

Workforce Development: Interim Evaluation

May 2018 – April 2019



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(Workforce Development Lead)**

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Foreword

Here at Fulfilling Lives NG we pride ourselves on offering excellent, co-produced, co-delivered and importantly *free* training to people providing some level of support to people with multiple and complex needs Newcastle and Gateshead.



When we changed our delivery model in 2018 and created a Workforce Development Lead post, it really helped us develop our workforce development programme further and our learning so far suggests this was a good move!

This interim evaluation report outlines our learning to date and offers an honest reflection on our journey so far. We've identified the importance of investing in developing trauma informed practice and hope the report offers some interesting learning to our external colleagues.

I am looking forward to building on this when we produce an additional report next year that will incorporate learning and reflections from our own team's workforce development journey within the multiple and complex needs sector.

**Lindsay Henderson
Programme Manager
Fulfilling Lives Newcastle Gateshead**

Introduction

This report presents interim findings evaluating 12 months of Fulfilling Lives Newcastle Gateshead workforce development activity to April 2019, across our 5 key workforce development activity areas. As well as evaluating the impact of this WFD programme on our own team, we present quantitative findings from our training evaluation tools and weave in frontline staff and manager experiences across the system. This report points to promising practice and early learning and recommendations from the delivery of this more structured programme of workforce development, and will be followed up with a final evaluation in 2020.

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Introduction to the FLNG Workforce Development work stream

Our workforce development work stream has grown and developed over the first four years of the programme and is now one of 5 key components of our new programme delivery model for 2018-2022, launched in April 2018:

- Direct work: System Change Practitioners (formerly Service Navigators) and our Operational Lead continue to use our navigation approach. We are also piloting an innovative American model of support called Critical Time Intervention (CTI) with our existing base of people we support between 2018–20.
- Experts by experience (EBE): Co-Production Workers facilitate and build a network of people that values the voice of lived experience, uses peer research to understand how services can better support people experiencing multiple disadvantage and informs all programme activity.
- System Change: our System Change Lead, supported by all members of the FLNG Team including Experts by Experience, supports the 'system' to think differently about multiple disadvantage focusing on mental health, transitions and commissioning.
- Research and evaluation: led by the Research and Evaluation Lead, supported by the Data Analyst, peer researchers, volunteers and the communications team; we get our evidence out there to influence policy and practice.
- Workforce development: all members of the FLNG team including our experts, help the Workforce Development Lead deliver training to build understanding, capacity and increase the skills of Newcastle Gateshead's workforce to better meet the needs of people with multiple and complex needs

The new workforce development offer builds on the success and achievements of our previous training packages and having a full time Lead role helps increase the quality of the programme offer, its reach and influence on practice through:

- Capacity building: offering ongoing quarterly multi-agency training sessions for the sector in our five core WFD areas of Co-Production, multiple and complex needs (MCN), Peer Research, PIE and Systems Change Thinking.
- All FLNG team members being trained in the areas above so they become a flexible resource to support our wider system change offer, particularly as direct work numbers reduce.
- Our Expert by Experience (EBE) Network members (and FLNG Team where appropriate) co-produce and deliver training with the Workforce Development Lead, to be supported by apprenticeship roles in the near future.
- Establishing a MCN core competency framework setting out 25 key skills and good practice examples to share with the sector locally and nationally via the System Change Action Network (SCAN).
- Developing a good practice guide for employers with an emphasis on recruitment and support.

Evaluation rationale

This interim evaluation points to promising practice and early learning and recommendations from the delivery of this more structured programme of workforce development. We use a wide range of tools to review the impact this work is having. This includes:

- assessing our own internal workforce development
- using online survey technology to secure feedback on external training
- capturing reflective commentary on the impact training is having
- developing plans with people and agencies we train and reviewing the effectiveness of any workforce development implemented

Workforce Development training offer

Our free, comprehensive training and development programme is informed by evidence gathered by our Research and Evaluation Team in relation to What Makes a Good Multiple and Complex Needs Worker¹ and the experiences of our staff and ² We also work to ensure that our local training and development offer connects effectively with the other Fulfilling Lives programmes³ across the country.

¹ <http://www.fulfillinglives-ng.org.uk/wp-content/uploads/2018/08/What-Makes-A-Good-MCN-WorkerFINAL.pdf>

² <http://www.fulfillinglives-ng.org.uk/experts-by-experience/>

³ <https://www.tnlcommunityfund.org.uk/funding/strategic-investments/multiple-needs>

This offer is open to all services across Newcastle and Gateshead on a rolling quarterly programme and covers skills in the following five areas:

- **Co-Production:** the theory and values underlying coproduction in order to help participants create their own co-production action plan to try out in their own service.
- **Multiple and Complex Needs Awareness for multi-agency staff:** psychological understanding of people with complex needs from a trauma informed perspective and developing three key sets of skills around engaging, motivating and collaborating with the people we support.
- **Peer Research:** key skills including research ethics and bias, interview skills, data analysis and report writing, leading to NVQ level 2 and preparing participants to deliver their own research project.
- **Psychologically Informed Environment (PIE) Lead training:** Understanding the five key areas of PIE and equips participants to return to their service and talk with staff to co-produce a baseline PIE self-assessment, including plans to improve in each area.
- **Systems Thinking :** Introduces some theories around system change including soft systems methodology and helps participants create their own plan for change in collaboration with fellow participants.



As of April 2019 we are delivering four of these five training areas to the wider system, and currently finalising the fifth area: Systems Thinking that will be piloted in May 2019.

We aim to ensure the best quality training and development is offered to the Newcastle and Gateshead workforce around complex needs. We will deliver this training programme quarterly and in creative and innovative ways that best meet the needs of the workforce (including the use of new technologies) as outlined in the table below:

Training offer	Number trained per quarter	Number Trained Annually
Multiple Complex Needs	16 staff	64
PIE Lead	8 services	32
Peer Research	8 people	32
Co-production	8 organisations	32
Systems Thinking	8 staff	32

We are developing tools and resources to support the wider sector to develop in five key skill set areas, including training booklets which summarise the key theories covered in the training and links to training films for participants to watch after the training day as a reminder of the key learning points.

These five key skill areas we believe essential in supporting people experiencing multiple and complex needs are covered in the training:

Accept & Engage people as they are (e.g. *be Validating, active listening and engagement skills*)

Believe people can Get Better (e.g. *Build Motivation, build Hope*)

Collaborate (*Co-produce: plan solutions to solve problems together, then reflect together on the outcomes...to build problem-solving skills*)

Develop Trust in Relationships (e.g. *be Reliable, Consistent, repair breaks in the relationship*)

Establish & Maintain our Role & Boundaries (e.g. *build realistic expectations about what you can (and cannot) do within your role*)

Evaluating the Workforce Development programme

We use a Survey Monkey evaluation form to seek feedback on 5 key areas of each of the training sessions delivered. The sample below is tailored to review the MCN training:

This survey is intended to capture your feedback on the multiple and complex needs training you attended recently, we are a learning programme, and as such are keen to hear your honest views about the training, and the impact of the training on your practice. This will help us to shape future training and respond to our participant's viewpoints.

1. What general feedback would you give about the multiple and complex needs training?
2. What is your view of the content of the training? Think about the range of subjects covered, was this as you expected?

3. What is your view of the resources shared during the training, and for you to take away? We'd appreciate feedback on film, audio, visuals, Ladder 4 Life and other materials

4. What is your view of the facilitator, and of the style of delivery?

5. Has the training made a difference to your practice? If so how? And if it has not, why not?

Workforce development offer: Key learning so far

- **Developing the training:** co-producing training with Experts by Experience and both internal/external colleagues across the system takes time but the benefits from this investment is clear and is helping us produce a training package fit for the needs of those who need the training.
- **Demand for training:** Our workforce development package is garnering interest and we are seeing promising practice developing in the workforce. We have trained 125 people to date across our workforce development programme, and surveyed 140 frontline staff about their skills. We are building a strong reputation for training with some quarters oversubscribed and interest in ad hoc training coming on stream
- **Emerging theme:** We are building a solid understanding of what the multiple and complex workforce needs and our learning has the potential to help services/agencies develop their practice in a focussed way. The need to build a trauma informed workforce is the golden thread emerging from all five of our workforce development areas.
- **Staff skills:** We've pin pointed skills around collaboration and building motivation as two key areas of focus for workforce development. It is exciting to see findings from within our local programme mirrored in the skills reviews of other local services and in the next phase of our work we will drill down further to understand what it is about these two skills areas frontline staff find challenging. Being able to name key areas in this way helps to focus future workforce development activity and there is some cross over here with our Critical Time Intervention evaluation where these skills also come into relevance, again this will be explored further
- **Organisational challenges and opportunities:** We now better understand the challenges and opportunities agencies have in developing PIE and supporting the MCN workforce and this will help us tailor and develop our workforce development offer further. These include:
 - a lack of understanding among staff of the effects of trauma and secondary trauma on staff
 - the difficulty of finding good quality training tailored to the job staff actually do e.g. trauma-informed, motivation building and collaborative working tailored to specific roles such as housing support worker or employment coach

- Time and workload pressures were a common hindrance referenced that made it hard to reflect, develop skills and learn on the job. Understanding these challenges
- **Change:** Cultural change takes time. Agencies felt it too early to comment on improved practice, so whilst we highlight early promising practice this is largely an evaluation of our process in setting up this workforce development programme. The next phase of evaluation will review how these changes are embedding and how practice is changing in better supporting people with multiple and complex needs. We will give a full presentation of all training feedback to include facilitation and training tools feedback.
- **Learning for FLNG:** Changing our delivery model impacted the team. As well as the wear and tear of frontline work, we have been exploring how trauma informed approaches, morale and staff roles have been affected by the change in delivery too. We have found our team have strong skills around building engagement and are less confident in working collaboratively and building motivation to change. Our frontline team joined us as Navigators and moved into System Change Practitioner roles, this role change is fundamentally different to the Navigator role, and people have felt connected to the programme through the people they support but not to their role. PIE explores roles and responsibilities, we can use this tool in the next phase of evaluation to look at what happens when a role changes, and how this impacts on skills and delivery.

