# Evaluation of the One Barnstaple Flow project.

March 2019 - March 2020



Paul Jones Flow Project Co-Ordinator

# **Contents**

- 1. Executive Summary
- 2. Background and introduction
- 3. Methodology
  - 3.1 Flow evaluation workshop
- 4. Key findings
  - 4.1 Which agencies committed to using the Flow approach?
  - 4.2 Evidence of Flow approach being taken by sector
  - 4.3 Breakdown of support requests from the Wellbeing Coordinator
  - 4.4 Personal Impact scores
  - 4.5 Case studies- summary
  - 4.6 Case studies- example case studies
  - 4.7 Professionals comments
  - 4.8 Banish the Winter Blues
- 5 Learning identified from workshop, informal get togethers and direct feedback.
- 6 Conclusions
  - 6.1 Has Flow achieved its outcomes as set out in the Flow logic model?
  - 6.2 Has Flow achieved the impacts as set out in the logic model?
  - 6.3 Has Flow achieved the overall outcome as outlined in the Theory of change?
  - 6.4 Going forward.

Appendix A Flow Theory of Change and Logic Models

Appendix B Case study summary
Appendix C Flow case studies:

Lindsay Clara Sally Jill John

Appendix D Professionals Comments

Appendix E Flow evaluation workshop summary
Appendix F Banish the Winter Blues report

# 1. Executive Summary

This report provides the findings of the evaluation of the Flow project which ran from March 2019 to March 2020.

# 1. Flow approach

One Barnstaple Flow is an alternative approach to traditional social prescribing whereby instead of individuals being referred to a social prescriber for non-medical support, practitioners have 'what matters' conversations with the individuals they are working with and are supported to offer non-medical options themselves by means of Wellbeing Coordinator. The Wellbeing Coordinator interacts with practitioners rather than individuals in order to build system links with wider support so that the 'system flows around the individual' rather than the individual bouncing around the system.

Thirty three teams and organisations committed to the Flow approach across Barnstaple, though only twenty three provided evidence that they had used it. The Flow Wellbeing Coordinator was approached for advice or funding support for seventy five individuals. However, at the Flow evaluation workshop, practitioners reported that the number of individuals supported using the approach is far greater as organisations did not always need support. See Appendix E.

#### 2. Impacts on the individual

Practitioners asked individuals three questions to measure the personal impact using the Flow approach had on them. The pilot very successfully achieved positive impacts for individuals with them reporting an average score of 4.32 out of 5 meaning they felt understood and supported (see 4.4 below).

# 3. Impacts on agencies, professionals and the wider system

At the evaluation workshop, practitioners piloting the Flow approach described the benefits of increased connection between agencies and increased ability to provide a holistic service due to newfound knowledge of community support. Having quick and easy access to funding helped them remove barriers, trigger further funding and gain the trust of the individual. Without Flow, a gap between practitioners and them accessing the wider system would be re-created. See section 5. Whilst it is impossible to predict the future and assess what Flow has prevented within the wider 'system', it is obvious from the case studies (see appendix C) that the approach has significantly reduced future demand on it.

#### 4. Recommendations.

- Expand Flow from Barnstaple to Northern Devon.
- Increase number of organisations taking part.
- Employ Wellbeing Co-Ordinator to co-ordinate all social prescribing and community development activity and embed Flow approach.
- Allocate a personal wellbeing budget to the service.

# 2. Background and introduction

One Barnstaple is a partnership of local staff representing the community, voluntary and public sectors in the town. It sits as a neighbourhood system as part of One Northern Devon whose aim is to improve the wellbeing of residents in Northern Devon by bringing together the different parts of the system to work in a coordinated manner in order to target the health and wellbeing needs of the population.

Via One Northern Devon, One Barnstaple sought and were awarded funds from the Devon County Council Improving Better Care Fund to employ a Wellbeing Coordinator (0.8 FTE) and a Project Coordinator (0.4 FTE) with fixed term contracts commencing in March 2019 for one year. These officers were tasked to encourage and support agencies to step outside of their 'remit' and take a holistic problem-solving approach to supporting individual clients / patients to address their own needs and vulnerabilities and to 'pull in' support of partner agencies where appropriate. If required, support from the Wellbeing Coordinator could be requested either by way of connection to other organisations or use of the wellbeing fund of £20,000.

It was identified that for far too long, agencies had expected individuals to fit the system as opposed to the system adapting to fit them. This meant that those individuals were required to navigate the system themselves and to tell 'their story' repeatedly sometimes re-traumatising themselves. The intention was that the person would only tell their story once and that the practitioner would support them by building a team around them.

The Wellbeing Coordinator role was not designed to be public facing as introducing another link in the system for the individual would defeat one of the key aims of the project. The practitioner would remain their key supporter.

This holistic approach became termed the Flow approach.

# 3. Methodology

The Wellbeing and Project Coordinators recognised that to achieve the aims of the Flow projects holistic problem-solving approach, it would have to involve a system and mind set change for some of those organisations.

See Theory of Change and System Logic Model at Appendix A.

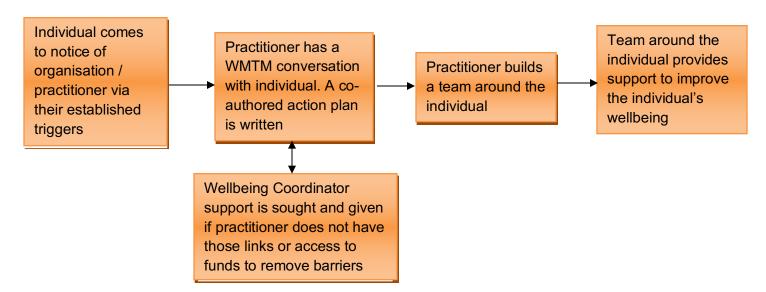
Therefore, a workshop was held in May 2019 for agencies working within Barnstaple to understand the One Barnstaple Flow approach and see how they could be best supported to adopt and develop it for themselves and in turn their clients. Fifty-eight professionals from thirty-nine agencies came together to discuss the opportunities of that integrated system.

The Coordinators commenced approaching organisations that had indicated an interest in working with the project and held individual meetings with them to discuss bespoke plans. Thirty organisations agreed to test the concept within their teams. This meant that they committed to this approach at different rates. Some organisations would test Flow via one or two of their practitioners and some would test it with only some of their clients.

Those practitioners would have a 'what matters to me' (WMTM) conversation with their individual client to understand the full set of circumstances and not simply focus on their own area of business. Once done, this facilitated a co-authored action plan which both the individual and the practitioner owned meaning the client felt that were not simply being 'done to' but that they were being supported to live the life they wanted. The practitioner would then record this plan on their organisational system and would 'pull in' the support of partner organisations. Where they could not source that support, they would contact the Wellbeing Coordinator who would reach out to the community to identify that support. The Wellbeing Coordinator would also provide an opportunity for the practitioner to access funding to remove any barriers to improving the individuals wellbeing. The practitioner was not required to identify the individual to the Wellbeing Coordinator meaning that they remained the key supporter nor were there information sharing issues.

Flow benefitted from the advantage of a 'wellbeing fund' being allocated to the team in order to remove barriers to improving an individual's wellbeing. The process was that after having an understanding conversation with their client, the professional and the client would agree a shared action plan. If funding was a barrier to implementing that action plan, then the professional would contact the Wellbeing Coordinator and discuss how funding would improve the individual's wellbeing. This fund was used in a number of creative and therapeutic ways which can be seen at Appendix B. It was also found that this funding could also unlock other funding streams creating a domino effect. This quick and easy funding application also allowed a practitioner to act rapidly to safeguard an individual as can be seen in the case study about 'John'.

Figure 1: Flow practitioners engagement model.



Further multi agency 'get togethers' were arranged to facilitate feedback to the Flow team as well as encouraging networking amongst the practitioners from all sectors in order to build a sense of

'community' amongst them and encourage direct contacts. Issues and learning were identified throughout the pilot and the main points are discussed in Section 4 of this report.

To allow for a clear understanding and measurement of the Flow approach and how it impacted on the individual, the practitioners were requested to ask three questions of them. The questions were

- To what extent do you feel like your needs were understood?
- To what extent did you feel supported to be able to meet your needs?
- To what extent were you able to meet your needs?

All three questions had five response options of:

1. Not a lot 2. A little 3. More than a little 4. Quite a lot 5. A lot

These results were fed into the overall evaluation given that this was a success measurement outcome outlined in the original funding bid in order to fully understand the impact of the approach on the individual.

# 3.1 Flow evaluation workshop

Towards the end of the Flow pilot, a workshop was facilitated to understand the advantages and challenges of the Flow approach amongst the various professionals. Thirteen practitioners attended the half day workshop. Appendix E gives a summary of what worked and what could be improved.

# 4. Key findings

# 4.1 Which agencies committed to using the Flow approach?

Thirty-three teams, agencies and organisations from within Barnstaple committed to using the Flow approach in part or in whole. Twenty were from the public sector, one from the private sector and twelve from the charity sector. Flow has been a real and significant support for those who understand the benefits of this way of working and are given the permission by their organisations. However, there's little evidence that professionals who do not work in this way have been supported to do so.

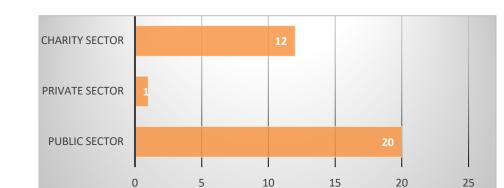


Figure 2: Organisations committing to using the Flow approach by sector.

