- Sarah Ford: We've all learnt through going through this process, we've learnt what works well, we've learnt what's possible and we've probably learnt what isn't possible and the isn't possible is a very small list.
- Narrator: Across London there's agreement that the ultimate purpose of personalised commissioning is to breakdown the traditional model of segregated existence.
- Same Hopely: We'd like to see a situation where people were no longer in service ghettos, finding much more holistic ways of supporting people within an environment surrounded by much more opportunity than they could ever be surrounded by in traditional day centre settings.
- Rebecca Harrington: Over time I think we'll see a much more blurred boundary between recipients of social care and ordinary citizens who are living their lives, with a bit of help from the finances that we can provide for them.

[End of Recording]