



CabinetOffice

Office for Civil Society

**Resolving Multiple Disadvantage:
leading local responses to local needs**

**Local Inclusion Labs:
developing new approaches and current
responses to multiple disadvantage
in the context of Big Society
and Efficiency and Reform**

**Information for local partners on becoming
a Local Inclusion Lab area**

February 2011

**The Resolving Multiple Disadvantage project
is led by a cross-sector group of experts
and is championed by the Cabinet Office**

Contents

1. Introduction p.3

2. Resolving Multiple Disadvantage project p.5

3. Local Inclusion Lab areas p.6

Annex A:
Opportunities and support for Local Inclusion Lab areas p.9

Annex B:
Members of Resolving Multiple Disadvantage project group p.11

Annex C:
Client Group Definition p.13

NB. Please read this document in conjunction with:

- Template to be completed by areas wishing to submit an Expression of Interest to become a Local Inclusion Lab area.

1. Introduction

We are looking for local partners to work with us on a cross-sector project addressing multiple disadvantage faced by adults. This is an opportunity to get support for improving the outcomes of some of the most disadvantaged people in your area, influence central Government and be at the forefront of current thinking and learning on multiple disadvantage.

As part of a national cross-sector Resolving Multiple Disadvantage (RMD) project being championed by the Cabinet Office, a range of Big Society partners (see Project Group below) wish to work with a small number of localities from April to September 2011 to find ways to improve outcomes for multiply disadvantaged adults. Localities will be supported over six months to develop and begin to implement plans that strengthen progress on meeting the needs of these adults in their area, and / or to try new approaches in this time of change, challenge and opportunity. These localities will be known as 'Local Inclusion Labs'.

Local Inclusion Labs

Any local partner (e.g. business; community group; local authority) can take the lead in expressing an interest to work on this project on behalf of (and with the approval of) a local partnership.

Lab areas will decide which adults they focus on within the project parameters (see section 2 below). They will also determine the geographical area for this work depending on their priorities and what they will find most useful. Lab areas are not expected to be current beacons of best practice (although they could be). They do need to have identified senior leadership and a local partnership to enable participation and progress from April to September 2011.

Project Group

There are several Big Society partners who make up the Resolving Multiple Disadvantage project group including the Community Development Foundation, National Council of Voluntary Organisations (NCVO), Confederation of British Industry (CBI), Local Government Improvement and Development (LGID), and the Cabinet Office. A full list of partners is at Annex B.

Lab ask and offer (see section 3 below for full detail)

Local Lab areas will be asked to develop and begin to implement plans for successful practice from April to September 2011, share their learning process, and catalyse action and innovation in other localities. Joint working up until September 2011 will enable areas to continue to progress after this time.

In return areas will be offered a Champion to link with the project, and members of the project group will offer their own and their networks' knowledge and expertise to support Lab areas to effectively address multiple disadvantage.

The work and learning of Lab areas will feed directly into Cabinet Office officials and Ministers to inform national policy developments.

Desired outcomes from Lab area work post September 2011:

- Improved outcomes for multiply disadvantaged adults;
- Plans to maintain and/or develop successful practice implemented and evaluated;
- Resource savings generated;
- Learning and progress continues to be shared via online resource.

Expressions of Interest

Expressions of Interest (EOIs) must be submitted using the template accompanying this document. Please send this to hannah.rutter@cabinet-office.x.gsi.gov.uk by 5pm on Monday 28 February.

EOIs will be assessed and local areas selected by mid March. Successful areas will need to attend an initial workshop with project partners in week commencing 21 or 28 March – date to be confirmed.

Further information is provided below. If you wish to speak to someone about this opportunity ahead of the EOI deadline please contact hannah.rutter@cabinet-office.x.gsi.gov.uk or call 020 7276 6016.

2. Resolving Multiple Disadvantage project - background

Overview

The recruitment of Local Inclusion Labs is one part of the work being taken forward by the national Resolving Multiple Disadvantage project. This project aims to improve opportunities and outcomes for adults facing multiple disadvantage: building on existing practice and taking forward new approaches, reflecting the drive towards Localism and Big Society.

