



Evaluation of the Practice Development Unit

November 2021

Sophie Wilson, Director of BVSC Research

Becky Nixon, Director of Ideas to Impact

Susannah Wilson and Clare Harewood, Learning and Evaluation Leads, BVSC Research

Executive summary

The Practice Development Unit (PDU) is run by Nottingham Community and Voluntary Service (NCVS) in partnership with Opportunity Nottingham. Opportunity Nottingham is part of the national 'Fulfilling Lives Programme' funded by the National Lottery Community Fund. The PDU was established in October 2017 and its mission is to work towards the creation of a "thriving and connected workforce," aiming to:

- Improve the skills and knowledge of professionals working in the field of multiple disadvantage.
- Facilitate the sharing of expertise, good practice and resources across sectors.
- Promote and facilitate collaborative learning across sectors.
- Create opportunities for promoting innovation and working practices across Nottingham.
- Improve outcomes for beneficiaries through contributing to system change and increased coordination and collaborative working between agencies.

At the core of the PDU's activity, is a belief that the needs of people experiencing severe and multiple disadvantage are best met by services which operate within a connected, informed system. In recent years, the Human Learning Systems (HLS) approach (Lowe and Plimmer, 2019) has emerged as a challenge to established means of organising public services. HLS is seen to have at its core a fundamentally different set of beliefs and management practices which enable systems to engage with the messy reality of how outcomes can be achieved in real lives.

The aims of this evaluation were to:

- Understand what impacts the PDU's activities have had on the working practices and collaborative approaches of professionals and volunteers in Nottingham and Nottinghamshire.
- Understand how supporting PDU activities has impacted on its contributors, including Steering Group members, event speakers, and volunteers with lived experience of multiple disadvantage.
- Identify "unintended" or "unexpected" impacts of the PDU's activity and analyse its potential to influence change outside of its core scope ("trickle-down effect" and opportunities for growth / further development).
- Assess the success of the PDU in contributing to Opportunity Nottingham's system change aims.
- Understand if and how the PDU is promoting a Human Learning Systems (HLS) approach in Nottingham and Nottinghamshire.

Methodology

A mapping and data collection exercise helped to ensure we had a shared level of understanding and a starting position to gauge progress against objectives. In a complex system, changes tend not to have one single cause, so we used contribution analysis¹ to identify the PDU's impact against outcomes.

Quantitative data provided by the PDU was reviewed and summarised. Qualitative data was collected using the following methods: workshop with Steering Group members, focus groups with

¹ https://www.betterevaluation.org/en/plan/approach/contribution_analysis

participants and contributors, in-depth semi-structured interviews, focus group with Experts by Experience and Beneficiary Ambassadors, and a Survey Monkey questionnaire.

Achievements

Over the four and a half years that the PDU has been operating, attendance at events held by the PDU has increased dramatically. From engaging with 164 attendees at events at the start of year one, to 385 in year four, it is clear that the PDU's workshops and communities of practice have become a valued resource for professionals across different sectors. Whilst there has been greater representation from the voluntary sector, monitoring shows that there has been a year-on-year increase in statutory sector participation and an improved balance of professionals from differing fields of practice, although issues were raised by participants about the lack of statutory sector staff in some areas of the PDU's work.

The gap between voluntary and statutory sector participants had almost disappeared by Year four, which shows that the statutory sector has understood the value of engaging with the PDU, which in turn is of huge value to the voluntary sector. From looking at the data, it's clear that once the PDU's online hub was up and running, it was used enthusiastically by the voluntary sector from the start. However, interest grew substantially in year four, which coincides with more people working from home and using online resources more regularly.

Key findings

Analysis of the qualitative data highlighted the following.

Aspects of the PDU that people highlighted as valuable to them were:

- The **mix of organisations** involved in the learning
- The **involvement of people with lived experience**
- The **innovation**, including that it has created what people identified as a **unique resource and system**
- The **commitment and skills** of people involved
- That the **resources are free** and available as a resource bank that people can draw on when needed
- The mix of **different types of learning** to provide flexibility for participants

The PDU is **supporting individuals** to develop their own personal practice through building:

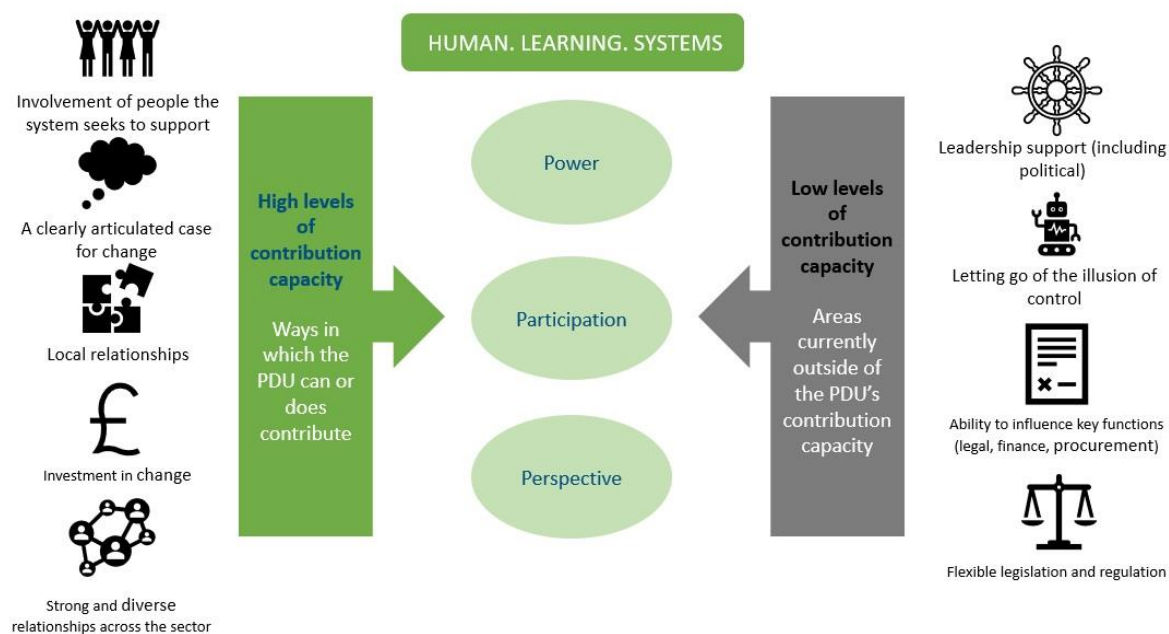
- **Awareness and understanding** of multiple disadvantage, and of the challenges that people face.
- **Self-reflection** through being able to reflect on own practice in a safe environment.
- **Confidence** in being able to work with people facing multiple disadvantage.
- **Knowledge** of best practice and current thinking.
- **Partnerships** with a range of organisations supporting people facing multiple disadvantage.
- **An evidence base** helps to give people confidence about their approaches as well as providing reassurance to commissioners of services.

The PDU is **impacting on organisations** through:

- **Awareness raising** – in respect of severe multiple disadvantage and trauma informed practice and psychologically informed environments.

- **Signposting and referrals** – with increased understanding of other services available to support people with complex needs.
- **Casework and other joint working** – from relationships but also having a shared understanding created through learning together.
- **Adaptation** – of current systems and processes, to be more responsive to the needs of clients facing multiple disadvantage.

We found that the potential *contribution capacity* of the PDU to contribute to a **Human Learning System (HLS)** varied across the accepted conditions for change (Lowe & Plimmer, 2019). This demonstrated high levels in some aspects (such as the involvement of people the system seeks to support) and low levels in others (i.e. flexible legislation and regulation). This has been summarised in the diagram below:



Similarly, we found evidence of the contribution made by the PDU to the Opportunity Nottingham **Systems Change Plan** in the following areas:

- **Sharing learning** through developing better understanding, underpinned by evidence and research.
- **Encouraging partnership working** through providing opportunities to network and learn from others.
- **Raising the profile** about the issues that need to be addressed.
- **Driving the conversation** about complex need and individuals facing multiple disadvantage.
- **Including the 'voice' of people with lived experience** both through modelling co-production, but also through championing the voice of experts by experience.
- **Influencing strategy** to ensure that there is a city-wide commitment to supporting people with facing multiple disadvantage.

Recommendations

Based on our findings, we have made a series of recommendations which centre on:

- **Increasing the PDU's reach and impact** - build upon relationships, facilitating more practice sharing and cross-agency learning, involving all levels of staff to promote organisational change and increasing opportunities for people to get involved.
- **Capturing impact** – developing systems and frameworks to measure change, increasing follow-up activities and feedback.
- **Promoting the value of lived experience** – encouraging user involvement from participating organisations, creating supportive spaces for all participants to share relevant lived experience and increasing feedback for experts by experience to understand their impact.
- **Contributing to systems change and the human, learning system** – more emphasis on psychologically informed environments, developing modules of learning around 'Systems Leadership', replicate the successes of the PDU at a system-level, particularly incorporating statutory services.

Contents

Executive summary	2
Methodology.....	2
Achievements.....	3
Key findings	3
Recommendations	5
1. Introduction and Background	7
2. Context.....	9
2.1 Severe and multiple disadvantage terminology	9
2.2 Responding to severe and multiple disadvantage through a systems approach	9
2.3 Human Learning Systems.....	9
3. Research framework	11
4. Methodology.....	12
4.1 Outcomes mapping.....	12
4.2 Evidence and process review	12
4.3 Contribution analysis	12
4.4 Data Collection	13
4.5 Analysis	13
4.6 Ethics	14
5. Evidence review - service delivery model and outputs	15
6. Key Findings	20
6.1 Impact on working practices and collaborative approaches of professionals and volunteers	20
6.2 Impact on contributors	33
6.3 PDU contribution and attribution	34
6.4 Contributing to a Human Learning System approach.....	36
6.5 Contribution to Opportunity Nottingham's systems change aims	41
Section 7: Recommendations	47
7.1 Increasing the PDU's reach and impact	47
7.2 Capturing Impact.....	47
7.3 Promoting the value of lived experience	48
7.4 Contributing to systems change and the human, learning system	48
References	50
Appendix 1 – list of participants	52
Appendix 2 – literature review	53

1. Introduction and Background

The Practice Development Unit (PDU) is run by Nottingham Community and Voluntary Service (NCVS) in partnership with Opportunity Nottingham. Opportunity Nottingham is part of the 'National Fulfilling Lives Programme' funded by the National Lottery Community Fund. The PDU was established in October 2017 and its mission is to work towards the creation of a "thriving and connected workforce" (ibid), aiming to:

- Improve the skills and knowledge of professionals working in the field of multiple disadvantage.
- Facilitate the sharing of expertise, good practice and resources across sectors.
- Promote and facilitate collaborative learning across sectors.
- Create opportunities for promoting innovation and working practices across Nottingham.
- Improve outcomes for beneficiaries through contributing to system change and increased coordination and collaborative working between agencies.

These aims are addressed through three areas of activity delivered through five key workstreams (see Box. 1). Each of these aims align with broader 'System Change Priorities' identified by Opportunity Nottingham, as illustrated by the PDU's operating model (*PDU Strategy 2020-2022*) set out below:

PDU activity

1. **Learning Events** – provision of a platform to enable different agencies to come together, share ideas and provide mutual support as a means of implementing practice and system change.
2. **Online Hub** – hosts a collection of academic papers, reports and practice tools, providing access to both local and national research and information pertaining to multiple disadvantage.
3. **Communities of Practice** – facilitation of a professional network supporting the implementation of practice and system change through ongoing connection and dialogue.

Key workstreams

- Implementing more psychologically informed environments, including trauma informed care and strength-based approaches.
- Meaningful service user involvement and co-production of services.
- Addressing women's complex needs, including gender responsive and specific services
- Substance misuse, including new psychoactive substances and alcohol.
- Housing First and homelessness support services.

Since its inception the PDU has reached a total of 947 individuals. 473 people have signed up to the online hub and 660 have attended at least one PDU event; 186 individuals have both signed up to the hub and attended at least one PDU event. In total, the PDU has delivered 58 events, of these 37 were discrete learning events and 21 were Community of Practice (CoP) sessions. Over time, there has been evidence of the PDU's increasing reach across sectors and professional groups. Whilst there has been greater representation from the voluntary sector, there has been a year-on-year increase in statutory sector participation and an improved balance of professionals from differing fields of practice.

The PDU's diagram of its operating model (*PDU Strategy 2020-2022 v.1*) is below.

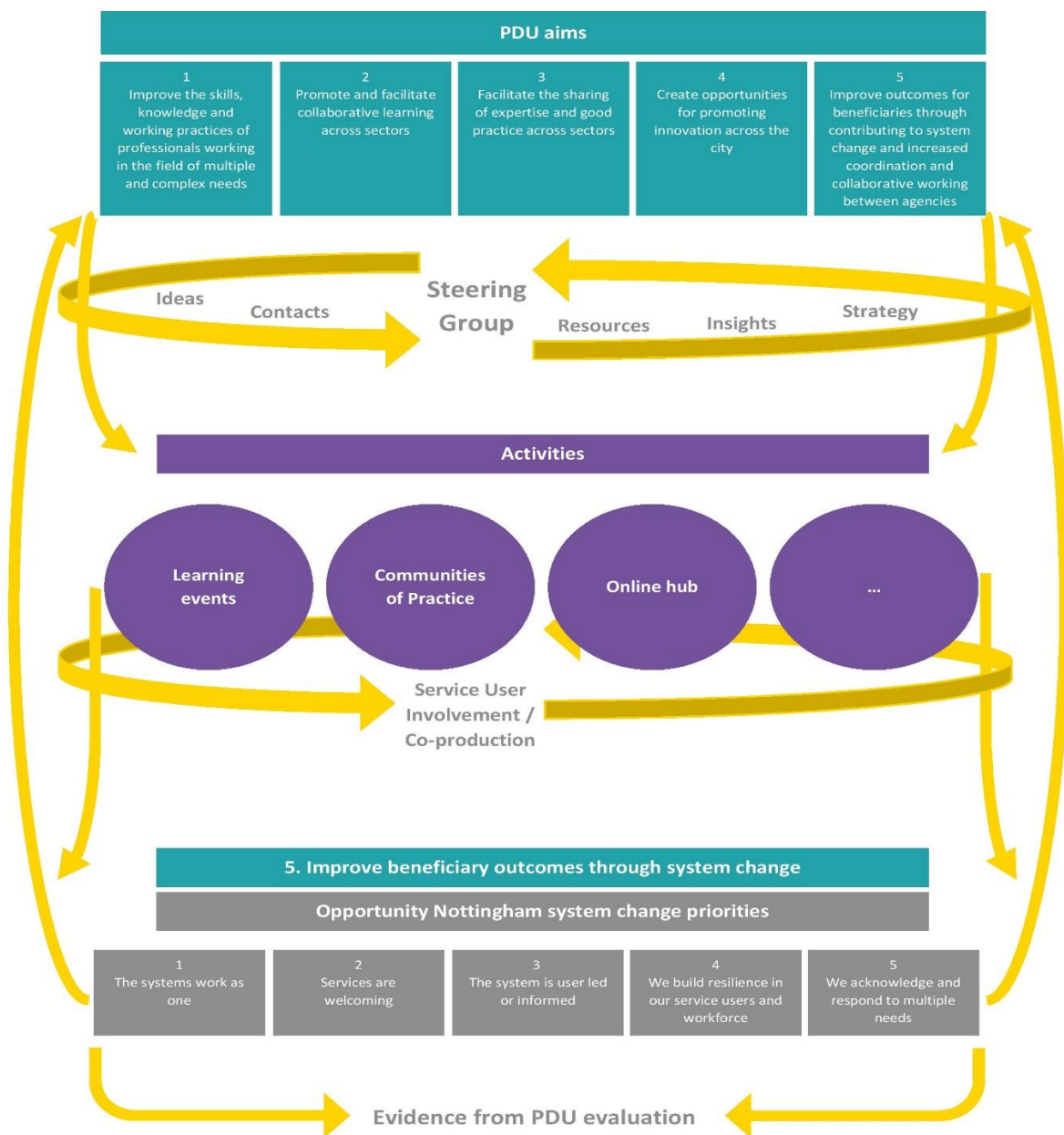


Figure 1. PDU Operating Model

In order to support with future sustainability and attracting new audiences to the PDU, it was suggested that a focus should be made on measuring the impact of the PDU, both on the development of the local workforce and the outcomes of their service users. This evaluation was subsequently commissioned.

2. Context

A literature review was undertaken to support this research (see Appendix 2, where it is also fully referenced).

2.1 Severe and multiple disadvantage terminology

The term **severe and multiple disadvantage** (SMD) is used to reflect the need to recognise the need for social and political intervention is required rather than pathologising individuals. The term has commonly been defined by the experience of two or more of the following issues: homelessness, substance misuse, mental health problems and offending behaviours². Issues are seen as interlocking, with their impact stemming from the cumulative effect of disadvantage, rather than the severity of any one issue³. For individuals, the consequence is often stigma and social dislocation, (Bramley et al., 2015), whilst for communities there are high social and economic costs⁴.

