

Neighbourhood Management Event 17th May- Workshop Notes

How can we best support individuals and families with complex needs in the priority neighbourhoods?

Workshop sessions

Group A

Facilitator: Tom Purnell

Part One (Case study A discussed)

How do we currently tackle an issue like this?

- Organisations have previously worked independently and not shared skills or knowledge.
- Organisations have taken a reactive approach, i.e. dealt with the problem once it occurs.
- Agencies do not have a joined up approach.
- There is a lack of a Common Assessment Framework.

How ought we tackle an issue like this?

- There needs to be a focus on problem solving.
- There is a need for a key person/worker/practitioner to lead on each case and take responsibility for it. *E.g. referring to the case study who will lead and take action for the 6 year old and will action be taken before further issues arise relating to the 6 year old?*
- Neighbourhoods need to have services in place to deal with issues themselves.
- There needs to be a change in culture, people need to work outside of their comfort zones.
- Good practice needs to be rolled out to other areas.
- There needs to be an emphasis on *place shaping*. This needs to be achieved by engaging with communities to find out what they want/need/consider the issues to be.
- Place shaping is about good governance by dealing with issues that mean something to the people who live there.
- There is also a need for an individual based approach to accommodate individual families.
- We need to ask the person/communities themselves what they perceive the issues to be? E.g. in the case study the mother needs to be asked what the key issues for her are.
- Some sort of *needs assessment* needs to be implemented to deal with individuals in a co-ordinated way. – Is there currently a needs assessment? Who needs to provide the needs assessment? How should it be tackled? What needs to be contributed to it?
- Better promotion of services - residents need to have knowledge of what services are available in their area.
- Agencies need to understand what the common ground is to deal with the issue as a group. Agencies responses need to be co-ordinated.

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- Agencies need to come back on board to support neighbourhoods and neighbourhood action teams.
- We need to ensure that information is effectively shared between agencies/blocks. e.g. between health authorities and the police.
- There is a need to initially identify the appropriate agency to deal with a case/ take the lead. E.g. in some instances certain agencies are responsible for dealing with cases that would be better dealt with by alternative agencies.
- The breadth of agencies who are going to come into contact with an individual needs to be opened up.
- Control mechanisms need to be joined up and agencies should take joint enforcement in extreme instances.
- Profiling and good strategic assessment needs to be joined up between agencies.

What are the barriers to improving our collective response?

- Transparency – i.e. who is accountable for each individual part? Which agencies and what is their part?
- The ability to listen – We need to take the solution from the people who have the problem by synthesising their needs and collectively listening to what their problems are and what the solutions might be.
- Capacity issues – this might be tackled by collective agency working changing capacity issues and breaking down silos.
- Time restraints.
- Lack of funding – this might be tackled by more partnership work, restructuring organisations and reallocating and combining resources.
- Certain agencies are currently under represented in neighbourhood action teams e.g. the PCT, adult services, and libraries.
- Capacity of agencies is an issue.

Other comments:

- There needs to be strong resident involvement.
- There needs to be diversions in place for young people e.g. provision of facilities and if they misbehave removal of these privileges.
- Local councillors need to get involved and take action.
- Strong, enthusiastic and motivated leaders are essential.
- Where there are individual cases there are usually high concentrations of other similar cases.
- The Voluntary Sector has a key part to play.

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Part Two

**What collectively could be done to change key documents/ strategies?
E.g. LAA themes.**

- Identification of governance at the right level for local communities. E.g. in terms of place.
- More priorities specific to priority neighbourhoods.
- More LAA outcomes that are relevant to all blocks.
- More LAA outcomes that are relevant to delivery in priority neighbourhoods.
- Outcomes should not be tied to all priority areas because in some areas actions won't be relevant.
- There needs to be a link between the district LSPs and the LAA, the relationship needs to be more joined-up to inform policy.
- Policy needs to be reactive to what's going on and what's needed.
- Districts need the ability to introduce their own local targets.
- Targets need to be proactive. There needs to be a switch in resources from reactive to proactive

Other comments:

- Resources need to be released to tackle issues.
- Sometimes actions need to be put in place before targets.
- Greater awareness that a range of issues affect individual cases. E.g. by increasing policing you won't necessarily reduce crime. It might be necessary to invest in youth activities to keep children occupied and prevent them from engaging in criminal activities.