Fulfilling Lives Newcastle Gateshead: our internal workforce development journey

As noted above our WFD activity plan includes an offer to train 32 services annually (8 per quarter) in how to become a Psychologically Informed Environment (PIE). Before we helped other services reflect, we thought it was important to start with our own programme so we used the PIE self-assessment to create a baseline for FLNG.

This PIE self-assessment (using the new version of PIE and the 'Pizazz' self-assessment framework developed by Robin Johnson from www.pielink.net) assessed the team's view of FLNG's; Training and Support, Psychological Awareness, Spaces of Opportunity, The Rules, Roles and Responsiveness, Learning and Enquiry and Reflective Practice. In April 2018 as a whole team we spent a day discussing, reflecting and coming to a collective judgement about where we were in each area of PIE. We noted the evidence to support our judgements, what helps and hinders improving in each area and our plans to develop over the next 12 months. Each PIE area was scored on a scale ranging from poor to basic, progressing, through to advanced. Numerically this was given a score between zero (poor) and ten (Advanced).

We repeated the process 7 months later to establish progress on our PIE Journey. Using a "pen and paper" approach to gather views (see appendix 2 for the

document used) we then input our data onto a new PIE software package we are piloting called iAbacus. This software allows PIE reports to be run and we found the iAbacus a sufficiently useful tool to use it here as part of the framework for this interim evaluation.

The data from this approach showed we had improved in all PIE areas, as can be seen from the graph on the following page. On reflection we were surprised at the improvement over a relatively short time period and would expect a more modest development for a typical service. We do think there were factors that can help explain this improvement such as low morale due to our team restructure at the first reading, followed by comprehensive induction training preceding the second reading.

Our induction training was one day a week for 3 months for the whole staff team during our transition to the new delivery model, and followed immediately after the first PIE self-assessment. This included:

- training around multiple and complex needs (MCN)
- boundaries
- risk assessment
- clarifying roles, operational expectations and core values in the new model
- Systems Theory/Thinking
- Psychological 'Formulation'
- Understanding trauma and Trauma Informed Care (TIC)
- Self-Care and compassion fatigue
- Critical Time Intervention (CTI)
- Engagement and Motivation Building skills
- Personalisation
- How we evidence impact we are having
- Understanding Personality Disorder
- Communications Strategy
- Expert by Experience pathway and involvement
- Unconscious Bias
- Wellness recovery action plan (WRAP) Training

"I thoroughly enjoyed all the induction training and it was good to learn new things and also refresh on some subjects.

I think it's good that the induction was tailored to meet our requirements and certainly helped to bring us all back together as a team." (FLNG System Change Practitioner)

Graph 1, overleaf, shows that scores have increased across all six PIE areas over 7 months, with a smaller increase around having a psychological awareness.

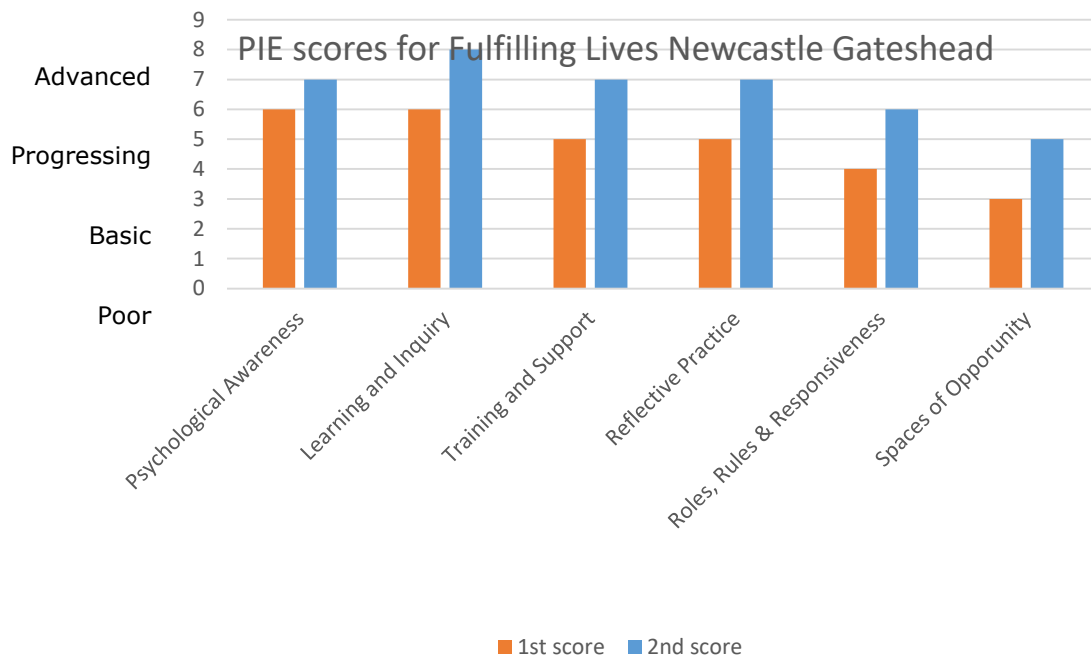
In addition to completing two PIE self-assessments as a delivery team (on 16/04/2018 and 14/11/2018); the management team and our core partners also completed a PIE self-assessment. These views broadly resonated with staff self-assessments in seeing the comprehensive induction training, EBE Network and clear Lead Roles as helping the programme and the hindrances or challenges included the challenge of converting our learning/training into bite-sized chunks

that can be put into practice, challenges related to understanding the staff skills base and the skills needed to work with people with multiple and complex needs and challenges of staff sickness and morale.

Compared with the average PIE data for services measured in cohort 1 and cohort 2 (graph 3), our programme had a lower baseline point across all areas. We subsequently improved in each area when we averaged the opinions of staff and experts by experience. These are relatively large increases in scores over a seven month period. For other services we wouldn't expect to see such significant increases as PIE change across other cohorts has been positive but less dramatic. It is possible that we either underrated ourselves in the first self-assessment, and/or the induction training and support had a positive effect on how the team reflect on our programme.

We note here that Experts by Experience were not part of the baseline assessment as we conducted the baseline during the induction period for staff. Interestingly 'Spaces of Opportunity' which was previously assessed as a three increased to a score of five. Reflection with the team on this suggests that the Experts by Experience space has developed considerably since the initial reading and this is most likely having a positive impact on the programme's scores as we are exploring how we use spaces to learn and develop together.

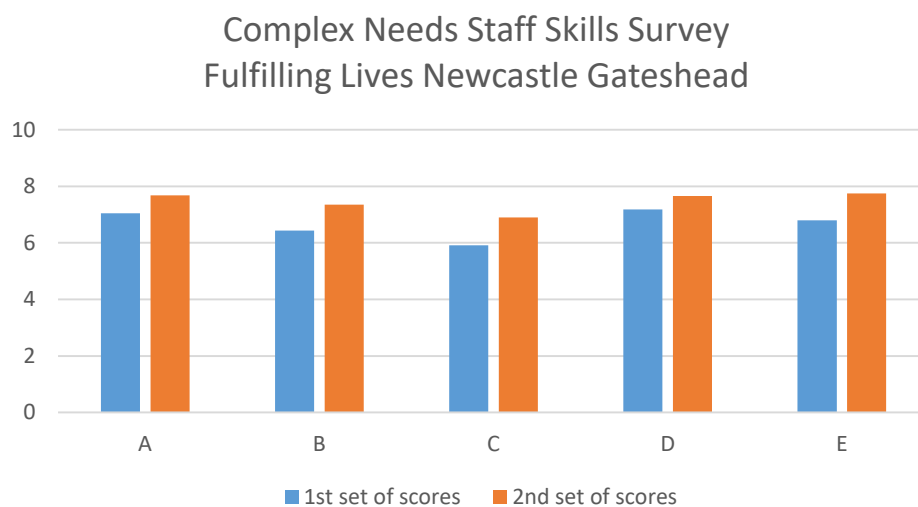
Graph 1: FLNG PIE self-assessment



In addition to the two PIE self-assessments, FLNG undertook an online staff skills survey to self-assess key skills for working with multiple and complex needs, across the whole team, including managers. The survey asks staff 25 questions in total to self-assess skill levels over the five key areas . The questions can be seen in Appendix 1.

For FLNG staff the initial reading was taken in April 2018 and the second in May 2019. The survey is anonymous to reduce any incentive to over-rate skills. The graph below shows a modest improvement in all areas.

Graph 2: 25 MCN skills survey FLNG



The modest, but relative improvement in all areas is encouraging and could be due to the training delivered during the induction period. The list given earlier of the topics covered in training may be worth considering by other agencies as a way to increase frontline staff skills in supporting people using the service who have multiple and complex needs.

We analysed the skills survey data further and ran a report asking which skill areas staff (on average) rate themselves highest and in which skills do they feel least confident. The top 20% and lowest 20% of the 25 skills survey are reproduced in table 1. The findings showed that FLNG staff felt more confident and skilled in three areas, two focused on initial engagement skills (Q. 2 and 4) and a third in building a trusting relationship by not overpromising and being reliable (Q. 16). It is very interesting that our staff felt least skilled around working collaboratively. On reflection this suggests staff are more skilled and confident around initial 'engagement' and relationship building skills, but find it harder to use that therapeutic relationship of trust to 'build motivation for change', and if people become motivated to change staff find 'working collaboratively' on those changes is even harder than building motivation. It may be worth reflecting if this finding is replicated in the wider workforce, and considering the training implications from this data further.

The people we support have complex trauma histories which are known to affect people's ability to work collaboratively as this involves trusting other people, which is difficult if you have had trust in people eroded in the past. Our response to this reflection is to consider increasing the time spent on collaborative skills in our MCN Awareness training. In addition, the Co-production training and System Thinking offers include this skill set area of 'working collaboratively'. A key area of focus for our CTI pilot is building the person's network, supporting them to build trusting relationships, through reflective practice staff are encouraged to hold in mind trust issues and reflect in their work that they understand how it impacts on collaborative working. Later in this report we discuss opportunities to build on this learning and share emerging practice.