Multiply disadvantaged adults

This project focuses on adults with three or more needs, some or all of which are not being met (e.g. homelessness, unemployment, poor physical or mental health, no or limited social network). These adults may not be accessing services, other than at the point of crisis (e.g. A&E) or they may be receiving treatment for one need (e.g. mental health) but not having their other needs addressed. Please see Annex C for further information.

We will encourage localities to focus on the most disadvantaged adults in their areas based on their local knowledge, priorities and needs.

Activity

The national RMD project has a number of strands, one of which is work with the Local Inclusion Labs outlined in this paper. In addition the project will set up an online community to share learning and resources and develop new materials to support implementation of what works.

Leadership

The RMD project is being led by a cross-sector Group of experts from the voluntary and community sector, private sector, and local and central government (a full list of Group members is at Annex B). The project is being championed by the Cabinet Office where it is seen as making an important contribution to the Government's Big Society and Efficiency and Reform agenda.

3. Local Inclusion Lab areas

Areas chosen as Local Inclusion Labs will be able to access support and expertise to improve outcomes for multiply disadvantaged adults in their area. Their learning will be shared to support further work in other parts of the country and influence central government policy

Between four and nine areas will be selected to be Labs. Between April and September 2011 they will develop and begin to implement plans to maintain and strengthen existing effective and efficient practice and/or develop new practice to improve the outcomes of multiply disadvantaged adults. The work is expected to continue post September 2011.

i. Requirements of Local Inclusion Lab areas

- Have a clear vision for how involvement in the RMD project will assist their specified area to improve outcomes for adults facing multiple disadvantage.
- Have identified local partners and senior leadership (e.g. local authority leader; community leader) that will drive progress from April to September 2011 and beyond.
- Put in place between April and September plans to maintain and strengthen existing effective and efficient practice and/or develop new practice to improve the outcomes of multiply disadvantaged adults.
- Implement initial actions from these plans by September.
- Be committed to measuring the success of the services the area intends to put in place and to develop plans for this.
- Be willing to share ongoing learning of what works and what doesn't in service development for other areas and partners to learn from; including contributing to the on-line Community of Practice and attending events.
- Catalyse innovation on addressing multiple disadvantage in other areas.
- Meet project timings:

Timing	Action
28 February 2011	Deadline for submitting EOI.
W/c 21 or 28 March – date tbc	Attend initial workshop for Lab areas and champions in London.
April to September 2011	Work with champions and partners to plan improved outcomes for multiply disadvantaged adults and begin implementation Share process and learning.
October 2011 onwards	Continue to implement provision for multiply disadvantaged adults. Share learning of what works.

ii) Support offered to Local Inclusion Lab areas

Support to Lab areas will be tailored to their needs and facilitated by a Champion - someone from the organisations and networks of those on the group leading the RMD project. More detail on the opportunities and expertise available to Lab areas is at Annex A, but it will include:

- Access the networks and expertise of the group leading the RMD project on a range of subjects e.g.:
 - Central government policy, programmes, plans and funding
 - Business planning and programme evaluation
 - Partnership working.
- Meet with and learn from other local areas on successful and new practice e.g.:
 - Other Local Inclusion Lab areas
 - Areas developing Local Integrated Services and Community Budgets
 - Adults Facing Chronic Exclusion pilots areas
- Utilise Office for Civil Society partnership and support programmes e.g.:
 - Community First grant
 - Community organisers
 - the next phase of the Partnership Improvement Programme.

iii) Eligibility criteria

- Any local area in England that can meet the requirements of Lab areas including project timings (see above) is eligible to apply. No geographical definition or restriction of 'local area' will be applied. For example, the focus of a Lab area could be a super output area, ward, neighbourhood or local authority area – whatever makes sense and is of use to the area applying.
- Any local partner (e.g. business; community group; local authority) can submit an agreed EOI on behalf of a local partnership

iv) Selection criteria

- EOIs will be assessed on the extent to which they meet the requirements of Lab areas set out in the 'requirements' section above.
- To maximise learning, we want to ensure a mix of localities in terms of:
 - geography
 - make up of local partnership
 - level of deprivation
 - current work on disadvantage.