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Group B

Facilitator: Derk Van Der Wardt

Part One (Case study C discussed)

How do we currently tackle an issue like this?

- Carers support project
- Health support, health assessment/s as a next step
- National policies for extra support *in the home*
- Tenancy issues & support from local council
- Opportunities of extra income (e.g. may help with transport needs)
- Ambulance service – issue of particular criteria
- Dial a ride
 - Voluntary schemes
 - Transport systems

How ought we to tackle it?

- *Coordination*
- School transport systems – using the buses during the day for hospital visit or elderly uses
- Using existing resources
- Collective information (adult services coordination role)
- Customer services – should they direct to other services or take more responsibility?
- Community support officers

What are the barriers to improving our collective response?

- Referral
 - Do people feel empowered to alert other services?
- Adult services involvement in neighbourhood management, are they aware of the priority neighbourhoods and to what extent?
- Difficulties due to movement of staff, resources and the people we are assisting

Other issues

- Royal mail alert service (already works quite well)

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Part Two

What might the SCS say about priority neighbourhoods?

- Depends on whether we will be having a 2 tier approach
 - Role of district community strategies
 - Overarching information in the county SCS which names the priority neighbourhoods
 - Direct to the district SCS for details about their priority neighbourhoods
 - Overarching targets for reducing gaps between the neighbourhoods and county averages
 - To justify a county strategy we need county wide targets
 - County strategies are often focussed on rural areas, whereas neighbourhood areas are always in urban areas
 - A framework is needed in the SCS for measuring QOL
 - Need to include information and think about cross boundaries and areas outside the county
 - County borders
 - Movement of people
- There are also risks around targeting – setting targets you can't measure or setting yourself up to fail, or skewing the focus away from what is needed locally. Also, targets don't always translate well into local action and local context. What you need in SCS is a framework for measuring success in the priority neighbourhoods: a cocktail of targets / outcomes that make sense to residents (this cocktail could be across the LAA themes) Each PN could choose a number of those targets to which it will seek to contribute.

What information is available about the priority neighbourhoods?

- Need to be more sophisticated in the mapping of priority areas
- More thoughts are needed with regards to the success criteria e.g. for when targets have been met or QOL improved
- Risks in setting targets
 - Targets should be weighted e.g. crime stats against access to museums
- QOL survey currently every 3 years
 - Issue of 3 year gap to find out if actions are making a difference
 - Movement of people during this time span
 - Survey should be every 6 months? For priority areas
- There are some rural priority neighbourhoods e.g. bagworth which have access to more/ different sources of funding
- Need to understand reasons why areas are priority neighbourhoods
 - Important to understand what is going on in these neighbourhoods & why / whether neighbourhood management is the right approach to create 'bangs for the bucks'
- As an example one particular priority neighbourhood area appears to be just farmland and one pub

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- Is it therefore a priority due to such things as access to services? This may not always be a problem for people who can drive

What role might Neighbourhood action plans play?

- Need to feed into district SCS
- Needs to fit with LAA & SCS or there will be a lacking in commitment to take the actions forward
- Need to ensure we are not giving false impressions to the neighbourhoods that there is an open agenda for improvements / actions
 - They need to fit with the bigger picture and strategies
- Need county ownership of action plans as include wider partnerships who must be involved

Other comments

- Causes
- The new LAA/ SCS needs to align social capital and neighbourhood areas as one – not as separate areas.
- A problem is that people in the priority neighbourhoods move around so as we improve their levels of e.g. crime or education they move from the priority neighbourhoods and new people move in
 - Making targets hard to reach as have to keep working with new residents

Next steps

How can we take this forward?

- LAA theme leads – take back and discuss in theme partnerships
- Neighbourhood Managers/ Facilitators – discuss in district LSPs
- Feed ideas into SCS/ LAA process, through Tom Purnell/ John Wright
- Worth this group meeting again to take the discussion further forward?
- Would it help if some proposals were drafted from the 'centre' for discussion?

Comments:

- Inviting priority neighbourhood councillors to meetings
 - An issue for individual district LSPs
- As a neighbourhood manager needs to understand how the LAA themes relate to the work they are doing / how their work builds into targets
 - Now is the opportunity to link N/M work with the development of the new LAA/ SCS
- Mechanisms to learn best practice e.g. melton case study
 - Best practice sharing between district LSPs

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- N/M would like the opportunity to explore links with the LAA leads
 - Leads welcome direct contact with N/M e.g. LAA lead meetings
 - Next leads plus meeting 8th June – Neighbourhood managers invited, further information to be sent

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Group C

Facilitator: John Wright

Part One (Case study B discussed)

How do we currently tackle an issue like this?