Table 1: The five highest and five lowest scored skills on average for FLNG team (ranked by average scores out of ten):

Aver. score (out of ten)	Question from 25 skills areas questionnaire
7.57	Q 2 - How well do I consistently communicate a warm, friendly, welcoming and interested attitude - even when I find someone difficult to engage?
7.57	Q16 - How reliable am I with doing what I said I would do, and not over-promising or under-promising on what I can do within my role?
7.43	Q 4 - To what extent do I validate and acknowledge the point of view and emotions of clients (e.g. explaining emotions like anxiety are 'normal' and communicating that their point of view and feelings are understandable)?
7.43	Q25 - How would I rate my knowledge of the impact past traumas have on people's ability to understand and maintain healthy interpersonal boundaries, and do I apply this knowledge in how I maintain good boundaries with clients?
7.17	Q 17 - To what extent am I able to repair breaks in the relationship with clients who I find challenging (such as admitting if I have made a mistake, or reflecting with them on an incident that has led to them losing trust in a service)?
6.00	Q 12 - To what extent can I help clients describe a problem from their point of view and reflect with them on different ways to view it (e.g. exploring how big or small they see the problem? How much of a priority it is for them?)
5.86	Q 15 - How would I rate my knowledge of the impact past traumas have on people's collaborative problem solving skills, and do I hold this in mind in the way I work (e.g. increasingly doing things with clients rather than for them)?
5.71	Q 13 - To what extent do I help clients develop their own plan for solving a problem collaboratively, in ways that draw on their strengths and skills?
5.57	Q 8 - To what extent am I able to help clients 'reframe' problems they present within the context of the better future they wish for? (E.g. an example of this would be saying "so how does your drinking interfere with your desire to have a voluntary job?")
5.57	Q 11 - To what extent do I work with clients to solve problems collaboratively in ways that draw on their strengths and skills, in order to build up their confidence? (E.g. solving problems with clients rather than for clients, as this can deskill them)?

Key reflections on the FLNG workforce journey

The team induction was intensive, with one day a week being dedicated to induction training for three months. This was positively received and bringing together the whole team was felt to be supportive. During this time the team's self-reporting of their key skills and experience increased, as will be discussed later. The change in delivery model has impacted on the team, as well as the wear and tear of frontline work where we have been exploring trauma informed approaches, morale and staff roles have been affected by the change in delivery

too. A number of staff on our team have lived experience of multiple needs and trauma, and they have worked with people with complex trauma histories for some time. As we have also experienced a high amount of staff sickness we will be exploring a potential correlation around this in the final evaluation as we pose the question 'how effectively do we support the workforce?' and in particular, people with lived experience.

Involving Experts by Experience in our second reading for our PIE assessment, and bringing Experts on board in co-producing and delivering training has increased our learning and insights into our workforce development offer.

We acknowledge strong skills on our team around building engagement, and have learned that the team are less confident in working collaboratively and building motivation to change. Our frontline team joined us as Navigators and have moved into the System Change Practitioner role, this role change is fundamentally different to the Navigator role, and people have felt connected to the programme through the people they support but not to their role. PIE explores roles and responsibilities, we can use this tool in the next phase of evaluation to look at what happens when a role changes, and how this impacts on skills and delivery. It is heartening that engagement skills are such a strength of our team, and our induction has moved some people forward positively in developing new skills to support the System Change Practitioner delivery, however not all of the team are quite where we would like to be in delivering this new role.

We see that there is an appetite and need for more trauma informed care training, this is not a one off training session but needs to be embedded within roles and training and development. Encouragingly our staff team are reporting that they are changing the way that they work and think around being more trauma informed, we will develop our work further in this area to offer a package of support around trauma informed care.

Workforce Development Programme: external delivery

This section covers the five training programmes available quarterly delivered by FLNG on a rolling programme – co-production, multiple and complex needs, peer research, PIE and system thinking. For each training programme we look at the training offer, feedback and learning to date and recommendations and next steps.

1 Co-Production training

Introduction

FLNG are committed to the principles of Co-Production and this part of our Workforce Development programme offers attendees the opportunity to make Co-Production come alive, and we aim to train 8 services each quarter. The training was Co-Produced with staff from Fulfilling Lives Newcastle Gateshead and the Experts by Experience Network and is co-facilitated by both staff and Experts.

Activity to date:

Developing the training

Co-designing the training involved 3 months of regular meetings involving members of the Experts by Experience network and staff from Fulfilling Lives Newcastle Gateshead. We felt it was important to take out time and not rush this process to ensure it was genuinely co-produced and contributions to be valued. The training references Social Care Institute for Excellence [resources](#)⁴ and draws on Experts' experiences of co-production and programme learning. It is delivered as an interactive workshop and covers:

- The meaning and history of co-production
- Key skills and core values of co-production
- Participants choosing a piece of work they wish to undertake in their service and practice applying the values and principles of co-production
- Developing a co-production action plan

After the training we offer follow up support to reflect and review how successful attendees' plans have been in their service

Training delivery

⁴ <https://www.scie.org.uk/co-production>

We delivered two Co-Production sessions on 25th January and 22nd March 2019, with 15 people attending in total:

Cohort	Service/s represented	People trained
1 (test and learn)	FLNG staff, FLNG core partners, four local VCS agencies	11
2	FLNG staff, Expert by Experience and criminal justice VCS agency	4
		Total 15

Feedback

The first session was a test and learn session with attendees acting as critical friends, the second session rolled out to our first official cohort. The feedback from the test and learn group is highly reflective, offering supportive comments and suggestions for improvements:

"I was very impressed - it all worked very well and I understood the basics and it helped me formulate a plan re co-production"

"The animated comparison between traditional power structures vs a shared one was really effective. I would be inclined to show this right at the start as it communicates simply what the differences are, and what the themes of co-production are."

"Both very good - I would have liked more of Expert - so when you went through 4 values or 4 jigsaw parts it would have been better to alternate each one - this would give a more balanced impression in terms of co-delivery between both trainers."

Key learning outcomes to date

The Co-Production session has only just begun therefore it is too early to look at key outcomes for this workstream. Encouragingly, people shared that the training has practical application to their work:

"Yes, I've co-produced before and feel like the training backed up my understanding of best practice, and has given me a stronger vocabulary and understanding to make the case for embedding co-production in more of my work. It has already influenced my facilitation style in a member involvement forum I ran last week. I'm also referring to it to develop my next steps from this forum; I'm hoping to pair feedback from the members and the content of the training to build a business case for a member events co-production project."

"The training has made me question even more how we work in mental health services and how users of services are involved, listened to and heard. It has prompted me to look at the concept of power and responsibility within society and particularly within mental health services."

This is positive learning and feedback which will help us improve the offer. In addition, the people and in particular the EBEs who helped shape and deliver the programme have found the experience a positive learning experience.

“Working as part of a team, to help design a programme to bring Co-Production training to others and working with staff has been a huge boost to my self-esteem and confidence.

Being able to have a space where we could talk about ideas and not feel that I had to agree with everything the staff said was an amazing experience. I cannot wait for other organisations to start using it”

Sheila Blatchford, Expert by Experience (peer researcher and training facilitator)

The next two co-production training sessions are already fully booked which reflects the demand for this training locally.

Recommendations and next steps:

It is too early to make clear recommendations but our next steps are to contact each attendee to review progression on their action plans.

We have established demand for this training so we will build up our pool of facilitators who can deliver this training. In light of this we are offering a “Training the Trainer” training day on 25th June 2019 and reserving half of the 16 places for experts by experience, with a view to them co-delivering the training in future. We will continue to use all course feedback to improve the training offer.

We will draw on learning from the forthcoming Co-Production week in July where we invite other stakeholders to share their experiences of co-production with us.

Further evaluation work will highlight good practice in co-production as services share with us their learning from their journey to working in a more co-produced way. We plan to embed co-production training within Human Resources teams in the Fulfilling Lives Newcastle Gateshead Core Partnership to build more robust HR processes, including recruitment, for people with lived experience.

2 Multiple and Complex Needs training

Introduction

In this training we particularly focus on developing an understanding of the impact of trauma on people with complex needs and developing five key skill sets which help staff to work more effectively with people with complex needs. These are:

Accepting & Engaging people as they are (e.g. *be Validating and active listening*)

Believe people can Get Better (*Building motivation & hope*)

Collaboration skills (*Planning solutions to solve problems together, then reflect together on the outcomes...to build problem-solving skills*)

Developing trust in relationships (*Being reliable and consistent*)

Establishing & maintaining our role & boundaries (*Building realistic expectations about what you can and cannot do within your role*)