# 4.2 Evidence of Flow approach being taken by sector

It became very difficult to measure how many individuals within Barnstaple were actually supported by organisations using the Flow approach though it is highly likely that more people were supported in this way than the number of advice or funding requests the Wellbeing Coordinator received. Requests for support were received from twenty-three of those thirty-three agencies for a total of seventy-five people within Barnstaple. Thirty from the Charity sector, none from the Private sector and forty-five from the Public sector.

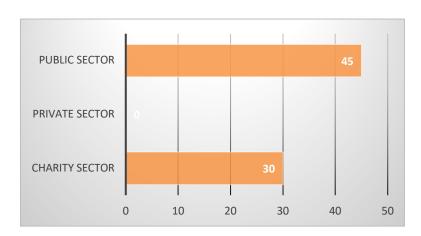


Figure 3: Requests for Flow support by sector.

As all the requests for support were deliberately anonymised, it is impossible to establish the breakdown of the support given to people by gender or age ranges.

# 4.3 Breakdown of support requests from the Wellbeing Coordinator

Of the seventy-five requests for support, twenty-five were for advice about further support available in the community and fifty were funding requests for to remove barriers for the individual to support and improve their wellbeing.

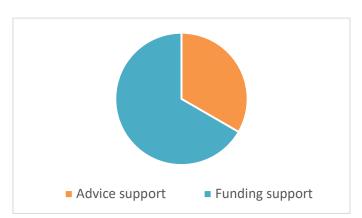


Figure 4: Breakdown of Flow support requests

Of those seventy five requests, they were broken down into five main categories, Activity, Practical / Equipment, Transport, Emotional, Training / Education.

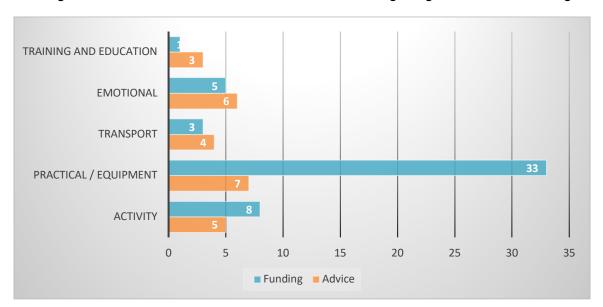


Figure 5: Breakdown of themes for advice and funding sought from the Wellbeing Coordinator

Funding totaling around £9,500 was supplied for 50 individuals meaning that the average cost for each was around £190 (not including the practitioners costs). Compared to the amount the wider 'system' may spend on an individual in a reactive rather than preventative mode, this amount is tiny in comparison and therefore should be seen as an investment rather than a cost.

Support from the Wellbeing Coordinator, whether it be financial or in an advisory capacity, was well appreciated by practitioners as was evidenced during the Flow evaluation workshop and the separate feedback from them. It was felt that because it was a quick and easy application mechanism, it eased the removal of barriers to improve an individual's wellbeing but on occasions also triggered a domino effect in releasing further funding streams. See Appendix D.

# 4.4 Personal Impact scores

As previously outlined, practitioners asked individuals three questions designed to measure the personal impact of using the Flow approach had on them.

Figure 6: Average scores of all individuals measuring the personal impact of Flow

Personal impact questions asked:	Average score out of 5
43 people were asked 'To what extent do you feel like your needs were understood?'	4.4
36 people were asked 'To what extent did you feel supported to be able to meet your needs?'	4.39
36 people were asked 'To what extent were you able to meet your needs?'	4.17

Overall, this scores 4.32 out of 5. It is clear that those who have benefitted from the Flow approach have felt well supported and understood. However, it has not been possible to compare this data against those who have not benefitted from Flow as we have not had the resources to measure a randomised control group.

#### 4.5 Case studies

When a practitioner contacted the Wellbeing Coordinator for support, either advice or funding, the case was listed. Please see a redacted version of that list at Appendix B.

# 4.6 Case studies- example case studies

Appendix C are five anonymised example case studies demonstrating the Flow approach.

#### 4.7 Professionals comments

We have a compiled a number of professionals comments about how the Flow approach has worked for them. Whilst we have not measured a professionals improved experience of a better-connected system; the comments give a flavour of that experience and the impacts they feel the approach has had on their client. Appendix D lists some of the comments given.

# 4.8 Banish the Winter Blues

During the course of the work of the One Barnstaple Flow team, it became increasingly clear that there was an opportunity to encourage the community of Barnstaple to take more control of their own wellbeing by showcasing activities and offering taster sessions of them.

Therefore, a plan to deliver a collaborative community event and named it 'Banish the Winter Blues' was set. The goal was to encourage people to think about wellbeing for themselves and others, engender a sense of community spirit in the town and offer gentle ways to nurture the mind, body and soul.

The team organised a series of activities across various locations in the town on Wednesday 5<sup>th</sup> February 2020. The event was hugely successful with some very positive outcomes. The evaluation report is shown at Appendix F.

# 5. <u>Learning identified</u>

The below is a summary of learning gathered from practitioners in the system during the final evaluation workshop, informal get togethers and direct feedback.

• During the planning phase of the project and prior to employment of the Flow team, there was little time to produce full job descriptions, agree a Memorandum of Understanding (MOU) between the One Northern Devon board (commissioners) and North Devon Voluntary Services (host employers), agree a detailed project and work plan, schedule regular review meetings and agree budget spending rules. The timing of the budget allocation and the need to commission the service within tight timelines meant that this negatively impacted on the pilot, creating confusion about intended direction and an initial delay into the effectiveness of it. This learning

- has already been accepted as MOU's are now standard between the One Northern Devon board and the host employer.
- The Flow approach is a different 'social prescribing' method in that it supports organisations to take a more holistic approach to and for the individual. Whilst this change in 'mind set' is easier for some organisations, it is more difficult for other organisations or professional within it. There is a striking need to support those professionals with relevant training (e.g. what matters conversations, managing expectations and motivational interviewing) as well as support to manage their workload and in turn capacity. An organisation needs to ensure it has the relevant structure in place to test, learn and adapt their approach to supporting an individual. However, the case studies have shown that where that has occurred, there is an improvement in the outcome for the individual but also anecdotal evidence of an improvement in the practitioners experience of a more inclusive system.
- If the Flow professionals are not embedded within a whole system approach to this shift in thinking and way of working, with corresponding changes in attitudes, then it becomes more challenging for them as individuals. If other professionals within an organisation think in a very boundaried way about their role/agency, then it is hard to make this shift.
- Flow has been a real and significant support for those who understand the benefits of this way of working and are given the permission by their organisations. But there's little evidence that professionals who do not work in this way have been supported to do so.
- Feedback from professionals was that the Flow approach is not just for complex issues but can also be used for relatively straightforward cases.
- If there is not sufficient support for the wellbeing of the professional carrying out the Flow role then their wellbeing may suffer (a team approach to wellbeing is suggested). If there are opportunities for training and networking with other like-minded professional's, then this is supportive to the model.
- The issue of clinical supervision is a recurring theme as some organisations do not appear to
  have robust measures in place to support their staff which in turn generates safeguarding risks
  within a system along with negatively impacting on the wellbeing of the professional.
- The interaction with statutory services can form a barrier, but participants thought that Flow provides a channel for interagency working and to feedback this experience (system lever).
- The style of short-term funding to support this change of mindset and stepping out of silos to
  provide relevant support is always problematic. Practitioners felt that a long-term project would
  be more beneficial to embed the Flow approach across more organisations from the various
  sectors which in turn provides a better connected system.
- Practitioners also felt that whilst the 'frontline' was aware of the Flow approach and the benefits
  of it, their senior strategic leaders may not have understood the full benefits and implications of
  it. This highlighted that more emphasis needs to be placed on engagement with those senior
  strategic leaders to explain the challenges but also the benefits of the multi-agency and holistic
  Flow approach.
- The Flow approach of building a team around the individual benefits practitioners in that they
  feel that there is a shared professional risk and responsibility by having that mutual support. Coauthored 'action plans' with the individuals and other organisations provides this feeling of
  shared risk.

- A simple and unbureaucratic system to seek advice and support is fully appreciated by professional as it is responsive and helps to build trust with an individual client / patient.
- The quick and easy funding Flow arrangements allow the practitioner to get involved beyond their normal organisation thresholds.
- The funding can really help build trust with the client and can start and support engagement, which in turn can start a process of change.
- As seeking funding is not bureaucratic and flexible, this facilitates the conversation to go into different places; this also means the client is treated and a human being with respect and dignity, opening up space to trust each other.
- Flow allows practitioners to engage beyond the usual thresholds and boundaries, taking a more rounded holistic view of the individual and their wider social needs. The practitioners invest more time in engaging because it is likely to result in a better long term outcome.
- Professionals asked if the Flow approach could be expanded throughout the wider Northern Devon in order to maximise the positive impacts of the approach.
- It was felt that the Flow platform enabled a greater ability for the practitioner to feedback about the system and more ability to positively influence it. Also, it provides opportunities to network and provide peer support across agencies.
- Whilst the Flow workshops were useful and positive in terms of influencing a change of mindset, it was identified that it was those who weren't at the workshops where future work should focus in order to remove any sense of silo working.
- Opportunities to facilitate multi-agency training days for a cross section of staff from all the sectors was identified e.g. trauma informed practice. This builds greater understanding of each other's roles and an opportunity to 'myth-bust'.
- Greater coordination of training and networking between all agencies was believed to be crucial
  in the spread of the Flow approach. Currently, there is no identified role to do that outside of the
  Flow pilot.
- There is a desire for a directory of services to be provided that is maintained and frequently
  updated meaning that professionals do not waste an inordinate amount of time looking for
  solutions with an individual. This is currently being carried out by Community Developers though
  these roles need continuation of funding.
- Social Prescribing models are often reliant on volunteers. Key themes that were constantly
  registered by professionals was a lack of volunteer transport and befriending services in
  Barnstaple. Resilience needs to be built into the system to recruit, train and support those
  volunteers.
- There is no ability for the general public to self-refer into the 'social prescribing' system outside of Ilfracombe, Braunton and Holsworthy. Therefore, if an individual identifies that they need support, they have to seek an appointment with a professional e.g. GP, first to get a relevant referral. This appears counter-productive to a system model where we are trying to prevent that demand at source.

