



# **The Role of Third Sector Innovation: Personalisation of Health and Social Care and Services to Reduce Crime and Re-offending**

## **Call for Evidence**

Cabinet Office Advisor on Third Sector Innovation, Rt.  
Hon. Anne McGuire MP.

July 2009

# Call for Evidence

## Introduction

### A. Project Priorities

The Cabinet Office Advisor on Third Sector Innovation, Rt. Hon. Anne McGuire MP, aims to realise the potential of third sector innovation in the personalisation of a) health and social care; and b) services to reduce crime and re-offending. Further information on the Advisor's work is available on the Office of the Third Sector's website.

In consultation with key representatives from the third sector and stakeholders across Government, the Advisor and the Minister for the Third Sector, Angela Smith, have identified four priority areas to be explored through this project. The four key questions to be answered are:

#### **How can the third sector....**

- 1. ...offer real choice to citizens?**
- 2. ...deliver personalised early interventions?**
- 3. ...overcome organisational barriers to personalisation?**
- 4. ...improve outcomes through service user participation?**

There is further information below explaining these priorities and the opportunities and challenges that underpin them. Key questions and prompt questions are highlighted within the purple boxes.

The Advisor is inviting third sector organisations to submit evidence, ideas and recommendations in relation to these priorities.

### B. Context: What is personalisation?

“What world-leading public services have in common is that they make sure users do not have to navigate various hurdles to get the public services they need. Rather, they fit within their lifestyles”

(Power in People's Hands: Learning from the World's Best Public Services, 2009)

Personalisation is tailoring support to an individual's needs, instead of just providing a one size fits all service. It is about involving people in making decisions about the services they receive to achieve the best outcomes and it is about answering people's ambition for prevention rather than cure.

The mechanisms for the personalisation of the services vary depending on the circumstances of the individual and the outcomes to be achieved:

- It can mean joining up existing services to provide integrated packages of care around the needs of the individual;
- It can mean tailoring and adjusting services to the level of need of the individual; and
- It can mean giving users of services genuine control, for example, by providing new funding mechanisms such as a personal budget.

### **C. Context: What does personalisation mean in this project?**

This project is specifically focused on the role of third sector organisations in the design and delivery of personalised services that improve health and social care outcomes and reduce crime and re-offending. It will take a holistic approach to understanding what types of activities and service models may support these goals.

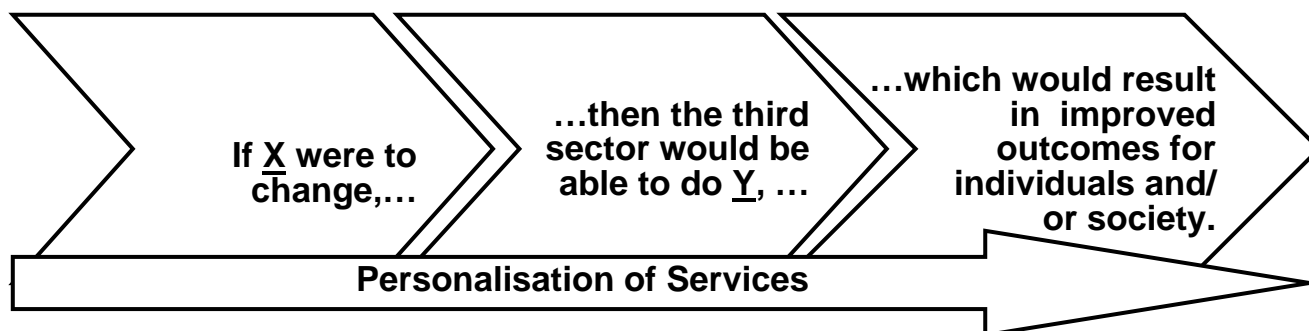
This project also takes a holistic understanding of the 'service users' for whom services should be personalised, encompassing families, carers, victims of crime and wider communities.

The Advisor acknowledges that existing policy and practice in relation to the personalisation of services is at very different stages across health and social care and the criminal justice system. However, there is a significant opportunity to transfer lessons, adding value to the Government and the third sector's understanding of how improved outcomes may be achieved.