Therefore these factors will also be taken into consideration in the selection process.

v) Application process

- Local areas submit EOI by 5pm on Monday 28 February
- Panel short-listing based on completed template and eligibility and selection criteria.
- Panel decision in mid March – the panel will be approximately five members of the RMD project group (see Annex B for list of group members).

NB. There will be no interview element to this process but members of the panel may contact applicants to seek further information or clarity on points raised in their Expression of Interest.

Annex A. Opportunities and support available to Local Inclusion Lab areas

What’s in it for local areas?

This project is seeking to offer you a comprehensive menu of support to enable you to explore new approaches or develop current work.

Your champion will plug you into the expertise available across the project’s Lead and Action Group and its broad networks. Responding to your requests, needs and interests, they will go to the relevant experts, whether in civil society organisations, business, local or central government, and arrange for support to be given in the way that works best for you.

For example, support could be given to you via:

- Workshops with other Lab areas to share learning and get more information about issues of common interest;
- Meetings with or visits to areas engaged in successful or innovative practice;
- Bespoke events or meetings for your area with experts.

Your champion will also feed the learning, best practice and innovation from your area back to central government, ensuring that your work influences policy development and can be highlighted nationally.

This table gives you some examples of the type of information, support and expertise which will be available to you:

<p>1. Access to expertise on Government priorities, programmes, plans and funding</p>	<p>There is input across Whitehall in the RMD project through which you could access the latest thinking on Government priorities, enabling you to be in the best position possible to benefit and influence e.g.</p> <ul style="list-style-type: none"> • Public service reform • Social justice • Regeneration
<p>2. Sharing knowledge and expertise on successful and new approaches relevant to improving outcomes of multiply disadvantaged adults</p>	<p>You could access the learning and have detailed advice regarding how successful and new approaches could work in your area, e.g. from areas and partners involved in:</p> <ul style="list-style-type: none"> • Local Integrated Services and Community Budgets • Making Every Adult Matter pilot approaches • Adults facing Chronic Exclusion pilot approaches • Social Impact Bonds • Mutuals.

3. Expertise in involving the community and individuals in service development, design and delivery	With expertise from Turning Point, a leading User Led Organisation (ecd) and the Community Development Foundation, you will be able to find out about a variety of effective community engagement approaches and access support in implementing those that best suit your needs.
4. Utilise Office for Civil Society partnership and support programmes	A number of OCS partnership and support programmes will be available from April 2011. Advice and support can be given on how to access these e.g.: <ul style="list-style-type: none"> • The Partnership Improvement Programme • National Commissioner Training Programme • Community First Grants • Community Organisers.
5. Expertise in engaging business	With input from Business in the Community and the CBI, you can access expertise in bringing the private sector into your plans.
6. Expertise in business planning	A number of partners including CBI and National Council for Voluntary Organisations will be able to provide advice on sustainable funding, business planning, Compact agreements and marketing.
7. Expertise on cost benefit analysis/ evaluation	Analysis support can be made available to you to develop evaluation tools that effectively measure and demonstrate the value of your work.
8. Increase Profile	There will be many opportunities to use your involvement to increase your profile and networks, e.g. <ul style="list-style-type: none"> • Meeting with the Minister for Civil Society • Access to useful conferences, round tables and other events • Profiled on websites linked to the project.