# 6. Conclusions

# 6.1 Has Flow achieved its outcomes as set out in the Flow logic model?

<u>Individuals feel more in control and able to live the life they want</u> and <u>Improved experience of the 'whole</u> system' for the individual:

The personal impact measures as outlined at 3.4 demonstrate that on average, individuals scored between Quite a lot and A lot in answering how they felt understood, how their needs were understood and how they were able to meet their needs. However, it is impossible to accurately understand if they felt improvements in the system as a result of Flow as we were not able to set a baseline data for this or have the resources to measure against a randomised control group. That said, all the indications are that when the individual received holistic support, then they were better able to meet their needs and therefore had a positive experience of the whole system.

Improved experience for the professional having provided full holistic support and by being better connected:

There were no specific measures set for this outcome though all the case studies and feedback from the workshops and anecdotal evidence strongly points to the fact that the professionals experience of the whole system leaves them better connected. Furthermore, the fact that a professional feels part of a wider network reduces the feeling that they are alone trying to support an individual and therefore provides a positive feeling of wellbeing for themselves.

# 6.2 Has Flow achieved the impacts as set out in the logic model?

Economic benefits to sustainable whole system resulting from reduction in service demand as system is better integrated:

Individual less likely to enter the 'system' as a full co-designed holistic solution is implemented:

As can be seen, the outcomes can be evidenced though the full impacts will take longer to play out and will need more resources to demonstrate them. However early anecdotal evidence suggests that these impacts are likely to positive.

#### 6.3 Has Flow achieved the overall outcome as outlined in the Theory of change?

# System better integrated to meet demand:

Where the Flow approach has been embraced by the practitioner, they have been better placed to connect to the partner agencies and or funding which has enabled them to provide a more rounded support structure with the individual.

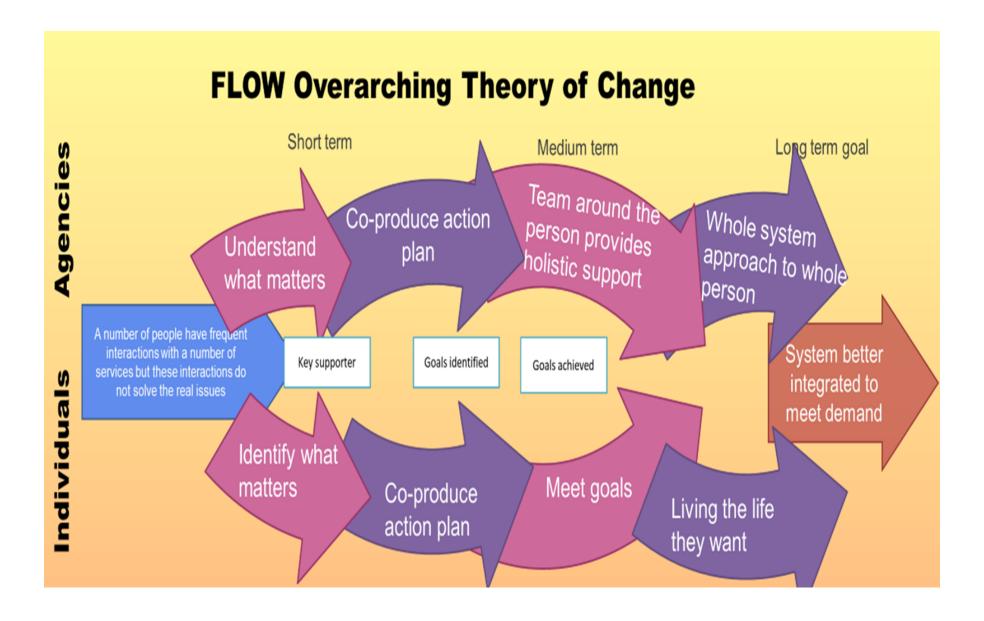
# 6.4 Going forward.

The Flow approach has been adopted across a number of agencies and for some practitioners is now business as usual. This is extremely encouraging and should be recognised as a significant step forward in promoting a person centred approach. This approach should be widened from just

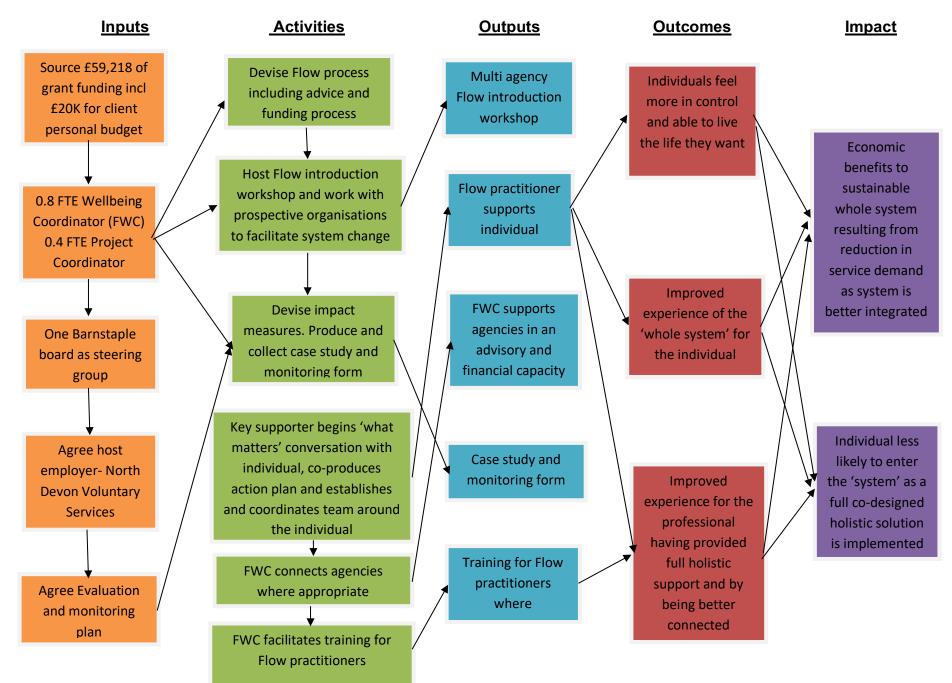
Barnstaple to the wider Northern Devon and increase the number of organisations adopting it. However, for this methodology to be widened across the geography, further work, support and training needs to be given to organisations across all the sectors.

The role of a Wellbeing Coordinator has been pivotal in order to support organisations to 'step out of their silo' and to coordinate a better connected system with organisations working within and adapting an approach. The feedback from practitioners is that having the Wellbeing Coordinator to act as a central point to connect and advise on community asset options has been integral to the successes they have had working with their patients / clients. It is difficult to see how the Flow approach could be spread throughout Northern Devon without this role to support organisations. Therefore, consideration to the funding of this coordination role should be deemed a priority for One Northern Devon in order to continue the spread of the successful Flow approach.

A wellbeing fund was critical in supporting organisations to provide that holistic support to individuals. This funding helped remove barriers to improving an individuals' wellbeing, on occasions triggered further funding streams in a domino effect and in turn resulted in increased trust in the practitioner by the individual.



# Flow Programme Logic Model



# **Case study summary**

	Lead Agency	Flow support sought	Summary of support requested
1	Police DST	Advice sought	Advice given re young father's groups- Inspire South West connection made
2	Flow	Funding request	Funding for archery and taxis to reduce isolation
3	Police DST	Advice sought	Seeking emotional support services for client
4	Barnstaple PCN	Advice sought	Befriending support requested
5	Barnstaple PCN	Advice sought	Volunteering opportunities
6	Care Direct Plus	Funding request	Funding for taxis to attend structured friendship groups to reduce isolation and encourage self sufficiency
7	Encompass	Advice sought	No direct Flow support but did embrace the Flow approach to resolve issues.
8	Encompass	Advice sought	No direct Flow support but did embrace the Flow approach to resolve issues.
9	Pain Service	Advice sought	Advice given re volunteering opportunities, apprenticeships and work placements as well as activity options
10	Pain Service	Funding request	Funding for hydrotherapy pool heater and gate to ensure security increasing overall wellbeing
11	Police DST	Advice sought	Seeking support to identify educational opportunities
12	Police DST	Advice sought	Support for client post drug and alcohol work
13	Barnstaple PCN	Funding request	3 month gym membership to improve confidence and wellbeing
14	Sunrise	Funding request	Complex issue. Funding to source a specialist interpreter sessions and removal costs to improve personal wellbeing and safety
15	Encompass	Funding request	Funding for counselling issues to address long term trauma issues
16	Care Direct Plus	Funding request	Funding for Hare to organise to carry out holistic hoarding services.

