

PUTTING  
RELATIONSHIPS  
FIRST



# RELATIONSHIPS: THE FIRST MILE NOT THE EXTRA MILE



**By David Robinson**

In our Putting Relationships First cell, we've been exploring how to make relationships central to our society and in our services and organisations, because people cannot thrive without good relationships. David Robinson, our thought leader for the cell, writes here about why this is important and what we've learnt.

Too often, relationships are the last thing we think about when they should be the first.

Take hospitals. Over the last few years, they have been in almost constant crisis. Even now, as politicians tell us that the worst of the pandemic is over, patients are still waiting for ambulances, waiting in ambulances, stretchers are double stacked in stone cold corridors, there's standing room only in A & E, red alerts and closed doors.

Distant ministers when challenged say that the NHS will 'get through this'. Of course it will, in the sense that it won't perish with a bang like a burst balloon, but the deep tissue damage to patients and staff will be grave and enduring.

Covid is an exceptional driver, but the crisis is not novel. The NHS teeters on the brink every winter. Paramedics, triage staff and

receptionists suffer the harsh brunt of our understandable but misplaced anger. These problems are not of their making and the solutions are not within their reach. In fact, a part of the long-term answer to the hospital crisis doesn't lie in the hospital sector at all. Or even in the NHS as currently configured.

It lies in the before and after. In reducing the need for acute admissions wherever possible. And in the safe and compassionate discharge of patients who no longer need acute care, as rapidly as possible.

## The before and after

A director at the London Hospital once told me that one in five beds were occupied by patients whose illness was caused or exacerbated by underlying, long term and, critically, *preventable*, conditions. We know that health messages, preventing the

preventable, are best received from people in our own community, people we like and respect, people, in short, with whom we have a good relationship. Community-based health education, ‘mobilising the bonds’ as Amitai Etzioni says, reaches the parts, and works in ways, that institutions cannot.

We also know that, even in this time of crisis, at least ten per cent of our hospital beds are occupied by people who are not ready to cope alone but don’t need acute care. Better by far for them to be properly supported in their own homes or in a community setting.

*Both the before and the after are all about relationships: the relationships in the community. The relationships between communities. The relationships that link people, place and service providers.*

## **Relationships, relationships, relationships**

Repeatedly in our Better Way cell on putting relationships first, we have heard brilliant stories about how communities and organisations are working together, or running services, doing difficult things, achieving extraordinary outcomes, with

strong relationships as the constant thread joining people to place, services to people, and people to one another. We have talked about:

- making relationship-building the purpose of our work.
- turning organisations into communities, not machines.
- seeing people as the solution, not the problem.
- building good relationships in adversity and conflict.
- relational leadership.

But – and here’s the rub – our brilliant stories are mostly one place wonders, inspiring exceptions, even though problems like the hospital crisis affect everyone everywhere. Social change at scale invariably begins with small acts and distributed players. Place by place activity generates well-informed, deep-rooted progress. But such radical incrementalism isn’t always sufficient. Our task now is to supersize the learning and turn common sense into common practice.

Our cell meetings have discussed the barriers: culture and path dependency, leadership models and systems, and the importance of ‘being the change’ –



demonstrating the qualities that build trust and share power. We have talked about how relationship-building can be ‘stamped out’ by command and control practices and targets and how this can be challenged by changing the norms, for example by including relationship building in job descriptions.

Leaders have the power and responsibility to set a new culture, say Better Way colleagues. Change is a continuous process. It must involve informal as well as formal behaviours. ‘The only thing of real importance that leaders do is to create and manage culture. If you do not manage culture, it manages you, and you may not even be aware of the extent to which this is happening,’ says Professor Edgar Schein.

Overwhelmingly our conversations have been realistic, at times painful, but also regularly, cautiously optimistic. Loss and isolation have reminded us all how much we need one another. Mutual aid and the burgeoning informal community support has shown us, again and again, the power

and potential of human beings being human, caring for, with and about one another.

It is inappropriate to talk about ‘opportunity’ when people are suffering, but behaviours have shifted, mostly if not everywhere, and so far temporarily, from a ‘me to we’ society in the last two years. These behaviours won’t last if we don’t act to embed them, but we could emerge from this dreadful period with the knowledge, and the evidence, to tackle old problems and to meet new ones with fresh conviction and authority. Relationship building is the better way.