Across local authorities in England, Nottingham was found to have the eighth highest prevalence of severe and multiple disadvantage when data was drawn together from three service-based sources in 2015⁵.

2.2 Responding to severe and multiple disadvantage through a systems approach

Severe and multiple disadvantage has been observed as a ‘wicked problem’, describing complex issues⁶ such as multiple disadvantage that have many and interlinked causes and effects. Solutions to wicked problems are difficult to identify and attempts to find solutions can lead to unintended consequences which may cause further problems.

One response to this is a ‘systems approach’ promoting collaborative working across organisational boundaries, drawing on knowledge from different places⁷. A system can have multiple organisations and individuals that interact, has shared objectives, with the ability to adapt and change⁸. However, systems working can be hindered for because services are too rigid and working in silos⁹, something that the PDU aims to address.

Section 6.4 outlines some of the behaviours that have been identified as necessary for effective system working, for example around sharing power and having trusting relationships.

2.3 Human Learning Systems

Our evaluation has examined how the PDU has enabled a Human Learning Systems (HLS) approach¹⁰. This is something that in recent years has emerged as a suggestion for organising public services. It is built around three core elements:

1. **Human** - the approach emphasises the importance of relationships between those who deliver and receive public services. Emphasis is placed upon building empathy and trust and understanding individuals’ strengths and needs. Practitioners are seen to be ‘liberated’ from the

² Bramley et al., 2015; MEAM 2018

³ Duncan and Corner, 2012

⁴ Bramley et al., 2015, Fitzpatrick et al 2011; DWP 2012

⁵ Bramley et al., 2015

⁶ Rittel and Webber, 1973; Grint, 2005

⁷ Ranade and Hudson, 2003

⁸ Ghate et al, 2013, Hobbs, 2019, Obelensky, 2010

⁹ Hobbs (2019)

¹⁰ Lowe and Plimmer, 2019

traditional management structures and approach which limit relationship building. Instead the contexts, skills and capabilities which support effective relationships are enabled.

2. **Learning** - adaption is a cornerstone of HLS, with the need to respond in new or revised ways. Services must create environments in which learning is possible and encouraged so that services can adapt through a continuous process of dialogue and learning.
3. **Systems** - systems must be 'healthy', nurturing trust, openness and honesty. It is this environment which is seen to enable those within the system to coordinate activity and collaborate effectively, encouraging innovation and motivation, leading to the most effective outcomes for people in receipt of services.

3. Research framework

The aims of the evaluation were to:

- Understand what impacts the PDU's activities have had on the working practices and collaborative approaches of professionals and volunteers in Nottingham and Nottinghamshire
- Understand how supporting PDU activities has impacted on its contributors, including Steering Group members, event speakers, and volunteers with lived experience of multiple disadvantage
- Identify "unintended" or "unexpected" impacts of the PDU's activity and analyse its potential to influence change outside of its core scope ("trickle-down effect" and opportunities for growth / further development)
- Assess the success of the PDU in contributing to Opportunity Nottingham's system change aims
- Understand if and how the PDU is promoting a Human Learning System (HLS) approach in Nottingham and Nottinghamshire

4. Methodology

We undertook a mapping and data collection exercise to help develop a comprehensive understanding of the PDU in Nottingham and its approaches and produce a baseline analysis. This helped us to ensure we had a shared level of understanding and a starting position to gauge progress against objectives and the effectiveness of the approach.

4.1 Outcomes mapping

Recognising that the work was being undertaken in a complex system with many stakeholders, we used an outcome mapping¹¹ approach to identify who and what was in the scope of this evaluation and look at what we expected to change for them.

The outcomes mapping process identified who the key “boundary partners” were – these are the people that the PDU has worked with directly to influence change. We then identified “indirect boundary partners” – these are the people who have been influenced indirectly by the PDU, e.g., beneficiaries, commissioners, or partner organisations not working directly with the PDU to address its potential to influence change outside of its core scope as identified in the specification¹². This (a) firstly provided us with a map of who we expected changes to have happened for, and then (b) identified the expected outcomes for each partner, and (c) identified the mechanisms that were predicted to have caused the change. This enabled a more in-depth analysis in a complex system that recognises that there may be differences across stakeholders.

4.2 Evidence and process review

The evaluation team reviewed the available existing documentation and evidence, including the local and national evaluation of Opportunity Nottingham/Fulfilling Lives and the systems change action plan for Opportunity Nottingham, documentation from the events (including feedback) and the functionality of the website. We had meetings with PDU staff (the Unit’s Coordinator) and core support staff from Opportunity Nottingham (the Evaluation and Learning Lead), to ensure a full understanding of the work that has been undertaken since the project went live in 2017.

We undertook fieldwork to collate primarily qualitative data. Taking the outcome mapping from the first stage and using a whole-systems change and human learning systems lens, we developed topic/focus group guides for semi-structured conversations. These focussed on the impact that the PDU has had on the “boundary partners”: (a) direct beneficiaries of the PDU, and (b) contributors, and whether they could identify how the impact on them has influenced further change in their stakeholders, the “indirect boundary partners”.

4.3 Contribution analysis

In a complex system, changes tend not to have one single cause, so we used contribution analysis¹³ to identify the PDU’s impact against outcomes in the map. This took an approach of looking overall at what has changed in an organisation or individual, then identifying the PDU’s role in that change considering the other factors that may have also influenced change. This gives a more accurate picture of the organisation’s contribution rather than looking at one intervention in isolation. It also

¹¹ https://www.betterevaluation.org/en/plan/approach/outcome_mapping

¹² It was not possible within the scope of this evaluation to do a full review of all boundary partners, so identifying those important in Opportunity Nottingham’s system change aims who are not working directly with the PDU was a way of prioritising these, along with discussions with the PDU Coordinator and other key stakeholders.

¹³ https://www.betterevaluation.org/en/plan/approach/contribution_analysis

identified unintended or unexpected impacts that were not already highlighted in our evaluation framework. To analyse the PDU's contribution to change we tested:

- where the intervention is neither necessary nor sufficient for the activity to occur, but PDU involvement has improved outcomes, for example things happen sooner or to a higher quality.
- where intervention is necessary but not sufficient for the activity to occur, so other inputs in a system are also needed for the change to happen, with a need to identify the relative importance of the PDU's contribution.

4.4 Data Collection

Quantitative data provided by the PDU was reviewed and summarised.

Qualitative data was collected using the following methods:

- **Workshop with Steering Group members:** An initial workshop was held with 16 steering group members (including two PDU staff members) to collect data about their perspective of (a) what has changed for people facing multiple disadvantage; and (b) the PDU's contribution to that change.
- **Focus groups with participants and contributors:** Two focus groups were held with six individuals who had been involved with the PDU either as participants or as contributors (or both). The focus groups were designed to draw out the impact of the PDU on an individual, organisational and systems levels and its contribution to developing a Human Learning System.
- **In-depth semi-structured interviews** with five participants to explore the impact that the deliverables from the PDU have had on (a) beneficiaries (professionals, volunteers, organisations); and (b) contributors (steering group members, experts by experience, contributors to events) at an individual, organisation and system-wide level and its contribution to developing a Human Learning System.
- **Focus group with Experts by Experience and Beneficiary Ambassadors** with five participants to explore the impact that involvement with the PDU has had on the individual, and their perceptions of change at an organisational and systems level.
- **SurveyMonkey questionnaire:** a survey monkey questionnaire, based on the topic guide developed for the in-depth interviews, was distributed with a total of 45 responses received.
- **Attendance at PDU events:** the Co-Production Community of Practice, and an online learning event, Can there be a happy ending? – Service transitions and multiple disadvantage.

4.5 Analysis

We used thematic and contribution analysis¹⁴ to draw out:

¹⁴ See <https://biotap.utk.edu/wp-content/uploads/2019/10/Using-thematic-analysis-in-psychology-1.pdf.pdf>

- The impact of the PDU on professionals, volunteers, experts and contributors (skills development, collaboration, shared learning) and their organisations, including intended and unintended / unexpected consequences, working practices and collaborative approaches.
- The success of the PDU in contributing to Opportunity Nottingham's system change aims.
- The contribution made toward developing Nottingham as a 'human learning system' in respect of supporting systems change for people facing multiple disadvantage.

4.6 Ethics

A highly trained research team, with broad experience of conducting research with vulnerable groups, conducted this research. Ethical approval was gained from the BVSC Research ethics panel. No data was collected prior to participants providing informed consent.

5. Evidence review - service delivery model and outputs

Over the four and a half years that the PDU has been operating, the attendance at events held by the PDU has increased dramatically, as can be seen in Fig 5.1. As year 5 is still in progress, data was not utilised in the charts below.

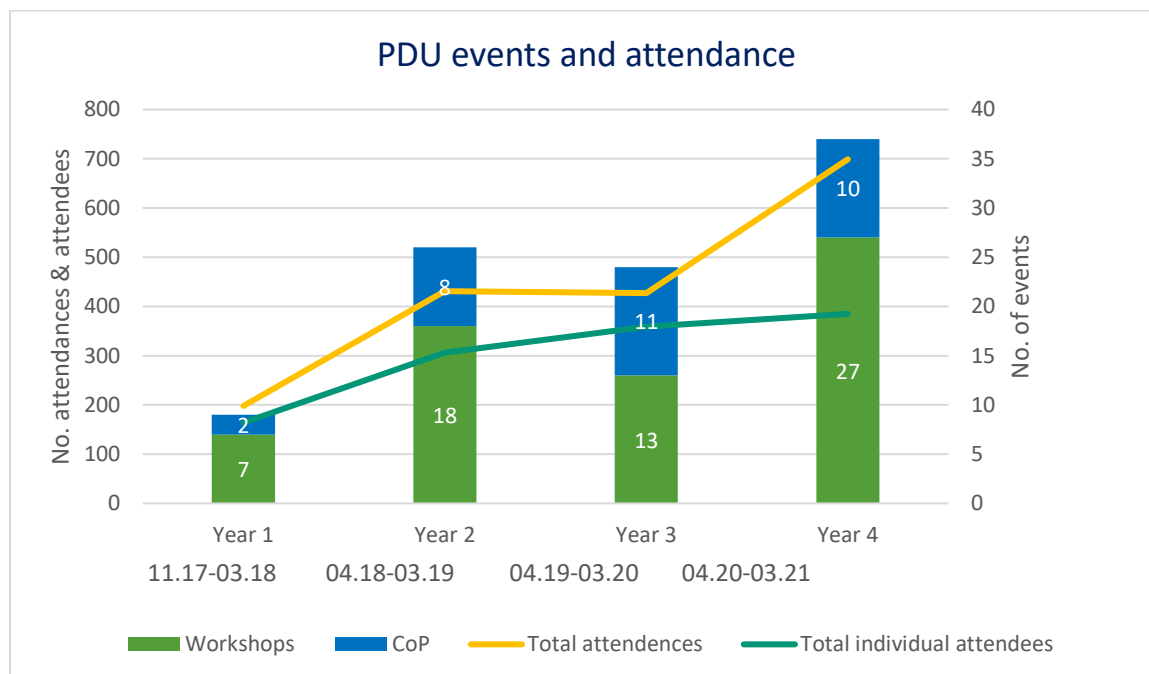


Figure 5.1: PDU events and attendance year on year

From engaging with 164 attendees at events at the start of year one, to 385 in year four, it is clear that the PDU's workshops and communities of practice have become a valued resource for professionals in the voluntary and statutory sector. There has also been appetite for more events to be held, with a marked increase in the number of sessions being offered by the PDU in year four, despite the potential limitations of the pandemic. This shows the value that individuals and organisations feel that they have gained from attending the events. The increase in participants also suggests that they have shared their enthusiasm for the events with colleagues and associates, who themselves have found the events to be useful to attend.

Events were attended by a mix of individuals representing different sectors (see Figure 5.2). As expected, the number of voluntary sector attendees is greater than any other sector, but the gap between voluntary and statutory sector participants has virtually disappeared by year four, where the numbers are almost equal, although issues were raised by participants about the lack of statutory sector staff in some areas of the PDU's work. This may reflect that statutory sector attendees have been involved in some activities, but not necessarily distributed throughout all. Nonetheless, this shows that people from the statutory sector have understood the value of engaging with the PDU, which in turn is of huge value to the voluntary sector, who often need "buy-in" from the statutory sector in order to operate their services. This increased attendance by the statutory sector should enhance the experience of service users, as it suggests that those who have attended PDU workshops and CoP will have a better understanding of severe and multiple disadvantage.

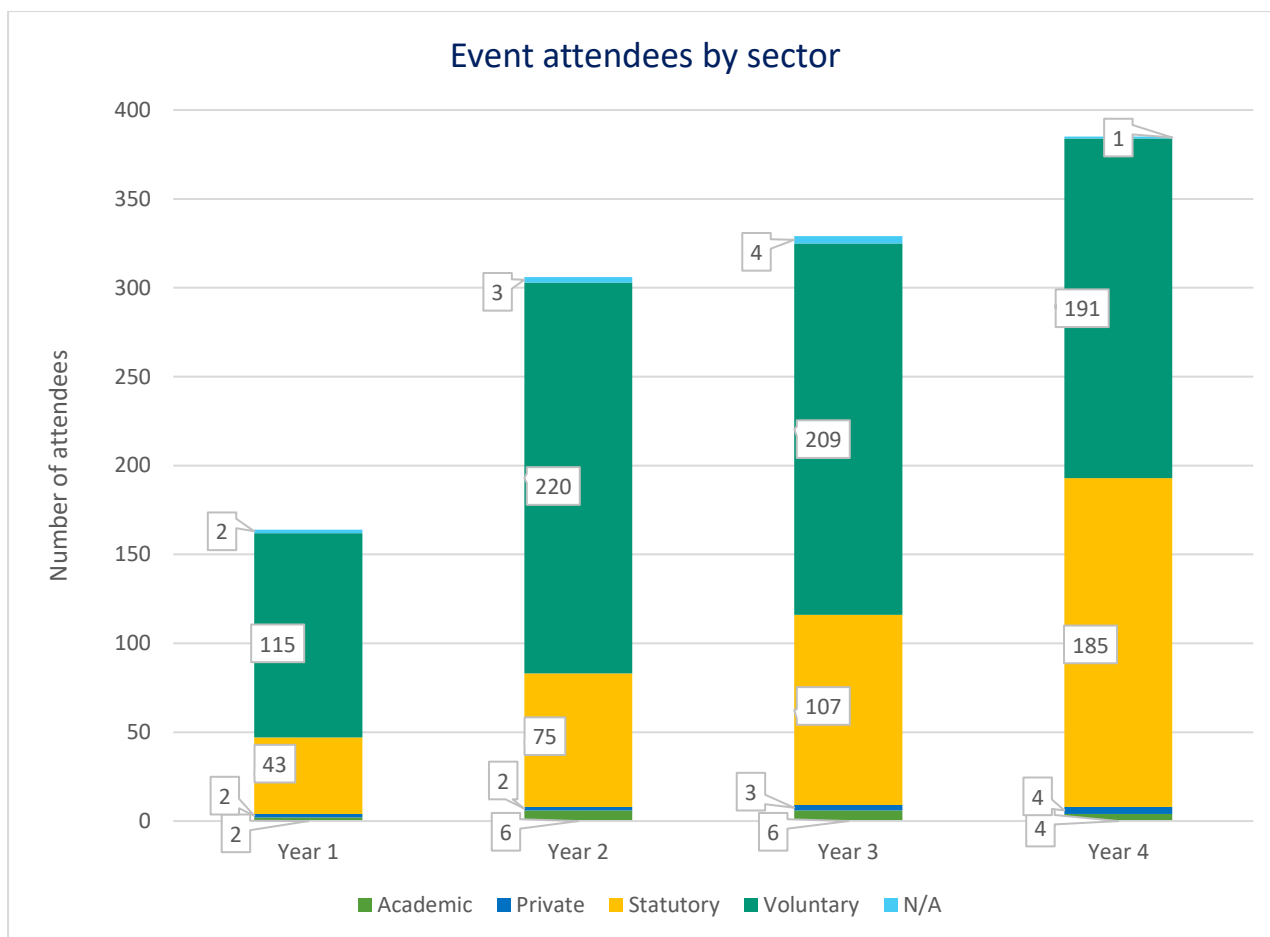


Figure 5.2 – number of attendees at events by sector.

The PDU seeks to promote and facilitate collaborative learning and the sharing of good practice among professionals who work with people experiencing multiple disadvantage. Therefore, it should follow that the mix of attendees should cover a large variety of areas of expertise. Figure 5.3 illustrates that this is definitely the case.

