

COMMUNITY SOCIAL WORK A Strength Based Approach

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A STRENGTH BASED APPROACH

The most important element of strengths-based social care is the aspiration to provide a better model of support for the people that access our services.

- This means having 'Better Conversations' and listening to what you say 'What matters to you?'
- Trust the skills of our Social Workers to work in partnership with people to come up with the best solution for them, building on their support networks, focusing on what is 'strong' as opposed to what's 'wrong'.
- Giving people the advice they need at the right time in a way that includes them.
- Meeting with people in the 'Right Place' locally and with a connection to their communities
- Understanding and strengthening our partnerships with 3rd sector and voluntary organisations.
- Using a Peer Review approach in teams to challenge our thinking, share knowledge and ensure we are focused on the strength based principles/approach



NEIGHBOURHOOD TEAM WORKING

The Community Social Work service is made up of 13 Neighbourhood Teams that cover the Leeds area and also provides a dedicated hospital discharge service.

- Each Neighbourhood Team (NT) is co-located with our health partners, so most of the teams are located in health centres so we can provide an integrated model of support.
- We provide 'Talking Points' in each of our Neighbourhood Teams – which operate on an a booking appointment system at the point of contact. This way of working enables the social work teams to meet people and have these conversations at a local venue, with links to other services
- We've adopted a D2A (Discharge to Assess operating model) and realigning our hospital social work teams to the community social work service



NEIGHBOURHOOD WORKING IN SPECIALIST SERVICES

Within Specialist Services the social work service is made up of the following teams:

Transitions

- One transitions team working across all groups of people with disabilities aged between 14 and 25 years.

Learning Disability

- Three area learning disability teams in each of the localities: East North East, West North West and South plus a Review and Development team closely aligned to the learning disability contracts and commissioning teams. The learning disability teams comprise a mixture of social workers, wellbeing workers and learning disability nurses.

Mental Health

- Three community mental health teams across: East North East, West North West and South, co-located with health colleagues from LYPFT.
- One forensic team, co-located at the Newsam Centre with the in-patient and community forensic service hosted by LYPFT.



Prevention and Promoting Independence

- Tele Care –and more
- Equipment – supporting independence
- Skills – reablement service
- Occupational Therapy

Currently scoping requirements for a more integrated approach for social workers/OT's at the front door.

Need to shift from traditional 'Duty' model as current process is not efficient and costly in terms of social work time and resources



COVID 19 – Neighbourhood Teams in a Virtual World

The current pandemic and the need for social distancing have required us to think differently about how we can continue the benefits of a strength based and integrated way of working.

Talking Points

The main referral point 'Front Door' for our service is still accessed through the Contact Centre but we have had to change our approach with our Talking Points:

- Offering people a booked appointment which takes place by phone or Teams/Zoom meetings with a relative or carer present.
- The model consists of 2 sessions a day AM/PM – allowing time for write ups etc
- In the main used for low level needs such as sign posting for social support, housing, carer /respite support.

So far the feedback has been positive, and we plan to continue this way of working by providing a hybrid model once the teams can get back to place based working in their neighbourhoods.

This way of working also supports with wait times for assessments and improved referral flow



Multi Disciplinary Team – Talking Point

- Team of 4 social workers working on a rota basis provide a Talking Point at the Crypt for street homeless people (2 days a week)
- Work in partnership with health, housing staff and alcohol and drug services to ensure holistic approach to meeting needs of this client group
- Being placed based means they get to know the client base and get improved understanding of their lived experiences
- Opportunity to share skills and knowledge and improve partnership working
- Promotes better outcomes and shift from focusing on eligible needs and promoting people's strengths
- Team provided vital support when all street homeless people were housed in a hotel during the pandemic, sourced supplies such as books, crafts etc as people were required to isolate in their rooms



Mental Health and LD - Talking Points

A number of “Talking Points” are provided across the learning disability and mental health services, examples of these locations are :

- Talking Point specifically for carers based at The Mount.
- Talking Point at Carers Leeds.
- Library Talking Points in collaboration with Through the Maze.
- Preparing for Adulthood drop in sessions with parents in education provision.

Within the forensic arena Talking Points are not available however the model of strength based approaches within secure mental health hospitals takes the form of better conversations with the forensic multi-disciplinary teams.

Each team holds a weekly peer discussion and peer review of practice, with internal critiquing and also with colleagues from Advonet and other organisations where appropriate. These fora have been established to promote good conversations and to develop best practice models underpinned by a peer support philosophy.



COVID 19 – Digital upskilling of the workforce

We never thought we could do this!

All the teams have new digital technology to support them in the virtual world and have really embraced the challenges

- Shift to virtual team meetings to support team collaboration and staff support is working really well
- Improved focus on health and wellbeing with staff being innovative about how they can use this platform creatively, as well as socially to maintain team relationships
- LGA Pilot undertaken to upskill social workers in the use of digital technology to promote independence, choice and control with customers (e.g. Alexa, Ring Door Bell and apps). Lots of opportunities to continue building on the lessons learnt from the pilot
- Further work and audit to see how the digital tools they have been equipped with are working in practice as we undertake our MS365 transfer (a cloud-based suite of productivity apps)



Improving BAME communities access to services

- Listening Project – led by our Director Cath Roff
- Using data to understand the uptake of services by different communities
- Under taken a survey to understand their experience of ASC services
- Mystery shopper to give us critique on our current web site
- Developing a training programme to upskill 3rd sector partners in co production with social workers – aimed at improving understanding of ASC service provision



Questions