17	Sanctuary	Funding request	Funding for removal costs to improve a
18	Encompass	Funding request	client's wellbeing Funding for counselling issues to address long term trauma issues
19	Encompass	Funding request	Funding for furniture removal and bus pass to improve wellbeing
20	Barnstaple PCN	Funding request	Shirts for job interviews to increase long term opportunities
21	Musgrove Hospital	Funding request	Funding for gym membership to improve health outcomes
22	Care Direct Plus	Funding request	Funding for heater as no heating for elderly client
23	Stroke Association	Funding request	Funding for carpet to improve wellbeing. Amount was match funded
24	Bright Futures	Funding request	Funding for college books to improve educational opportunities for a young carer
25	Pain Service	Advice sought	Advice given re volunteer car agencies and other options for transport to reduce social isolation
26	Pain Service	Advice sought	Advice sought re computer software that would transcribe dictated work
27	North Devon Council Environmental Health	Funding request	Funding for Hare to organise to carry out holistic hoarding services.
28	Together Drug and Alcohol service	Advice sought	For funding of bus pass to improve social mobility and in turn wellbeing
29	NDC housing	Funding request	Funding carpet and underlay to reduce ASB issues and remove likelihood of eviction and creating Adverse Childhood Experiences and trauma
30	Care Direct Plus	Funding request	Funding for contribution towards flooring to repair flooded hallway for elderly and physically impaired person. Property was unsafe to inhabit.
31	Stroke Association	Funding request	Funding replacement seat on wheelchair to allow use of it to improve mobility
32	Care Direct Plus	Funding request	Funding Oil filled Heater as no other heating options. Part of a wider care plan.

33	Cancer Care	Funding request	Funding Mobile phone and credit for a sofa surfer who needs to retain contact with Cancer Care services as risks missing treatments.
34	САР	Funding request	Bike, lights and lock to assist with employability options.
35	Pain Service	Advice sought	Advice sought to source cookery workshops and woodwork workshops to improve diet and reduce social isolation
36	Resilient Women's Programme	Funding request	Funding for a female client to access gym membership to improve wellbeing
37	Splitz	Advice sought	Advice on creative workshops and yoga and a piece of land for an allotment
38	Cancer Care	Advice sought	Advice for local services that will do a housebound patients shopping
39	Pain Service	Advice sought	Advice sought about availability of games groups in the area (e.g. Dungeons and Dragons) to reduce social isolation
40	Riverside Mental Health	Advice sought	Seeking to access cookery classes for a patient whose wellbeing is compromised by lack of cookery skills
41	Together Drug and Alcohol service	Funding request	Laptop to increase education outcomes to increase overall wellbeing
42	Bright Futures	Funding request	Gardener for client to improve immediate environment to improve sense of wellbeing
43	Pain Service	Advice sought	Driving instructor for elderly patient who wishes to regain confidence and drive again and also how to improve general fitness
44	Pain Service	Advice sought	Financial advice and also advice re activity groups to get the patient active
45	Pain Service	Advice sought	Access and knowledge to applying for grants for a walk in shower.
46	САР	Advice sought	Funding for mattresses to improve wellbeing and sleep opportunities
47	Pain Service	Advice sought/ funding	Funding to repair car to allow client to reduce social isolation
48	Bright Futures	Funding	Return Travel fare to Kent at Christmas to see family for a client with very poor financial opportunities.
49	Pain Service	Advice sought	Befriending services for mother with dementia so daughter can get some respite

50	361 Energy	Funding	Match fund electric kitchen hob circuit wiring to allow client to cook in a kitchen that has previously flooded
51	Cancer Care	Funding	Counselling and hypnotherapy for High Anxiety levels
52	Neuro Rehab	Advice sought / funding request	Support with housework for client who has left hospital and is unable to carry out
53	Stroke Association	Funding request	Mobility scooter repair and service part contribution for 2 batteries to improve mobility and in turn wellbeing
54	Stroke Association	Funding request	Help with removal costs for a client who has recently suffered a stroke and has had to find new suitable housing
55	361 Energy	Funding request	Flooded kitchen requiring initial socket installation to allow later fitting of a kitchen to improve wellbeing
56	ND Environmental services	Funding request	Clients flooring is rotted due to health condition and therefore pest control/ replace flooring to allow carers to live in
57	ND Environmental services	Funding request	To assist a client with hoarding issues
58	ND Environmental services	Funding request	Funding to landscape garden to prevent squirrel infestation
59	361 Energy	Funding request	Funding for electric blanket and oil filled radiator for client in fuel poverty
60	ND Environmental services	Funding request	Cleaning for client with hoarding issues
61	Encompass	Funding request	Funding request to fund counselling sessions to address long term trauma issues
62	Adult Social Care sensory impairment	Funding request	After a house fire, client requires clothing
63	361 Energy	Funding request	Requires convection heater to keep a vulnerable client warm whilst long term solutions are found
64	Neuro Rehab team	Advice request	Support to find someone to do the shopping for an elderly patient
65	361 Energy	Funding request	Requires convection heater to keep a vulnerable client warm whilst long term solutions are found
66	Adult Social Care	Funding request	Requires microwave, utensils and blankets for elderly vulnerable client
67	Adult Social Care	Funding request	Contribution to a new carpet to keep main living accommodation warm

68	Dietician Team, NDDH	Funding request	Patient with complex issues requires counselling to address ACE's
69	Bright Futures	Funding request	Discounted gym membership for young carer to reduce social isolation and improve self esteem
70	Sunrise	Funding request	Funding for a bed and fridge for vulnerable client
71	Barnstaple PCN	Funding request	National Trust membership for client to connect to nature and improve mobility
72	Community Children's Nursing	Funding request	Funding for specialist massage course for parent to treat child
73	Encompass	Funding request	Rental of space at local art gallery for art therapy for client with safeguarding and long term multi agency impacts
74	Adult social care	Funding request	Funding to pay for plumbing of washing machine for vulnerable client
75	Barnstaple PCN	Funding request	Transport to take a group of patients with low activity levels for cold water swimming sessions

# Flow case study ref F1

# One Barnstaple Flow

One Barnstaple Flow is an alternative approach to traditional social prescribing whereby instead of individuals being referred to a social prescriber for non-medical support, practitioners have 'what matters' conversations with the individuals they are working with and are supported to offer non-medical options themselves by means of a Wellbeing Co-ordinator. The Wellbeing Co-ordinator interacts with practitioners rather than individuals in order to build system links with wider support so that the 'system flows around the individual' rather than the individual bouncing around the system.

# About Lindsay

Lindsay<sup>1</sup> has long-term back and leg pain with related functional impairment together with PTSD from historic physical assault.

Recent benefit issues have culminated in the threat of losing her motability car.

Lindsay supports her partner who has chronic illness as well as 4 other family members.

Lindsay has benefited from using an outdoor solar pool for hydrotherapy exercises and general exercise, a key component of her pain self-management and wellbeing.

Winter weather meant that this could not continue as she couldn't afford a pool heater.

The couple's accommodation has open access to the back of the property, a cause of anxiety due to previous experience of being assaulted in the home.

# What did the Flow practitioner do?

The Clinical Psychologist in the Pain Team at NDDH: had a conversation to understand the circumstances contributing to Lindsay's ongoing pain and as a result:

- Psychological therapy (Eye Movement Desensitization Re-processing)
- Provided Lindsay with food bank vouchers
- The practitioner connected Lindsay to support from DWP to resolve the immediate benefits issues.
- The practitioner connected Lindsay to Encompass / Wiser Money to support her with an appeal
  to DWP regarding the decision to cut her PIP benefits. They are also supporting the extended
  family in liaison with DWP regarding another benefit cessation.
- Used Flow funds to purchase a pool heater to enable year-round use of the hydrotherapy pool
- Used Flow funds to fit a rear gate to increase Lindsay's sense of safety and security.

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<sup>&</sup>lt;sup>1</sup> Not real name.

# How Flow has helped

- Lindsay is now able to feel safe and secure in her garden.
- Lindsay is now able to continue exercising in her hydrotherapy pool in the winter months.
- Food bank vouchers took pressure off during financial hardship by providing food basics.
- Lindsay's mobility benefits have been reinstated to an enhanced level

# How Lindsay feels about the Flow support

"It's good to know that there are charities that take things seriously and try to help, especially in the current climate we are living in. I would like to say thank you for the help you have given us. Now I can feel a lot safer in our back garden and get back to the much-needed pool therapy without freezing to death."

In answer to the three Flow evaluation questions, with the options of 'not a lot, a little, more than a little, quite a lot, a lot'

To what extent did you feel supported to meet your needs? Lindsay answered 'A lot'

To what extent were you able to meet your needs? Lindsay answered 'Quite a lot'

# What were the limitations of Flow?

The latter score is a reflection on the fact that although the individual has been reinstated on the enhanced level for mobility allowance, they have not been reinstated on the enhanced level of care allowance which means that they cannot afford to re-purchase a motability car. Due to the rural location where the family live, this will impact on quality of life and being able to get out and about as much as they would like. The issue of lack of community transport is a common thread identified throughout the Flow pilot.

# How the practitioner feels about the Flow support

"The Flow approach complements and enhances the approach that I already take within my work as a clinical psychologist in a pain team. My approach is informed by a biopsychosocial model and the input from Flow has enabled taking a more active stance in relation to the social/environmental dimension, via provision of funds to purchase items improving the security of the individuals home environment (addressing a basic human need for security) and purchase of a pool heater — enabling them to continue with their home based hydrotherapy exercises. This means that they are better placed to experience sustained and on-going benefit from the time-limited therapeutic work they have engaged with in the pain team. I hope that the pilot project will continue to receive funding going forwards."

# What would have happened without Flow?

This viewpoint is subjective but provides an input to a not unusual series of developments.

If the clinician had not recognised the need for a holistic solution to the issues affecting their patient, any clinical interventions that they would have provided would have been difficult for the patient to sustain due to the other factors affecting their life. Had the clinician not had a full understanding conversation with the individual, the full set of circumstances would not have been understood.

