



The Life Programme

A report on our work

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Participle would like to thank all our partners in the Local Authorities for allowing us to share their stories, and to all the Life Teams and Families for their on-going support and commitment to the programme. We would also like to acknowledge Annie Dare for her help in preparing this report. This report was first published in June 2013 and has been updated and enhanced in June 2014.

Executive Summary

The Life Programme works with families in entrenched social, economic and emotional crisis. Designed in partnership with Swindon, Life has continued to evolve through practice and partnership with Wigan, Lewisham and Colchester.

Life is focused on supporting families to independence (as opposed to managing immediate crises). The programme's approach is developmental: sustained, high trust relationships with the Life Team support the development of new capabilities within each family to lead the independent lives they truly want.

All practitioners in this area know that there are no easy solutions. The work for the Life Teams – recruited from talented individuals at the front line in a wide range of services – is complex and often fraught. We are proud therefore of the families that have successfully exited our programme and of our ability to open families to change. In our experience this process can often mean that families can seem to become 'more troubled' as they open up to Life Teams about a wide range of issues, some that may not have been previously known by other services. This has often been a critical step on the road to helping people understand and address the root causes of difficulties and work towards real and sustainable change. Some families found it harder to sustain change – these challenges when seen close up offer interesting learning.

This report therefore offers up Participle's reflections on our work to date. We want to share the lessons we have learnt with others in the sector. The first part of the report describes the iterative way that Life was developed in partnership with families and agencies across Swindon and discusses in detail the core tenets of our approach to change and the lessons we have learnt through implementation. The second part of the report contains case studies of each Life programme, presents the data and metrics, which underpin the Life approach and includes an update (in Annex F) of our most recent work.

We hope that this Report sparks discussion and interest and we welcome feedback from families, workers and Local Authority leaders. Please take a look at the Life Programme website (www.alifewewant.com) and share your comments and thoughts on the Relational Welfare blog (www.relationalwelfare.com).

1.0 Introduction

Participle was formed to design working exemplars of a future welfare state. Our mission statement, Beveridge 4.0, sets out the ways in which we believe the current welfare state is out of step with society – unable to address the challenges of today such as ageing and chronic disease, or to tackle the entrenched deprivation and inequality of our post-industrial society.

We believe a future welfare state must foster a set of core capabilities that will allow everyone in our country to lead flourishing lives, fully able to contribute and participate in society. Working with communities across Britain we have designed and developed a series of new services based on our capabilities approach. Each of these services is designed for national scale and offers a working exemplar of relational welfare.

Life is our programme for families living in a situation of entrenched social, emotional and financial crisis. Life offers a developmental approach: families are offered support to foster a core set of capabilities that will support them on the road to the lives they want to lead. The programme is based around four broad stages: Invitation – opening families to change; Aspirations – building a plan of what a better life might look like; Activities – developing and practising core capabilities around relationships, working and learning, health and living in community; Opportunities – sustaining independence and exiting the programme.

The families we work with are characterised by complex inter-generational issues of neglect and deprivation. Many of those who are now parents grew up in crisis themselves and have no role models of their own to follow. The current services on offer, however they are re-organised against new targets, are unlikely to deliver the radically different approach we believe is needed. A family that has never lived in any other way cannot change on command. What is needed is a developmental approach based on sustained, trusted relationships.

We have found that, even in the most difficult of circumstances, we can create an openness to change within family members and many front-line workers alike. Offered the chance to make real changes, the trusting relationships to support this change and develop their capabilities, many are brave enough to try.

Our work is making a difference. In the second part of this report we present case studies and early evidence from our work in four locations in Britain: Swindon, Wigan, Lewisham and Colchester. We are working with small numbers and only one of our programmes has reached the two year mark. However, the Life programme can be seen to have made measurable progress and to have offered our partners potential cost savings.

At the same time, we have found the work to be extremely challenging. Changes are hard to sustain in families where a different way of living has never been known and in communities that have been left behind by the development of modern Britain, even where they live cheek-by-jowl with those whose horizons have broadened.

Changes in the system similarly mean the space for our work is not easy to sustain. Our Local Authority partners have been courageous in working with us and in the care they have taken to set up the work at the local level. At the same time, the constant changes in leadership and cycles of re-organisation that local government is subject to means that we have found ourselves constantly having to re-make the case for our work at a local level.