### **D. What would the Advisor like from you?**

The Advisor is inviting third sector organisations to submit evidence, ideas, recommendations in relation to the project priorities (section A).

In particular, the Advisor would like information and examples that fill the X and Y in the diagram below:



For example, to apply this approach to another area, education and learning, if education was based on collaborative personalisation with learners then the third sector would be key in facilitating the creation of peer mentoring and one-to-one services for every child which would result in improved outcomes for individuals and society.

Additional guidance on the submission of information:

- You only need to respond to the questions that apply to you or your organisation. There is no need to respond to everything in this paper;
- Please submit information in whatever format you feel best communicates your ideas, experience or evidence. However, please make clear how your submission fills the X and Y points on the previous page;
- Please make clear how your ideas will improve the personalisation of services (as described in section C above); and
- Please make clear what the third sector's unique contribution is.

**The deadline for the submission of information is Friday 25<sup>th</sup> September 2009.**

**Please send submissions to:**

**[anne.mcquire@cabinet-office.x.gsi.gov.uk](mailto:anne.mcquire@cabinet-office.x.gsi.gov.uk)**

or

**Rt Hon Anne McGuire MP  
Advisor on Third Sector Innovation,  
Office for the Third Sector  
Admiralty Arch  
The Mall  
London SW1A 2WH**

#### **D. What will happen with this information?**

The Advisor will be making a series of recommendations to Cabinet Office Ministers and colleagues across government. These recommendations will focus on translating the potential of third sector innovation to personalise services into reality, delivering improved health and social care outcomes and reducing crime and re-offending. The information provided will inform these recommendations.

Please note that information provided in response to this consultation, including personal information, may be subject to publication or disclosure in accordance with the access to information regimes (these are primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).

If you want information that you provided to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence.

## PRIORITY 1: How can the third sector offer real choice to citizens?

**KEY QUESTION: What could central Government, local commissioners and the third sector do to support a diversity of provision for citizens?**

### Prompt Questions

- How can the third sector enable and empower people to make a real and informed choice between a range of providers?
- Within existing resources, how could the Government and/ or local commissioners better support smaller specialist providers?
- What evidence exists that smaller third sector providers provide greater choice and flexibility to service users?
- Within existing resources, how could the Government and/ or local commissioners better support innovation amongst third sector providers?
- How can the third sector help people to understand the choices available to them?

### **What does this mean?**

For individuals and communities to have a genuine choice between the services, there needs to be:

- a) A range of services and providers to choose between; and
- b) The tools and resources to understand the options available.

In some parts of the country this is already happening. For example, micro-enterprises, websites selling services directly to people (e.g. shop4support<sup>1</sup>) and user-led organisations are enabling a diverse range of support to be developed.

### **Example - Plan My Care**

Plan My Care<sup>2</sup> is an online solution that is being developed in partnership with Health Launchpad<sup>3</sup> at the Young Foundation, to support individuals to manage all aspects of their care needs. It will provide tools to simplify what could be a confusing transition to personal budgets and self directed support. It will provide a space for individuals and their helpers to access up-to-date information, assess their needs, create a personal support plan and procure goods and services. It will also have an interactive element allowing users to leave feedback about different providers or to compare how other people with similar needs have created care packages.