- The relationship between LCC Adult and Children's services to neighbourhood management approaches is not well understood
- At present LCC Adult and Children's services do not seem to feel enough engagement with Neighbourhood Action Teams to attend
- Schools capacity to work with challenging young people
 - Limited resources to give specialised support
 - Youth service provision stretched, not aware of what the targeting criteria are for things like detached work.
 - How do exclusion processes work?
- Eviction – The criteria for intervention with families at risk of eviction are high the results/causes are:
 - Eviction will compound problems
 - May have to pay rent in private sector
 - May fall between gaps in services
 - May depend on age of children
 - Limited inclusion provision
 - Extended schools/ Children centres
 - Should take up the agenda
 - No clear cross-agency process in place for intervention with early teens
 - Only at crisis point
 - 16/17 year old interventions in LAA is a possible model
 - Adult and Children's services are not a universal service excepting education. This mitigates against prevention at an early stage

How ought we to tackle it?

- Focus on customers and their needs looking particularly where they live
- There needs to be an assessment of the potential for greater Multi-agency group preventative work
- Promising practice to look to roll out
 - 16/17 year old LAA project
 - Melton hub approach Those about to be excluded – family focussed
 - Nottingham project
 - Contract with family
 - Lead officers
 - Single assessment

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- Bridges?
- Exclusion
 - Review school capacity to provide alternative/provision intervention, build up that capacity
- Eviction –
 - Take a preventative approach to sustaining tenancy e.g. through early housing intervention
 - Joined up response when evictions are unavoidable
 - Promising practice exists in the City with Supporting People funded STAR tenancy support project and a resettlement projects (Dundee model)
 - Neighbourhood Management approaches would way of co-ordinating and/or adding value to such specialist projects
- Empowering neighbourhoods to be more resilient so community self-help and peer support occurs more readily
- ASB
 - Some lack of knowledge around the table as to how ASB reduction interventions, link in with housing and school services. This should be clearer.
- Parental support
 - To assist parents/guardians in supporting children to stay in school
 - Extended school?
 - Bring in income check and other support
- Some simple improvements to facilitate better agency communication, data protection shouldn't be a barrier

What are the barriers to improving our collective response?

- Geography
 - People in need but outside of geographical boundaries may not receive support
 - Transport barriers e.g. when accessing services requires catching two buses
- Legislative responsibility
 - What are the limits on professionals to sharing information and discussing multi-agency responses to particular issues. Are they always insurmountable
- Housing, Adult and Community Services and Police seem core service providers that require close collaboration
- Front line and/or customer service staff limits
 - Their understanding of what they can share and who with
 - Knowledge of who to make referrals to within partner organisations when someone presents with an issue not directly connected to their service
- Resource/capacity limits
 - Staff and Financial

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- Particularly in developing a joined up response to preventative services
- Organisational norms and structures which make difficult a joined up response when people present
 - Different assessment processes
- Trust in communities of agencies can make co-operation difficult

Overcoming barriers

- Is it a big enough issue to generate:
 - Ownership on the part of LSPs and public sector organisations
 - To provide a strategic response
 - top level commitment to increasing prevention capacity and joint commissioning
- JSNA/Police Strategic Assessment/SCS evidence base
 - JSNA a statutory requirement from 2007/8
 - A shared more holistic view of need covering adults children and health may be a better basis for assessing the need for preventative work and the potential for commissioning it together
- LAA – opportunities for sharing capacity via joint commissioning to focus on priority areas and preventative services
- Empower front line staff - joining up better some of what is there does not require many more resources e.g. in relation to referrals issues and & confidentiality concerns
 - Pool knowledge base (via IT support)
 - Training and skill sharing
 - Partnership response to issues such as interpreters, area guides, service guides
- Block structure is artificial in the context of places we need to work harder on cross cutting issues
- Raise awareness across agencies of where they are supporting the same or similar clients as a basis of identifying opportunities for shared support to create more capacity and better joining up of what's there
- Rolling out promising practice elsewhere e.g. Melton hub
 - Resources?