**David Robinson is the Co-lead of the Relationship Project and a founding member of a Better Way.**

# PUTTING RELATIONSHIPS FIRST IN EAST CAMBRIDGESHIRE



**By Graeme Hodgson**

**A key lesson from our Putting Relationships First cell is that it's important to make relationship-building a core operating principle and central to each job and to the workplace culture of every organisation. Graeme Hodgson writes here about what they've been doing in East Cambridgeshire to put this into practice.**

I have always believed that we are stronger together and by embracing diversity and engaging in meaningful conversations and relationships across the barriers that sometimes divide us, almost anything is possible.

When I was asked to take responsibility for a large-scale place-based programme bringing together a dozen different innovative projects in Adult Social Care, I immediately knew that building the right relationships with stakeholders was going to be essential for success. That meant relationships not only with partners and providers in the local health and care system, but (especially) with local residents who would be key to a co-designed, co-created set of solutions that would help them do the things that mattered to them, in the places they called home, with the people they chose to do them with.

That's right, I was given an opportunity to put into practice the Social Care Future vision in the form of a programme called Care Together (initially dubbed Happy at Home), and knew that the insights and exchanges made possible by participating in online events promoted by a Better Way were going to help me do just that. The aims of Care Together are to:

- work with local people and services to design a system which makes it easier for people to access support;
- improve the way that organisations deliver care and support, and how people access services;
- raise awareness of local care and support resources;
- give people more choice of local support and more options for paying for help if they are unable to manage this themselves;
- support people to be as independent and happy in their own home as possible.

The two councils I work for are facilitating a stronger relationship between residents needing care and their personal assistants and communities, working in a variety of ways. For example, we are seeking to change the situation where domiciliary carers often change from one week to the next and no real lasting relationship is built. Direct payments to people needing care are a standard option, but this comes with what can be a heavy and undesirable administrative burden as a direct employer, which many people, particularly older adults, shy away from. As part of a larger programme of changes, residents are instead being offered Individual Service Funds, through which a third party takes away the administrative burden, but people needing care still retain direct control over who becomes their carer and what services they access, with flexibility to change when they wish to. The councils have also commissioned a Direct Payment Support Service to give advice for those who do want to take full budgetary control.

We are proud to be working with Community Catalysts to enable carers to become self-employed, so they are better able to develop strong, consistent relationships with those they care for, particularly in under-served rural communities, serving the local population with minimal travel time, thus generating a smaller carbon footprint than traditional home care models, which often see workers commuting long distances by car.

We build relationships in other ways, too, particularly through the social connecting role of community hubs and community organisers and mutual aid groups. For example, we have a network of Community Navigators who signpost people to local services and activities, with the aim of early intervention.

We build relationships with service users through co-production, for example through Healthwatch Partnerships Boards, and they work with providers and people with lived experience at the very beginning of designing what they commission.

We also seek to build good relationships with central government, the NHS and other local authorities and, as a result of the trust this has created, have been able to improve care, for example directly providing PPE and Covid-19 vaccinations to personal assistants on the same terms and at the same time as they were made available to NHS and care home staff.

The council has also been looking at how to direct more resources to relationship-building and to measure relationships and their outcomes, not outputs. To help us measure the right thing we ask service users: 'What does good look like to you? What is it you want to do? How can we help?'

It is only by establishing meaningful relationships between members of the public, providers, local authorities and the voluntary and community sector that we can move forward with truly person-centred, place-based solutions that generate the outcomes people are seeking.

**Graeme Hodgson is a Commissioning Manager in Adult Social Care at Cambridgeshire County Council and Peterborough City Council and a volunteer for Care Network Cambridgeshire as well as being a local community organiser, Scout leader and father of four.**

# UBUNTU!



**By Olivier Tsemo**

**It's important to demonstrate and champion human qualities, for example kindness, warmth and honesty, in what we do, we've concluded in our Putting Relationships First cell. Olivier Tsemo writes here about what this has meant in his work in Sheffield.**

'Ubuntu' is a Bantu term that translates as 'humanity'. It could also mean 'I am because we/you are' or 'humanity towards others'. It is this philosophy that drives everything I do.