<sup>1</sup> Shop4Support - <http://www.shop4support.com/s4s/ui/content/>

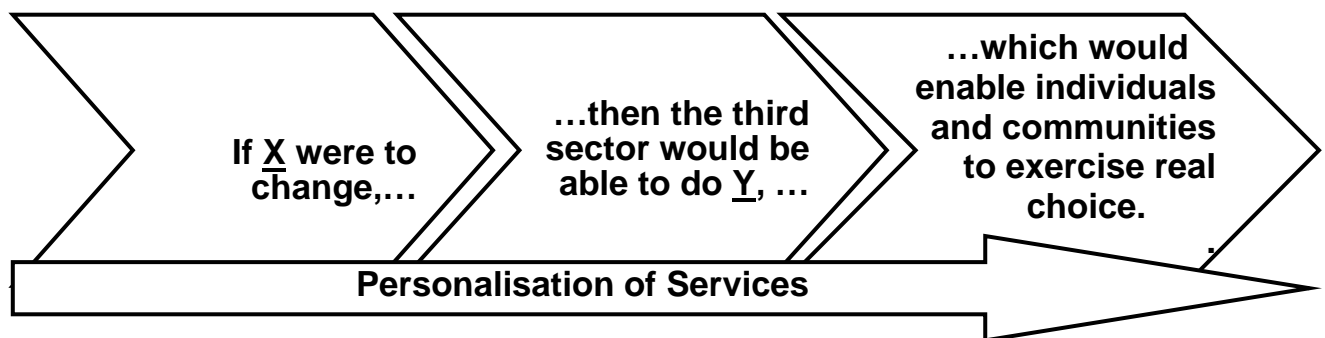
<sup>2</sup> Plan My Care - <http://www.planmycare.com/>

<sup>3</sup> Health Launchpad - [http://launchpad.youngfoundation.org/fund/hia/fund\\_home](http://launchpad.youngfoundation.org/fund/hia/fund_home)

### What issues have already been raised by the third sector?

Some of the challenges third sector organisations have raised have been:

- Patchy uptake amongst commissioners of personalised approaches;
- Contracting with larger, well established organisations rather than local specialist, smaller or newer groups;
- Tight contractual arrangements stifling innovative approaches that meet individual's needs and wishes; and
- Lack of grant funding to enable capacity building.



## **PRIORITY 2: How can the third sector deliver personalised early interventions?**

**KEY QUESTION: What are the most significant opportunities for the third sector to deliver more personalised early interventions?**

### Prompt Questions

- What are the best examples of personalised early interventions in the third sector? What makes these the best examples?
- What positive outcomes do you see in early interventions:
  - for those you work with;
  - for your organisation; and
  - for society as a whole?
- How could the third sector's involvement in personalised early interventions provide increased value for money?
- What prevents third sector organisations from carrying out early interventions?
- Do you have examples of early interventions you would like to carry out, but are currently unable to do so or are unable to replicate/ bring to scale?

### **What does this mean?**

A more personalised approach to delivering early interventions involves personalising services around risk factors and early indicators, rather than a persons fully developed and often entrenched needs. While this may have positive benefits for individual and communities, demonstrating effectiveness and value for money can be challenging for many providers.

#### **Example – Islington Neighbourhood Link Worker Scheme**

St. Mungo's, in partnership with Revolving Doors Agency, are developing a pioneering service to prevent people with mental health problems who are involved, or at risk of being involved, in crime, from becoming homeless. The service helps people to access the support services they need to find different paths and opportunities away from crime, making a visible difference to the community.

Work is jointly carried out with other agencies involved in the Safer Islington Partnership, and is therefore able to provide early intervention and a holistic service. They are currently working with Islington's Safer Neighbourhoods Team (Police), Homes for Islington (registered social landlord), Highbury Grove Crisis Centre, the Drug and Alcohol Action Team and the local Primary Care Trust.

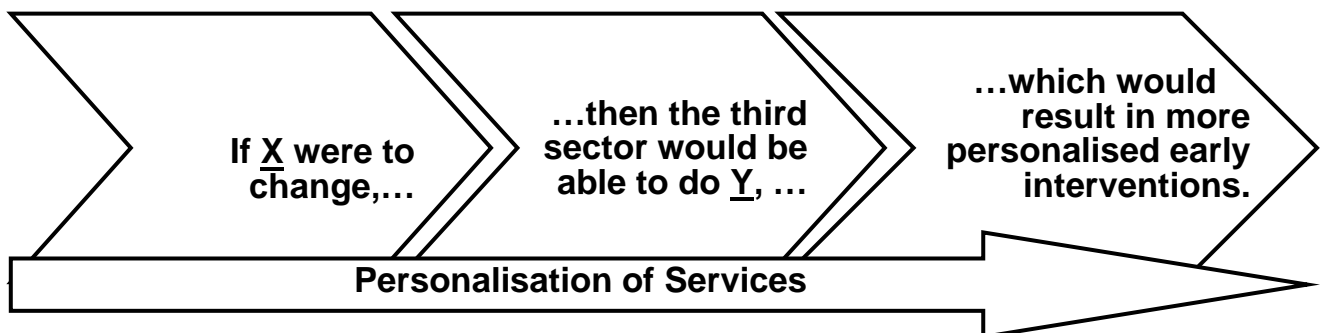
<sup>4</sup> Islington Neighbourhood Link Worker Scheme -