The patient would have ceased to use the outdoor solar hydrotherapy pool during the winter months due to their feelings of insecurity and cold. This would have meant that their physical and mental health could have been severely negatively impacted. Given that they are the main carer and supporter for their partner, 2 daughters, grandchildren and elderly aunty, there would have been increased and wider reliance on public services by the whole family.

This reliance would have been exacerbated by lack of financial funds due to DWP benefits decisions.

The individual feels that without the support offered that they would have been an increased 'burden' on the system which in turn would have increased the family's 'burden' on the community.

# System impact

The clinician is now better assured that their patient is able to continue self-management of their pain thereby reducing the longer-term reliance on health and social care services. The clinician is also now more aware of what other support there is available in the system that they can connect their patients to.

# Flow case study ref F2

# **About Clara**

Clara<sup>2</sup> lives with her spouse in a property in Northern Devon. She has recently suffered a stroke which has caused restricted movement down her right side which reduces her opportunities to leave the house. This is exacerbated by recent flooding in the area which has warped the hall flooring making it very uneven restricting access and egress for her even more. Clara has fallen on two occasions whilst trying to leave the house and continued to put herself at risk when leaving.

Flooding in the local area has led to increased insurance premiums meaning that she and her partner are unable to afford replacement flooring. Hallway flooring is not considered a 'care need' and therefore is not eligible for DCC funding unlike the bathroom which was replaced.

# What did the Flow practitioner do?

The Referral Support Worker for Care Direct Plus had a conversation to understand the circumstances contributing to Clara's difficulties. As a result, they agreed the following actions:

Clara was to obtain a quote for non-slip flooring similar to what had been laid in the bathroom.

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<sup>&</sup>lt;sup>2</sup> Not real name

- Support Worker contacted the Royal British Legion to enquire about funding support. However, as they were already supporting the couple with funding for roofing repairs, they were unable to assist.
- Support Worker contacted the Flow Wellbeing Co-ordinator to arrange using Flow funds to purchase the non-slip flooring materials with Clara funding the fitting. The flooring has now been replaced.

# How Flow has helped

- Clara is now confident in leaving the home allowing easier access to services.
- Clara's spouse is now confident enough to leave Clara at home alone content that her risk of falling is greatly reduced. This reduces his social isolation as a primary carer.

# How Clara feels about the Flow support

In answer to the three Flow evaluation questions, with the options of 'not a lot, a little, more than a little, quite a lot, a lot'

To what extent do you feel your needs were understood? Clara answered 'A lot'

To what extent did you feel supported to meet your needs? Clara answered 'A lot'

To what extent were you able to meet your needs? Clara answered 'A lot'

As can be seen, these are the highest possible scores for all three questions.

# What would have happened without Flow and what are the benefits of it in this case?

This viewpoint is subjective but provides an input to a not unusual series of developments.

If the Support Worker had not recognised the need for a holistic solution this unacceptable situation could have continued and become worse with Clara struggling to access services away from the home meaning that services would have had to be home based. This would have led to increased costs for those public services. Furthermore, the fact that she can now safely leave and return to her property increases her feeling of wellbeing.

Clara's partner, her primary carer, can now also leave the house confident in the knowledge that Clara is less likely to fall. This means that his wellbeing is greatly improved and reduces the likelihood of him being socially isolated. Without that support he would have grown increasingly reliant on public services to reduce that isolation which again brings an increased burden to already overstretched public services.

Instead of the OT supplying additional equipment (which in a small home, can take up much required space), the use in this instance of a hospital grade, non-slip, water-tight flooring is a long-term solution, which can tolerate a subsequent flood, and remain a safe floor for the individual to increase their confidence and their independence.

# System impact

The Support Worker and Clara's clinicians are better assured that she is better able to support herself rather than increase her reliance on health and social care services in the community.

# Flow case study ref F3

# **About Sally**

Sally<sup>3</sup> is a young woman who has diagnosed complex mental health issues which have contributed to her social isolation. She suffers from depression, anxiety, low self-esteem and has an emotionally unstable personality disorder. Furthermore, this is exacerbated by a poor financial situation.

The underlying causes of these issues were several Adverse Childhood Experiences including family mental health issues and domestic abuse. Added to these were her own personal experiences of domestic abuse, unhealthy relationships and low level cannabis use.

Sally is new to the area and therefore has little knowledge of local systems and services and therefore given the mix of all these scenarios has left her feeling extremely isolated with very low self-esteem.

# What did the Flow practitioner do?

The Women's Outreach worker had a conversation with Sally to understand the circumstances contributing to her ongoing situation and as a result:

- They identified physical activities such as a gym helpful for mental health and general wellbeing
- The professional to research gyms and funding options
- The professional to contact the Flow wellbeing coordinator to discuss options that would cater for a young woman with mental health difficulties
- Support to access the Community Mental Health Team

# How Flow has helped

The Flow wellbeing coordinator linked the professional to a body aware fitness centre known to be supportive to this client group. This enabled Sally to have an accompanied visit to the studio where she found the environment to be non-discriminatory, welcoming and supportive to her needs. Once Sally confirmed that she would like to proceed, the professional and the wellbeing coordinator arranged a voucher based system rather than a monthly membership. This flexible arrangement was so she could access the studio on her good days and not feel she was missing out, wasting money or letting

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<sup>&</sup>lt;sup>3</sup> Not real name.

anybody down on days she could not attend due to her poor mental health. This unnecessary pressure would have had a negative impact on her mental health.

# How Sally feels about the Flow support

Sally stated that she is very grateful for the support and was overwhelmed that people who had not met her would invest in her as an individual and understand that access to physical fitness would improve her mental health.

In answer to the three Flow evaluation questions, with the options of 'not a lot, a little, more than a little, quite a lot, a lot'

To what extent do you feel your needs were understood? Sally answered 'A lot'

To what extent did you feel supported to meet your needs? Sally answered 'A lot'

To what extent were you able to meet your needs? Sally answered 'A lot'

# How the practitioner feels about the Flow support

"As I am the only worker for my organisation in North Devon and the nearest team members are in Exeter, it is quite isolating as a worker. So, to have the support and connection to Flow has been helpful to me on a professional basis as I can access support from other professionals and Flow helps identify and enable those professional connections."

"The holistic support has made a real difference to their life and in my opinion will reduce the impact on all services in the long run. Gail's support has been excellent."

# What would have happened without Flow?

This viewpoint is subjective but provides an input to a not unusual set of circumstances.

Being new to the area, Sally was already feeling isolated which negatively impacted on her own unstable mental health and was in financial difficulties so was unable to fund activities and support herself. She acknowledges she was a low level cannabis user which she used as her 'escape'.

Without the professional's intervention, it is possible that with proven links to poor mental health and cannabis use alongside a poor financial state, she would have continued a downward spiral and required increased support from mental health services. With her financial difficulties exacerbating her dilemma it is possible that she would continue interaction with a local criminal element and become increasingly embroiled in criminal activity placing further burden on the criminal justice system but also on the wider community as possible victims.

It is entirely feasible that Sally would have become an increased burden on primary, acute and mental health services, adult social care, the criminal justice system as well as increased reliance on housing services without the Flow practitioners' interventions and support.

# System impact

Professionals involved in this case believe that for a small financial investment, an unnecessary burden on community services in the long run is likely to have been averted.

# Flow case study F4

# **About Jill**

Jill<sup>4</sup> is a young woman who lives with Asperger's and is the carer for her 16 yr old sister as well as her brother who lives with severe Down's Syndrome. She currently works part time in order to support her siblings. Their mother is currently sectioned in a Mental Health Hospital in the Essex area and has stopped filling out forms to claim benefits which has put the children in financial hardship and struggling to pay household bills including the mortgage.

Jill's younger sister is currently at Petroc attempting to study for her A-Levels whilst juggling her domestic commitments. As there is no household income, Jill cannot support her sister to purchase A-Level textbooks. Her sister's situation is exacerbated by the fact that she cannot stay longer at college and take part in group studies as she must get home to share the care for her brother. Furthermore, as their home internet connection is intermittent, she struggles to study whilst in the house as she does not have the textbooks to facilitate this.

Jill struggles to get her brother outside in the household garden for some fresh air as it is overgrown and a severe slip and trip hazard. She is unable to address this issue due to lack of funds.

The mental health teams out of county have not been communicating well with Jill and have not kept her up to date with care decisions taken for her mother.

# What did the Flow practitioner do?

The Bright Futures case worker had a conversation to understand the circumstances contributing to Jill's ongoing situation and as a result:

- Arranged that Jill could contact the practitioner at any stage to provide ongoing support
- The practitioner will contact Social Services to get them to re-engage with the family
- The practitioner will contact Wisermoney to facilitate support for the financial issues
- The practitioner will liaise with Petroc to explore options of a bursary for Jill's 16 yr old sister
- The practitioner will contact Essex mental health teams with a view to better communication with Jill and her family about their mother's care.
- The practitioner will also contact the Flow wellbeing coordinator to explore funding opportunities in relation to A-Level textbooks and garden clearance to improve Jill's brother's wellbeing

<sup>&</sup>lt;sup>4</sup>Not real name.

## How Flow has helped

- Social Services are now re-engaged with the family and to support Jill's brother.
- Wisermoney have now taken pressure off the girls and are also trying to engage their mother to access bank accounts to start paying bills again. Jill is now much less stressed.
- Flow has paid for the A-Level textbooks meaning that young person does not need to stay in college, and when the Wi-Fi has been cut off can still continue studying at home.
- The garden clearance meant it is safer for them to take brother outside, and that they are on top of the maintenance for the winter. This will improve his wellbeing and in turn, theirs.