When I was asked if I would write a short essay for this collection, uncertainty flooded through me. Firstly, I didn't think anyone would be interested in reading about my philosophy in life and also my work in the community. Secondly, I have never felt comfortable writing about myself, I am an active and evaluative kind of person. I am still uneasy about writing this article, but I do feel that I would like to embrace this opportunity to share with you my collective work with the community.

In 2015, after many years of working as an executive mathematics consultant, I volunteered to become the CEO of SADACCA, the Sheffield African and Caribbean Community Association, a registered charity that has been in operation since 1955, and which now provides a wide range

of activities and services. This includes an education programme – which has been of particular benefit to women – and a variety of measures designed to tackle deficiencies in mainstream services in response to the cultural and social needs of the community, including day care facilities with a domiciliary care and lunch club for the elderly, a Saturday school and an advice service designed to cater for the needs of the African and Caribbean community. SADACCA Studios has professional recording studio facilities, production and rehearsal rooms and instruments, and music producers and recording engineers. All of this involves a great deal of effort with a very minimal and inadequate financial resource base.

It was a period of financial instability and inadequate funding leading to minimum service delivery to the community. Relations between the charity, its leadership, the local council and mainly the African and Caribbean community were at their lowest and reflected discontent, brought about by a

culmination of years of distrust and the loss of confidence between the local council and the African diaspora community.

A new direction of travel was urgently required.

SADACCA had its own relationship problems with the community. As Chief Executive, I received complaints, mainly from community members, about the quality of care they had received from staff at the organisation. For example, there was an increasing number of elderly people of African origin not receiving satisfactory care at the day care centre due to funding cuts from the local council.

I decided to approach leaders at the council to engage in meaningful conversation with the aim of creating a safe space where open and transparent discussion could happen. To my surprise, I realised that I was knocking on an open door. They were welcoming and very accommodating. I was also reassured at my first meeting that they, too, wanted to build an organisation which reflected diversity in the community. My engagement with city council leaders reduced the trust gap with the community hence creating opportunity for more engagement with the young and the elderly people from the African diaspora.

The objectives of our meeting had two aspects, firstly to establish a working group which comprised of the Council Community Team and wider community representatives. Together, we organised and delivered a series of events and other activities which are still ongoing. These initiatives were extremely successful. Not only did the number of participants from this community

increase significantly within a short period, which continued during subsequent years, but also the level of support from the council increased as well.

It is fair to say that up until this time the council staff knew very little about the different issues facing the African Diaspora community, or of the racial discrimination they were experiencing on a daily basis. Equally the African diaspora community knew very little about the council and their operations.

I was confident that I could facilitate the communication amongst diverse audiences. I was already committed to promoting justice and equality within the community and to ensuring that the most vulnerable had access to good quality care. One of my primary roles as community leader is the promotion of racial equality. It is also one of my professional duties not only to challenge injustice, promote fairness and equality, but also to ensure that we can all be instrumental in striving for the changes that we wish to see.

We put relationships and people first in everything we do and now have a real opportunity, in line with Sheffield City Council and the NHS five-year plan, to develop solutions that engage by providing innovative, appropriate services in the community for the community with a goal of creating happier, healthier and more engaged communities. As we have renovated and diversified our provision, we have further increased the number of people we are able to assist. We help roughly 300 people a week, responding to a variety of needs, and this number is set to grow further with the rise in living costs



and the ongoing impact of Covid-19. We also provide personal care to older people living in their own home in the community. Our SADACCA Daycare service is a social and healthcare provider for the African-Caribbean citizens of Sheffield and has won twice the Prestige Award for Community Care Centre of the Year in 2020 and 2021. Our services are focused on the wellbeing of this group, and the prevention of their social isolation. The service delivers, assists with and monitors their health needs through craft activities, day trips, health and nutrition workshops and signposting to other services.

When asked what piece of wisdom I would give, I always speak about the need for

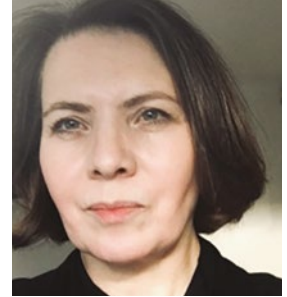
people to think more collectively. We need to constantly ask the question, 'What is it we can do together?' I grew up in the Kingdom of Bayangam in the Grassfields region of Cameroon where the words Muntu/Bantu/Ubuntu are commonly used.