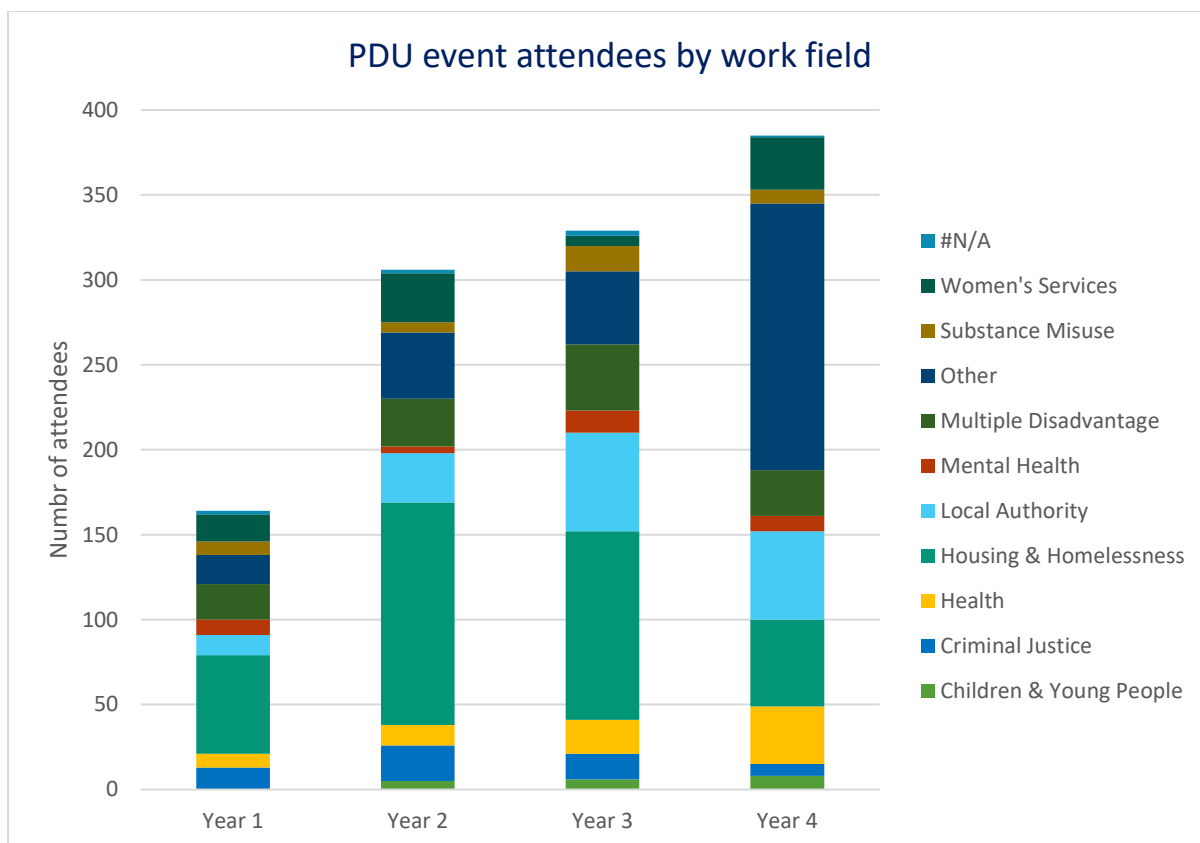


Figure 5.3 – PDU event attendees by work field

In the main, all of the sectors represented have increased their attendance over the years that the PDU has been operating. The exceptions to this are generally seen between years three and four, and it is expected that this is due to the pandemic. These exceptions are as follows:

- There was a rise in participation from health professionals (from 20 to 34), which, given the increased demands on their time is pleasing, and shows a perceived need to continue engagement with those sometimes harder to reach, including parts of the programme targeted to specific groups.
- There was a substantial drop in participation from those working in housing and homelessness (from 111 to 51), suggesting that workplace demands potentially overrode the desire to attend PDU sessions.
- There was a dramatic increase in organisations in the “other” category (from 43 to 157; it would be interesting to know who this represented and/or whether the PDU needs to change its monitoring categories to represent different groups).

Users of the PDU’s online hub have increased from year two when it was launched. In year two, 252 users were interacting with it. Year three saw a similar number of users (238) and there was a dramatic rise in year four to 394 users. This is potentially due to the rise in the use of online services due to the pandemic, and consequently a greater appetite for information presented in this way. Up to August in year five there were already 200 new users. The breakdown of different work fields using the PDU’s online hub can be seen in Figure 5.4, and the different sectors in Figure 5.5.

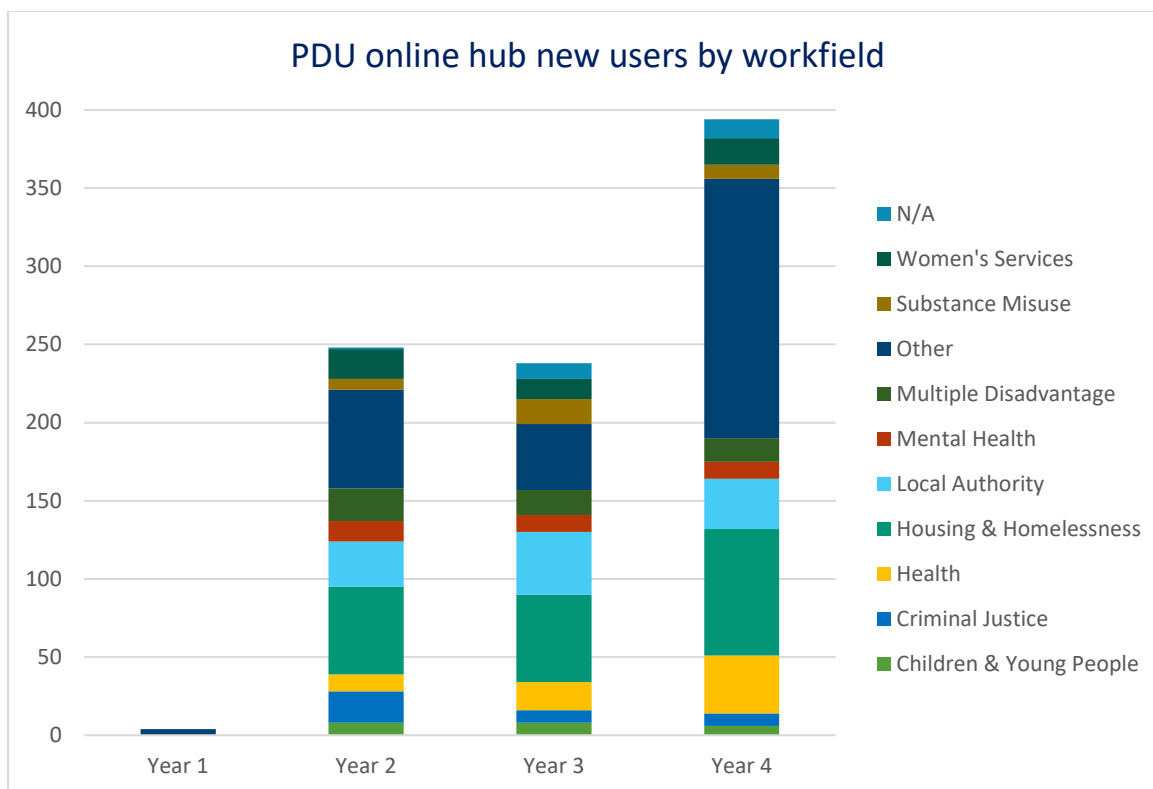


Figure 5.4 – PDU online hub new users by work field

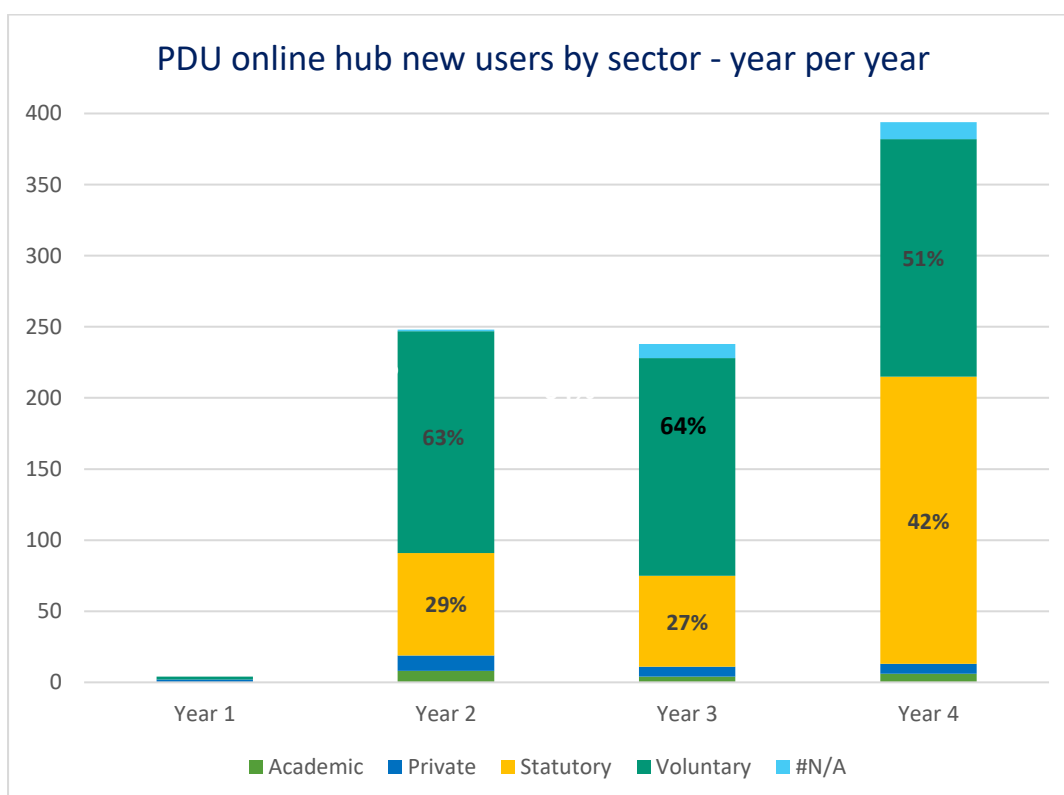


Figure 5.5– PDU online hub new users by sector

From looking at the data, it's clear that once the online hub was up and running, it was used enthusiastically by the voluntary sector from the start, but interest grew substantially in year four, which coincides with more people working from home and using online resources more regularly. It also shows that the online resource became very valuable to the statutory sector, and this uptake is encouraging as it shows an appetite for learning about severe and multiple disadvantage from the statutory sector which is not always evident. This can also be attributed to the perceived good quality of the resource.

Figure 5.6 shows that once the online hub was up and running, there was a real desire for blended learning, therefore showing the value of both methods for communicating information.

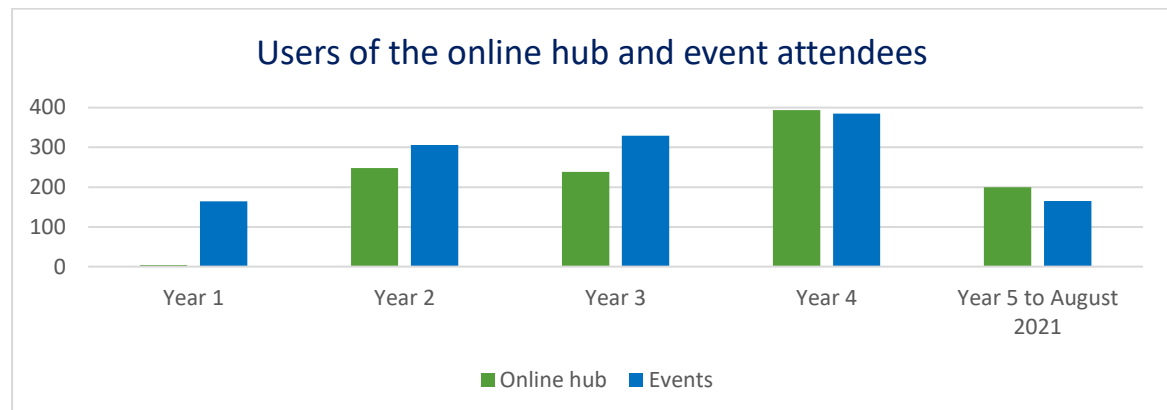


Figure 5.6 – table showing contrast between those attending events and those using the online hub

NOTE: Year 5 is ongoing. Data available covers 1 April 2021 up to 16 August 2021

6. Key Findings

The online survey questionnaire generated 45 responses. 28 respondents were from the voluntary and community sector, 16 were from statutory agencies, one was a private sector organisation and two described themselves as 'other' which were housing and the NHS (CIC). Respondents worked primarily in housing, criminal justice, multiple disadvantage, domestic abuse and mental health services; with mental health being dominant (28%, n=13). Other categories (15%, n=6) included advocacy, social research, sex workers, refugees, befriending and consultancy.

The majority of survey respondents had attended learning events or completed learning either on-line or face to face, and eight respondents had been active within the PDU as a contributor or supporting the development of activities or business planning for the PDU. Three of the respondents were Steering Group members, and one was a Beneficiary Ambassador.

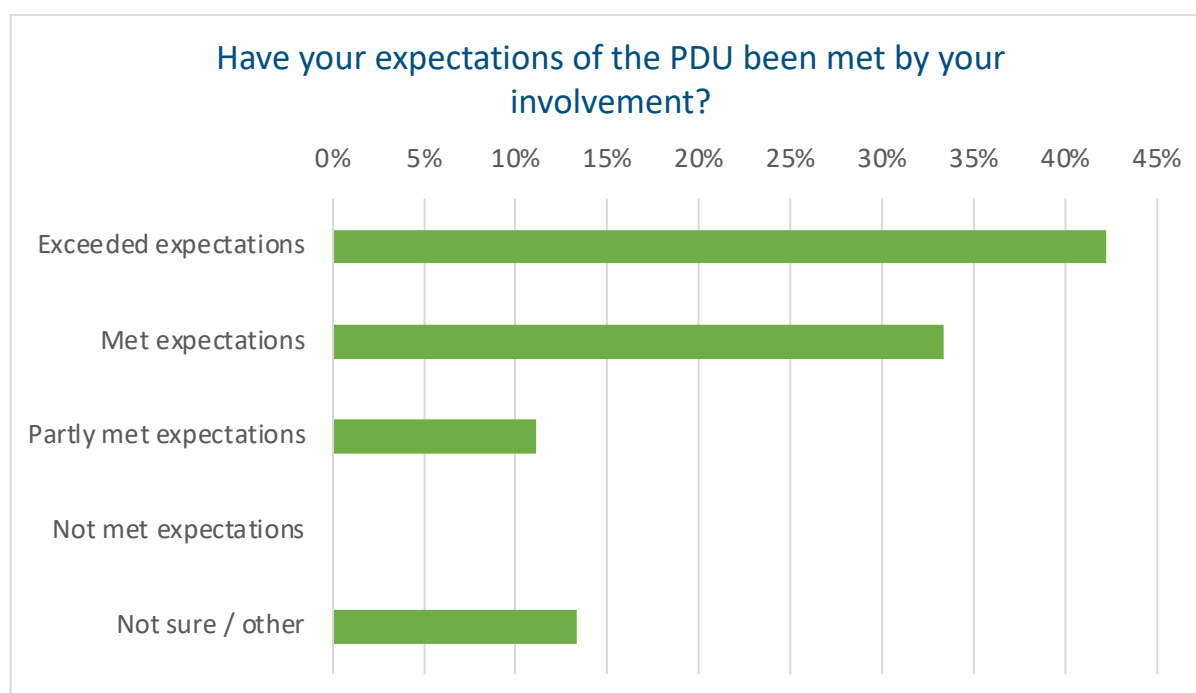
We also conducted in-depth interviews with five stakeholders including a commissioning lead, two individuals who had attended learning events, and two contributors who had supported delivery of the PDU activities.

Finally, we conducted four online focus groups. Two of these were open to anyone involved with the PDU, one for beneficiary ambassadors, and one for experts by experience. There were ten participants in total in the focus groups.

6.1 Impact on working practices and collaborative approaches of professionals and volunteers

6.1.1 Reaction and satisfaction – overall comments about the PDU

The overall feedback about the PDU was extremely positive. 42.22% (n=19) of our survey respondents stated that the PDU had exceeded their expectations, and a further 33.33% (n=15) stated that it had met expectations. 11.11% (n=5) stated it had part-met expectations, and 13.33% (n=6) were unsure. Of these, some said that they had not yet used PDU services.