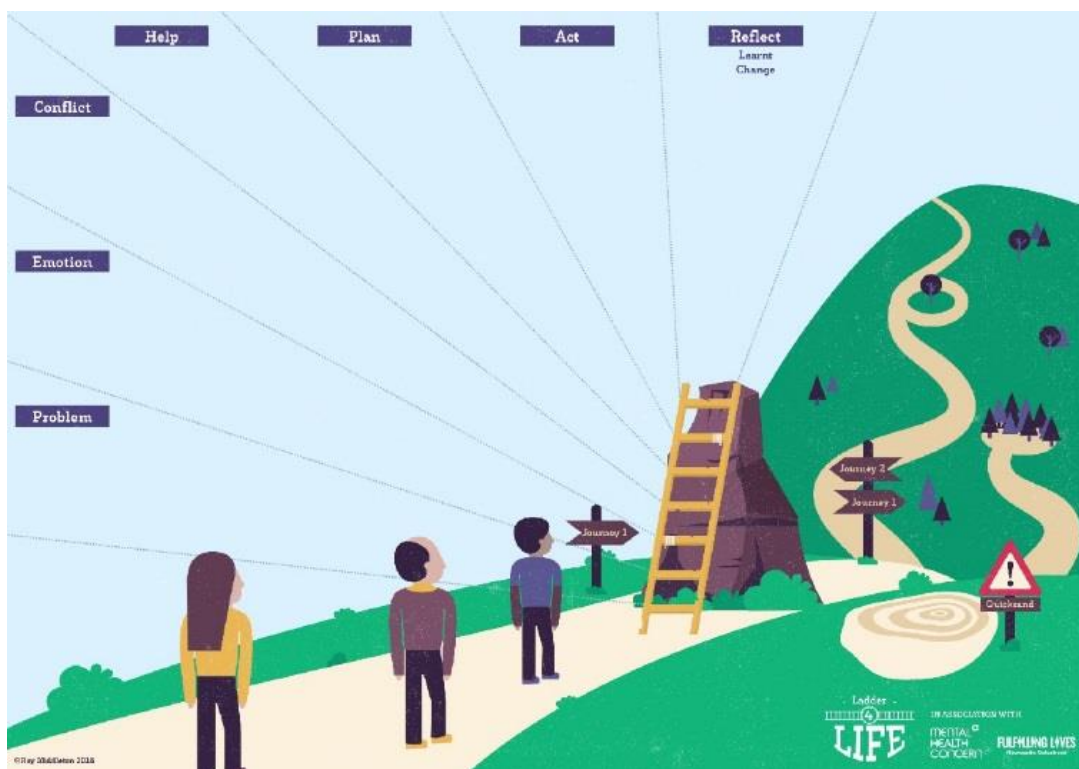
The training has been developed through an iterative process reflecting on feedback and programme learning from reflective practice sessions, interviews with Experts by Experience and people who we have supported, and the What Makes a Good Multiple Complex Needs Worker report referenced earlier. We aim to train 64 staff each year. The one day training offer is delivered to multi-agency staff with plenty of opportunities to learn from each other through reflective discussions and exercises. A variety of media are used throughout the training to allow for different learning styles, such as text, audio, pictures and films.

The views of our Experts by Experience on each skills area were recorded and the interviews are played to the attendees who then discuss reflections on the interviews. Alongside this lived experience input we also share some theory, for example Validation theory and Motivation Building Skills.

An example of one of the YouTube films used in the training can be viewed [here](#)⁵.

Attendees take away a workbook and laminated psychological framework in plain English, called Ladder4Lifehelping staff to remember the key learning points from the day. A psychological framework is a simple model to help people think in a consistent way about patterns/habits of thinking, emotion and actions and how they connect with each other, other people and the wider social world.

⁵ <https://www.youtube.com/watch?v=wDG1YjTFe6w&feature=youtu.be>



One of our short films explaining the Ladder4Life framework can be viewed [here](#)⁶.

Activity to date

Between April 2018 – and April 2019, we have delivered three training sessions with 51 people. As seen in the table below we have a variety of services represented, however the Criminal Justice sector have so far been under-represented.

Multiple Complex Needs (MCN) Training		
Cohort	Who attended?	Total
1	Fulfilling Lives Newcastle Gateshead (FLNG) Mental Health Concern Oasis Community Housing FLNG Expert by Experience	16
2	Mental Health (11) - 3 from Mental Health Concern - 8 from Statutory Mental (NTW NHS) Substance Misuse services (CGL) (2) Chilli Studios (community creative activities) (2) Social workers (Newcastle Local Council) (2)	17
3	Mental Health Matters (3) Street Rangers (1) Barnardo's (1) Expert by Experience (1) DWP (3) Richmond Fellowship (1)	18

⁶ <https://www.youtube.com/watch?v=V3lthjAaY8g&feature=youtu.be>

	Gateshead Council (1) Housing Association (1) Red Cross (2) Northumbria University (1) DePaul UK (1) Changing Lives (2)	
4	<i>Due 30/04/2019</i>	
		Total: 51

Training feedback

Feedback about the training has been very positive with 17 surveys returned in total from all attendees. We are currently considering how to increase uptake of the evaluation surveys and moved our booking system onto Eventbrite to streamline this process and will automate survey follow up linking to the Survey Monkey system.

The quality of responses returned however, has been very useful in identifying how the training is working and the impact it is having:

"Exciting and innovative, first training I have been on where I have learned practical things that I can apply that will make doing my job less tense" [Attendee Cohort 2]

I felt on a whole the structure of the day flowed well and felt there was an even balance of teaching and practical work." (Attendee Cohort 2]

This feedback helps us to adapt our training and understand how people are practically applying their learning. For example, we received four comments that the course feedback forms are sent out too soon after the course, which we will take on board. There were also useful comments about the training tools and materials shared, including that the video with a focus on the USA does not feel as relevant, the graphic novel exercise is a little long, and a few people asked for more information to take away:

"I would of liked a copy of [Levy and Johnson, 2018⁷] to take away. I think it would be a useful learning tool to use with students and to get them to do the same exercise when done on the training. I found the handouts had lots of useful information on."

"The resources were excellent and for me definitely encouraged me to engage more. We weren't able to take away all of the resources, however I think some of the resources would be useful in practice e.g. the little laminated cards."

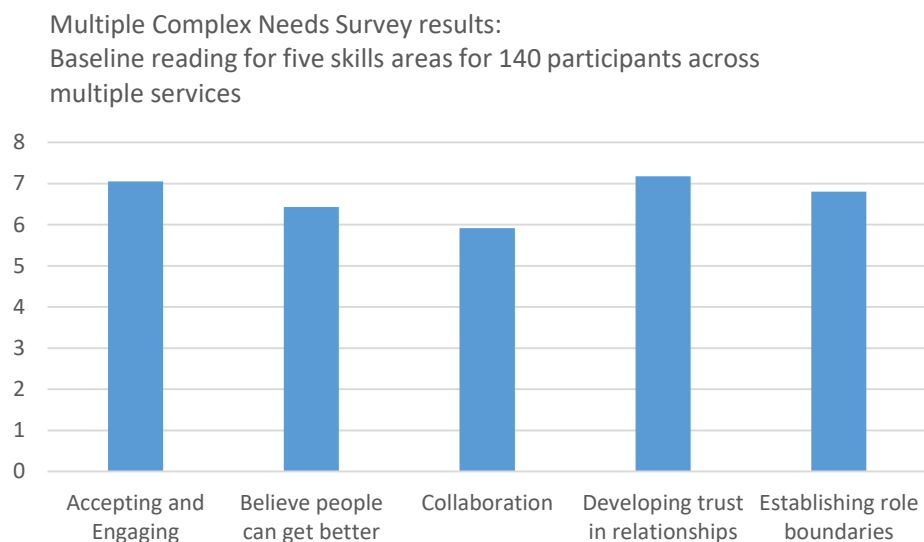
Key learning outcomes to date

⁷ Levy and Johnson, 2018, Cross-Cultural Dialogues on Homelessness: From Pretreatment Strategies to Psychologically Informed Environments

It is helpful to have captured data from a large number of staff and although it is too early to gauge the full impact of the training to date, the feedback returned by people attending shows how the structure and delivery works well.

We measure the long term impact of our MCN and PIE training on the workforce with a baseline and then a follow up of a skills survey encompassing 25 skill areas for multiple and complex needs workers (see appendix 1). We wanted to capture a baseline of the multiple and complex needs sector so have also sent the survey out to a wider network of accommodation staff and staff from other services, securing a baseline skills survey for 140 people in total.

We have found that the profile for this larger group matched the pattern of scoring for FLNG team scores. Again this tells us that our MCN training can best be developed to increase skills around collaboration and building motivation (believing people can get better):



Recommendations and next steps:

From our learning to date, we recommend resources are put into training staff across Newcastle and Gateshead who are working with people experiencing multiple and complex needs in these skill areas:

- Collaborative problem solving
- Motivation building

We also recommend that this could be delivered in a reflective practice style which allows more experienced staff to share their practice with people newer to the sector, or who have not been trained in such skills. We will target specifically the criminal justice sector who have not taken up the training as readily, we recognise here that changes in the delivery landscape impact on the people we support.

FLNG will develop collaborative case studies to showcase positive examples of working in both areas to support the development of good practice and learning.

FLNG will include more of a focus on these skills within the WFD offer.

3 Peer Research Training and Network

Introduction

Peer research is fully embedded within both FLNG's Research and Evaluation and Co-Production team with FLNG continuing to promote it as an excellent tool to elicit the authentic voice of people experiencing MCN. Drawing on participatory research methods and with its roots in community activism our course skills up people with lived experience to co-deliver and lead their own community research projects. We have built on this offer, training staff to use these skills in exploring learning from their own peers and to embed peer research in their agencies.

We run a six week Level 2 NVQ accredited research skills training module quarterly aiming to train 8 people with lived experience a quarter. The course covers the following skills:

<p><i>Session one:</i> Understanding research Different research methods Understanding peer research</p> <p><i>Session two:</i> Informed consent Thinking about bias</p> <p><i>Session three:</i> Developing research questions Research methods in focus: Interviews</p>	<p><i>Session four:</i> Reporting</p> <p><i>Sessions five and six:</i> Putting it all together, writing a report</p> 
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At the end of the six weeks the trained peer researchers are able to take forward their own research project, with support from our Research and Evaluation team.

Qualified peer researchers are then invited to join the FLNG Peer Research Network which meets monthly and acts as peer support for peer researchers. Due to the sometimes challenging material elicited in research projects, we found it essential to establish this space for the Peer Researchers. The Network acts as a good practice forum and a space to explore opportunities to get involved in a) further peer research and b) Experts by Experience Network opportunities.

Activity to date

Prior to July 2017 we delivered one peer researcher session and three peer researchers were recruited and trained with a view to developing the Gateshead Homeless Health Needs Assessment. Two peer researchers completed the training and went on to produce a peer research report that contributed to the development of the Homeless Health Needs Assessment; a well-regarded report, [published](#) in May 2017 and later adopted by Gateshead's Health and Wellbeing

Board. In July 2017 we moved assessment of the NVQ L2 module to Open College Network (OCN).