Annex B. Member organisations of Resolving Multiple Disadvantage Project Group

<p>Business in the Community Business in the Community mobilises business for good. They work with business to build a sustainable future for people and planet.</p> <p>Their approach to responsible business provides a framework to support and challenge business to improve its performance and benefit society through our four areas of expertise – community, environment, workplace and marketplace.</p>
<p>Catch-22 Catch22 is a local charity with a national reach that works with young people who find themselves in difficult situations. It supports disadvantaged young people age 18-25.</p> <p>Catch22 believes every young person deserves the chance to get on in life – no matter what. Whatever the reason for their situation, Catch 22 help them out, working with their families and their communities wherever and whenever young people need us most. As young people become more positive, productive and independent, the whole community benefits.</p>
<p>Confederation of British Industry (CBI) The mission of the CBI is to help create and sustain the conditions in which businesses in the UK can compete and prosper for the benefit of all. The CBI’s Public Services Strategy Board and welfare to work programme aim to promote the benefits to business, taxpayers, individuals and communities, of moving more people back into the workplace and increasing rates of economic activity.</p>
<p>Community Development Foundation (CDF) CDF is the leading source of community development expertise and delivery. As a public body and a charity they bridge government, communities and the voluntary sector. We help local people lead.</p>
<p>Department for Communities and Local Government (DCLG) DCLG sets policy on supporting local government, communities and neighbourhoods, regeneration, housing, planning, building and the environment, and fire. The Department is ending the era of top-down government by giving new powers to councils, communities, neighbours and individuals.</p>
<p>Department for Work and Pensions Employment Group Partnership Division developing localism policy as it applies to addressing worklessness and associated social exclusion. Supporting local partnership working through the development of increasing flexibility for Jobcentre Plus to meet local need, learning from previous partnership working including the City Strategy.</p>
<p>ecdpc - Essex Coalition of Disabled People A User led organisation of Disabled People. Provide support, information, advice and guidance services. Work in partnership with public, private and voluntary sectors. Influencing policy at local and national level.</p>

<p>Local Government Improvement and Development (LGID) LGID (formerly the IDeA) supports improvement and innovation in local government, focusing on the issues that are important to councils and using tried and tested ways of working. They work with Council in developing good practice, supporting them in their partnerships. They do this through networks, online communities of practices and web resources, and through the support challenge provided by Councillor and office peers.</p>
<p>London Borough of Ealing</p>
<p>London Disadvantage Partnership The London Disadvantage Partnership creating a 'Reducing Multiple Disadvantage' Community Interest Company from a group of Department for Health, Local Authority, Primary Care Trust and NHS staff. A local multi-agency independent organisation brings together local frontline staff providing health, housing and employment services. These staff would take a more effective pan-London approach to multiple needs across a range of outcomes.</p>
<p>Making Every Adult Matter (MEAM) MEAM is a coalition of four national charities – Clinks, DrugScope, Homeless Link and Mind – formed to influence policy and services for adults with multiple needs and exclusions.</p>
<p>National Mental Health Development Unit (NMHDU) NMHDU, launched in April 2009, consists of a small central team and range of programmes funded by both the Department of Health and the NHS. It provided national support for implementing mental health policy by advising on national and international best practice to improve mental health and mental health services.</p>
<p>National Council for Voluntary Organisation (NCVO) NCVO aims to give a shared voice to voluntary organisations and to help them achieve the highest standards of practice and effectiveness in all areas of their work. NCVO believes passionately in the voluntary and community sector.</p>
<p>Office for Civil Society, Cabinet Office Office for Civil society, to help civil society and government develop the social capital and action needed to build the Big Society. OCS resource for the Resolving Multiple Disadvantage project includes Big Society Outreach partners who will be working with localities and Government to develop Big Society policy and approaches from April 2011.</p>
<p>South West London and St George's Mental Health NHS Trust South West London and St George's Mental Health NHS Trust work in partnership with primary care, social care and voluntary organisations to provide high quality mental health services in south west London and nationally.</p>
<p>Turning Point Turning Point is the UK's leading social care organisation. It provides services for people with complex needs, including those affected by drug and alcohol misuse, mental health problems, and those with a disability.</p>

Annex C. Client Group Definition

Multiple disadvantage occurs when people have a combination of three or more problems, such as unemployment, poor skills, low incomes, poor health, poor housing, family breakdown and high crime. In the UK, multiple disadvantage remains a significant problem – around 11% of the population (five million people) experience three or more problems and two per cent (800,000) do so persistently (i.e. five or more years¹). This can lead to a lifetime of dependency and wasted potential, as well as being costly to the state. For example, an offender with alcohol and drug use can cost public services over £51,000 each year over a 20 year period.²

The Resolving Multiple Disadvantage project focuses on the following adults who experience multiple disadvantage.

1. People with multiple disadvantages who are receiving support for one or more of their needs but are not having all of their needs met.

These adults have at least one need that is of a degree that meets a public service threshold and is being addressed e.g. someone who is accessing secondary mental health services. However, these individuals have other needs that are not being met e.g. housing, employment and skills support. This may be because the service they are accessing does not take a holistic approach or is insufficiently integrated with other services.