[http://www.mungos.org/services/recovery\\_from\\_homelessness/our\\_mental\\_health\\_team/](http://www.mungos.org/services/recovery_from_homelessness/our_mental_health_team/)

## What issues have already been raised by the third sector?

Some of the challenges third sector organisations have raised have been:

- While public services are developing strong personalised approaches for people with developed needs, services that respond to risk factors and early indicators are not personalised. The third sector is well-placed to fill this gap.
- Early intervention tends to be focused on individuals with lower levels of need, or short term needs, which attracts low (and in some cases no) funding;
- Benefits from early intervention will often be felt across different parts of the system, but this makes proving effectiveness and securing funding difficult as more often than not resources are still departmentalised;
- The long term outcomes of early intervention can be difficult to demonstrate; and
- There seems to be a need for a common framework to evaluate the success of projects.



## PRIORITY 3: How can the third sector overcome organisational barriers to personalisation?

**KEY QUESTION: What are the organisational barriers faced by third sector organisations when trying to deliver more personalised services and what is needed to help overcome these barriers?**

### Prompt Questions

- What organisational barriers do you face when trying to personalise services?
- What have you done to overcome these barriers?
- What could the third sector do to help overcome these barriers?
- What could commissioners do to help overcome these barriers?
- What could Government do to help overcome these barriers?

### What does this mean?

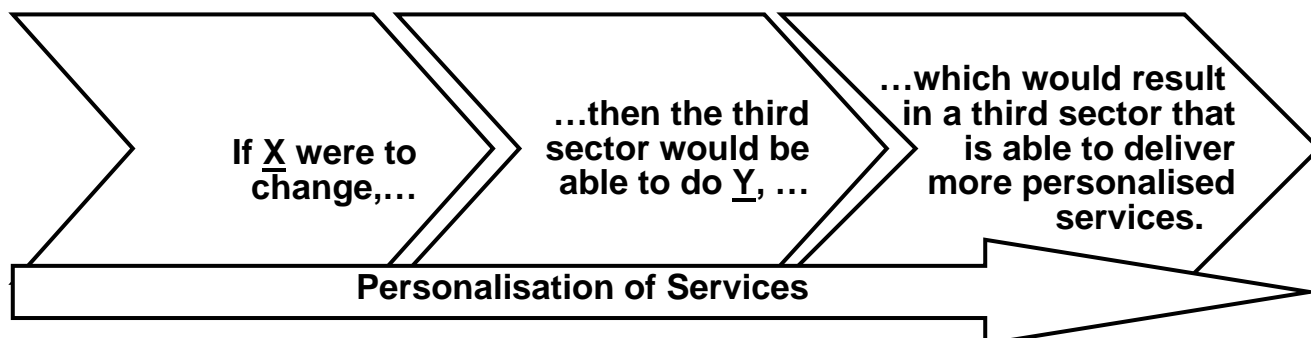
Personalisation may well mean third sector organisations have to change the way they work. These changes may lead to savings, but could also lead to short term costs. There could be a range of implications for organisations including, for example:

- The recruitment, development and retention of staff and volunteers;
- Business planning approaches;
- Service evaluation and review practices;
- Fundraising activities; and
- Governance structures.

### What issues have already been raised by the third sector?

Some of the challenges that our initial consultation has highlighted are:

- Selling services to individual customers instead of public service commissioners;
- Insurance cover for new ways of working;
- Managing risk, both for the individual receiving the service, and for the organisation delivering it; and
- Personalising services for an individual, even when the commissioned service still exists in a 'block contract' model.