Five further courses have been delivered to date, with 21 peer researchers completing their qualification and joining our peer research network.

Cohort	Service/theme	People trained
1	Together in a Crisis evaluation of TiaC service response for people who do not meet the threshold for crisis services (MHCO identified 5 peers for training)	5
2	Moving on Tyne and Wear research exploring the barriers to employment for people who use drugs and alcohol and people in recovery (MoTW former service users trained)	5
3	Experts by Experience scoping research into experiences of the care system for people with multiple and complex needs	3
4	Experts by Experience scoping research exploring the value of peer research and experiences of delivering this model of peer research	3
5	Mixed cohort of staff from Fulfilling Lives Newcastle Gateshead, Mental Health Concern and West End Newcastle health practices	5
		Total 21

To support the new delivery model and our renewed focus on system change, we expanded our offer to include staff who wanted opportunities to develop peer research skills and use them within their own organisations to develop learning and evaluation alongside their peers (colleagues).

Feedback on the training has generally been positive and honest and constructive feedback is requested from attendees after each course to explore how we might improve the training offer. Learning is outlined in the next section.

In order to build the connection between the Peer Research and Experts by Experience elements of the FLNG programme; Peer Researchers are now invited to become members of the EBE Network and some have taken up this offer.

We're encouraging services to embed this model, building capacity for peer research within our Core Partnership, hence training a mixed cohort of staff to support peer research activity, and also to get involved in leading peer research as frontline staff.

In 2017/18 FLNG prime funded peer research exploring the efficacy of the Together in a Crisis (TiaC) model of support for people who do not meet the threshold for crisis services. Peer researchers evaluated the model and TiaC's delivery partners secured further funding for delivery in other localities as a result of peer research findings

We are seeing the benefits of linking in to academic research networks, our R&E Lead is an associate member of FUSE. Making this link and networking within

FUSE has led to the development of a peer research project in Summer 2019 exploring Multiple and Complex Needs deaths with academics from Newcastle University and the four other FUSE-represented institutions.

Published findings:

- In May 2019 the Moving On Tyne and Wear peer research project was [published](#) and launched with an event at St Mary's Gateshead.
- In 2018/19 we were commissioned to deliver peer research for Healthwatch Newcastle exploring access to mental health for people with experience of homelessness. These findings, together with TiaC findings, demonstrate a clear need for pre-treatment for people with co-existing needs are driving the next phase of our system change activity where we're exploring opportunities to pilot this kind of support.

The Healthwatch report was [published](#) in May 2019, we received the following feedback from Healthwatch Working with the *'Experts by Experience' group has allowed Healthwatch to hear the experiences and views of people and groups that we would otherwise have struggled to engage with. Their powerful stories have added depth to our understanding of the issues, which in turn has enabled us to develop better recommendations for change'*

Both of these reports will be presented at Strategic Group in July 2019, and two peer researchers now the Experts by Experience representatives on Strategic Group.

Key learning outcomes to date:

Feedback received from course attendees clustered around two main areas:

- Preparedness for peer research project delivery
- Timeliness of having an opportunity to put peer research skills into action.

Peer researchers told us that they enjoy the peer research training but still feel daunted by the prospect of commencing a peer research project. One of our peer researchers reflected on this, stating that it was daunting to hear the lead researcher say that "it's our project, she's supporting us but we will write the questions and deliver the work". At this point we didn't have a published piece of peer research so it was difficult for peer researchers to visualise what they would produce and to feel confident that they too could produce similar work. We

recently produced a short film featuring a peer researcher talking about their experience of overcoming this fear and uncertainty and growing in confidence, to encourage new peer researchers.

We responded to comments that peer researchers wanted to test their new skills immediately where projects sometimes take some time to get setup, or have quieter periods: *"I'd have liked to have had something to get my teeth into quicker, even doing some interviews to get some practice, or writing some research questions"*. In addition the research and evaluation lead noted that retention of peer researchers has been challenging as she has limited capacity to oversee multiple peer research projects. In June 2018 we launched a monthly Peer Research Network to bring together peer researchers offering peer support, opportunities to get involved quickly in peer research projects and to extend reflective practice opportunities so that peer researchers feel well supported and stay engaged with the programme when there are quieter periods between projects. Early feedback from the peer research network has indicated that there would be appetite to explore other models of reporting peer research findings including film and presentations.

We have found soft outcomes including that peer researchers grow in confidence and form a strong supportive bond and enjoy meeting each other outside of peer research sessions:

"As a group we've grown a lot, and in my view we've all grown as individuals too. I think we've all had our own benefits from taking part, growing in confidence. Seeing my name on the front of the report, I was made up. I thought "I did that!" I've shown it to my network of friends and family and I'm really proud of what we've achieved as a group"

Three of our peer researchers were offered four months employment, learning from supporting them is shaping our peer research apprenticeship offer and it has been a privilege to share their journey to employment:

"I've gone through a mixture of emotions while carrying out the research but battled through and started to feel quite proud of myself and passionate about what I was doing thus started to believe that I actually could apply for the role and I was capable of doing it. So here I am in paid employment preparing a report of our findings which is bringing up a new set of barriers for me but I'm up for the challenge!"

We're growing the Experts by Experience network and expanding this skills base by inviting peer researchers to join the Experts Network

Our approach has led to real employment opportunities with the creation of three peer research posts within Changing Lives- this is wonderful, of course, but means we need to recruit new peer researchers to ensure we have an ongoing pool of people available to support peer research projects!

Recommendations and next steps:

We noted issues around retention of peer researchers and will evaluate the efficacy of the peer research network in retaining peer researchers.

In the pipeline we have a train the trainer programme for peer research as we have found staff have been enthused by their training and can support our capacity to deliver more research projects. We will start with embedding peer research within our core partnership.

The peer research network is proving an invaluable space for testing out learning, developing supportive networks and we recognise that peer researchers are hearing sensitive information and stories so it proves a strong source of reflective and emotional support for researchers. Early feedback from the peer research network has indicated that there would be appetite to explore other models of reporting peer research findings including film and presentations. This will be explored over the coming 12 months.

4 Psychologically Informed Environments (PIE)

Introduction

FLNG have been keen advocates of PIE since the programme's inception in 2014 and our current PIE offer has been developed from reflecting on our initial PIE pilot in 2015/16 (see Boobis, S., 2016, Evaluation of a Dialogical Psychologically Informed Environment (PIE) Pilot: Addressing homelessness, re-offending, substance abuse, and mental illness).

The overarching aim of the PIE workstream is to train staff to produce a PIE service self-assessment through a conversation involving all members of their service staff.

Our PIE Lead training equips PIE leads with the group facilitation skills and PIE pro-forma tool (Appendix 2) to go back to their staff team and self-evaluate where they are at in each PIE area as a baseline exploring what helps and what hinders for each area. In addition a plan to improve in each area is coproduced through this process. This allows the self-assessment to be repeated at a later date (currently six months after baseline reading) to measure progress against plans. These key PIE areas for service development are;

- Psychological awareness
- Staff training and support
- Learning and enquiry
- Spaces of opportunity
- The 'Three Rs' (roles, rules and responsiveness)

Each area covers several areas which could become sub-topics. In our pilot we wanted to focus on Reflective Practice, which can be seen as a sub-section of Learning and Enquiry, so in line with this approach to PIE we also evaluated an additional area of;

- Reflective practice

No prior knowledge of PIE or facilitating reflective practice is necessary to take on this role as we are offering training for both roles.

We used the new upgraded version service specification and evaluation measure designed by Robin Johnson from www.pielink.net called Pizzazz.

Commentary from Robin Johnson:

"Ever since we began, some ten years or so ago now, to talk about the work of homelessness and complex needs services as 'psychologically informed environments', the North East as a region and Newcastle/Gateshead in particular has been in the vanguard of developments. They were not just early adopters, but active contributors to a growing recognition of what it is that services are doing – trying to capture and describe the essence of it.

With this report, this active contribution really shows. Taking reflective practice – quite rightly – as the 'golden road', and their key intervention, the approaches they describe here are bristling with vitality. The enthusiasm and energy are palpable.

This very welcome report will be shared, as part of the Big Lottery and its Fulfilling Lives programme, and their commitment to disseminating action learning. I would also like to take a moment here to pay tribute to those at the Big Lottery, who devised such a forward-thinking programme. Right across the country there are now not just services but whole localities experimenting with new approaches to some of the most excluded. We are seeing a welcome revival of the creativity that marked homelessness services in the early Supporting People era, when so much of the actual practice that we describe as PIEs began to come together.

We have tried to respect and embed that spirit of exploration in the PIEs framework, and especially in the self-assessment module, the Pizzazz. So it is particularly rewarding – and encouraging – to find Newcastle & Gateshead deeply involved in this, continuing to take new approaches forward, and exploring now this use of software to boost that assessment process, both for services and for networks.

The next stage in this development, I suspect, is the encouragement of more coherence in the overall network of services, the pathways into and out of services, to tackle the gaps and the barriers between services. The attempt to devise a common language for such complex needs work has been challenging, but we need to talk to each other, to bridge those gulfs, if we are ever to help service users to."

Robin Johnson, inventor of PIE and editor of www.pielink.net

Activity to date

We [evaluated](#) the PIE leads training in 2017/18, establishing a demand for more training across Newcastle and Gateshead. Reflecting on feedback secured we used the suggestions to improve the training offer and build on the PIE facilitator’s toolkit by including new films and resources.