It is the idea that I am only human if I recognise the humanity in others. It is this collective notion of life which I think we have lost.

**Olivier Tsemo is the CEO of SADACCA which provides community and health services for the African and Caribbean community in Sheffield.**



# THE POWER OF KINDNESS



**By Jenny Sinclair**

**A key message from our Putting Relationships First cell discussions has been how important it is to demonstrate and champion human qualities, for example kindness, warmth and honesty, in what we do. Here, Jenny Sinclair gives her view on kindness.**

‘We became more human – people were offering to help each other, delivering letters, doing errands and giving lifts...it wasn’t like that before. I think people had forgotten how to be kind.’

That comment on the early days of the Covid-19 pandemic was from my friend Mary. It took a crisis to remind us that being kind to each other is vital for our wellbeing. But that flush of neighbourliness during lockdown waned so quickly. Why do we keep on forgetting to be kind?

The answer, I think, lies in modernity, which has changed our culture both for good and for bad. We’ve seen vast improvements in efficiency and dramatic declines in discrimination. Some of us have seen huge prosperity. We can order anything directly into our homes. We enjoy the ‘freedom to choose.’

And yet, modern life is often unkind. Loneliness has increased, not just among the old but sharply among the young. More and more psychological pathologies are emerging, and our existential pain is increasingly medicalised.

Inequality has got a great deal worse. And as life has become more transactional, people trust their neighbours less.

We’ve been groomed into a false promise of freedom. A philosophy of hyper-individualism pits us against each other. The centralised state categorises us according to our rights, and the market commodifies us. The digital paradigm exacerbates this, as the algorithms of Big Tech (in both market and state) push us into ever narrower and ever more closed-off groups.

We’re increasingly estranged from each other’s different backgrounds and opinions. Schooled to focus on the self, we become less and less dependent on each other. Amidst this dehumanised mass of rights-bearing consumers, kindness struggles for attention.

For a few months in 2020, we were inspired by a surge of neighbourliness. It felt strange, but natural. However, it didn’t stick. The offers and expectations of kindness were too distant from the all-pervasive hyper-individualistic paradigm. We had forgotten how to be kind.

What is kindness anyway? In its etymology, it's related to 'kin', as in the kinship of family or nation. And, besides this sense of belonging, it also has roots in the Judeo-Christian concept of *chesed* which translates as 'loving-kindness' – giving oneself fully, with love and compassion.

Properly understood, kindness is ultimately loving-kindness: the practice of love, manifested in warmth, tenderness, compassion, honesty, generosity and self-sacrifice. These are virtues encouraged by interdependency – the less mutual responsibility we have, the less likelihood of developing the habits of kindness.

True kindness is not always obvious. When my son was eight, he commented on a very badly behaved boy in his class: 'Mum, Robert does his own ironing.' I was horrified: how could his parents be so negligent, and so unkind?

I was wrong. Robert's 'negligent' adopted parents understood that what this little boy needed was confidence. They knew it would be a kindness to help him develop competence. Robert is now a Head Chef in the Royal Navy.

Kindness should uphold the dignity of the person. 'Rescuing' someone from responsibilities is not kind. That aspect of kindness is easy to forget in a marketised society bent on pleasure and avoiding pain. Think of the #BeKind hashtag trends on Twitter, which encourages random acts of kindness, empathy and generosity.

But should we #BeKind to our friends no matter what they do? If someone is pursuing a foolish path, is it kinder to say nothing or to tell the truth? Which is more respectful? The loss of social credibility is

a risk, but we are in trouble when we place a higher value on loyalty than on right and wrong.

Authentic loving-kindness has a radical political edge. Because it makes us more interdependent and less reliant on economic products and government services. It builds relational power, strengthening our resistance against the powers that commodify and dehumanise.

But some activists intentionally misuse the meaning of '#BeKind' to close down debate. By framing opposing political positions as unkind, people are shamed into submission. This tactic of corrupting language is dishonest and coercive. It's also counterproductive, pushing dissent underground.

As Jonathan Haidt says, to develop sustainable solutions, opposing views need to be tested in the robust, free exercise of conscience and in mutual accountability. Kindness – in its true sense – is vital for intelligent politics.