## PRIORITY 4: How can the third sector improve outcomes through service user participation?

### KEY QUESTION: How can third sector organisations facilitate, encourage and promote participation?

#### Prompt Questions

- What is your organisation doing to promote participation?
- What are the barriers to third sector organisations promoting participation?
- What could the third sector do to help overcome these barriers?
- What could commissioners do to overcome these barriers?
- What could Government do to help overcome these barriers?
- What lessons do you think can be learnt from other service areas?
- What could be done to engage specific groups of service users?

### What does this mean?

Service user participation can lead to real improvements in service delivery and ultimately outcomes. This can be seen in terms of a ladder of participation from no control to full control:

- Full Control:** Service users control decision making at the highest level.
- Sharing Power:** Service users share decisions and responsibility, influencing and determining outcomes.
- Participation:** Service users can make suggestions and influence outcomes.
- Consultation:** Service users are asked what they think but have limited influence.
- Information:** Services users are told what is happening but have no influence.
- No Control:** Service users are passive consumers.

We are interested in ideas ranging **from consultation through to full control**. For example, within health and social care the introduction of personal or individual budgets can be seen as full control. Within criminal justice engagement may take the form of offenders taking an active role and therefore responsibility over their resettlement plans; or peer mentoring by ex-service users. It could equally relate to the victims inputting into sentence planning. In both service areas, service users and ex-service users can be involved in the commissioning of services to ensure the best possible service are provided, leading to improved outcomes for the individual and society.

### **Example – Essex Coalition of Disabled People (ECDP)**

ECDP is a User-led Organisation (ULO) working to empower disabled people to have independence, choice, flexibility and control.

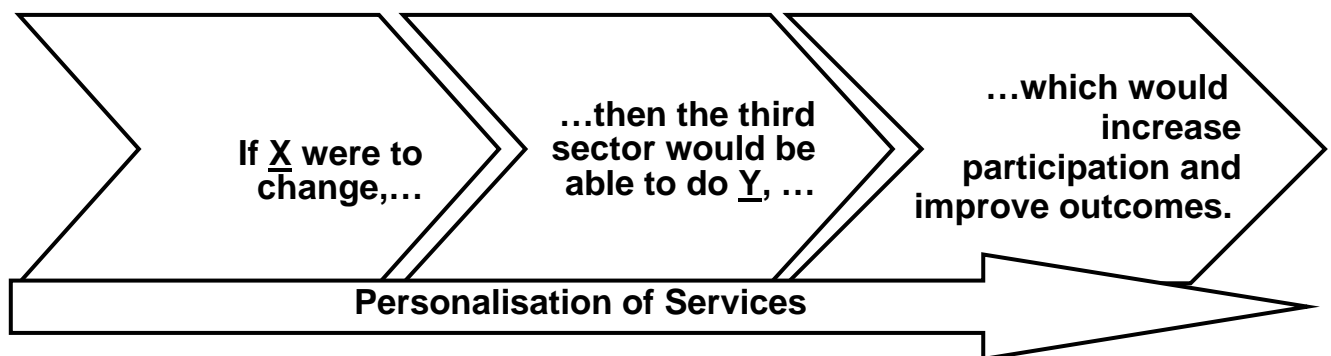
As an organisation run by and for disabled people, they have a unique and insightful perspective. This provides them with a depth of knowledge on the inequalities faced by disabled people in Essex. They use this knowledge to add value to their own work and that of the public, private and third sectors in order to affect change for disabled people.

Through support from the Department of Health, ECDP has become a mentor to a wide range of disability groups in Cambridgeshire, supporting them to establish their own user-led organisation.

### **What issues have already been raised by the third sector?**

Some of the challenges that our initial consultation has highlighted are:

- The significant potential and value of peer support but the need for a stronger evidence base;
- The challenge of moving the balance of power from staff working for organisations (both third sector and government agencies) to the individual;
- The challenge of the geographical movement of people receiving the services, preventing ongoing participation;
- The challenges of engaging individuals within a coercive environment.



<sup>5</sup> Essex Coalition of Disabled People - <http://www.ecdp.org.uk/>