Since we started our work the landscape has changed – families in crisis have become the focus of forensic political analysis and the Prime Minister has publicly committed to resolve their problems by the end of this parliament (2015). In 2011 the Troubled Families Unit was formed, headed up by Louise Casey, with a fund of £448 million to reward Local Authorities who hit targets, under a payment by results mechanism.

In this context the Life programme is in a paradoxical position. The acceptance that there are a small but significant number of families in Britain not served by the current systems and services on offer is a position we welcome. At the same time, with a focus on contracts and payments for short term outcomes, the space and support for the long term, deep work that many believe is needed, has become contested.

Within this shifting context this report sets out the history of our work, highlights the elements that we believe to be distinctive and key, and shares what we have learnt to date. It is our experience that much of the best practice in Britain is operating at small scale and isolated in the teeth of a wider system, which works in ways that are often detrimental to developmental change.

We hope that by sharing our experience, we can inspire others and contribute to the wider learning and movement that might genuinely give every family in Britain the support it needs to play a full part in our community and society.

1.1 The Challenge: troubled families, troubled systems

The current troubled families agenda started under the previous Labour government. In 2008 Gordon Brown, following a visit to the Dundee Project (one of the first interventions in the UK to focus on parenting skills with what were then termed 'chaotic' families), declared that: "most mums and dads do a great job – but there are those who let their kids run riot and I'm not prepared to accept it as simply part of life". Brown was echoing a widely held belief that family breakdown lies behind a wider sense of social breakdown and that something needed to be done.

The Labour government declared there to be in excess of 100,000 families in need of intervention and estimated that each family cost the tax payer £250k a year. Since this time the precise costs, numbers and definitions of what are now called troubled families have been a source of debate. At times, the definition of a troubled family has elided dangerously with definitions of poverty, as if to be poor or out of work automatically suggests that your family is in some way a problem. At the same time, at a local level, authorities are reported to be unable to find the numbers of families that the Troubled Families Unit has told them they have.¹

In 2012 the Troubled Families Unit (TFU) and the Department of Communities and Local Government defined a troubled family as having three of the following criteria:

- Involved in youth crime or anti-social behaviour
- Children who are regularly truanting or not in school
- An adult on out-of-work benefits
- Cause high costs to the taxpayer²

In our experience, this definition includes a large number of families whose problems are immediate and short term, as opposed to structural. We have sought to work with families whose problems are considered to be the most entrenched and severe. Life families for example often have children at risk of going into care.

¹ www.guardian.co.uk/local-government-network/2013/mar/13/social-issues-digital-solutions.

² Information published by the Government shows that the following 7 criteria were used to initially identify the families defined as 'troubled': No parent in the family is in work; The family lives in poor quality or overcrowded housing; No parent has any qualifications; Mother has mental health problems; At least one parent has a longstanding limiting illness, disability or infirmity; The family has low income (below 60% of the median); The family cannot afford a number of food and clothing items. There is a potential mis-match here between these sets of criteria.

The Life Programme defines families in chronic crisis as having the following characteristics:

- Current and historical experience of multiple and entrenched risk factors such as domestic violence, substance misuse, housing issues, mental ill-health, child protection concerns, anti-social/offending behaviour and children with school attendance issues;
- Particularly costly to the public purse as a result of long-term engagement with services, especially social services and police; often recipients of intensive but ineffective single-focused interventions and considered 'stuck' in the system;
- Family members at risk of losing their home, children, or liberty.

These definitions, whilst helpful for identifying families, cannot capture the daily reality of Life families who live in a pattern of constant crisis: domestic abuse, debt, poor living conditions, feuds with neighbours, alcohol misuse, truancy, the threat of homelessness, criminal proceedings, exclusion. Crisis has become the norm, as families reel from one difficulty to another. Antisocial behaviour is common; but these families have often been victims themselves too. As TFU reports have also noted, families are isolated from support networks, live in fear, have numerous and serious mental, physical and emotional health issues and – most importantly – have never known a different life. The challenges are inter-generational: just as parents and grandparents before them, children and grandchildren grow into the same patterns.

The day-to-day challenges faced by these families seem daunting. At the same time however there has been an exponential growth in the services on offer and significant resources have been invested in trying to both contain and support families. So why, as successive governments have asked, is so little progress made? The truth is that the systems designed to support families are just as troubled as the families they set out to support.