Mary was right – we had forgotten how to be kind. We would do well to reacquaint ourselves with the fundamentals, as set out in 1 Corinthians 13:4-7:

'Love is always patient and kind; love is never jealous; love is not boastful or conceited, it is never rude and never seeks its own advantage, it does not take offence or store up grievances. Love does not rejoice at wrongdoing, but finds its joy in the truth. It is always ready to make allowances, to trust, to hope and to endure whatever comes.'

**Jenny Sinclair is founder director of Together for the Common Good, a UK charity dedicated to civic and spiritual renewal.**

# EMPOWERING PEOPLE THROUGH USER-LED ORGANISATIONS



**By Khatija Patel**

We have talked in our Putting Relationships First cell about the importance of recognising and showcasing the strengths in the people we serve and giving them leadership roles. Khatija Patel writes here about the role of user-led organisations in this respect.

I am always in awe of how the disabled people's user-led organisation that I am now CEO of came into being, and what can be achieved when people with lived experiences are empowered!

In 1997, it was the ambition of a group of disabled people to access services under one roof and receive up-to-date, accurate information, advice and guidance. Their ambitions were to develop person-centred approaches to care including developing, co-designing and delivering additional accessible services.

It helped that at that time there was a national movement to support the establishment of centres of independent living. However local challenges were many, yet the group persevered, challenged and negotiated with statutory bodies. In partnership, securing millions of pounds of funding to build a state-of-the-art Independent Living Centre.

When council officers showed them dozens of sites for the build, hidden away in industrial estates, that were not suitable in terms of access and transport links, the group refused these even with the threat of withdrawal of funding. Until a suitable site that ticked all accessible boxes was found.

During the build, disabled people worked with contractors, architects and stakeholders ensuring the design and infrastructure were inclusive and accessible. This included where light switches and door handles were placed, to the colour of paint on the walls.

The centre opened in 2000 and during the build the group developed a user-led membership governance structure, registered as a charity, changed its name from Sandwell DLC to 'Ideal for All' and secured further funding to deliver independent living services under the management of people who use the services.

The centre became a hub for local disabled people and is recognised nationally by government as an example of what can be achieved when working in partnership with communities. With councils and health professionals visiting from around the country.

By 2012, Ideal for All was delivering support to thousands of people, working within its user-led ethos, and developed further services and activities: an information, advice and guidance hub point, a drop-in duty service for low level mobility aids, an occupational therapy and a sensory equipment service. We also deliver strategic engagement and enablement, co-production, consultation on national strategies like benefit transformation and personalisation and supported the first person in Sandwell to receive their personal budget as a 'direct payment'.

Ideal for All brought in millions of pounds of investment into the borough, developing – to name but a few – three derelict pieces of land into accessible market gardens and therapeutic gardening spaces and trialling social prescribing as part of 'allotments on prescription'.

However, despite all the successes, lessons were learnt when austerity measures hit and 'market shaping' meant tendering for service delivery.

In 2013, the core work of the charity and the management of the Independent Living Centre were reviewed by local politicians and council officers, culminating in a substantial loss of funding and service delivery. Ideal for All were held to ransom over contracts and had to relinquish the leasehold of the Centre. This was a difficult time for the charity where we asked ourselves, 'Should we wind down or review options and carry-on invaluable work?'

The Board and staff (all on redundancy notices) rallied and worked hard to restructure and focus on core strengths, continuing to negotiate with the 'powers that be' and source additional opportunities. We also responded to the environment with a new way of working, ensuring the user-led ethos was embedded throughout.

As an employee, I saw the determination of disabled people coming together to challenge the authority's intended way forward, meet with politicians and officers,

develop petitions and even get their voices heard on local news channels. They supported me to take a leadership role in the charity, focusing on the core of our work to help people to live independent lives and be heard.

For me and the fantastic staff team it was a very difficult time, a roller coaster of emotions, managing conflicting priorities of job security and wanting to ensure the continuation of the invaluable work of the charity.

Six years on, resilience has shone through, and we have a thriving disabled people's user-led organisation, with doors remaining open during the pandemic, which has widened its geographical reach supporting around 2,000 people per year with Direct Payment Support Services and around 5,000 people with integrated health and wellbeing support, comprising peer support and condition management, community engagement and support, employment and skills development and mental health and well-being services, incorporating the fantastic horticultural sites into service delivery.