Aspects of the PDU that people highlighted as valuable to them were:

- The *mix of organisations* involved in the learning
- The *involvement of people with lived experience*
- The *innovation*, including that it has created what people identified as a *unique resource and system*
- The *commitment and skills* of people involved
- That the *resources are free* and available as a resource bank that people can draw on when needed
- There's a mix of *different types of learning* to provide flexibility for participants

Comments included,

"The value of the PDU is in working with mainstream partners to make services more relevant to people with MD" (Survey respondent).

"It has done innovative work and created something that was not previously available." (Survey respondent)

"Having the resources there all in one place is really useful and beneficial to go to. I have never seen anywhere else that has got that. It just needs promoting more" (Interviewee)

"Organisations are built around people....and the PDU people have a genuine commitment and understanding" (Interviewee)

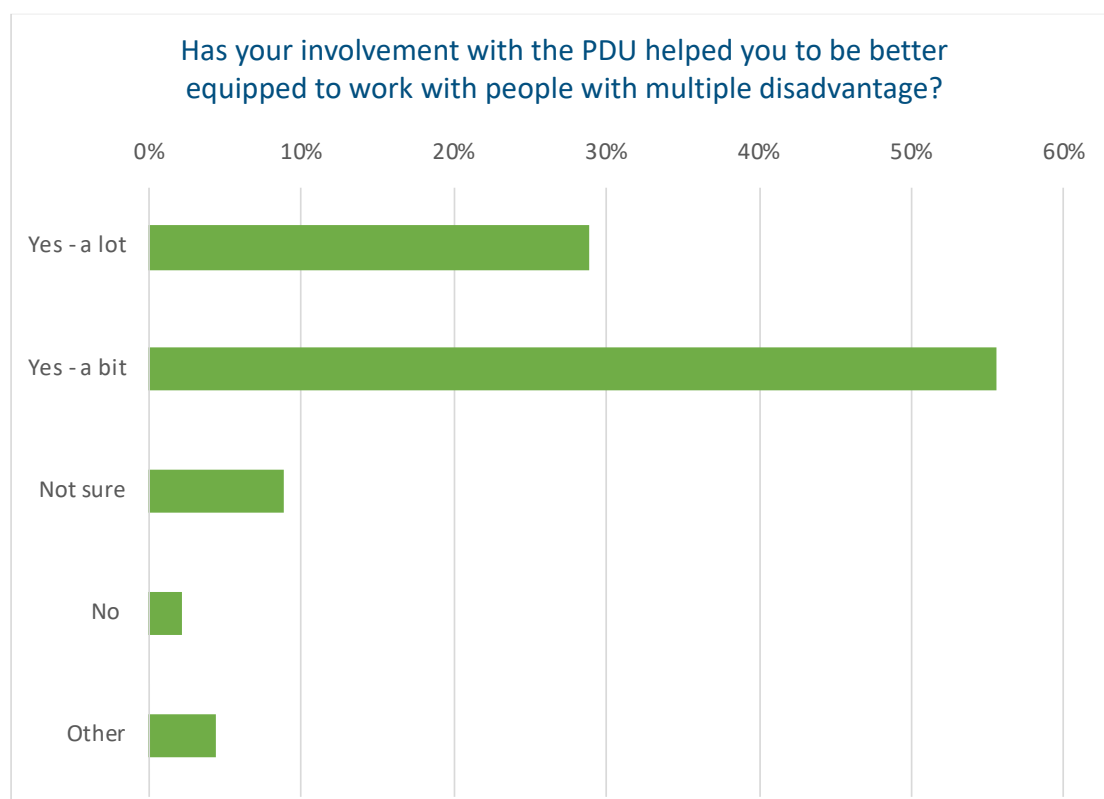
"In our sector there's a shortage of qualified staff and a lack of pathways to develop skills" (Interviewee)

In particular there was consistently high praise for the PDU Coordinator,

"Filipa is totally brilliant, a really fantastic coordinator/facilitator and great communicator, very patient, friendly, extremely knowledgeable and willing to try new ideas. It's great to work with/alongside her" (Survey respondent)

6.1.2 What have participants learned and contributed?

84.45% (n=38) of survey respondents said that involvement with the PDU had helped them to be better equipped to work with people with multiple disadvantage.



Based on our findings, it is evident that the PDU is supporting individuals to develop their own personal practice through building:

- **Awareness and understanding** of multiple disadvantage, and of the challenges that people face.
- **Self-reflection** through being able to reflect on own practice in a safe environment.
- **Confidence** in being able to work with people facing multiple disadvantage.
- **Knowledge** of best practice and current thinking.
- **Partnerships** with a range of organisations supporting people facing multiple disadvantage.
- **An evidence base**, which helps to give people confidence about their approaches as well as providing reassurance to commissioners of services.

6.1.3 Learning topics

Respondents had attended a number of the available learning and/or community of practice events, either face to face or online. Topics ranged from general awareness around complex needs to specific issues including hoarding, cuckooing and the benefits system. It was evident from the responses that the PDU has supported people to develop more in-depth understanding of the issues affecting people facing multiple disadvantage and to keep abreast of best practice,

"I think the subjects covered have all been very relevant and definitely topics that we welcome input on – e.g. domestic violence, 'cuckooing, hoarding etc'" (Survey respondent)

"I have a more in-depth understanding of multiple disadvantage which I haven't gained from any other source" (Survey respondent)

By far the most prevalent area of learning related to trauma-informed care (TIC) and developing psychologically informed environments (PIE), which was highlighted by 31% (n=14) of survey respondents, and 100% (n=5) of the interviewees as well as all of the focus group participants.

The feedback on the content and usefulness of the learning events was overwhelmingly positive with only one negative comment. Respondents identified that the learning events had helped them to fill gaps in their knowledge and expertise and/or consolidate existing understanding. There was also high praise for the way in which events were facilitated,

“A great resource, so much and such a wide range in one place. Very inclusive events, well facilitated and inclusive. Lived experience welcomed and valued” (Survey respondent)

“The training helped me to gain insight into areas where my knowledge was lacking” (Survey respondent)

“I have been in post a year and have never heard of trauma Informed practice or PIE, it was completely new to me.” (Interviewee)

There was one respondent (interviewee) who expressed a more critical view of the learning events,

“To be honest, it’s never been earth shattering. I’ve probably contributed more than I have received.” (Interviewee)

Part of the purpose of the PDU is recognising the expertise that exists already within the sector and for people to share learning with each other. Section 6.4 about human learning systems discusses this further.

Whilst the quality of the current learning events is rated as high and contributing to the professional development of front-line staff and managers, it was highlighted that the range of available learning could be developed further to meet the needs of others. Ideas for future topics for learning were:

- Self-harm and suicide
- Supporting B.A.M.E. individuals
- Health inequalities
- How public places can support individuals
- Reflective practice
- Interdisciplinary learning to help build those working relationships and share practice
- Clinical supervision/de-briefing of staff who are implementing trauma informed practice

6.1.4 Format and delivery of learning

The fact that the resources are free, and that they are offered through a blended mix of on-line and face to face was widely welcomed. Clearly, the Covid-19 pandemic and the associated restrictions on delivery had impacted on what had been available over the 18 months prior to the evaluation taking place. However, it was clear that there was value seen in both mechanisms,

“I would rather participate in a course face to face with others as doing it online felt too vague and a lot of the content didn’t sink in very well” (Survey respondent)

🔄 **Recommendation:** when Covid allows, consider larger conferences and workshops bringing a wider range of people together to increase buy-in, relationships and understanding of the issues amongst a greater range of agencies.

Some participants expressed a wish that more people would engage with the PDU resources,

“I understand that, particularly perhaps in statutory services, there isn't much opportunity to attend events in real time, but there are all these resources on the PDU hub, to read or to look at when you have the opportunity. And maybe more can be done to try and put it out there as a thing.” (Beneficiary ambassador group)

➡ **Recommendation:** there is a lot of information on the PDU hub, which may be overwhelming for people when they start. Creating some specific pathways based on people's area of work, role and interests may help focus learning.

It was suggested that some events should be held outside of office hours to allow people to attend sessions, alongside the expansion of on-line learning and the option to access recorded learning events if unable to attend,

“It would be great if you could continue providing training sessions on line as well as in person – it's really useful to be able to access recorded sessions if timing of live sessions doesn't fit with existing diary commitments/busy caseloads.” (Survey respondent)

It was also pointed out that some frontline workers, for example in hostels, may not have easy access to a computer of their own, which also created access difficulties.

- ➡ **Recommendation:** consider more ways for people to be able to access learning opportunities out of office hours to enable more people in more diverse roles to engage.
- ➡ **Recommendation:** more practice sharing, and cross-agency learning to be facilitated through the PDU by promoting opportunities across sectors, with a particular focus on practitioners who work outside of targeted support for severe and multiple disadvantage clients (i.e. DWP, health practitioners, social workers)
- ➡ **Recommendation:** consider whether there is a need to send out more information more regularly, about what learning is available and provide clarity about how organisations can be involved with the PDU (i.e. the 'ask' for attending meetings) and continue general promotion to ensure that people know about the email list.

Although the PDU events were seen to have facilitated learning and to have brought people from different fields of work together, respondents highlighted a danger that the learning was essentially 'preaching to the converted'. Making a more concerted effort to get more statutory agencies participating in events would give it a more multi-disciplinary, inter-agency, cross-sector flavour,

“How do we include people who aren't on the same page, because that's where the biggest change can happen.” (Focus group participant)

One participant from a larger organisation felt that what they described as the “common conversation” approach of some of the activities was not a good use of their time, and they were looking for something that was more “challenging and practical”, using expertise to work to achieve specific change. A Human Learning Systems approach (see section 6.4) prioritises learning rather than “deliverology,” so there is perhaps a tension around changes happening organically as a result of the learning versus more structured and planning and follow up. Both may be useful in different situations.

- ➡ **Recommendation:** consider whether the learning needs to fit within a more structured programme of change – capacity building can be seen as a means in itself, skilling up

organisations in general to respond to change; or as a means to an end with a particular goal in mind, for example specific contribution to the systems change plan or to Changing Futures objectives. The PDU could consider whether this balance is currently right to attract a diverse range of individuals, roles and organisations to be involved.

The way in which the PDU has encouraged a process of 'learning together' in a supportive environment was highlighted,

"It has allowed staff to learn together in a non-threatening way because they have all been able to share." (Interviewee)

"[There are] opportunities for people to volunteer to input into something that is viewed by an audience so wide, I think that's a really special and unique part of it, because I can't think of anywhere else that people would be able to do that." (Focus group participant)

"There's a culture of sharing learning and good practice rather than paying for trainers to deliver sessions." (Steering group member)

The ability to problem solve an immediate issue was an example of the PDU having the flexibility to respond to what was on people's minds,

"For a while, every conversation was about Covid. You couldn't change the subject from Covid to what it was you wanted to talk about, because it was all about the rapid changes that were taking place around 'Everyone In', and services suddenly being able to work together and be pragmatic, so there's a rapidly changing kind of environment, and you just need to be able to respond to that." (Beneficiary ambassador)

Overall, the learning was seen to have inspired change and encourage self-reflection amongst participants about their own practice; facilitated learning between organisations and increased participants confidence in working with people with complex needs,

"I've found the on-line resources e-learning good for learning about psychologically informed environments and trauma informed approaches which have supported in developing my approach when working with people with severe and multiple disadvantage. I have found the PDU events excellent ways to gain knowledge of best practice, learn how other organisations work with severe and multiple disadvantage and share ideas, making me more reflective in my day-to-day work." (Survey respondent)

The steering group and focus groups identified a major outcome of PDU activities being a more rounded understanding of severe and multiple disadvantage. Some commented that services tended to operate in silos but that the PDU had helped them to understand how different experiences link together for people who have experienced severe and multiple disadvantage, rather than thinking about the different areas, e.g. homelessness, substance misuse, domestic violence etc., separately.

6.1.5 Involvement of people with lived experience in learning

The involvement of people with lived experience of facing multiple disadvantage in the learning events was cited by a number of respondents as being particularly impactful. The way in which experts shared their experiences stimulated new ways of thinking and was seen as highly beneficial,

"I have previously been nervous to approach people if I have no knowledge of their issues or difficulties; so, I have been able to solidify and widen my knowledge by using the PDU."

Attending on-line meetings with people of experience has been amazing in order to see what “issues” look like in the real-world life of a person – and the daily grind of getting through life with the current barriers they come up against. It has given me the ability to move confidently towards service users because I have a small understanding that I can use as a germ to get them to tell me about the Expert they are. This has also given me confidence and a passion for change in current systems.” (Survey respondent)

It was identified that this had been increased. Key to its success has been the proactive approach of the PDU coordinator,

“Filipa attends the expert citizens meetings and talks to them about what’s coming up and they opt-in where interested.” (Beneficiary ambassador)

This was also perceived as the PDU ‘modelling’ good practice in relation to coproduction and collaboration with people who have lived experience,

“The involvement of the expert citizens sends a message about the importance of co-production and collaboration, it challenges assumptions and gives a different perspective, informing future practice” (Interviewee)

One of the contributors we interviewed also described the way that having experts involved in the workshops made the learning events far more dynamic and had her stopping to question her content. This was very helpful to her as a learning facilitator in terms of her own reflective practice.

However, it is worth noting that one of the survey respondents found the involvement of experts in the sessions to have had a detrimental impact,

“Whilst I am mostly in favour of coproduction, allowing constant interruptions on training/networking events (including swearing and often irrelevant interjections) is distracting for everyone else, delays progress and seems very unfair on the speakers/contributors. Can beneficiaries not be asked to adhere to a code of conduct or similar beforehand, and then held to it during the calls? Service users offer a refreshing and valuable perspective, but allowing them free rein doesn’t seem respectful to everyone else. Perhaps it is common practice now in social care, but it’s a shame to alienate others in the name of joint working and would simply not be permitted in a health context” (Survey respondent)

Although the same respondent did also say that despite the practical challenges, the involvement of people with lived experience offered a refreshing perspective, and that they recognised that the PDU is the only joint learning environment where beneficiaries are actually present and involved. There is an interesting point here about parallel process in which the described situation in the learning events replicates issues in accessing services – people with lived experience not behaving as expected by some professionals or systems or structures. One of the beneficiary ambassadors commented on this,

“We have done some work around trying to prepare people for events, ‘tell this much but not any more’, and try and script it to some degree so you stay kind of on topic. The thing I notice often with people with lived experience, when you give them these opportunities is it’s very easy to start talking. And then one sentence leads into another – it’s very hard for people to stop and come to the end of what they’re saying. It’s a sense almost, either they’ve never had

a chance to speak or they feel they need to keep talking because of silences.” (Beneficiary Ambassador)

The work that the PDU Coordinator and the beneficiary ambassadors have done building trust with the experts by experience has been crucial to enabling their contribution.

➡ **Recommendation:** consider whether what some people perceive as inappropriate contributions by people with lived experience can be utilised within workshops in “parallel process” as learning in relation to what happens in services when people are excluded or choose not to return because of a mismatch between expectations from different perspectives.

It is important, however, to remember that there is a cost for people with lived experience in speaking about their lives. One of the experts by experience spoke to us about how they felt about being involved in the evaluation,

“I'm sick of people researching claiming funding. It's promising so much and delivering so little. And then once they've got the wages, they're not interested in dealing with the job at hand. And we might be the job at hand, we might be their subjects, and I want to get the support I've worked for, because no one's giving me support for nothing. One they're getting paid, and two our knowledge has given them help to support us. So where's my [return] in putting my effort in? I want an outcome, I want that person who's used my knowledge to come back and say, 'We've done this X, Y and Z for you.'” (Expert by experience)

There has been a comprehensive support structure for experts by experience put in place by Opportunity Nottingham, and this supports them to be able to participate in PDU activities, which experts by experience do voluntarily. Experts by experience appeared to be satisfied and complimentary about this support, but there is a wider concern here as to what individual organisations do as a result of the time that experts by experience have contributed, particularly from senior managers.

➡ **Recommendation:** consider whether there is more that the PDU can do to (a) more proactively follow up streams of work, creating greater accountability within organisations and across the programme as a whole; (b) create more feedback to experts by experience and others about what has happened as a result of their input; (c) work with participants to highlight the issues around the cost of the involvement with people with lived experience, to encourage them to be more explicit about what they are doing with the learning. This may link with the recommendation in section 6.1.9 about some learning experiences being more structured to meet specific aims.