Further examples of adults that face this situation can include some individuals from these groups:

- a. People defined as statutorily homeless (estimated 60,000 people)³
- b. People with statutorily recognised disabilities (estimated 10 million+ people, of which 6.9 million are of working age)⁴
- c. Those with serious and enduring mental health problems (estimated 280,000 people)⁵
- d. Those with moderate to severe learning disabilities (estimated 123,000 people)³
- e. Care leavers (estimated 6,000 people)³
- f. Ex-offenders (estimated 55,400 people)³

¹ Cabinet Office (2009) Left Behind? Disadvantages in Britain: the evidence base (interim report by the Strategy Unit and the Social Exclusion Task Force)

² Recycling Lives case study

³ <http://www.poverty.org.uk>

⁴ ODI - <http://www.odi.gov.uk/disability-statistics-and-research/disability-facts-and-figures.php#gd>

⁵ Social Exclusion Task Force – Guidance note on using socially excluded adults PSA 16 data

Case study

Chloe is 19, she has a moderate learning disability and suffers from depression. She was living with her Mum, but the relationship broke down and she is now living alone in a small flat on a council estate. Chloe is unemployed, she doesn't know the area, has no family near by and has lost contact with the friends she made at school.

Local Authority Adult Social Care provision entitles Chloe to two hours of support a week to help her manage her finances, but Chloe called her support worker last month saying she didn't need her to come over any more because some friends were going to help her.

Chloe's new 'friends' have moved into her flat and are using it to sell drugs from. The police have been called and complaints have been made by local residents to the housing officer.

Chloe missed her last appointment with her GP for a medication review. The surgery have sent Chloe a letter to reschedule, but her learning disability means she doesn't understand it – she thinks she's in trouble for missing the appointment so won't go back to the GP.

Chloe's support worker is calling her every week, but Chloe's 'friends' have stopped her answering the phone. The police and housing officer don't know about Chloe's potential vulnerability. Her mental health is deteriorating, she is at risk of losing her home and facing criminal charges.

2. People with multiple disadvantages who either have difficulty accessing services or who are not using services effectively.

These adults experience a combination of issues that impact adversely on their, and often other people's lives e.g. homelessness, substance misuse, mental ill-health and offending. They tend to lead chaotic lives that are costly to the state. This group has been roughly estimated at about 60,000 people⁶ at any one time.

Each of their individual needs is often low-level resulting in them not qualifying for public services that could treat their needs. However, these adults are usually well known to local services that are accessed at points of crisis and difficulty e.g. A&E, the police. Due to a lack of co-ordination and differing priorities and pressures within local services, the totality and cumulative impact of these people's need are not acknowledged so they do not receive the help they need.

Case study

George⁷ is 35 and just been released from HMP Brixton having served his eleventh short sentence. He has no probation officer but has an appointment with job centre plus, the housing office and a GP booked in for tomorrow.

He has £45 cash, which he has just spent on drugs. These stop him hearing voices in his head that tell him to hurt himself. He has no food, address or job.

The next day, George misses all of his appointments, apart from the GP. Still high, he turns up 2 hours late, swears at the receptionist and is escorted out of the building. He goes to A+E where similar behaviour leads to a similar eviction.

George is considered too chaotic and difficult to help by housing, primary care and job centre plus (from which he is barred). Without support, he is incapable of turning up on time and does not keep his behaviour in check. However, he is not ill enough to access specialist mental health and drugs support. He was assessed as needing mental health care in prison, but the assessment has not been sent to the CMHT. As George has no address, there is also no way for the Team to contact him.

At this point, Georges' options are limited. Begging, stealing and further offending would get him food and drugs, but he risks further imprisonment. However, George does not have a great deal to lose and a quick fix is appealing.

George walks to the local supermarket and walks out with bacon and a bottle of cider. The police are called and sentence number 12 is looming.

⁶ Social Exclusion Task Force – Guidance note on using socially excluded adults PSA 16 data

⁷ George and Chloe are not real, but the situations described are based on a variety of real experiences.