## How Jill feels about the Flow support

'the books will help immensely with college work. Thank you so much for everything you've done'

In answer to the three Flow evaluation questions, with the options of 'not a lot, a little, more than a little, quite a lot, a lot'

To what extent do you feel like your needs were understood? Jill answered 'A lot'

To what extent did you feel supported to meet your needs? Jill answered 'A lot'

To what extent were you able to meet your needs? Jill answered 'Quite a lot'

# What were the limitations of Flow?

The latter score is a reflection on the fact that Mental Health teams do not communicate well with the young adult carer which means she finds she is not being kept updated with care decisions for her mother. The case workers influence out of county is diminished. At the time of writing, the practitioner was still waiting to hear about a bursary from Petroc.

# How the practitioner feels about the Flow support

'Normally I would have to fill out lots of applications to various trusts for grants. This is time consuming and can take a long time to get an answer/ support and you might not get anything. This has been a really quick way to make a huge difference to someone's life. Massive thanks to Gail for getting a decision so quickly.'

# What would have happened without Flow?

This viewpoint is subjective but provides an input to a not unusual series of developments.

If the practitioner had not recognised the need for a holistic solution to the issues affecting Jill, it is clear that the issues experienced by her and her siblings would have deteriorated still further. Had the caseworker not had a full understanding conversation with her, the full set of circumstances would not have been understood.

It is likely that Jill and her siblings would have got even deeper into debt and in all likelihood would have defaulted on their mortgage and lost the house. This would have led to the families physical and mental health plummeting which would have necessitated a huge investment from the PCN, Acute services as well as DPT. Social housing costs would also hugely increase. There is even the possibility that the family would have been split up living in different locations. This scenario creates added pressure and stress to the family which undoubtedly would have consequences for Health and Social Care services.

Long term, there would be reduced educational opportunities and outcomes for Jill's younger sister. Due to the young age of this family, the long-term impacts are ultimately immeasurable.

# System impact

The case worker is now better assured that their client is better able to live the life they want whilst supporting their siblings to maintain and improve their wellbeing. As above, this intervention has undoubtedly impacted positively on the family's lives but has also prevented already stretched services becoming increasingly so.

# Flow case study F5

#### **About John**

John<sup>5</sup> is an elderly man who lives alone in a rural area within North Devon. His property has no heating or hot water and has damaged windows meaning the house is a cold and damp living environment. John's finances are tied into the family farming business with limited family contact. This results in him being lonely and isolated. He has traditional 'make do and mend' values over modern lifestyle choices and struggles with understanding modern technology. His traditional values also mean that he struggles to ask for help and furthermore, accept it.

John also has a Parkinson's disease diagnosis and a history of falls. He also struggles with some hoarding issues which is mainly historic paperwork issues but that were significant enough to clutter entry and exit routes.

John's only source of heat for the house is via a very old electric heater whose corded flex was broken with exposed electrical wiring. As it is the only source of heat, it wasn't unusual for John to dry damp clothing on the electric heater which was an obvious fire risk. This in addition to the excess of paperwork stored in the house made this a very dangerous environment for a gentleman who has a previous history of falls and blocked entry and exit routes caused by that hoarding.

<sup>&</sup>lt;sup>5</sup>Not real name.

# What did the Flow practitioner do?

The Care Direct Referral Support Worker had a conversation to understand the circumstances contributing to Johns ongoing situation and as a result:

- Identified that heating is main priority as the current plug in heater was a fire hazard to urgently seek funding to purchase a replacement heater to remove the immediate risk.
- To research Fall Detection Apps and simple technology to ensure contact whilst working on the land
- Individual to purchase a second kettle for hot water upstairs to lessen risk of falls whilst carrying boiling water.
- Identified recycling of farm wastes around plastics and strings and source funding of a skip to make an initial start on clearance.
- Contacted Energy 361 to research first fit central heating (LPG or storage heaters) and an electric boiler for hot water. Also, to investigate grants to fund replacement white goods.
- Contacted the Farming Community Network currently engaged on an ongoing basis to assist with transport to hospital appointment and grocery shopping.
- Contacted the Royal Agricultural Benevolent Institution, obtained and submitted quotes to repair and replace windows as required to make the home weather-tight.
- Contacted the Devon & Somerset Fire Service, Home Safety Visit clutter scale around a 4/5 –
  mainly quantity of paperwork within the kitchen area. Provided individual with fire alarms, cold
  pack (including a flask and hot water bottle) and identified fire risk of blocked doorway, and
  hazardous electric heater. Initially, unable to remove as only source of heat at time of visit.
  However, see below.
- Arranged for an Occupation Therapist home visit to help with fall prevention in the home. Grabs
  rails subsequently fitted. Case held open, to re-visit once hot water is in the property in regard to
  improved self-care facilities.
- Being able to use mobile work supplied IT equipment, we were able to apply for a Blue Badge online within the home and later supported the individual to access the assessment. The Blue Badge was subsequently awarded.
- Continued to support the individual throughout the required home surveys related to achieving full-funding for the LPG tank, boiler and central heating system.

# How Flow has helped

Due to the unbureaucratic Flow grant system, the practitioner was able to purchase and therefore immediately supply a new and safe electrical plug in heater to John, thereby massively reducing the immediate fire risks. This also bought time to identify more long-term funding solutions for heating the house.

Farming Community Network continues to provide weekly support to appointments and food/feed shopping.

RABI have agreed to fund not only the window repair, but also the outstanding balance required towards the Heating System, knowing there is now support around this individual of which he is able to engage with.

OT Home visit from Care Direct Plus has ensured grab rails are fitted.

DCC approved funding towards the first skip.

# How John feels about the Flow support

"I use it (radiator) every day. When I get up, I come to the kitchen, switch it on, make my breakfast and sit down next to it with a cup of tea. Again, in the evening, when I come in I switch it on again when having my dinner, or doing paperwork. It has made a big difference, the heat is warmer, and I appreciate and understand that it is safer than the old one.......Thank you again"

In answer to the three Flow evaluation questions, with the options of 'not a lot, a little, more than a little, quite a lot, a lot'

To what extent do you feel like your needs were understood? Jill answered 'Quite a lot'

To what extent did you feel supported to meet your needs? Jill answered 'Quite a lot'

To what extent were you able to meet your needs? Jill answered 'A lot'

#### What were the limitations of Flow?

Flow has not been able to reduce the time scales of obtaining quotes and applying to funding sources. Waiting for them to return has slowed the process down considerably causing frustration to the individual.

#### How the practitioner feels about the Flow support

'Rather than stepping away after the home energy visit, I am in regular contact with the Happy Energy Company to be able to update the individual, Farming Community Network, RABI and other agencies, to ensure we all work together for the best outcome.'

# What would have happened without Flow?

This viewpoint is subjective but provides an input to a not unusual series of developments.

This case is very one of personal wellbeing but hugely about personal safety. The gentleman had been drying wet clothing on an old electric heater that had exposed live wiring on the corded flex. This was a

fire hazard which in conjunction with the easily flammable materials in the kitchen could have easily led to a serious house fire. The fact that the individual has also fallen in the past made this even more urgent to resolve. The intervention of the Referral Support Worker has potentially prevented a house fire at best or at worst, a fatality. Flow allowed the issue of the heater to be resolved on the day rather over a number of days.

Without the interventions listed and ongoing Farming Network support, the individual would still be living with poor heating solutions and poor living standards which in all likelihood would have meant a serious deterioration in his health which would have meant intensive Health and Social Care costs as well as likely hospitalisation. It is also unlikely that he would have still been able to live alone at home which was certainly his wish. The H&SC interventions undertaken were minute compared to the potential costs without them.

# System impact

The case worker is now better assured that their client is better able to live the life they want whilst preventing huge impacts on the Emergency Services along with Health and Social Care services. The intervention has undoubtedly impacted positively on the individual's life and safety which cannot not be understated and has also prevented already stretched services becoming more so.

# **Appendix D**

# **Professional's comments**

"The books will help immensely with college work. Thank you so much for everything you've done" – Bright Futures

The support of FLOW has meant the client has been able to move on further to being able to live healthy & independently – Care Direct Plus

Without FLOW, the client would not be able to engage in social groups until a much later date, which the client would put the information to one side, and continue in his current routine, unlikely to act upon the information handed to him. With the immediate impact of FLOW funding a taxi, the client now has a regular outing to look forward to, as well as in turn gain more confidence and activity in his routines. – Care Direct Plus

By using the FLOW, and the rapid turnaround of accessing the funds to purchase the heater - we have avoided a potential safe-guarding issue around the individual. Organisations working with the individual are proactively speaking to one another, to ensure the best interests of the individual at both a local and national level. — Care Direct Plus

The client states "This is life changing "- Encompass

This client is still in early days ie accommodated now for four weeks. Please note that as this client has been very long term homeless – 10 to 12 years – and is physically disabled, the impact on him of having good quality accommodation is not to be underestimated. – Encompass

Excellent, person centred and responsive – Barnstaple PCN Link Worker

I honestly can't tell you how valuable this has been for this patient, myself as a clinician and also the team as I was also able to share the info that was provided. For the patients we see it's really great. – Persistent Pain Service, NDHT

Thank you Flow team and another great outcome for a patient who has complex needs, is socially isolated and vulnerable and would not have had this outcome before we worked together as we are now – Persistent Pain Service, NDHT

# Flow evaluation workshop summary

Below is a summary of some of the main themes that came out of the Flow evaluation workshop.