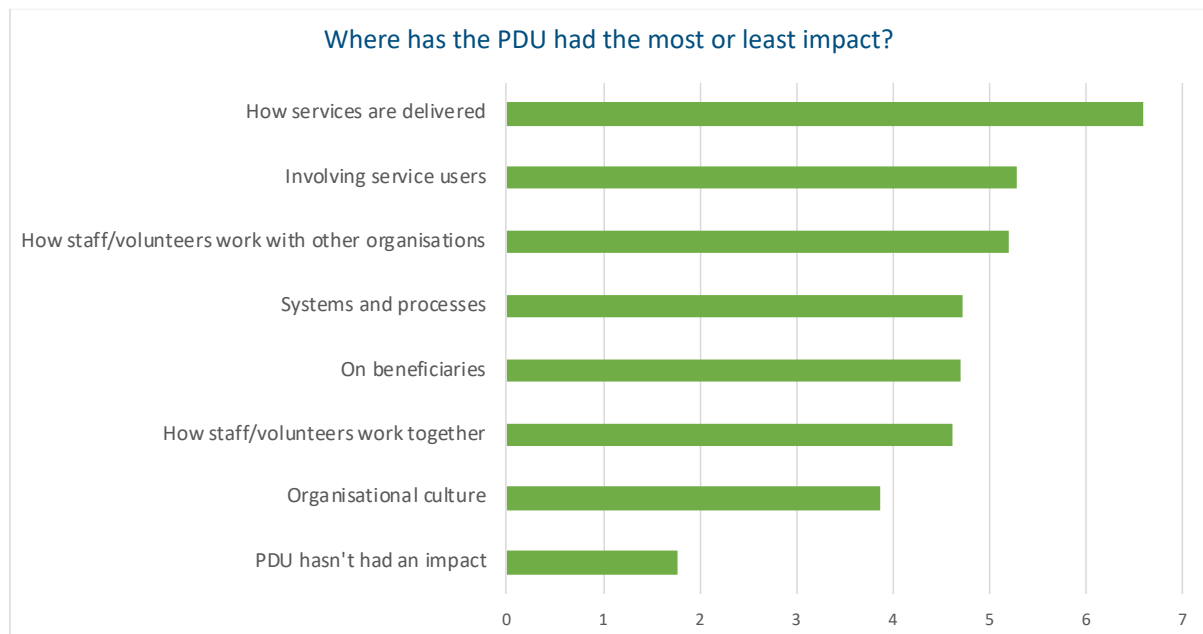
➡ **Recommendation:** It may also be important to recognise that there will be other staff members and volunteers within PDU participants who have a range of lived experience of the issues, who may also experience emotional distress and concerns about disclosing or on the other hand feeling unable to participate. This is something that each organisation could consider alongside broader staff and volunteer support mechanisms (see section 6.1.6)

There was some discussion amongst participants about whether the PDU could be providing its resources on a national basis. At present there seems to be some involvement from organisations outside Nottingham and Nottinghamshire. Whilst national participation would certainly be possible in a logistical sense, this may weaken the impact of local organisations working together for systems change if it was done in an indiscriminate way.

🔄 **Recommendation:** the PDU should come to a considered position on whether to include organisations from outside Nottingham and Nottinghamshire in its activities, based on its wider strategic aims. This could include having two-tier access, for example some activities that are only local organisations and some open wider, and/or charging organisations from outside the local area.

6.1.6 Changes in organisations' practices

The survey asked respondents to rank the following areas in order of where they felt that the PDU had had the most impact, which were then weighted according to the combination of rankings.



40 out of 45 survey respondents answered the question which asked them to rank the areas where the PDU had had most or least impact. The highest ranked response was 'On the way that you deliver services' (Score 6.58) and the lowest ranked 'positive' response was 'On your organisational culture' (Score 3.86). All other areas sat between these two scores and were fairly equally distributed. The response to 'the PDU had had no impact' scored 1.76. This would indicate that respondents felt that the PDU has had an impact in a wide range of areas.

Based on our findings, it is evident that the PDU is impacting on organisations through:

- **Awareness raising** in respect of trauma informed practice and psychologically informed environments
- **Signposting and referrals** with increased understanding of other services available to support people with complex needs
- **Casework and other joint working** from relationships but also having a shared understanding created through learning together
- **Adaptation** of current systems and processes to be more responsive to the needs of clients facing multiple disadvantage

In the narrative of the survey responses, specific examples were given including:

- Adapting therapeutic assessment to be more understanding of autistic needs and re-design of family autism sessions.

- New signposting processes, sharing information about other organisations, and increased collaboration.
- Increased awareness of needs.
- Staff debriefs and meetings.
- Implementation of a psychologically informed environment to the physical environment.
- Application of trauma informed practice.

Other examples of where practices have changed or have started to change as a result of the PDU include:

- A recognition that there hasn't been enough of a focus on the needs of women, and in particular the high-level of abuse that women with multiple disadvantage have experienced. An example given is that learning from domestic violence, sexual abuse and gender equality charity Equation is now included in the PDU resources.
- Another example given was the overlap between the Homelessness Reduction Act and adult social care provision, with housing staff knowing about the former and social care staff about the latter, but people not understanding the significance of the overlap. The PDU got agencies involved, along with an expert from Birkbeck University, to explore ways of working so people who are homeless are better able to access housing, whereas before they didn't quite fit the criteria for either service.
- More outreach for the volunteer centre into communities rather than expecting people to come to them. Understanding of the needs of people with multiple disadvantage has helped them to reach a different type of beneficiary and to be more open to involving people with multiple disadvantage in volunteering, which gives people something meaningful to engage with.
- Development of Housing First. It was identified that by listening to people with lived experience, people have become more and more aware not to keep waiting for people to have all their issues resolved before they get accommodation. Instead, if people go into accommodation and then services start to work with them to help them overcome the barriers, it leads to a much more stable life and better involvement in communities. A focus group participant highlighted that,

"Part of the role of the PDU is to identify best practice that's occurring around the UK and to bring in experts in the field to talk about that particular subject, to educate local people and what it's all about. Part of that education hit the ears of commissioners and housing strategy managers and the PDU was put absolutely pivotal in that." (Focus group participant)

- Through organisations coming together through the PDU, social workers became embedded in voluntary organisations with trusted assessor status to prevent duplication of work. Assessments were previously being undertaken twice and sometimes there was disagreement, which slowed things down.
- The DWP made changes after they attended learning put on by the PDU,

"I think they're aware now, the possibility of re-traumatising people by asking them to relate what happened in their earlier life or what happened in various aspects of their life. They put all sorts of signs up about you mustn't do this, you mustn't do that, and they don't do that

anymore. They've totally adjusted the approach, it's softer, more compassionate, more understanding and more pragmatic in terms of support.” (Focus group participant)

Discussion about the attribution to or contribution of the PDU to changes, is contained in section 6.3.

- ➡ **Recommendation:** consider whether the PDU could collect information about impacts such as these to publicise changes. This feedback is important for people who have participated in making changes, particularly the experts by experience (see section 6.2.2) but also to act as examples for other organisations to be inspired by and follow.
- ➡ **Recommendation:** one interviewee commented that it had been difficult to follow up with the DWP after they had attended learning. The PDU could consider whether there could be more follow up of activities (see also section 6.5.2) including emphasising how implementing trauma and psychologically informed services is not just a one-off intervention but needs continual thought and adaption.

6.1.7 Psychologically informed environments and trauma informed care

A presentation by Opportunity Nottingham and Framework psychologist Dr Anna Tickle¹⁵ given in 2019 identified that a psychologically informed environment, “takes into account the psychological makeup – the thinking, emotions, personalities and past experience – of its participants in the way that it operates”. There are five elements, with relationships being key throughout.

1. Psychological awareness
2. Staff training and support
3. Learning and inquiry
4. Spaces of opportunity
5. The three Rs (rules, roles and responsiveness)

It highlights that a trauma informed care and approach includes staff at all levels having knowledge about trauma; recognising that systems can (re-)traumatise people and work to avoid this, understanding behaviour as coping with trauma and its impact, providing pathways to trauma-specific support when survivors are able to report trauma, trustworthiness, transparency and collaboration, empowerment, choice and control, including strengths-based approaches, and creating safety for staff and service users.

One of the interviewees shared with us how trauma and psychologically informed learning had been implemented at her organisation. As a result of attending the PDU learning, an external trainer was commissioned to develop a mandatory learning programme for managers and front-line staff which is now fully embedded. Team meetings have a standing agenda item relating to trauma informed care and psychologically informed environments and this has changed the way that the organisation ‘thinks’ about their clients and how they work with them. An example given was the way in which initial assessment is completed. Whereas previously clients were asked to fill in in-depth forms on day one or arrival, there is now a more staggered approach which means that people are not overwhelmed when they first arrive at a property,

¹⁵ An overview of *Psychologically Informed Environments / Trauma Informed Care and implications for commissioning* available via the PDU’s resource bank

“If I hadn’t gone on the TIC and PIE learning, it wouldn’t have been embedded across our services, so it has definitely enhanced what we are doing.” (Interviewee)

However overall, it is fair to say that there was relatively limited evidence in the written responses to the survey, nor through our interviews that demonstrated a significant impact at an organisational level,

“My organisation does not refer to or discuss the PDU as far as I am aware.” (Survey respondent)

There is also a question about to what extent some of the changes are superficial (for example removing signs) or structural (for example better referrals), rather than considering what this means at a deeper psychological level around the importance of forming trusting and boundaried relationships. There could also be implications in relation to staff (and volunteer) support, and a need for reflective learning, clinical supervision that enables the exploration of psychological and emotional aspects and recognising the effects of vicarious trauma. This issue of wider organisational change is reflected in the survey response to the question about where the PDU has had most impact, where changes in organisational culture was rated lowest (see section 6.1.6).

There was a sense from some of the managers participating that they were distant from the PDU, though valued it for their staff and volunteers,

“I’ve referred some [practitioners] to the training, but I’m not directly supervising them - it’s difficult to identify whether it’s made any difference to their practice.” (Interviewee)

This situation was reflected in a comment from a frontline worker,

“I do not have a role that can affect organisational change. Hopefully service users will have benefited from my different ways of working.” (Survey respondent)

➡ **Recommendation:** consider whether more emphasis could be given to the importance of relationships in psychologically informed approaches and particularly in ensuring that there are whole organisation culture changes to recognise this; that it is not just seen as something that happens on the frontline but permeates the whole organisation. This includes considering the impact of vicarious trauma, particularly on workers who may themselves have experienced trauma and providing the opportunity for reflection and clinical supervision as appropriate at all levels of the organisation.

6.1.8 Involvement of service users in designing and delivering services

This section looks at the involvement of service users at an individual organisational level. Section 6.2.2 discusses involvement of experts by experience across PDU activities.

When asked specifically about whether participants had involved service users more in designing and delivering services because of PDU activity, only 30% (n=13) of respondents responded positively; with 19.51% (n=8) being unsure, and 41.46% (n=17) saying that they had not. For many this was because they felt they were already involving service users in the design and delivery of services, whilst several respondents indicated that Covid-19 had impacted their ability to do this,

“Inclusion and input feedback about the general service is sought from service users and implemented where possible – service users are asked directly what they feel could change and this is fed back to management for discussion – then fed back again to show that we have listened and thought about the client’s opinion. If we get a complaint we are prompt in

our actions to put this right straight away if possible. We are currently looking at enabling service users to attend Service User forums via our equipment so they have another way to feel heard.” (Survey respondent)

Whilst Opportunity Nottingham have designated resources for supporting people with lived experience to be involved, the quote above probably better describes where many organisations are in relation to service user involvement. On Sherry Arnstein’s ladder of participation,¹⁶ developed in 1969 but still used and relevant today, this may be described as consultation.

One of the researchers attended a community of practice around co-production, with some good discussions, but mainly attended by experts by experience, beneficiary ambassadors and other user engagement organisations. Participants confirmed that it was a challenge to get some of the larger and/or statutory organisations to attend.

➡ **Recommendation:** supporting service users to be more involved in designing and delivering services can take considerable thought and resources and needs to be done carefully. However, there is clearly more potential for services to be considering how to do this. The PDU could encourage service delivery organisations from the voluntary and public sectors to become more involved in learning events and the community of practice to consider what steps they can take to encourage more user involvement.

6.1.9 Impact on beneficiaries

There was limited evidence in the responses that highlighted changes within organisations that have an impact directly on beneficiaries, although one interviewee highlighted a significant drop in incidents involving clients since the implementation of changes based on trauma informed practice, indicating that service improvements have affected beneficiaries. This replicates the findings of other research nationally.

There were some examples of how workers had changed their approach to working with beneficiaries,

“I learnt a lot from my involvement with the C.O.P on substance use. In particular, I found that I became more confident in supporting service users who were habitual NPS (Mamba) users and was able to share knowledge acquired with colleagues at the service where I work.” (Survey respondent)

“We introduced a Facts About Me approach following a session from Experts by Experience.” (Survey respondent)

Another interviewee commented on how they hoped service changes had affected beneficiaries but hadn’t specifically measured the impact.

“Hopefully they would think that the changes are for the better, and that we are not re-traumatising them by asking them the same questions over and over again.” (Interviewee)

➡ **Recommendation:** it was notable that many respondents were unable to provide examples of how the learning events they had attended translated into tangible change in the workplace. A

¹⁶ Sherry R. Arnstein (2019). The ladder contains: degrees of citizen power: citizen control, delegated power, partnership; degrees of tokenism: placation, consultation, informing; and non-participation: therapy, manipulation.

greater emphasis on supporting individuals with the 'what next' aspect following learning may support participants to actively promote and drive change in their respective organisations. This links with the recommendations around placing learning within a more structured programme (see section 6.1.4) and following up changes particularly to feed back to experts by experience.

- ➔ **Recommendation:** developing ongoing systems to identify and capture the impact on beneficiaries will help the PDU to reflect on and promote its impact. This may include case studies to illustrate outcomes, but could also include more robust measurements, for example the number of incidents with beneficiaries, percentage of beneficiaries completing programmes, outcomes for beneficiaries, and/or staff and volunteer satisfaction and retention.

6.1.10 Unintended or unexpected impacts

This question was asked in the steering group, focus groups, and in the survey. Responses were varied, with one admitting that they had no idea how much they didn't know. Another felt that their understanding of multiple disadvantage had changed, particularly seeing the multiple needs of an individual as having the same origin. One respondent felt that they now thought of people with multiple disadvantage as volunteers themselves rather than recipients of services from volunteers. It was also noted that the PDU was a platform giving people with lived experience to "shine". One respondent believed that the PDU had strengthened their team by providing more resources for advice and signposting.

Whilst these might be unexpected outcomes for participants, and it is very positive that they have gained from their experiences, they are not necessarily unexpected in relation to the PDU's aims.

6.2 Impact on contributors

6.2.1 Organisations

The most common response around the impact on contributors was that it has been an opportunity for contributors to raise the profile of their work and encourage joint working,

"I hadn't expected that I would be able to facilitate an event for the PDU. I value that many of the events are people working in the sector themselves or people with lived experience. There is very little 'red tape' and the coordinator is approachable and non-judgemental. This is therefore creating positive opportunities for staff members with the goal of promoting good practice to support people." (Survey respondent)

One contributor highlighted that it had been an opportunity to review knowledge, check the research, and to develop, based on feedback from people working "on the ground", helping to recognise the significant challenges that there are around putting things into practice.

It was clear that people who were not identified as official contributors had benefitted as contributors to sessions just by attending,

"it's an opportunity to share what you know, as well as learn stuff. There's people around this table who are second to none in terms of engaging people who've got complex disadvantages, so to be able to share that learning and know that platforms there." (Focus group participant)

6.2.2 Experts by experience

A number of contributors highlighted how experts by experience have the opportunity through PDU events to share their lived experience with people commissioning, designing and delivering services

and feeling that this is valued. One of the experts by experience described what he gained from this explaining that he wanted,

“To be involved with system change, to get more networking, get more understanding of what services were involved, what part I could play as a lived experience person. I guess as well, something to structure my day, committing to something, a lot of learning how to deal with the services, but also for myself, to be playing a part in hopefully making some changes and understanding stuff about co-production.” (Experts by experience focus group participant)

Feeling on equal footing to professionals was also important,

“There seems to be an opportunity to be mutually involved in being received the same as professionals being like a lived experienced person” (Steering group member)

As was the opportunity to “give back”,

“For me, personally, I just look at it like what we're doing now is going to benefit someone else, hopefully. I'm happy with everything that's been thrown my way anyway, I just want to give back now.” (Experts by experience focus group participant)

Experts by Experience have also gained experience in delivering learning, which increases their confidence,

“The other day, it was one of the expert citizens’ first events. And at the start he was shy, and he didn't want to say much, but by the end of the event, he was really sharing and feeling open. Just seeing even that transformation within that short space of time is really powerful to watch. I imagine for the individual, it's also a very empowering feeling. All of a sudden people are learning from them rather than those people feeling like they have to learn from professionals. It's addressing the power imbalance between people. There's a feeling in the events that everybody's equal.” (Beneficiary ambassadors focus group participant)

One person who had been a service user attended learning in part because,

“I actually just wanted to find out what was being taught to others, organisations about autism.” (Focus group participant)

She had some concerns about how the behaviour of people with autism was presented during the course but had spoken to the learning facilitator who listened to her, which the participant hoped would affect how the facilitator would present things in future.