The charity has built long-lasting partnerships and is a part of established (co-founded) consortia, which means, together, we can reach further into communities delivering social and health care outcomes.

We are ambitious for our innovative social enterprise activities and the most recent business plan aims to achieve sustainability and ensure we are here as long as disabled people and people who need the support to be empowered exist.

What has struck me most – and it is still prevalent in our society today – is that too many disabled people and people who require support must challenge and fight for their statutory rights. It takes determined people who run user-led organisations which empower individuals and communities with information and support to show there is a better way and make life better for all of us.

**Khatija Patel is the CEO of Ideal for All, a user-led registered charity and social enterprise based in Sandwell and working to make life better for disabled, elderly and vulnerable people and their carers in the West Midlands and neighbouring regions.**

# SEEING PEOPLE AS THE SOLUTION NOT THE PROBLEM



**By Edel Harris**

**Edel Harris shares her insights here on how important it is to recognise and showcase the strengths in the people we serve and give them leadership roles, a key theme emerging from our Putting Relationships First cell.**

It is an interesting time for those of us working in the social care sector. And a very interesting time if you are an individual or a family who require some form of care or support.

Mencap's vision is for the UK to be the best place in the world to live a happy and healthy life, if you have a learning disability.

For this vision to be realised we need to ask – what sort of society do we want to live in? One where everyone who needs care and support to live a happy and healthy life gets the support they need when they need it, or a country where disabled and older people must be grateful for whatever they are given, often delivered by low-paid and undervalued workers operating within a system fixated on time and task.

As the parent of a young man with a learning disability who employs his own personal assistant, as a family we want a social care system that is genuinely personalised with the person firmly in the lead. A system that is based on individual strengths and assets not the current deficit culture within which we

operate. Let's think about measuring impact rather than input (if we need to measure something – my son is the only member of our family who has 'annual outcomes'!) and promote a system that encourages community innovation by providing the right environment for this to flourish.

On 1 December 2021 the UK Government published the White Paper entitled, *People at the Heart of Care*.

There is a lot to like in the White Paper – the way it was written with a focus on the 'I' statements was welcome, and the sentiments expressed throughout are worthy and hard to disagree with.

However, there is little acknowledgement of the current pressures – real pressures which we are experiencing right now – that are having a negative impact on people with a learning disability and their families.

Despite the warm words in the White Paper the overall sector narrative is still founded on words such as challenge, drain, deficit –

people who require support being viewed in a negative rather than a positive light and funding requirements seen as a drain on the public purse as opposed to an investment in people's lives and an investment in a vibrant and caring society.

I was surprised not to see more in the White Paper about commissioning practices, which are often inflexible, risk averse, inconsistent and lack a personalised approach to the type of support offered. Mencap is concerned that many local authorities continue to commission support based on the lowest cost rather than with a focus on other essential factors such as quality and based on achieving certain outcomes for the people who require the care and support. The trading in a commodity – an hour of care – does not chime with the 'people at the heart of care' intentions in the social care reform plans nor the principles of an integrated health and care system.

Users of social care and their families must help drive the design for local services, putting the individual at the centre by creating a commissioning model that focuses on outcomes rather than input and 'hours of care'. Give people greater choice to source the support that they want and, where someone has a personal budget, greater control over how this is spent. My son's PA recently took him on a trip to Old Trafford to watch a football match – I can't imagine that experience appearing in a social care contract tender process!

We need to refocus on prevention and early intervention. We know from our own family experience that a little support at the right time, determined by the person themselves, can go a long way and we must do more to

help people avoid crisis situations which result in expensive interventions or people ending up in in-patient units when this is not the best place for them to be.

People being in the lead also means ensuring everyone has access to information about their rights and the support that is available to them. This should include help to understand and exercise these rights, including support to challenge any decisions taken by others which impact on their life. We also need to invest in local decision-making and take a few risks to help enable people with a learning disability to flourish as active citizens. We understand the need to keep people safe, but this should be balanced with their right to live a happy and fulfilled life.

Mencap's current Big Plan (our organisational strategy) puts people with a learning disability in the lead. Whether that be at a personal level, where everyone receiving support decides what that support looks like and who should be involved in supporting them, or whether that is determining and leading our national campaigning activity.