#### **ENABLING DIFFERENT CONVERSATIONS**

#### What works well?

- Peer support
- · Networking; networking or an "open door"
- Having different organisations together
- Home visiting to individuals; understanding an individual's network, where their strengths lay suitability of referral etc.
- Sharing ideas
- Professional platforms

#### Areas to improve

- Training for professional to have a what matters to me conversation
- Training for staff
- Programme of training and networking events to open multiple services locally
- Having a set representative from Statutory agencies e.g. mental health
- Understanding our own services
- Multi-disciplinary team around the individual when appropriate. Network around the individual
- One platform to share from
- Lack of strategy at NDHT as we have: MECC, SDM, Flow, Living well, High Flow, social prescribing all very similar things an overlap, which is very confusing to staff.

Summary and reflection: supporting greater networking and presence at decision making forums between all agencies would facilitate a more rounded conversation on an individual. At an individual level, holding the conversation in their home gives you more insight into their situation and circumstances, possibly leading to a better intervention. There's a need for more training and events in what matters to me conversations.

#### COORDINATION BETWEEN PROFESSIONALS

# What helps?

- Better understand of other support networks within Flow. Trust with onward referrals
- Networking events
- Who's who
- Partnership events and networking events increases knowledge and understanding of where and who helps. Flow get together

- Network being coordinated
- Networking and care of community
- Shared training opportunities

# How to improve

- Develop wider professional networks to share expertise/resources
- Flow forum?
- More willing to share resources
- Sharing expertise mapping skills etc.
- Building links between teams/agencies/ organisations further
- Asking us all to feed in our experience of individuals agency e.g. social services

Summary and reflection: Greater coordination and networking between agencies and professional, including training, could be enhance or increases knowledge and understanding of each other's offer and the resources available to support individuals. Joint events, forums or decision making mechanisms or training or peer to peer events could help achieve this. The loss of the Flow project may recreate the gap between agencies and prevent that wider collaboration.

#### FACILITATING AND ENGAGING IN GOAL SETTING AND PLANNING

# What helps?

- Time for relationship building
- Organisation and team support for the what matters approach
- Training in conversations, goals and motivational interviewing
- Shared paperwork/forms; clear simple approach
- Outcome based framework

# How to improve

- It would be useful to promote a template to plan /set goals
- Flow incorporating trauma informed approach [?]
- Continuation of training opportunities
- Peer to peer support learning
- Autonomous
- More resources

Summary and reflection: training and time are crucial in dealing with complex cases. Crucial for building trust with the individual but also for staff to engage. The time it takes needs to be recognised with you own organisation. As a consequence, anything that saves time such as simple paperwork and forms, is helpful. Perhaps a simple template to facilitate /guide goal setting would be helpful.

WHAT CONTRIBUTION DID FLOW MAKE TO THE OUTCOMES YOU SAW IN YOUR CASE STUDY?

Individual

- empowering people in a sustainable way
- enabled them to connect with the right social groups
- helps physical and mental health
- Helps remove some of the stress. Made them feel listened to, because it was a quick fix

# **Practitioners**

- Reduces time spending 1 to 1 work
- I could go on annual leave knowing a positive change had happened (and a fire risk had been reduced)

# System

- It meant that I was able to achieve quickly what statutory services weren't doing
- Enabled a first step to ensure the system works

#### What did Flow Prevent?

# Individual

- Preventing mental health decline/illness
- Could/would have die (prevented a suicide in a teenager)
- Becoming homeless
- Someone being admitted to hospital

#### **Practitioners**

• Our mental health could deteriorate, we don't take leave; we have to spend time complaining to the statutory service [for not doing their job]

Summary and reflection: Flow is impacting on individual's health and well-being who are complex, sometimes empowering them and connecting back into social groups. This impact can be in small or significant i.e. maintaining mental health, preventing death/suicide or dangerous situations, or escalation of problems (loss of housing) or use of services. Flow also impacts on the practitioner, sometimes reducing time on cases or alleviating their stress or concern. It is also supporting the statutory agencies, if not doing their work, and preventing demand. More people were supported using the Flow approach than the number of requests from the Wellbeing Coordinator. Those were simply the cases where more resource was required.

# Banish the Winter Blues- Wednesday 5th February 2020

**Appendix F** 

During the course of the work on the One Barnstaple Flow team, it became increasingly clearer that there was an opportunity to encourage the community of Barnstaple to take more control of their own wellbeing by showcasing activities by offering taster sessions of them.

Therefore, Gail Mistlin and Ella McCann hatched a plan to deliver a collaborative community event and named it 'Banish the Winter Blues'. The goal was to encourage people to think about wellbeing for themselves and others, engender a sense of community spirit in the town and offer gentle ways to nurture the mind, body and soul.

The team organised a series of activities across the town on Wednesday 5<sup>th</sup> February 2020. The events were held at a number of locations i.e. North Devon Leisure Centre, Barnstaple Museum, The Plough @ St Annes, Barnstaple Library, Pannier Market, Green Lanes, Banburys, Devon Violets, Boston Tea Party, Washhouse Studios, Re:Love and Games Workshop.

Activities ranged from free sports taster sessions at the Leisure Centre to Soundscape therapy in St Annes to reflexology in Green Lanes. The full programme of events is attached. All but one of the events were free of charge. In total, there were around 28 organisations offering activities in ten venues.

The day was widely publicised via the North Devon Gazette, The Voice, One Barnstaple Facebook page along with various Facebook event sharing by partners, promotion through GP practices and widely distributed posters around the town.



One of the day's activities was an Art Cube placed in the Pannier Market where people were asked to write how they felt on post it notes and stick them to the cube. One person wrote 'Tired with no real direction in life'. Towards the end of the day, that same person returned and wrote on the same post it note, 'Just spent 2 hrs painting ceramics and now feel enlightened'. (See the feedback attachment for all comments)

Event feedback postcards were produced asking what activity the respondent had participated in, how they rated their experience, whether they would take part in the activity after the event and what would make Barnstaple a healthier place to be. (See the feedback attachment for all comments).

The postcards also asked if participants would like to volunteer and if so to leave their details for the team to recontact them. 17 people have stated



team to recontact them. 17 people have stated they would like to volunteer.

One participant in the reflexology is a student in Health and Social Care and could now see how general wellbeing fitted into the wider Health and Social Care agenda. She was keen to volunteer in her community and details were taken.

Sunrise staff engaged with two members of the community who were looking for local support and were unaware of the existence of Sunrise. They also gave their details as they were

energised to become Sunrise volunteers.

One professional stated that they 'found a new love for Barnstaple today'.

Barnstaple Library fed back: Fab events today. Well done Gail & Ella. You are both Fab! It was great to be a part of a town wide initiative around health and well-being. Thank you for asking us to be involved. We had new faces at the session. I think it helps our regulars too to see that others would like to join the group as well. They commented how lovely it was to see new faces and chat to different people. Some people did comment 'Do you think this might become a regular event?' and how much they had enjoyed all the different sessions around the town

The following was an email received by the Museum:

'Hi, I just wanted to give you some feedback from the event that happened yesterday at the museum. My 83 year old mother who is not in the best of health made her way down there and could not speak highly enough of the event. Mum was able to speak to others in her age group and compare memories. This greatly helped her mental health as she does get quite lonely. Mum met a lady who had donated photos to the exhibition, and they spent a good couple of hours chatting about their lives.



Mum then made her way to the St Annes centre and had a lovely informative afternoon learning about the sea in the interactive sessions. It was great to hear mum so happy about the day she had and the friends she made. Mum is an ex teacher and loves learning new things and meeting people and learning about their lives. Well done all involved.'



As is always the case, the weather was important to this event and it was great to see that we were lucky with it- almost as if it had been booked. There was always going to be risk with inclement weather but hosting it in the early part of the new year was the whole point – encouraging people to seek activities to remove those winter blues.

There was some learning from the event which has been taken on board including the use of certain venues, certain activities and as ever the issue of the difficulty of publicity as there is with any event.

In total the event has cost in the region of £1200 to arrange though those costs could be reduced in the future if the event were to be arranged again. The primary costs were marketing and costs incurred at the Queens Theatre.

In summary, this event was hugely successful with a large number of people attending all the locations around the town centre and giving

the mentioned heart-warming feedback.

# Banish the winter blues- feedback

<u>Art Cube placed in the Pannier Market- Post it notes</u>- Below are some of the comments given by members of the public in response to being asked to describe how they feel today:

- Sore
- Beautiful sunny day. Great to be out and about having a purpose
- Positive. Happy. Optermistic (sic)
- Happy the lord is my saviour
- Happy
- Inclusive
- Super happy
- Sorry we missed the whittling
- Invigorated
- Feeling better
- My mood has improved
- Content
- Tired but happy
- Excited to be moving forward and for what 2020 holds
- Neutral
- A little ill but otherwise happy
- Sunny
- Trusting in the lord

- Leave our estuary green. No more building!!!!
- Disappointed to have missed the whittling
- Cold
- Happy and tired
- Tired and with no real direction in life......