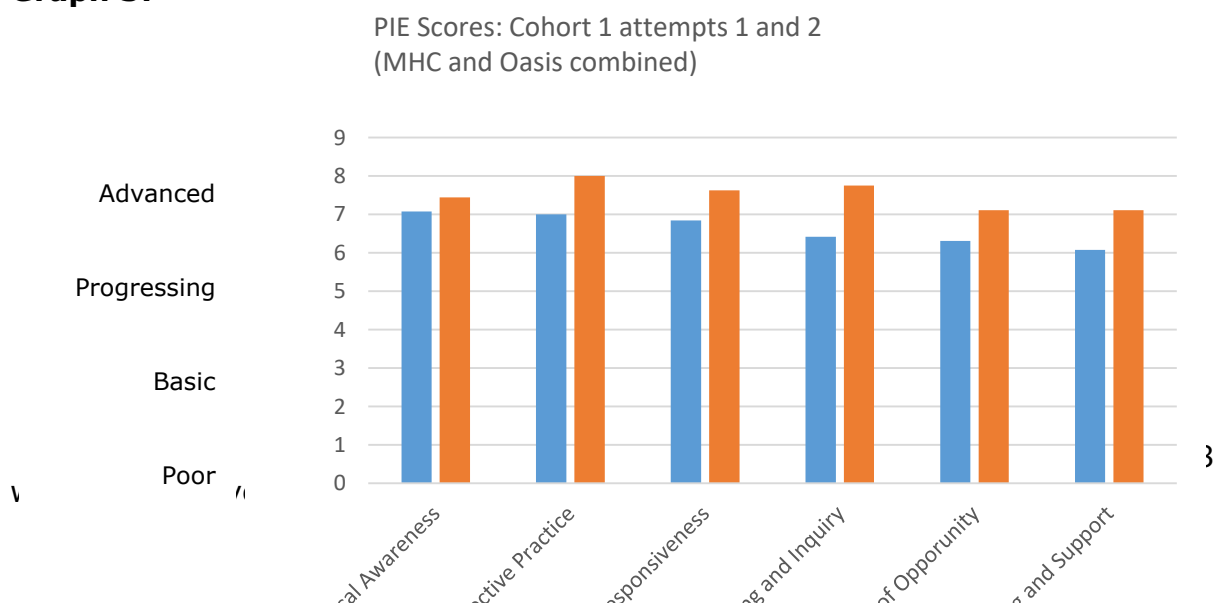
Four PIE Lead sessions have been delivered over the previous 12 months covering 38 services as outlined in the table below:

Table 2: services PIE trained in 2018/19

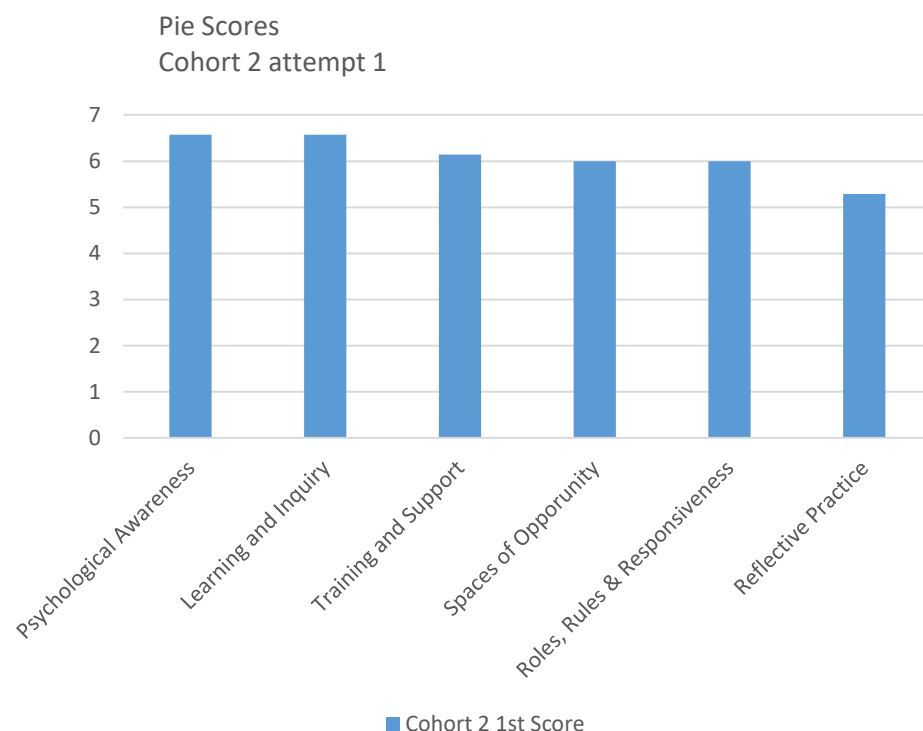
Psychologically Informed Environment (PIE) Lead Training		
Cohort	Who attended?	Total
1	Mental Health Concern (9 services) Oasis Community Housing (4 Services) Changing Lives (1 Service)	14
2	Changing Lives (6 Services) The Gateshead Housing Company (1 Service) Barnardo’s (1 Service) Crisis Skylight (1 Service)	9
3	Changing Lives (8 services) Gateshead Council (1 Service) DePaul UK (1 Service)	10
4	Plummer Court (Substance Misuse Service - 1 Service) Recovery Connections Gateshead (1 Service) Recovery Connections Middlesbrough (1 Service) CGL (Substance Misuse Service - 1 Service) Teams Medical Practice (GP practice) (1 Service)	5
		Total: 38 Services

We have full self-assessment baseline data for the first two PIE cohorts trained, and for cohort one we have comparator data with a follow up self-assessment reading taken six months after the baseline (see graphs 2 and 3, overleaf). Both cohort’s baseline data is higher than our programme baseline.

Graph 3:



Graph 4:



Reading and refl
these PIE pilots,

1. Psychological

area was a la

secondary trauma on staff). This tended to be linked with increases in staff over-busyness and burnout. Training around trauma-informed approaches and reflective practice spaces with peers to process the emotional 'wear and tear' of the work were seen to help this area develop in the planning area.

2. Training and Support: Formal support structures were reported as helpful (such as 1-2-1 supervision, incident debriefs, team meetings and handovers) if they happen as planned. A hindrance was the difficulty of finding good quality relevant training tailored to the job people actually did (such as trauma-informed, motivation building, collaborative working) and tailored to specific roles (such as housing support worker or employment coach). There was also a difficulty of practicing new skills learnt and embedding them in the day to day work; not just forgetting skills learnt on a training day in the busy-ness of the work.

3. Learning and Enquiry: A help identified was the ability to measure progress and then learn from this, such as reflecting on 'good news stories' of progression. However, time and workload pressures were a common hindrance

that made it hard to protect space to reflect, develop skills and learn on the job.

4. **Roles, rules and responsiveness:** A good induction which is clear about staff *Roles and the Rules and responsiveness* of the service was seen to help, with ongoing peer support to stay in a consistent Role helping in the "3 R's" area. However a common hindrance theme emerged when different personalities interpret staff Roles differently and the Rules are often inconsistently applied by staff. Also in this area some people disproportionately took up staff time meaning quieter people did not benefit fully from the service offer, which was seen as unfair.
5. **Spaces of Opportunity:** In this area staff were able to think more systemically about the wider local offer of services on offer to people outside their own service and to spot gaps or spaces of opportunity that did not accept the people they support. However a significant theme identified was people lacking the motivation to access what was on offer which could help them develop. This raised the question of whether motivation building skills tailored to people's job roles, would be good to focus on in future training.
6. **Reflective Practice:** Running regular reflective practice groups in staff teams was seen to be beneficial when it happened, however, often services said they were hindered by lack of in-house skills to run reflective practice session and lacked finances to pay for an external reflective practice facilitator. This raises the question of whether training around facilitating reflective practice groups might build capacity within the sector for this to happen. In addition to the need for skills training around facilitating group reflective practice, there appears to be some reluctance amongst some staff to prioritise and protect reflective practice time. This may be linked to their overall levels of busyness. However, our thinking is that regular reflective practice sessions would reduce the levels of stress and lead to better decision making and consequently reduce busyness levels. This is reliant on strategic/management buy-in to PIE as discussed in our previous PIE train the trainer evaluation outlined earlier.

Key learning outcomes to date:

- People trained to be PIE Leads were in general able to understand the PIE categories, to successfully facilitate reflective discussions with their staff teams and to generate a baseline PIE self-assessment for their service. However, the quality of the data gathered did vary. Some services generated comprehensive data which included over 15 helping and hindering factors in each area whilst other services gave less depth to their answers by identifying only one or two factors that helped and hindered. We were not surprised by this and on reflection thought publishing some anonymised examples of good PIE self-assessments through the iAbacus could role model good practice. Giving other people ideas about factors that might help and hinder, as well as publishing data of common themes that help and hinder and plans to improve could inspire other services to improve the quality and depth of their PIE self-assessment.
- Internally in our own service we implemented a monthly reflective practice session for frontline staff after reflecting on the initial baseline PIE self-

assessment. We also delivered training on trauma informed care (TIC) in our induction and a number of other psycho-social techniques to improve our “psychological awareness” and “training” areas, such as validation skills, motivational interviewing, solution focussed practice and collaborative problem solving skills. Our next evaluation of workforce development activity will focus on our experience of implementing training in these areas, to explore to what extent the skills learned are being implemented on the frontline and how effective this is. We recognise a need to develop a suite of casestudies where practitioners reflect on their learning in action, to help us to spread good practice.

- In general services needed a month to be able to get the team together to discuss and reflect on the PIE areas to create self-assessment. In reality most services managed to complete this in 6 weeks with some prompting and encouragement from the Workforce Development Lead. The general atmosphere in most services was over-busyness which meant for innovation and learning to happen to support service development there needed to be a named person to take responsibility for PIE with a service (the PIE Lead).
- We found services in organisations where there was ‘buy in’ and understanding about PIE from senior staff who gave out the message that PIE was important to the organisation did better at gathering the data on the ground.
- We were invited to take part in the first wave of an iAbacus PIE pilot; some software allowing the service PIE data to be inputted into a website and database, detailed reports to be run and services to be compared to enhance the learning and development areas of PIE. This could be particularly useful for larger organisations wanting to coordinate their approach to PIE. Having tried it, FLNG’s experience has been that this has been sufficiently useful to include in our evaluation report here. It has also allowed us to produce individual service specific PIE reports in a visually appealing format which we are using in our next steps for PIE peer review. We can envision how these PIE reports could also be used for internal/external reflective conversations as they present the data clearly. However as with all pilots it is important to hold in mind that at this stage this is an experimental exploration of new technology to help.