As one of my colleagues who has a learning disability recently said: 'I love being part of Mencap's leadership team. I have learned so much but the best part has been contributing to the Big Plan and feeling like I am using my experience and skills to make a difference. I don't tell people that I meet now that I have a disability, I tell them that I am on the leadership team at Mencap. It feels good.'

**Edel Harris is the CEO of Mencap.**



# FREEING UP THE FRONT-LINE BY LIBERATING THE METHOD



**By Mark Smith**

**A key theme from our Putting Relationships First cell is the importance of giving freedom to the front line to build relationships so they can understand what's needed and do what's right. Mark Smith writes about what they've been doing in Gateshead to make this happen.**

It all started with a (wonderful) soul in the Council Tax Recovery section of Gateshead Council – let's call him Jim – who decided he would try to help a single mum – let's call her Juliet – who had fallen behind in the payments. The de facto purpose of his department was to get money from Juliet and others like her. And, if they don't pay, the normal method was just to send the bailiff round.

But Jim was one of the people working in that section who said, this isn't working, this doesn't feel right.

So he rang Juliet and just said, 'Hi, I'm from the Council, I'm not chasing you for the money, I just wondered what we could do to help?'

It turned out that Juliet was caught in a trap, and when he asked her this question she was so moved she cried. The underlying problem she was facing was that she needed to move because she was literally frightened of her neighbours, but because she owed a lot of rent, the Housing Company wouldn't let her. She

used to get by with two zero hours contracts, with her mum looking after the kids. But her mum decided she didn't want to babysit at night any longer because she was also really frightened of the neighbours. So Juliet had to reduce her hours and that's when her financial problems began.

Her mental health also declined, the children became disruptive at school, Juliet couldn't cope and the discussions with social services turned to the children being removed and also towards homelessness...

Jim learnt that if she could move, she had a chance ... more hours, more money, a new start. He started a train of events which not only gave Juliet and her family a new beginning but also changed how we work in his section and more widely in Gateshead too.

Jim called me about Juliet and we worked with the housing department to allow her to move. But as a result I also went down to the Council Tax Recovery section and

listened to lots of phone calls and we did a bit of research and discovered that only four per cent of the people we were chasing wouldn't pay and 96 per cent just couldn't pay, with not paying being a signal of a deeper problem, yet we treated both groups as if they were the same.

This was not something that could simply be tweaked, so we set up a small six-month prototype for doing things differently with a small team from Citizens' Advice, the Department of Work and Pensions and the Council Tax Recovery team. And we gave them the freedom to do things differently. There were constrained by two rules only – do no harm and don't break the law – and we told them they could do anything else they liked for a list of 40 people who would otherwise be about to get a bailiff visit.

We also 'liberated the method' – that's what we called it – giving them four operating principles or freedoms:

- Front-line authority to make decisions in their work, without having to escalate things to my office.
- No assessments. Instead, they should ask people 'what can we do for you?' and try to discover what a good life looks like to them.
- No referrals – because we know that this just leads to people going round and round in circles. Instead, the team pooled expertise so they could establish a relationship with the people who weren't paying council tax and solve the underlying problems together.
- Measure only to learn and improve, not to keep scores or to make a point. If we learn something's working, that's great, and if it isn't, we adapt.

We gave that team a pot of money and we gave them six months and asked them to tell us what they learnt. The team found that, like Juliet, the people they were working with were already struggling, many had been going round in circles for many years, moving from service to service in desperation. They were able to get 70 per cent of those they worked with out of it – for example, into work, into education and onto the benefits they were entitled to. They also built connections locally, working with lots of third sector organisations as partners because they know a lot more than we do about what's going on.

We've since tried to develop the same approach through homelessness and through area-based working and it's setting the platform for reform across the council and – I'd like to think – beyond.

What we've found is that those two rules and four principles have really stayed with us. They haven't been adapted. What we're now trying to do is make that much more normal and we're finding it is beginning to get some traction, though the pandemic hasn't helped.

The truth is Jim is a hero but we also have buildings full of Jims whom we must set free before they give up, leave and take up less stressful and frustrating careers. And there are many Juliets out there whose lives can be helped if we 'liberate the method'.

**Mark Smith is Director of Public Service Reform for Gateshead Council.**