Later in the day, this post it was added to by the same person...... Just spent 2 hrs painting ceramics and now feeling enlightened

# Feedback postcards:

What activities have you taken part in today?	How would you rate your experience? Really Good, Good, Average, Poor	How likely are you to take up the activity? Likely, Fairly Likely, Not Likely	What would make Barnstaple a healthier place to be?
Christians Against Poverty	Really good	Likely- Signed up for a course	
Stroke- blood pressure	Really good	Likely- Going to follow up as blood pressure a bit high	
A virtual walk to the beach	Really good	Likely	It could be more inviting, people to be more aware of mental health and to cater for this.
Immersive beach experience and ND plastic free- virtual reality	Really good	Likely	
Water painting Wash House freestyle painting	Really good Really good	Likely Fairly likely	More creative outlets  More activities accessible for teenagers / early 20's to get into good habits
Make a handbag at Devon Violets	Really good	Likely	I love where I live so any improvements are a bonus
Making a handbag	Really good	Likely	Lovely class. Given lots of tips and new skills. Thoroughly enjoyed the day
Sewing a handbag	Really good	Likely	Keeping it local. Farmers markets maybe
Sewing- making handbags etc	Really good	Likely	
Making a handbag (sewing)	Really good	Likely	A farmer's market in town
Sewing a handbag	Really good	Likely	

Virtual walk to the beach. MTC solution. One small step  Colouring. Hand massage	Really good  Really good	Likely	A wellbeing event page that lists activities going on each week with the benefits highlighted i.e. lift mood, improve outlook, improve social interaction, relaxation etc
Hand massage- Body Shop	Really good	Likely	
Colouring and hand massage	Really good	Likely	More activities advertised to engage people in positive activities and fill their spare time
Colouring. Hand massage	Really good	Likely	More traffic free zones
Colouring in at the library. Hand massage	Really good	Likely	Less traffic in town centre
Colouring. Hand massage	Really good	Likely	
Hand massage. Colouring	Really good	Fairly likely	More traffic free zones
Reflexology	Really good	Likely	
Joined in with Pick and Mix singers	Really good	Likely	
Reflexology. Wash house studio. Colouring. Hand massage	Really good	Likely	More free activities and better advertisement
Reflexology- Not done this before. Really relaxing. Will probably do it again. Lovely to be able to experience this kind of therapy in a taster session	Really good	Likely	
Reflexology- Green Lanes. Great thank you-feel a lot less stiff	Really good	Likely	
Reiki	Really good	Likely	More food health workshops
Knitting, sewing and crochet and chatting	Good	Likely	More groups for knitting and sewing etc. Community shop / centre
Enjoying the brill piano player who is absolutely fab. Just relaxing and chilling out. Many many thanks	Really good	Fairly likely	Bring back youth clubs and organisations. Kids got nothing to do. Leisure centre passes- may not

		have money
		•
		especially if big
		families.
Really good	Fairly likely	Children- more
		things to do. Cost
		little and get them off
		the streets
Good	Likely	More activities to get
		people out and
		socialising. Needs
		more advertising
Really good	Likely	I think you're doing
		pretty well
Really good	Likely	Pedestrian free
Really good	Fairly likely	
Really good	Likely	Nice to come and
	-	watch groups
Really good	Fairly likely	
		Very little info except
		title and date
Really good	Not likely	
Really good	Likely	If it had area that
		promoted wellbeing.
		Walks with areas to
		sit and reflect and be
		inspired with poems,
		paintings and
		sculptures
Good	Likely	Community café.
		Centre for well being
Really good	Likely	To have an online list
- <del>-</del>	_	of activities going on
		and the health
		benefits of
		participating on a
		weekly / monthly
		basis
Really good	Likely	Crochet group in
, U ~		Barnstaple. More
		wellbeing events in
	l .	Barnstaple
	Really good	Really good Likely Really good Likely Really good Fairly likely Really good Fairly likely Really good Fairly likely Really good Likely

Reflexology. Leisure Centre	Average	Fairly likely	More awareness. Healthy lifestyle choices
Reiki. Stroke management. Talkworks. Re:Love. One Step. Colouring. Fire Safety	Really good	Likely	
Reflexology. Stroke management. Talkworks	Really good	Likely	It's more of these events more often to promote healthy lifestyles and mental and physical health
Ceramic painting	Really good	Fairly likely	Better lighting for walking at night / evenings
Ceramic painting	Really good	Likely	Four day working week with lots of wellbeing events on Fridays
Let's paint ceramics	Really good	Likely	
Loved t- only knew on the day though.	Really good	Likely	
Blank	Really good	Likely	More knowing about events – groups – inspiring people hosting them to draw in different ages
Blank	Really good	Likely	Unaware this was happening as not involved with 'One Barnstaple'. What is it? How do I find out more?
Blank	Really good	Likely	Activities for younger people. 14-35- more inclusive events-advertised to know-weekend ones
Blank	Really good	Likely	More wellbeing, free / low cost activities- sharing with all businesses so we can share and support- and these events can drive footfall which the town needs
Painting	Good	Likely	More art
Wash house studio- so feeling totally outside my comfort zone but loved it	Really good	Likely	Welcoming signs on shops etc saying come on in you are

			welcome. We have a space for you.
Freestyle painting- really enjoyed the chance to paint which I've not done before. Very freeing. Enjoyed.	Really good	Likely	

# General anecdotes from the day

- A young woman who was homeless and sat on the street was approached and engaged by a
  member of the BWB team. They explained what was happening today with the range of
  activities. When the fact that the Leisure Centre had free activities for the day, the woman was
  thrilled at the prospect of going there and having a shower. She duly made her way there.
- One participant in the reflexology is a student Health and Social Care professional and could now see how general wellbeing fitted into the wider Health and Social Care agenda. She was keen to volunteer in her community and details were taken
- One woman who described herself as a 'professional lady' but stated how she was still socially isolated but now felt better connected after a colouring session at the library.
- The mother of a home schooled child now felt more aware of social options within the community for herself and her child.
- Petroc staff brought students for 'enrichment'. One of those students further voluntarily committed to visiting the Leisure Centre for free activities themselves later in the day.
- Sunrise engaged with two members of the community who were looking for local support. They
  were unaware of the existence of Sunrise. They also gave their details as they were energised
  to become Sunrise volunteers.
- One professional stated that they 'found a new love for Barnstaple today'.

#### Comments made by service providers

- After hosting a knit and natter session, Banbury's staff felt that they were more aware of other groups and were now better able to connect and had the impetus to establish other groups.
- Devon Violets stated that they had seen an increase in bookings from the day and in particular from people who are socially isolated.
- The Ceramic painting facilitator at Boston Tea Party is a trained nurse and had many and varied therapeutic conversations.
- Thank you so much for letting us be part of this wonderful event. We met so many lovely people
  and the feedback we got was really positive. Lots are hoping there will be more events like this
  again soon. There were quite a few participants that had never tried their hand at painting
  before and came away with a real sense of achievement. Wash House Studios
- Fab events today. Well done Gail & Ella. You are both Fab! It was great to be a part of a town wide initiative around health and well-being. Thank you for asking us to be involved. We had

new faces at the session. I think it helps our regulars too to see that others would like to join the group as well. They commented how lovely it was to see new faces and chat to different people. Some people did comment 'Do you think this might become a regular event?' and how much they had enjoyed all the different sessions around the town. - Barnstaple Library

- I had a great time, signed up someone for our money course and did some great networking. Thank you! – Christians Against Poverty
- I'm sure there were quite a lot of incidental connections made- for example I was chatting to a man while his wife was having her blood pressure checked. They were new to the area and we got to talking about the community choir I sing with at the Plough and he said she was looking for a choir, so I was able to give her the details. I'm sure lots of other similar connections were made during the day just because people were in the right frame of mind and had the breathing space to engage with other people. Devon Access to Services
- We had 12 visitors, and all stayed for a long time- chatting and enjoying looking at the photos collected from the community. 2 of our volunteers helped and they enjoyed talking to the visitors too. We are now aiming to start a 'chatty café' in our tearoom at the end of February. Museum

Service providers also reported an increase in people signing up to activities post event:

<u>Devon Violets.</u> The provider ran the handbag making day immediately had sign up for future sessions. These were from people who had no previous experience of handicrafts and were delighted with the outcome of the BWB day.

<u>Reflexology.</u> The reflexologist received one booking as a result of the Banish the Blues. From experience she finds that some people are quite slow in learning to look after themselves or finding time in their lives to do so and it may take a few "nudges" for them to commit. "Nudges" may be attending other well-being events, seeing something on Facebook, or finding the card they picked up a year ago in their handbag! Often new clients say they picked up her card and it's been on their noticeboard for months before they have committed or found time.

<u>Reiki.</u> Nobody has contacted her following the event. She was hopeful one lady would have but sometimes it can take several months or a specific event to trigger off an enquiry. Although it was in a public place, she was pleased to have had four people for Reiki as it can seem quite strange to people or can go against their religious beliefs.

**North Devon Sunrise.** Sunrise were encouraged by the fact that several people said they would attend the Diversity Festival held in June in Barnstaple. They also had two people who wished for volunteer for them.

<u>Washhouse studios.</u> It was such a feel-good day. Some participants even hugged the organiser at the end! There were quite a few participants that had never tried their hand at painting before and came away with a real sense of achievement. The Washhouse really thought there were a lot of isolated people that attended. There were further bookings for art sessions and the event generated a lot of interest in the Washhouse's general programme of events.

<u>Let's paint ceramics.</u> Have had 3 ladies booked in for my painting evening on Friday. They are also in contact with a lady who works at a special needs school and is interested in getting LPC in for a workshop.

<u>Barnstaple Library.</u> By having events all day there were people who went around and tried everything. Statistically they had more people attend the group on the day. When the library looked back over their activity statistics, they could only see a marginal increase in attendance.

# Other general email received

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Mum then made her way to the St Anne's centre and had a lovely informative afternoon learning about the sea in the interactive sessions. It was great to hear mum so happy about the day she had and the friends she made. Mum is an ex teacher and loves learning new things and meeting people and learning about their lives.

Well done all involved.'