"Ray and the team have brought a new level of insight to using iAbacus® in this sector. The team's deep understanding of workforce development has strengthened the way our evaluation and strategic planning tool is used. We highly value the detailed feedback and positive input we receive from the team and the way in which this is shaping future product developments."

Daniel O'Brien, Creator of iAbacus®, Director at TDK Business Technologies Ltd.

The obvious challenge with this data presentation is that organisations may not want to expose themselves to judgements from others by showing their internal service self-assessments. An alternative way to share learning would be to publish general themes that emerge from a number of services within each PIE area

without naming specific services. To show how common themes could be drawn out and shared we have collated typical answers from the services involved in our pilot into one document called "Typical Service" also available on request.

It is too early to fully gauge the impact PIE training is having on services, indeed services felt six months was too soon to reflect learning. Our next WFD report will build on our previous ground-breaking work evaluating PIE with a full review of the difference this training is making.

Recommendations and next steps:

The quality of the training offer has been established through the attendee feedback received. We therefore plan to build on the work already achieved in the PIE pilots by training 8 services per quarter throughout 2019/20 in PIE self-assessment; thereby developing PIE in 32 services annually.

The Pizazz PIE self-assessment is a practical tool that enables services to create a baseline PIE assessment and action plans to improve in each area. The PIE Leads trained in 2019/20 will self-assess using the Pizazz framework (www.pielink.net) and the data collated and migrated onto the iAbacus data processing software to allow reports to be run on each service in terms of baseline and future progress.

Publishing examples of service's self-assessments could help improve the overall quality of the self-assessment. In line with this we have reproduced our PIE self-assessment for Fulfilling Lives Newcastle Gateshead (see our separate technical appendix) and an anonymised example from another service is available on request.

Drawing together learning across the workforce development programme we will place a greater focus on the training needs of staff – including our own team – promoting co-production and systems thinking training to help build staff skills in building motivation to change, and working in collaboration, which we have identified as gaps in our 25 skills area assessments.

We will explore a more robust sign up to the PIE Lead training which is focussed on achieving management agreement/buy-in to support the protected space needed to properly review provision.

5 Systems Thinking training

In light of our increased focus on system change in the new delivery model, we are currently writing our Systems thinking training session. We aim to train 8 staff each quarter and this training will cover an introduction to soft systems methodology and system change tools to equip and enable participants to develop their own plan for system change.

This training will be supported by a follow up training session six weeks later to bring participants together to review progress on their plans and consolidate learning from the attempts to put system change into practice. We then aim to bring this system learning together with other colleagues across Newcastle and Gateshead via ongoing quarterly system change groups facilitated by FLNG.

Other training linked to this workstream

Bespoke training requests and sharing practice

In addition to our rolling programme of Workforce Development, we receive a variety of bespoke requests for training and invitations to share our learning and good practice.

In Summer 2018 we did some exploratory research at two Time in Time out (TiTo) sessions exploring frontline staff's experiences of working with people with multiple and complex needs. This research suggested that work needed to be done to increase the workforce's knowledge of multiple and complex needs and particularly the impact of trauma. In response to this, we are developing multiple complex needs training for GP reception staff, to be delivered as a one hour session at TiTo and rolled out in May 2019.

We were commissioned by Crisis Skylight to deliver reflective practice delivery training, and are building on this training by developing a train the trainer package. In addition we have accepted a request to write an introductory training session on Trauma Informed Care (TIC) for volunteers at Crisis Skylight for September 2019.

We were also invited to share our practice in terms of our current workforce development activity and future plans at the Adverse Childhood Experiences (ACE's) Conference in Gateshead on 7th February 2019.

Recommendations and next steps:

We will continue to share our learning on a wider stage and it is essential to seek some focussed Communications support over the next 6 months to ensure the Workforce Development learning reaches audiences through a variety of channels including social media.

We will continue to monitor the number of requests and evaluate the impact of any additional training offered by FLNG outside the generic social media offer.

Conclusions and recommendations

- **Developing the training**

We are building a solid understanding of what the multiple and complex workforce needs and our learning has the potential to help services/agencies develop their practice in a focussed way.

Co-producing training with Experts by Experience and both internal/external colleagues across the system takes time but the benefits from this investment is clear and is helping us produce a training package fit for the needs of those who need the training.

- **Demand for training**

Our workforce development package is garnering interest and we are seeing promising practice developing in the workforce. In terms of our delivery numbers

we are on track and we have trained 125 people to date across our workforce development programme. We are building a strong reputation for training with some quarters oversubscribed and interest in ad hoc training coming on stream.

- **Emerging theme**

We are building a solid understanding of what the multiple and complex workforce needs and our learning has the potential to help services/agencies develop their practice in a focussed way. The need to build a trauma informed workforce is the golden thread emerging from all five of our workforce development areas.

- **Staff Skills**

We've pin pointed skills around collaboration and building motivation as two key areas of focus for workforce development. It is exciting to see findings from within our local programme mirrored in the skills reviews of other local services and in the next phase of our work we will drill down further to understand what it is about these two skills areas frontline staff find challenging. Being able to name key areas in this way helps to focus future workforce development activity and there is some cross over here with our Critical Time Intervention evaluation where these skills also come into relevance, again this will be explored further

We recommend services explore the five core skills areas with their staff teams and feed in evidence and learning to Fulfilling Lives Newcastle Gateshead. We will explore examples of good practice and produce collaborative case studies showcasing promising practice we find in these two areas.

- **Organisational challenges and opportunities:** We now better understand the challenges and opportunities agencies have in developing PIE and supporting the MCN workforce and this will help us tailor and develop our workforce development offer further. These include:
 - a lack of understanding among staff of the effects of trauma and secondary trauma on staff
 - the difficulty of finding good quality training tailored to the job staff actually do e.g. trauma-informed, motivation building and collaborative working tailored to specific roles such as housing support worker or employment coach
 - Time and workload pressures were a common hindrance referenced that made it hard to reflect, develop skills and learn on the job. Understanding these challenges
- **Change:** Cultural change takes time. Agencies felt it too early to comment on improved practice, so whilst we highlight early promising practice this is largely an evaluation of our process in setting up this workforce development programme. The next phase of evaluation will review how these changes are embedding and how practice is changing in better supporting people with multiple and complex needs. We will give a full presentation of all training feedback to include facilitation and training tools feedback.

- **Learning for FLNG:** Changing our delivery model has impacted the team, as well as the wear and tear of frontline work where we have been exploring trauma informed approaches, morale and staff roles have been affected by the change in delivery too. We have found that our team have strong skills around building engagement, and have learned that the team are less confident in working collaboratively and building motivation to change. Our frontline team joined us as Navigators and have moved into the System Change Practitioner role, this role change is fundamentally different to the Navigator role, and people have felt connected to the programme through the people they support but not to their role. PIE explores roles and responsibilities, we can use this tool in the next phase of evaluation to look at what happens when a role changes, and how this impacts on skills and delivery.

Summary of next steps

- General – We are seeing clear value in the engagement of Experts in all five workforce development areas, and in co-producing our offer and learning with them. We have identified a golden thread of building a trauma informed workforce, this runs through all five of our workforce development areas, from co-producing training to providing a safe space for peer researchers to reflect, to building skills and capacity to work collaboratively and manage the emotional wear and tear of frontline work.
- Co-production - Each attendee will have a follow up with the co-production team and findings will be collated and explored each quarter to establish the impact the training is having locally. This interim report recommends that learning from the test and learn cohort is explored with the wider Fulfilling Lives Newcastle Gateshead team and recommends opportunities to improve the training in light of findings.
- Multiple and complex needs training – it is interesting that both for our staff team and the wider MCN workforce self-assessment skills around building motivation and collaboration were shown to be the areas most in need of development. We have taken this on board and now have a section focussing on collaboration skills in the MCN training day. Other ways to build capacity, for example developing modular bite sized training for teams will be explored.
- Peer research – the peer research network is a supportive environment for peer support, learning and reflection, we will evaluate the efficacy of the peer research network in supporting and retaining peer researchers. We will explore following up with peer researchers who move on into employment to explore opportunities to build on their peer research skills in embedding peer research in these agencies.

In the pipeline we have a train the trainer programme for peer research as we have found frontline staff have been enthused by their training and can support our capacity to deliver more research projects.

Early feedback from the peer research network has indicated that there would be appetite to explore other models of reporting peer research findings including film and presentations. This will be explored over the coming 12 months.

- PIE – as we gather more data for each of the cohorts we will be in a position to give a thematic overview by each type of service, for example for accommodation projects, for drug and alcohol services etc.

We are piloting a peer review for PIE, buddying up services to support each other to offer peer review and peer support on their reading of their PIE scores and reflecting on what helps and hinders in relation to each of the six PIE areas.

For PIE and MCN training we have heard from cohort one that asking them to send us a second reading on their progress after six months feels too soon, we will review with services after 12 months instead.

- Systems thinking – This training is in development, it will be piloted in May 2019 in a similar test and learn model to the co-production training.

Appendices

Appendix 1: Complex Needs Staff Skills Self-Assessment

Please be as honest as you can answering these questions self-assessing your own skills on a scale of 0 to 10. This will help to see any progress in skills development answering these questions at a later time. Be assured **your answers will be anonymised** in any assessment that helps services reflect on where to prioritise future training - your name is only taken in order to link it to your future responses.

Person answering these questions:

Date:

- There are 25 short questions covering five areas.

Please rate yourself on a scale of 0 to 10 in response to each question (remembering your answers will be anonymised).