6.3 PDU contribution and attribution

Measuring contribution and attribution in complex systems is difficult because of the complexity of problems, that they are multicausal and its unlikely an intervention will be a single cause of a change, and that there are many stakeholders with different viewpoints. It can also be difficult to gauge attribution or contribution of the PDU towards meeting outcomes retrospectively, as people forget the detail over time of what has happened and its cause.

The steering group were asked about the PDU's contribution in three categories, reported below.

Contribution	Examples
Happened solely because of the PDU <i>Capacity building is sufficient in itself to deliver benefits</i>	<ul style="list-style-type: none"> Communities of practice Development of knowledge base Involvement of people with lived experience in learning Bringing in national good practice, for example around the Care Act Interaction between services that had no awareness of each other Culture of sharing learning rather than paying for experts to deliver sessions
Happened because of partnership working between the PDU and other organisations <i>Capacity building is necessary but not sufficient for change</i>	<ul style="list-style-type: none"> Workshops delivered are in partnership with other organisations, for example hoarding which is delivered by the fire service. This increases their interest in the PDU. Developing the structure for trauma informed practice with Framework. Severe and multiple disadvantage learning events with organisations such as GP practices and DWP. This relied on contact with people on board with the PDU agenda and with passion for developing severe and multiple disadvantage awareness in their organisations. Increased interest in the learning opportunities within the PDU from Nottinghamshire County Council, which happened in conjunction with having trusted assessor status with adult social care around the Care Act Assessment.
Happened faster or better because of involvement of the PDU <i>Capacity building is neither necessary nor sufficient but has improved outcomes (e.g. things happened sooner or are higher quality)</i>	<ul style="list-style-type: none"> Getting trauma informed care and psychologically informed environments onto the agenda Changed people's perspective of severe and multiple disadvantage (Some people placed these two changes above in the top box) Understanding of co-production Development of services for women Strength-based practices Use of online learning to reach a larger audience

Although various activity was taking place through Opportunity Nottingham, the PDU was the vehicle that shared learning with organisations wider than those involved in the Opportunity Nottingham delivery,

“The PDU has provided a mechanism to get [learning] out to organisations that wouldn't otherwise have access to it.... Without the PDU coordination, this wouldn't have happened.”
(Interviewee)

People were asked what they would miss if the PDU wasn't there as another way to measure its contribution. Most responses focused on it being a rare opportunity to come together to learn, and

because the resources are all in one place and there are communities of practice that are ongoing relationships rather than one-off activities, this allows the relationships to develop. Its focus on multiple disadvantage rather than learning targeted more broadly was also mentioned as something not available elsewhere,

*“A forum for networking, building awareness and links to other organisations locally.”
(Survey respondent)*

“Excellent training and resources. Forums to learn together and share good practice. Progressive voice in the sector championing the rights and voice of service users. An organisation that truly understands and explores multiple disadvantage.” (Survey respondent)

Finally, it did become apparent that several respondents seemed confused as to what was delivered through the PDU and what was being delivered by Opportunity Nottingham or Framework. For example, the psychologically informed environment learning was perceived as being delivered by Opportunity Nottingham. In this respect, the learning was not attributed to the PDU. There may be a need for clarity in the marketing of the events and learning to ensure that people associate the PDU with the delivery and attribute their professional development accordingly.

Participants identified that it was difficult to say how things might have been without the PDU. Factors such as austerity and Covid have also had an impact, as has increased awareness nationally of issues such as psychologically informed and trauma informed services,

“The most we can say is that things have happened coincidentally with the arrival of the PDU, like the greater acknowledgement of multiple and complex needs.” (Steering group member)

“PDU had a big part to play in getting TIC and PIE on the agenda and broadening people’s perspective on SMD.” (Steering group member)

➡ **Recommendation:** the PDU could consider developing a framework to implement ongoing impact measurement to capture changes contemporaneously and as a routine part of activity. For example, this can include projectable change, which is planned and part of a specific piece of work; transformative change – when needing to adapt to a crisis or other urgent situation; and emergent change – from constantly learning and adapting¹⁷. Theories of change can help to plot and demonstrate intermediate change when the ultimate goal is longer-term. Using outcomes mapping can help to think about change from the perspective of different stakeholders who might value different outcomes in different ways. This can look at different levels of analysis and demonstration. For example it may be possible to quantify changes for organisations, whereas without significant resources, changes for beneficiaries may be more realistic to just illustrate, for example with case studies at the organisational or individual level.

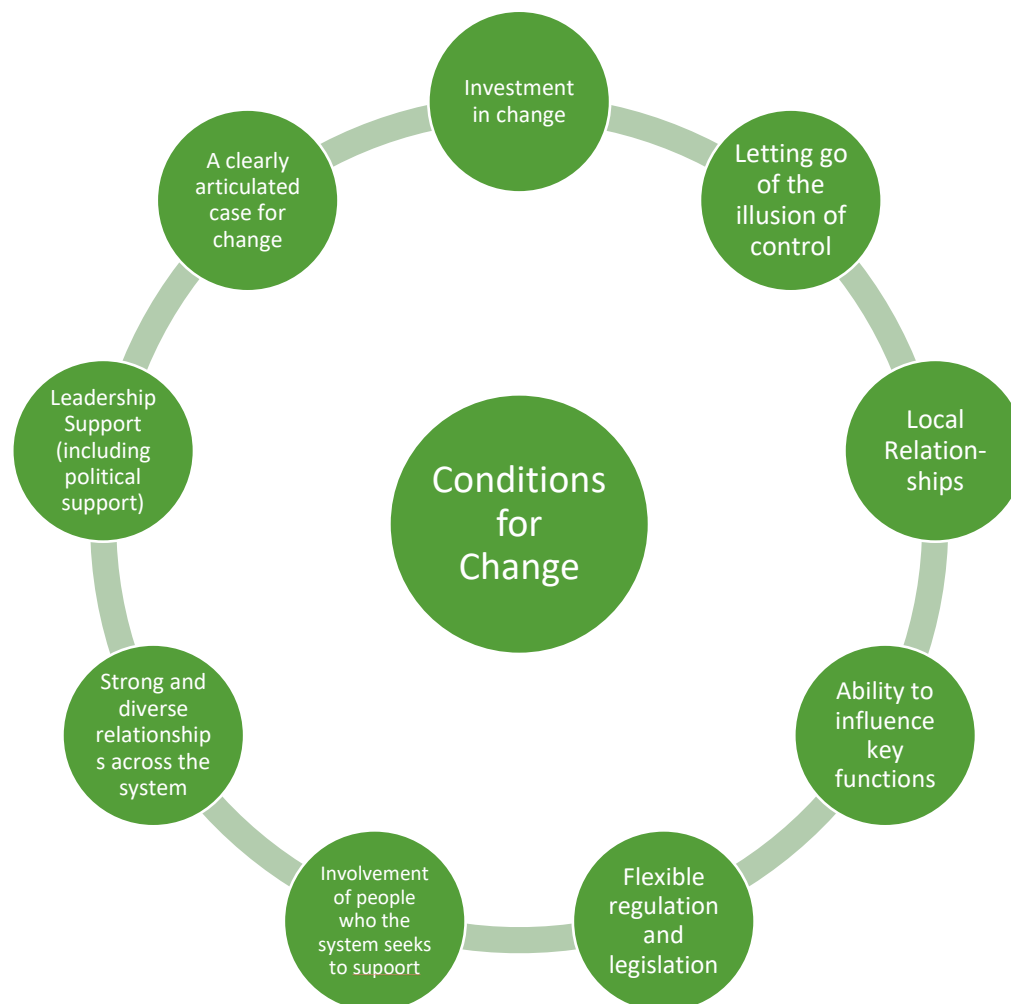
6.4 Contributing to a Human Learning System approach

As part of our evaluation, we were asked to assess the ways in which the PDU has contributed to a Human Learning, System (HLS) in Nottingham. As described in Section 2, Lowe and Plimmer (2019) suggest enabling conditions which support HLS approaches. Being human creates a condition in

¹⁷ Reeler, D. (2007)

which trust is built across boundaries between commissioners and delivery partners; adopting a learning approach accepts a continuous process of learning and adaptation; and understanding systems means recognising that outcomes will be produced by the whole system rather than individuals, organisations or programmes.

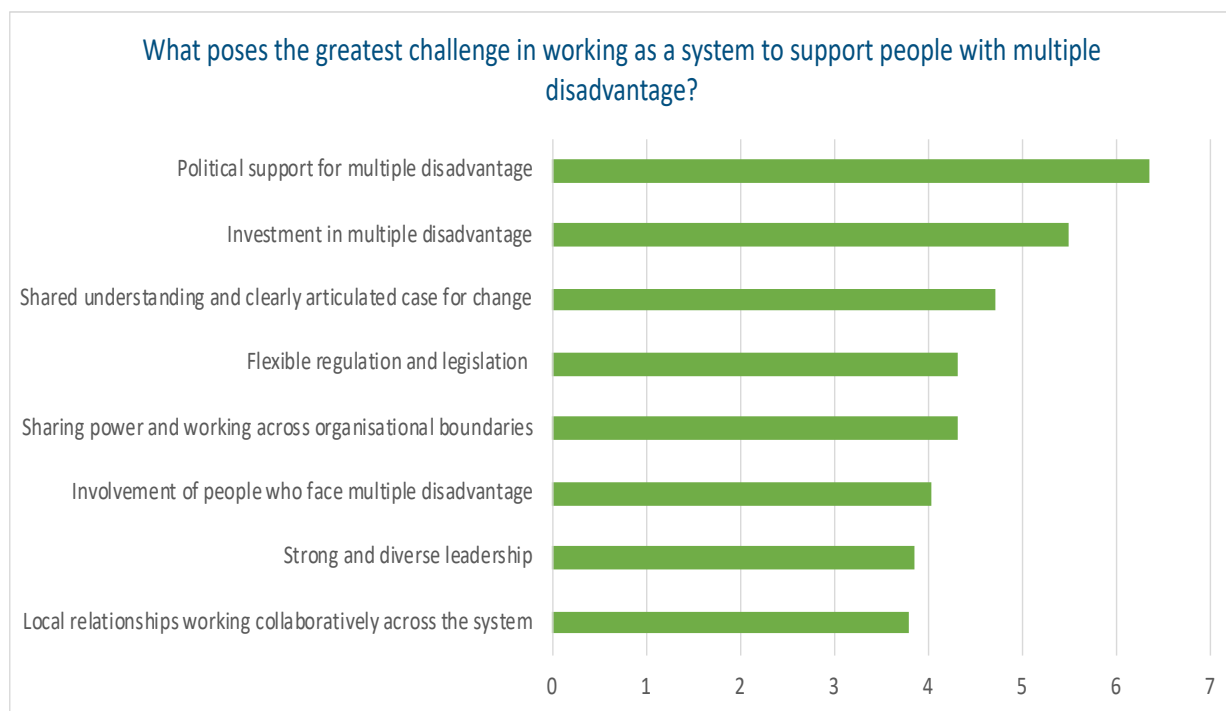
Lowe and Plimmer (2019) identify the following conditions for change¹⁸.



This description of a HLS, and the conditions for change that are needed to facilitate it, provide an ideal model against which ‘real-world’ experiences can be compared. The following section provides an analysis of if and how the Nottingham PDU is contributing to the conditions for change of a Human Learning System (HLS).

Our survey asked respondents to rank the challenges faced within the ‘system’, based on the HLS conditions for change, from the greatest to the least challenging areas. The highest-ranking challenges were ‘political support for the cause of multiple disadvantage’ (score 6.36); second placed was financial investment (score 5.50) and the least challenging areas were identified as ‘strong and diverse leadership’ (Score 3.86) and ‘local relationships working collaboratively across the system’ (Score 3.80)

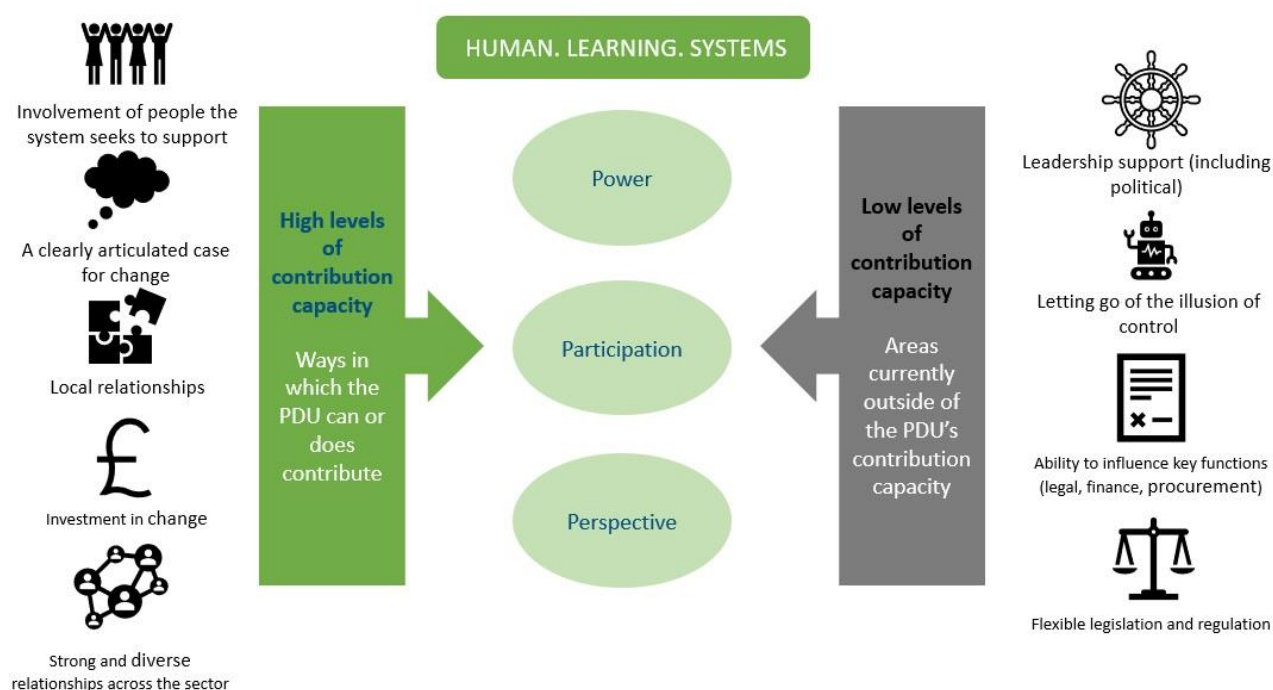
¹⁸ Adapted from Lowe, T. and Plimmer, D. (2019)



In the more qualitative elements of our evaluation, respondents found it challenging to identify the specific ways that the PDU had contributed to the conditions for change, and the challenges in attributing change they had observed solely to the PDU.

However, drawing from data detailed in section 6, we have attempted to identify the '**contribution capacity**' of the PDU (by this we mean the areas in which we could reasonably expect the PDU to make a contribution); identifying the areas where there are higher levels of contribution capacity and those conditions for which the PDU was found to have little influence or contribution.

Overview



6.4.1 Higher levels of contribution capacity

1. *Involvement of people the system seeks to support*

The data highlighted the significant contribution that the PDU is already making in respect of ensuring that individuals with lived experience are an integral part of its delivery and learning. This has been seen to have an impact, both on the individuals themselves and on other contributors and participants.

If this involvement is to make a contribution to a HLS however, there needs to be further work done to ensure that they have increased feedback about the changes implemented as a result of their involvement, and increased opportunities to influence the wider system.

2. *A clearly articulated case for change*

Feedback from participants highlighted that the evidence-base for learning adopted by the PDU is robust and informative and has helped to identify some of the key challenges for people facing severe and multiple disadvantage. This knowledge creation has the potential to contribute to making the case for change across the system. A good example of this is the work the PDU has delivered around trauma-informed practice and psychologically informed environments.

However, if this is to be fully utilised, the learning needs to be shared beyond front-line practitioners and delivered more widely across the system, and at all levels. The findings from this evaluation would suggest that the PDU is uniquely placed to support the development of a clearly articulated case for change; using its knowledge and expertise to shape the thinking around what is needed to achieve systemic and long-lasting change for people facing multiple disadvantage.

➡ **Recommendation:** consider the opportunities of the PDU to further increase its reach into strategic forums in the city to share knowledge and expertise about severe multiple disadvantage to help to inform a shared vision and clearly articulated case for change

3. Local relationships

There was evidence that participation in the learning events hosted by the PDU has facilitated a growth in local relationships and partnership working. Strengthening local relationships between organisations, enhancing local knowledge and ensuring that people understand ‘who does what’ is something that the PDU could build on further.

➡ **Recommendation:** consider whether there are opportunities to build upon the relationships fostered through the shared learning experiences, through facilitating best-practice sharing and development

4. Investment in change

Whilst the PDU has not single-handedly secured further investment for severe multiple disadvantage, it has contributed in a number of ways. The evidence provided for a recent tender (Changing Futures) that the partners involved in the Nottingham City bid are committed to developing trauma-informed practice and psychologically informed environments, was seen to have strengthened the bid, and helped the local authority to secure the funding. Similarly, we found some evidence of the PDU influencing the Integrated Care Partnership and Joint Needs Assessment strategies to ensure the severe and multiple disadvantage was specifically prioritised, and we also heard that the learning events had had an influence on commissioning planning. This is in no way insignificant and demonstrates the potential contribution capacity in this area.

5. Strong and diverse relationships across the sector

Finally, and an area which is not yet as advanced as others but for which the evaluation team saw significant potential, is in the facilitation of strong and diverse relationships across the sector. In the same way as local relationships have been enhanced, there has been a more recent focus on developing cross-sector involvement in the PDU. A further focus on this should bring a more diverse audience to the work of the PDU and ensure a greater impact and reach.

➡ **Recommendation:** consider whether there are more collaborative ways to undertake learning linked with wider objectives to encourage commissioners and other parts of statutory services are more involved in PDU activities.

6.4.2 Lower levels of contribution capacity

1. Leadership support (including political)

We did not find any particular focus on ‘Systems Leadership’ in the activities of the PDU, and it is clear that the work has been primarily targeted at front-line practitioners (although some commissioners from the local authority have also been involved).

As discussed earlier (Section 2 - Context), systems leadership is seen as a vital component of systems change. Arguably, without people across the system who have a deep and enduring understanding of the problem, and the skills attributes and behaviours requisite of leaders operating in complexity, the opportunities for long term change are limited.

As the PDU moves into a new phase of delivery, they may want to consider how (and if) this is an area in which they would like to increase their contribution capacity.

➡ **Recommendation:** consider developing modules of learning around ‘Systems Leadership’ and leading beyond boundaries

2. Letting go of the illusion of control

This condition for change relates primarily to people being prepared to work beyond boundaries, share accountability and relinquish organisational control. There is very little evidence in our evaluation that suggests that the PDU has had any influence in this area. However, it is also one of the most challenging aspects of systems change and it may be the case that this is not an area that the PDU can, or should, focus upon.

3. Ability to influence key functions (legal, finance, procurement)

We mentioned earlier that we found some examples of the PDU influencing the commissioning of services that support people facing multiple disadvantage; however we would assess this to be relatively limited. Ultimately, the PDU has very little influence on the systems and processes that underpin the way that services are delivered – and this will limit the contribution it can make to a HLS. Ultimately, whilst the up skilling of the workforce in terms of knowledge and understanding may support different ways of working on the front-line, whilst inherent structural issues remain that perpetuate the barriers individuals face, progress will be limited. This may well be outside the remit of the PDU, although some consideration could be given as to how the PDU can exert more influence (particularly through raising the voice of people with lived experience).

4. Flexible legislation and regulation

Finally, the PDU was found to have very little contribution capacity around developing flexible legislation and regulation which is seen to be outside of scope for its core activities.

6.5 Contribution to Opportunity Nottingham’s systems change aims

The evaluation looked at to what extent the PDU was helping to meet Opportunity Nottingham’s system change aims. Each of the current five aims is identified below with the evidence that was found against them, including from the questions reported on in section 6.4 about Human Learning Systems.

Drawing from data detailed above and that drawn from the survey and interview data, we found evidence of the PDU impact on the wider system in the following areas:

- **Sharing learning** – through developing better understanding, underpinned by evidence and research
- **Encouraging partnership working** – through providing opportunities to network and learn from others
- **Raising the profile** – about the issues that need to be addressed
- **Driving the conversation** – about complex need and individuals facing multiple disadvantage
- **Including the ‘voice’ of people with lived experience** – both through modelling co-production, but also through championing the voice of experts by experience
- **Influencing strategy** – to ensure that there is a city-wide commitment to supporting people with facing multiple disadvantage

6.5.1 The five systems change aims

Below is discussion of findings and recommendations under each of the five Opportunity Nottingham systems change aims.

1. The system works as one

Success under this aim is identified as: Services are accessible *before* crisis | Access and referral systems are *flexible* | Services *share* information and co-operate | Everybody knows their role | People with multiple and complex needs can navigate the system.

In our survey, “*Local relationships working collaboratively across the system*” was rated as the lowest challenge, and our research has certainly found strong evidence of enhanced networking and partnership amongst the voluntary and community sector. This extends to some degree to the statutory sector, but research participants identified that statutory sector involvement had been less easy to facilitate. This is reflected in the statement, “*Shared understanding and clearly articulated case for change*” being rated as the third greatest challenge – there has been a change in relationships, with the PDU being central to facilitating these, but this is not yet system-wide.

There was evidence of shared responsibility and a willingness to work more collaboratively, seen to have been facilitated by the PDU. This included developing a sense of the challenges faced by agencies being ‘collective’ and there being a collective responsibility to resolve or work together,

“It sort of feels like we are part of a movement rather than it being any one organisations agenda.” (Interviewee)

The PDU was also found to have facilitated networking and an enhanced understanding of the various agencies involved in supporting people,

“...by attending meetings I find out who, when and why services exist. This is very hard to do if you don’t ‘mix’ with them daily but very easy is we are placed on the same platform. We can then discuss from different perspectives and understand what others offer that benefit our own service users” (Survey respondent)

Having a shared language and understanding of concepts has helped with easier communication between organisations,

“Prior to the PDU we didn’t have language around trauma informed practice or psychologically informed environments. We didn’t know about adverse childhood experiences. That wasn’t common parlance and certainly wasn’t a common understanding.” (Focus group participant)

➡ **Recommendation:** further work needs to take place at a senior, strategic level to aim to replicate the successes of the PDU at a system-level, particularly incorporating statutory services, bringing the whole system together to share understanding of the issues and to work collaboratively.

2. Services are welcoming

Success under this aim is identified as: Multiple and complex needs is ‘everybody’s business’ | Multiple and complex needs *opens access* to services; it does not act as a barrier | Services do not make it hard to engage | Services are provided *without stigma* or judgement | Services are *psychologically informed*.

The provision of psychologically and trauma informed learning was very commonly mentioned by research participants. The evidence-based learning has enhanced knowledge and expertise around supporting people facing multiple disadvantage, and there is strong evidence to suggest that the work around trauma informed care and psychologically informed environments has really enhanced

a shared understanding of the importance of trauma informed practice (see section 6.1.7). It is also clear that there were changes to services as a result (see section 6.5.1).

3. The system is service user led and informed

Success under this aim is identified as: The value of lived experience is recognised, and is core to service design and delivery | Approaches and goals are defined by service users | Engagement is always two-way, with meaningful feedback.

The involvement of Experts by Experience was highlighted as having had an impact on the wider system as well as on them as individual participants of learning.

“I love the online meetings where I get to hear Experts talk about their experiences and what helped them to make change. I feel that ALL services – public or charity should use this within induction or even at interview to illustrate the sensitive and difficult situations that they will be wading their size 10 boots into....” (Survey respondent)

“Having the faces of expert citizens is useful because it’s easier to reach people with good stories when people can talk about their experiences and make it real. Political leadership are prepared to listen more. When you hear from people who have been there it makes it more understandable.” (Focus group respondent)

“I think people who receive services feel more listened to. They are starting to believe that their voice is credible and can steer services. Commissioners are listening more to the voices of people with lived experience and being part of the forum that includes people with lived experience, and that didn't happen before. And services are improved as a result of that listening and doing process.” (Focus group participant)

The PDU has both modelled good practice in relation to involving people with lived experience in delivery (coproduction) it has also facilitated sessions in order that their voices have been heard. This has been welcomed by participants and contributors.

There remains a risk of this being ‘lip service’ and of collaboration and consultation being tick box rather than truly participatory with value to services and to beneficiaries.

4. We build resilience in service users and the workforce

Success under this aim is identified as: The frontline takes a strengths-based, progress-focused approach | Services understand and can articulate what progress means | Services stick with people and re-presentation is encouraged and permitted.

The concept of resilience is not without its problems¹⁹. It can focus more on the individual needing to change when the social and economic conditions make this difficult and set them up for failure. It can overlook that even positive coping mechanisms that work in the short term can be counterproductive in the longer term. Genetic and epigenetic factors, intergenerational trauma, and neurological pathways created as a result of early childhood trauma can leave individuals physiologically vulnerable to stresses around them, with feelings of shame when they are unable to demonstrate the “resilience” that is expected of them. The importance of service users being welcomed back in this aim helps to ameliorate this, although there was some feedback with frustration about programmes being time-limited which can constrain this.

¹⁹ For example see Mahdiani, H. and Ungar, M. (2021)

Expectations around resilience can apply to workers absorbing the effects of vicarious trauma without an adequate psychological framework to understand what is happening to them. This can also be the case within organisations that expect staff to be resilient, rather than recognising that feeling and expressing emotion is an inevitable and necessary part of the work. The disconnect between workers and management that was apparent in some of the responses may indicate further work needed in this area.

Although it wasn't an area that organisations were specifically questioned about, the research did not pick up how organisations were putting structures in place to focus on the psychological and relational aspects of working with trauma. One participant identified that there were employee assistance schemes in place in some organisations, but these are likely to be limited and not appropriate to be dealing with the ongoing aspects of the work, or the way that work is managed day-to-day. On-site clinical supervision or learning and reflection sessions would be much more beneficial. There are also four "Act on Wellbeing" sessions available in the online hub.

There was some acknowledgement of taking a strengths-based approach as part of the learning.

- **Recommendation:** the psychologically based sessions have been well-received by participants, and there are further opportunities for the PDU to work with organisations to implement psychologically informed environments at a deeper and more holistic level. This would give workers greater insights into their own psychological processes and consider their broader support needs at an organisational level. This links with recommendations considering organisational culture as a whole, and greater involvement of senior and strategic staff in activities.
- **Recommendations:** the sessions targeted specifically at commissioners were well-received and better attended by senior, strategic staff than more general sessions. More sessions targeted at managers, trustees and other governors may help to focus them on their role around culture change to better support people with multiple disadvantage.

5. We acknowledge and respond to multiple and complex needs

Success under this aim is identified as: Multiple and complex needs and the people experiencing these needs are recognised and defined in policy | The root causes of multiple and complex needs are understood, for different groups and from a 'whole life' perspective.

"The PDU is at the forefront of keeping the sector informed of the latest evidence of the best ways to support people with severe and multiple disadvantage" (Survey respondent)

"Political support for multiple disadvantage" was rated the greatest challenge in our survey.

When considering the wider system, there were some interesting reflections about the way in which the PDU has influenced change, and in particular had drawn attention and awareness to the issues for people facing multiple disadvantage,

"Services in Nottingham now have a much better understanding of multiple disadvantage which I think the PDU has driven due to having a wealth of research and resources all in one place that can be accessed easily" (Survey respondent)

"The PDU is strong on encouraging organisations to share, maybe not power but information and resources, and encourage cooperation, although that can change when there's competition for services. Political support has maybe increased by the PDU as multiple disadvantage is made more visible." (Focus group participant)

➡ **Recommendation:** consider whether there are more cooperative ways to undertake commissioning, for example looking at the human learning systems approach (see section 6.4) that helps to maintain sharing and cooperation rather than creating competition between services. This could include commissioners and other parts of statutory services being more involved in PDU activities.

One of our interviewees also described how the PDU has been involved in discussions across various multi-agency partnerships in the city. They considered the PDU a valued partner that had influenced some of the city's strategies including the Joint Strategic Needs Assessment and the Integrated Care Partnership (ICP) Assessment,

"[Opportunity] Nottingham and the creation of the ICP severe and multiple disadvantage priority workstream have led to more effective cross org working. The PDU has helped with this, particularly when being involved in ON annual events, or when Anna Tickle/PDU has presented at forums such as the ICP, how much of this effective working is down to individuals remains to be seen" (Survey respondent)

Another respondent felt that there was further to go,

"Things are moving in the right direction but getting statutory services to work more effectively with the voluntary sector takes a cultural shift. Adult social care has accepted trusted assessors for example. However, it will take change to the ICS, so that commissioning changes are made to increase funding opportunities for the voluntary sector and develop alliances between organisations, for real change to be made." (Survey respondent)

It was noted that this came amongst a backdrop of austerity and disinvestment which was working against progress being made. As one interviewee commented when asked if the PDU had made positive change to the wider system,

"If you are able to adjust for austerity, then yes, things are better." (Interviewee)

The PDU was also seen to have enhanced individual commissioners' understanding of the issues, and in turn this has meant that they have more clarity about what is needed. Simultaneously, providers of services have a shared understanding of what this means for them.

- ➡ **Recommendations:** there are still further opportunities for the PDU to link in more strategically with the severe and multiple disadvantage meetings and multi-disciplinary teams. There needs to be coordination at a senior strategic level for this to happen, and for commitment to make it possible for workers to spend time on and prioritise this work.
- ➡ **Recommendation:** consider creating more space to work with statutory partners – facilitate more cross-sector learning/conversations

6.5.2 The PDU's role in systems change

Despite the positive aspects highlighted during our fieldwork, it was also noted that respondents did find it difficult to assess the full impact. Our interviewees, for example, struggled to describe what 'systems change' would look like and felt that this was not explicitly addressed by the PDU. Again, it was perceived that there has been little follow up by the PDU in terms of the impact of activities on longer term change, and issues of attribution and causality were difficult to assess.

It was also noted that progress was slow, and whilst tentatively positive it was suggested by several of the interviewees that there was still much more to do and that this would need far more engagement with statutory agencies, and commitment from a range of partners,

*“Things are moving in the right direction but getting statutory services to work more effectively with the voluntary sector takes a cultural shift.....However, it will take a change to the ICS, so that commissioning changes are made to increase funding opportunities for the voluntary sector and develop alliances between organisations, for real change to be made”
(Survey respondent)*

Furthermore, again we found little evidence that demonstrated change had had a direct impact on service users. Whilst there was a ‘hope’ that things had changed, it is clear that this is an area that needs further exploration,

“Would service users say things are better?...there are definitely things that are done that I would hope people using services might feel were better if they could compare before and afterwards.” (Interviewee)

- ➡ **Recommendation:** Consider whether there might be closer and more explicit alignment to the systems change agenda and more determined by the issues that front-line staff face.
- ➡ **Recommendation:** More explicit links to the ICP to articulate the longer-term vision and what the work of the PDU is aimed at achieving, so that this change can then be more closely monitored and reported against.

Section 7: Recommendations

Our recommendations encompass a need for greater involvement of larger/statutory services and more consideration of what is needed at senior strategic levels to support the frontline. It is clear that its important activities are linked with wider system change aims, and that there is focused follow up, in particular to help experts by experience to feel that their contribution has been valued.

Based on our findings, we offer the following recommendations for consideration:

7.1 Increasing the PDU's reach and impact

- When Covid allows, consider larger conferences and workshops, bringing a wider range of people together. This would increase buy-in, relationships and understanding of the issues amongst a greater range of agencies.
- Creating some specific pathways on the PDU hub, based on people's area of work, role and interests to help people focus their learning.
- Consider more ways for people to be able to access learning opportunities out of office hours to enable people in more diverse roles to engage.
- Facilitate more practice sharing, and cross-agency learning by promoting opportunities across sectors, with a particular focus on practitioners working outside of targeted support (i.e. DWP, health practitioners, social workers)
- Increase the number of Communities of Practice.
- Decide whether or not to include organisations from outside Nottingham and Nottinghamshire in activities, depending on the wider strategic aims. This could include having two-tier access: for example some activities that are only for local organisations and some open wider, and/or charging organisations from outside the local area to access learning.
- Consider opportunities to further increase reach into strategic forums in the city.
- Build upon relationships fostered through the shared learning experiences, through facilitating best-practice sharing and development.
- Consider more collaborative ways to undertake learning, to encourage commissioners and other parts of statutory services to be more involved in PDU activities.
- More sessions targeted at managers, trustees and other governors may help to focus them on their role around culture change.
- Consider sending out information more regularly, about what learning is available. Provide clarity about how organisations can be involved with the PDU (i.e. the 'ask' for attending meetings) and continue general promotion to ensure that people know about the email list.

7.2 Capturing Impact

- Developing ongoing systems to identify and capture the impact on beneficiaries will help the PDU to reflect on and promote its impact. This may include case studies to illustrate outcomes, or more robust measurements: the number of incidents with beneficiaries, percentage of beneficiaries completing programmes, outcomes for beneficiaries, and/or staff and volunteer satisfaction and retention.
- Develop a framework to implement ongoing impact measurement to capture changes contemporaneously and as a routine part of activity. For example, this can include *projectable change*, which is planned and part of a specific piece of work; *transformative change* – when needing to adapt to a crisis or other urgent situation; and *emergent change* – from constantly

learning and adapting. Theories of change can help to plot and demonstrate intermediate change when the ultimate goal is longer-term. Using outcomes mapping can help to think about change from the perspective of different stakeholders who might value different outcomes in different ways.