A – Accept & Engage people as they are (e.g. **be Validating**, *active listening*)

1. How well do I **actively listen** to clients, (e.g. *summarising* and feeding back what I have heard, and *checking out* if I have understood correctly) ?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

2. How well do I consistently communicate a **warm, friendly, welcoming and interested attitude** - even when I find someone difficult to engage?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

3. To what extent do I **creatively try different ways** to engage clients who do not want to engage with me - including talking about things **they are interested** in and 'problem free' talk (e.g. hobbies or past achievements)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

4. How skilful do I feel I am at **Validating and acknowledging** the point of view and emotions of clients (e.g. explaining emotions like anxiety are 'normal' and communicating their point of view and feelings **understandable**) ?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

5. To what extent do I know about **the impact past trauma has** on people's willingness to **engage with help** - and do I apply this knowledge to **the way I engage** with clients?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

2. **B - Believe people can Get Better** (e.g. *Build Motivation, build Hope*)

6. How well am I able to communicate a **Realistic Hope** for a better future with people who are lacking hope (without overpromising or being overly pessimistic)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

7. To what extent am I able to *help clients* **break their goals/plans into smaller realistic steps and stages?**

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

8. To what extent am I able to have positive conversations with clients to help them 'reframe' problems they present within the context of the better future they wish for (e.g. an example of this would be saying "so how does your drinking interfere with your desire to have a voluntary job?")?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

9. To what extent am I able to help clients discuss how they would like their life to be better in their future (e.g. what is valuable to them, or explore what motivates them) to build up a positive picture of what they would like to work towards on their life-journey?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

10. How would I rate my knowledge of **the impact past trauma** on people's **level of motivation**, and do I **apply this knowledge** to **the way I build motivation** with clients?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

3. C - Collaborate (Co-produce: plan solutions to solve problems **together**, then reflect together on the outcomes...to **build problem-solving skills**)

11. To what extent do I work with clients to solve problems collaboratively in ways that draw on their strengths and skills in order to build up their confidence in their problem-solving skills and? (e.g. solving problems **with** client rather than **for** clients which can deskill them)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

12. To what extent can I help clients describe a problem from their point of view and reflect with them on different ways to see it (e.g. how big or small they see the problem?, its priority for them?, etc.) ?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

13. To what extent do I help clients develop their own plan for solving a problem collaboratively, in ways that draw on their strengths and skills?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

14. To what extent do I help clients **reflect** on how well their efforts to put a plan into action have gone? (e.g. Helping them think about **what has worked well** and what could have **been better**?)

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

15. How would I rate my knowledge of **the impact past trauma** on people's **problem solving skills** and their ability to work **collaboratively**, do I hold this in mind in the way I work collaboratively (i.e. doing things **with** clients rather than **for** them)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

4. **D - Develop Trust in Relationships** (e.g. *be Reliable, Consistent, repair breaks in the relationship*)

16. How **reliable** am I with doing what I said I would do, and not overpromising what I can do?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

17. How would I rate my practice in **repairing breaks in the relationship** with clients who I find challenging (e.g. such as admitting if I have made a mistake, or reflecting with them on an incident that has led to them **losing trust** in a service)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

18. To what extent do I **communicate that I Trust my clients** around appropriate topics and tasks?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

19. To what extent am I **consistent** in my approach with a client to avoid giving "mixed messages" and maintaining a **consistent approach** with other staff?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []

Basic	Evolving	Advanced	Exemplary
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20. How would I rate my knowledge of **the impact past trauma** on people's ability to **Trust others**, and to what extent do I apply this knowledge to how I **build Trust** with clients?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
 Basic Evolving Advanced Exemplary

5. **E - Establish** & Maintain our **Role & Boundaries** (e.g. *build realistic expectations about what you can (and cannot) do within your role*)

21. To what extent do I always **explain my role** and the **realistic limits** of what I can do to others (e.g. clients, family members, colleagues and staff in other services)?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
 Basic Evolving Advanced Exemplary

22. To what extent am I **able to say "no"** to requests for help from others that are outside my usual role, and explain the reasons why?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
 Basic Evolving Advanced Exemplary

23. To what extent do I consistently check out with colleagues when something I am doing is in a "grey area" around **boundaries** if feel unsure if it is appropriate?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
 Basic Evolving Advanced Exemplary

24. To what extent am I able to be appropriately **flexible around boundaries** – (for example, negotiating with clients and colleagues an

agreement for exceptional circumstances to do something not usually within my role, but for a good reason (e.g. location/time of meeting a client) ?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

25. How would I rate my knowledge of **the impact past trauma** on people's ability to **maintain healthy interpersonal boundaries**, and do I apply knowledge in how I **establish** and **maintain good boundaries** with clients?

0 [] 1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 []
Basic Evolving Advanced Exemplary

Appendix 2: PIE Self assessment

PIE Self-Assessment: Distance Travelled

Categories copied from PIE v.2 with permission from Robin Johnson from pielink.net

Service being reflected upon:

Person answering the questions on this form:

Your role:

Date:

Please **involve as many people as possible** in a reflective discussion about the answers to these questions including all staff and volunteers to **co-produce** your answers:

Training and Support for Staff:

How would you rate the service on a scale of 0 to 10 in terms of:

1. Training and Support for Staff over the last 6 months (e.g. relevant training such as trauma informed, motivation, etc., supervision (1-2-1 and/or group supervision)

01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10
Poor Basic Progressing Advanced

A) What **evidence** do you have to support the score you gave this service? i.e. what have you done in this area **that worked well**, in the last 6 month?

B) What is **Helping** you? And, What is **Hinders** you? ...to develop in this area?

Helping:

Hindering:

C) What plans have you got to develop the service **in this area?** (Please give a **timescale**, e.g. 'over the next 3, 6 or 12 months')

Psychological Awareness

Please **involve as many people as possible** in a reflective discussion about the answers to these questions to **co-produce** your answers:

How would you rate the service on a scale of 0 to 10 in terms of:

<p>2. Having some kind of <i>Psychological Understanding</i> about the people you are working with and <i>the effect the work can have on staff's mental and emotional well-being?</i> (e.g. a 'trauma informed' understanding, and/or a psychological framework of some kind, etc.)</p> <p>01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10 Poor Basic Progressing Advanced</p>
<p>A) What evidence do you have to support the score you gave this service? i.e. what have you done on this topic that worked well, in the last 6 month?</p>
<p>B) What is Helping you? And, What is Hinders you? ...to develop in this area?</p> <p><u>Helping:</u></p> <p><u>Hindering:</u></p>
<p>C) What plans have you got to develop the service in this area? (Please give a timescale, e.g. 'over the next 3, 6 or 12 months')</p>

Reflective Practice

Please **involve as many people as possible** in a reflective discussion about the answers to these questions to *co-produce* your answers:

<p>How would you rate the service on a scale of 0 to 10 in terms of:</p> <p>3. Having Reflective Practice sessions within the service, where people reflect on their practice and skills development, the emotional impact of the work, consider the wider context, and the thoughts and feelings that may underlie client's behaviours (e.g. in 1-2-1 & group sessions, formal and informal reflection)?:</p> <p>01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10 Poor Basic Progressing Advanced</p>

A) What **evidence** do you have to support the score you gave this service?
i.e. what have you done on this topic **that worked well**, in the last 6 month?

B) What is **Helping** you? And, What is **Hinders** you? ...to develop in this area?

Helping:

Hindering:

C) What plans have you got to develop the service **in this area?**
(Please give a **timescale**, e.g. 'over the next 3, 6 or 12 months')

The Spaces of Opportunity for our clients

Please **involve as many people as possible** in a reflective discussion about the answers to these questions to *co-produce* your answers:

How would you rate the service on a scale of 0 to 10 in terms of:

4. **Good Spaces for Interaction** - Such as a safe, welcoming social and physical space where your service is delivered (for both staff and clients)? and creating good relationships with the wider social spaces outside of your service where clients go - such as good access to other services or community groups?

01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10

Poor

Basic

Progressing

Advanced

A) What **evidence** do you have to support the score you gave this service?
i.e. what have you done on this topic **that worked well**, in the last 6 month?

B) What is Helping you? And, What is Hinders you? ...to develop in this area?
<p><u>Helping:</u></p> <p><u>Hindering:</u></p>
C) What plans have you got to develop the service in this area? (Please give a timescale , e.g. 'over the next 3, 6 or 12 months')

The 3 R's - Rules, Roles and Responsiveness

Please **involve as many people as possible** in a reflective discussion about the answers to these questions to *co-produce* your answers:

<p>How would you rate the service on a scale of 0 to 10 in terms of:</p> <p>5. Think about <i>developing relationships</i> in the service terms of "the 3 R's" - the clarity and implementation of Rules around how the service is delivered, the clarity of Roles people have, and the Responsiveness of the service (e.g. to what extent are there good reflective reactions to issues or does there tend to be impulsive reactions to issues that crop up?)</p> <p>01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10 Poor Basic Progressing Advanced</p>
A) What evidence do you have to support the score you gave this service? i.e. what have you done on this topic that worked well , in the last 6 month?
B) What is Helping you? And, What is Hinders you? ...to develop in this area?
<u>Helping:</u>

Hindering:

C) What plans have you got to develop the service **in this area?**
(Please give a **timescale**, e.g. 'over the next 3, 6 or 12 months')

Learning and Enquiry

Please **involve as many people as possible** in a reflective discussion about the answers to these questions to *co-produce* your answers:

How would you rate the service on a scale of 0 to 10 in terms of:

6. **Generating Evidence** for evaluating any difference you make by delivering your service (and sharing that with staff, service users and commissioners) and to what extent do we create a **Culture of Learning** within the service, such as sharing new learning or regularly reflecting on what can be learnt from an incident or issue that has cropped up?

01..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10
Poor Basic Progressing Advanced

A) What **evidence** do you have to support the score you gave this service?
i.e. what have you done on this topic **that worked well**, in the last 6 month?

B) What is **Helping** you? And, What is **Hinders** you? ...to develop in this area?

Helping:

Hindering:

C) What plans have you got to develop the service ***in this area?***
(Please give a ***timescale***, e.g. 'over the next 3, 6 or 12 months')