- More explicit links to the ICP to articulate the longer-term vision and what the work of the PDU is aimed at achieving, so that this change can then be more closely monitored and reported against.
- Collect information about impact, to publicise changes, for other organisations to be inspired by and follow.
- Consider follow up of activities, including emphasising how implementing trauma and psychologically informed services is not just a one-off intervention but needs continual thought and adaption. This will help to create greater accountability within organisations.
- Highlight to participants the issues around the cost of the involvement with people with lived experience to encourage them to be more explicit about what they are doing with the learning.
- Supporting individuals with the 'what next' aspect following learning. This supports participants to actively promote and drive change in their respective organisations.

7.3 Promoting the value of lived experience

- Consider whether what some people perceive as inappropriate contributions by people with lived experience can be utilised within workshops in "parallel process" as learning.
- Encourage organisations to recognise there may be staff members and volunteers within the PDU participants who have a range of lived experience. They may also experience emotional distress and concerns about disclosing or feel unable to participate.
- Encourage service delivery organisations from the voluntary and public sectors to become more involved in learning events and the community of practice to consider what steps they can take to encourage more user involvement.
- Create more feedback to experts by experience and others about what has happened as a result of their input.

7.4 Contributing to systems change and the human, learning system

- Consider more emphasis on relational aspects of psychologically informed approaches, encompassing whole organisation culture change. This includes considering the impact of vicarious trauma and providing the opportunity for reflection and clinical supervision as appropriate at all levels of the organisation.
- Work with organisations to implement psychologically informed environments at a deeper and more holistic level.
- Consider whether the learning needs to fit within a more structured programme of change, for example, specific contribution to the systems change plan or to Changing Futures objectives. Ensure the balance is currently right to attract a diverse range of individuals, roles and organisations.
- Consider closer and more explicit alignment to the systems change agenda, more determined by the issues that frontline staff face.
- Consider developing modules of learning around 'Systems Leadership' and leading beyond boundaries.

- Further work needs to take place at a senior, strategic level to aim to replicate the successes of the PDU at a system-level, particularly incorporating statutory services, bringing the whole system together to share understanding of the issues and to work collaboratively.

References

- Arnstein, S. (2019) 'A Ladder of Citizen Participation', *Journal of the American Planning Association*, 85:1, 24-34. Available at <https://doi.org/10.1080/01944363.2018.1559388>
- Bramley, G, Fitzpatrick, S, Edwards, J, Ford, D, Johnsen, S, Sosenko, F & Watkins, D 2015, *Hard Edges: mapping severe and multiple disadvantage in England*. Lankelly Chase Foundation, London.
- Duncan, M. and Corner, J. (2012) *Severe and Multiple Disadvantage: A review of key texts*. Lankelly Chase Foundation, London.
- Department for Work and Pensions (2012) *Social Justice: Transforming Lives*. London: DWP.
- Fitzpatrick, S. (2005) 'Explaining homelessness: a critical realist perspective', *Housing, Theory & Society*, 22(1) pp. 1–17.
- Fitzpatrick, S., Bramley, G. & Johnsen, S. (2013) 'Pathways into multiple exclusion homelessness in seven UK cities', *Urban Studies*, 50 (1) pp. 148–168.
- French, M. and Lowe, T. (2018) *Place Action Inquiry: Our learning to date*. Lankelly Chase Foundation, London.
- Ghate, D. Lewis, J. and Welbourn, D. (2013) *Systems Leadership: Exceptional Leadership for Exceptional Times: Synthesis paper*. Cass Business School, City University London, The Colebrooke Centre for Evidence and Implementation.
- Grint, K, (2005) 'Problems, Problems, Problems: The Social Construction of Leadership', *Human Relations*, 58 (11) pp. 1467-1494.
- Hobbs, C. (2019) *Systemic Leadership for Local Governance, Tapping the resource within*. Palgrave Macmillan, Switzerland.
- Lowe, T. and Plimmer, D. (2019) *Exploring the new world: practical insights for funding, commissioning and managing in complexity*. Available at: <https://collaboratecic.com/exploring-the-new-world-practical-insights-for-funding-commissioning-and-managing-in-complexity-20a0c53b89aa>
- Mahdiani, H. and Ungar, M. (2021) 'The Dark Side of Resilience', *Adversity and Resilience Science* 2:147–155. Available at <https://doi.org/10.1007/s42844-021-00031-z>
- Making Every Adult Matter (MEAM) Coalition (2018) *Tackling Multiple Disadvantage Nationwide, A Strategy for the MEAM Coalition 2018-2022*. Available at <http://meam.org.uk/wp-content/uploads/2018/10/HOMJ6444-MEAM-Strategy-doc-181003-WEB.pdf>
- Obolensky, N. (2010) *Complex Adaptive Leadership: Embracing Paradox and Uncertainty*. Gower Publishing Company, Farnham, Surrey, England.
- Reeler, D. (2007) *A three-fold theory of social change*, The Community Development Resource Association, available from https://www.shareweb.ch/site/Poverty-Wellbeing/Documents/media_-_addressing_poverty_in_practice_-_impact_hypotheses_-_reeler_a_theory_of_social_change.pdf
- Rittel, H. W. J., and Webber, M. M. (1973). 'Dilemmas in a general theory of planning', *Policy Sciences*, 4 (2) pp. 155–169.

Sandu, R. D. (2021). 'Defining severe and multiple disadvantage from the inside: Perspectives of young people and of their support workers', *Journal of Community Psychology*
<https://doi.org/10.1002/jcop.22572>

Tickle, A. (2019) *An overview of Psychologically Informed Environments / Trauma Informed Care and implications for commissioning*, available from the PDU online hub at
<https://www.pdunottingham.org/my-activity/work-streams/psychologically-informed-approaches/>

Wendy, R. and Bob, (2003) H. 'Conceptual Issues in Inter-Agency Collaboration', *Local Government Studies*, 29 (33) pp. 2-50.

Appendix 1 – list of participants

We would like to thank everyone who gave up their time to participate in this research. The list below is participants at steering and focus groups and individual interviews.

Aaron Freestone	SEA
Ann-Louise Rees-Mowbray	Futures for You
Anna Tickle	Framework Housing Association
Bobby Lowen	Nottingham City Council
Dave Thomas	NCVS
Denis Tully	Emmanuel House
Deonne Peters	Opportunity Nottingham
Ellie Lupton	Opportunity Nottingham
Filipa Santos	PDU
Graham Bowpitt	Nottingham Trent University
Grant Everitt	Opportunity Nottingham
Hayley Harris	Opportunity Nottingham
Heloise Miller	SEA
Janine Bryan	Framework Housing Association
Jules Sebelin	NCVS
Julia Berrington	Emmanuel House
Julian Jennings	Opportunity Nottingham
Katy Gilbert	Opportunity Nottingham
Keely Groom	PDU
Kirsty Youngs	Nottingham Community Housing Association
Lee Cross	Opportunity Nottingham
Leslie McDonald	Nottingham Counselling Service
Maria Ward	D2N2 / Nottinghamshire County Council
Richard Galloway	Opportunity Nottingham
Rob Eagle	Opportunity Nottingham
Sandra McCallum	Opportunity Nottingham
Sarah Bull	D2N2 / Nottinghamshire City Council
Shamaila Kauser	Opportunity Nottingham
Tejinder Swali	Opportunity Nottingham

Appendix 2 – literature review

At the core of the PDU's activity, is a belief that the needs of people experiencing severe and multiple disadvantage are best met by services which operate within a connected, informed system. The following section presents the context for the report by outlining the conceptual and theoretical basis for this approach. It begins by defining severe and multiple disadvantage and setting out the Nottingham context, before introducing the concept of 'systems' and practice of 'systems working' as a means of responding to the challenge presented by severe and multiple disadvantage. The section concludes by considering enablers of system change, presenting a synopsis of Ghate's (2013) framework for systems leadership, and the Human Learning Systems approach (Lowe & Plimmer, 2019).

2.1 Severe and multiple disadvantage and the Nottingham context

Numerous attempts have been made to define severe and multiple disadvantage, with a similarly broad range of terminology adopted by policy makers, academics and professionals (Sandhu, 2021). Over time, language such as 'multiple and complex needs', 'high support needs', 'chronic exclusion' and 'severe and multiple disadvantage' has been used interchangeably to refer to the experience of combined disadvantages. Duncan and Corner (2012) argue that the term severe and multiple disadvantage provides the most useful language through which to describe and discuss the experience; enabling a discourse which avoids pathologising the individual whilst recognising that social and political intervention is required,

"The advantage of employing SMD is that it recognises the social nature of disadvantage by emphasising its relativity: as the experience of disadvantages that most others don't experience. This avoids the individualising effect of talking about 'needs', which appear to originate from the peculiarities of the person rather than inhering in social relations and requiring social and political solutions" (p3).

Whilst individuals may experience various disadvantages either singularly or in combination, in recent years within policy and practice, the term severe and multiple disadvantage has commonly been defined by the experience of two or more of the following issues: homelessness, substance misuse, mental health problems and offending behaviours (Bramley et al., 2015; MEAM 2018). Particular attention has been directed to these domains of disadvantage due to their overlapping and mutually reinforcing nature (Fitzpatrick 2005; Fitzpatrick et al., 2013), which is found to produce a complex and intractable challenge. The issues are seen as interlocking, with their impact stemming from the cumulative effect of disadvantage, rather than the severity of any one issue (Duncan and Corner, 2012). For the individual, the consequence is often stigma and social dislocation, resulting everyday life at the extreme margins society (Bramley et al., 2015), whilst for communities there are high social and economic costs (Fitzpatrick et al 2011; DWP 2012).

Drawing together data from three service-based sources (OASys, NDTMS, and SP), Bramley et al., (2015) suggest that around 1,470 severe and multiple disadvantage cases are likely to be encountered by the average local authority over a twelve-month period²⁰. Across local authorities in England, Nottingham was found to have the eighth highest prevalence of severe and multiple disadvantage.

²⁰ The authors also recognise that this figure is likely to be an under-estimate due to gaps in service take-up (i.e. underrepresentation of women, and BAME and LGBT+ groups) and that the number of cases are typically more heavily concentrated in northern cities, some seaside towns and central London boroughs.

2.2 Responding to severe and multiple disadvantage through a systems approach

Severe and multiple disadvantage has been observed as a ‘wicked problem’, a concept developed to describe complex and intractable issues (Rittel and Webber, 1973; Grint, 2005). Akin to severe and multiple disadvantage, wicked problems are characterised by their multifaceted cause and effect, often being symptoms of other problems to which they are intrinsically linked. Solutions to wicked problems are typically difficult, if not impossible, to identify and attempts to find solutions can lead to unintended consequences which may further compound the problem. It is suggested by some that the prevalence of wicked problems has increased as the resource available to address them has reduced (Ghate, 2013). This, it is argued, necessitates public services to identify new ways of working across organisational boundaries in order to cope with increased “volatility, uncertainty, chaos and ambiguity” (Ghate, 2013, pg 6).

In the UK, the response to this challenge has been a movement towards a “network governance” approach to public service delivery. This promotes collaborative working across organisational boundaries (Ranade and Hudson, 2003), providing opportunity to draw upon knowledge and expertise from disparate sectors, with the potential to yield better outcomes for citizens. This practice is referred to as a ‘systems approach’. A system can be defined as an entity which incorporates multiple individual organisations that interact (Ghate et al, 2013), has collaborative capacity and collectively shared objectives (Hobbs, 2019). Systems are themselves complex, but are also adaptive, fluid and dynamic (Obelensky, 2010). They are inherently interconnected and interdependent and, in the context of public services, often geographically located and focused upon local need.

Some argue however, that the systems approach has had limited success, with a disjuncture evident between the rhetoric and reality of public service delivery. For Hobbs (2019), the required change in mindset extolled in the systems approach literature has been impeded by an attachment to a mechanistic paradigm, fragmented service delivery and silo working. She suggests that if this dysfunction is to be overcome, a new mindset of questioning, exploring and “way finding” is needed.

2.3 Enabling Systems Change

Adopting a systems approach undoubtedly poses a challenge for individuals, organisations and whole-systems. Leadership emerges as a recurrent theme across the systems literature, its style being core to the effective operation of a system. Grint (2005) makes a distinction between command (of critical problems), management (of tame problems) and leadership (of wicked problems), highlighting the forms of authority which underpin these approaches, and arguing that legitimacy is drawn from the problem they seek to address (see Fig.2.1). When wicked issues are prevalent, leadership – he argues - is the only effective form of authority. However, Grint (ibid) also acknowledges an inherent irony in that the more complex and wicked a problem becomes, the more leaders seek to find the answers and try to hold onto traditional styles of leadership – and the more difficult it becomes to let go and embrace ambiguity, conflict and complexity.

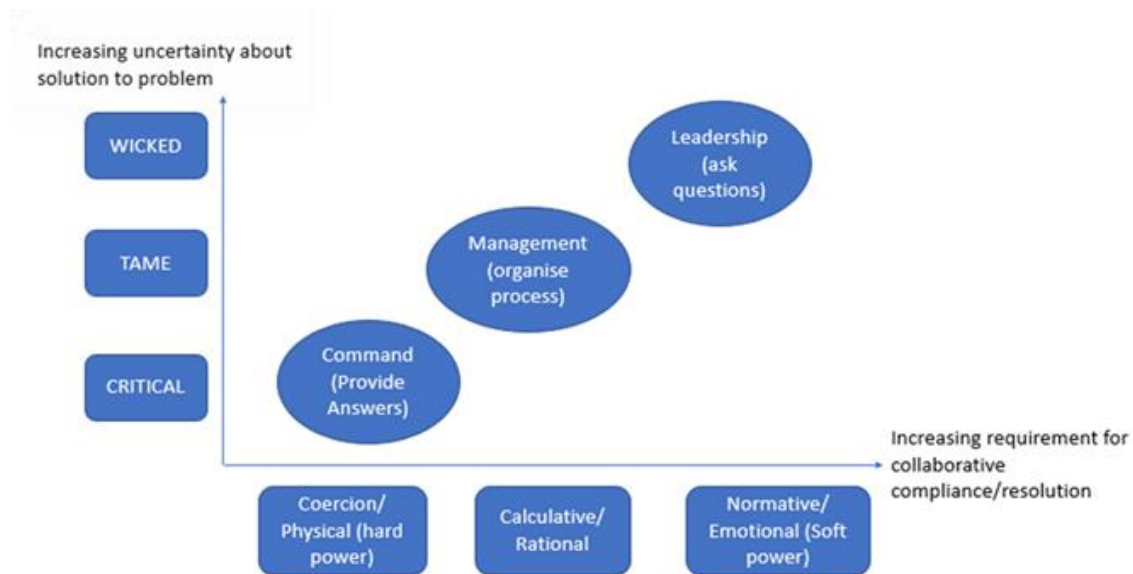


Figure 2.1. Grint's typology of problems, power and authority (Grint, 2005, Pg 14)

More generally, French and Lowe (2018) identify particular systems behaviours that they regard as conducive to effective systems working across public services. These behaviours, which sit across the domains of perspective, power and participation (see Fig 2.2), point to the need to radically shift ways of working, to enable the increased levels of collaboration, power sharing and accountability necessary to tackle complex social problems.



Figure 2.2: Desired Systems Behaviours (Adapted from French & Lowe, 2018, P. 7)

In recent years, the Human Learning Systems approach (HLS) (Lowe and Plimmer, 2019) has emerged as a challenge to established means of organising public services. Its proponents argue that the dominant paradigm for the practice of public management, New Public Management (NPM), is dehumanising, slow to learn and adapt to a changing world, creates fragmentation, and thus is hugely wasteful (HLS, 2021). HLS is seen to have at its core a fundamentally different set of beliefs and management practices which enable systems to engage with the messy reality of how outcomes can be achieved in real lives. This is built around three core elements:

1. **Human** - the approach emphasises the importance of relationships between those who deliver and receive public services. As a fundamentally relational mode of operating, emphasis is placed upon building empathy and trust, and understanding individuals' strengths and needs. Practitioners are seen to be 'liberated' from the traditional management structures and approach which impede relationship building. Instead the contexts, skills and capabilities which support effective relationships are enabled.
2. **Learning** - adaption is a cornerstone of HLS, with the need to respond in new or revised ways seen as critical in contexts of uncertainty and where individual needs may differ. Services and those who run them, must therefore create environments in which learning is possible and encouraged, creating a context in which services can themselves adapt through a continuous process of dialogue and learning.
3. **System** - systems themselves must be 'healthy', nurturing trust, openness and honesty. It is this environment which is seen to enable those within the system to coordinate activity and collaborate effectively, encouraging innovation and motivation, leading to the most effective outcomes for those in receipt of services.