As Louise Casey adroitly recognises, “We talk a lot about troubled families and dysfunctional families. I can assure you that from their perspective it is the system that looks pretty troubled and dysfunctional. From their perspective one of the best things that could happen to them is someone sorts out the system surrounding them, to enable them to sort out their problems. I don’t think we should be too judgmental about the troubled families because there’s a troubled system that runs in parallel.”

DCLG reports similarly point out, “[families] often have a whole host of agencies involved with them, often focusing on the individuals within that family. Families become confused by overlapping professionals, assessments and appointments...Currently systems and services around families are highly complex and fragmented. Often this results in an uncoordinated and inadequate response to chronic, multi-faceted needs, forcing frontline staff to ‘work round’ the system.”³

Families themselves are often vocal about this confusing system and its inability to support them:

³ DCLG Working with Troubled Families, Casey 2012

“I didn’t know whether I was coming or going, who I was talking to next, and if it would be the same person because they keep swapping people about. [My son] had three or four different workers. Then someone else would take over, it was like that all the time, it wasn’t good at all. I didn’t want them to think I wasn’t coping, because I didn’t know what the outcome would be if they thought I couldn’t cope. I can tell [Life Team member] if I’m not coping, I have a chat to her about it.” -- Life family member

“We’d have 17 people at these meetings. They’d start by saying I’m from such a place, I’m from here and by the time they got to the end I hadn’t got a clue who the second person was, and they wouldn’t be talking to me, they’d talk about me, or if someone dropped out, their fill in would have to read from a piece of paper what had happened at the last meeting. I’d just be sat there listening to it. It’s a lot better now at meetings: there is only me and the Life Team member and school.” -- Life family member

In our experience, frontline workers are all too aware of the problems and many feel demoralised and constrained by the services and systems they work within. They want to work in a different way with families and have skills and qualities to do so, but are trapped in dysfunctional systems and limited by silos, targets, bureaucracy and the institutional demands of constant assessment and gate keeping.

“In my current role I can signpost families to services but I can’t take the time to go along with them and make sure they can actually access the support.”

“We’re not really addressing root causes, we’re fire fighting (...) it does feel like us and them, so people don’t open up. They’re fearful of what action will be taken.” -- Prospective Life Team members

It frequently appears to us that it is not just that both families and the systems that surround them are troubled, but that they are a mirror image of each other. Both sides feel at once judged by, and judgemental of, the other, without trust, exhausted and in many cases hopeless, having lost sight that any change might be possible. We have visualised services as a costly gyroscope, spinning round the families, keeping them exactly where they are. It is no surprise, therefore, that many have come to realise the size of the challenge and that something has to change.

1.2 Developing the Life Programme

In 2008 Participle was approached by Swindon (the Borough Council, Strategic Health Authority and Partners – who we will call Swindon Partners). Convinced by our mission, Beveridge 4.0, they asked us if we would work with them to develop a new approach that might stop the cycle of crisis for a number of families they perceived to be falling through the gaps of their existing service provision. Whilst they believed the numbers of these families ‘in crisis’ were small – about 100 – they knew the cost implications to be large, and moreover, they believed they had a duty of care towards these families.

We accepted. Not only did we want the opportunity to see if our capabilities approach could support families and communities living in the most extreme circumstances, we also believed we could learn a lot about the future welfare state by looking at those most poorly served by current provision. As the sociologist Zygmunt Bauman has said, any society needs to judge itself according to the experience of its weakest members. Critically, it was clear that Swindon’s leaders would be good innovation partners, open to whatever might be needed to support a new approach.

In 2008 members of the Participle team went to Swindon to spend time getting to know and living alongside a group of families identified to be ‘in crisis’. We also spent time embedded with frontline workers in order to understand the issues from both perspectives.

Out of this experience, using Participle’s innovation process, we developed the Life programme with our partners in Swindon. Over the course of 18 months three broad phases of work took place: immersion in the lives of Swindon’s families and frontline workers; rapid prototyping of new ways of working developed with families; synthesis of the approach and the co-creation of the Life programme.

Immersion: living alongside families and front line workers

Members of the Participle team lived alongside a number of families that our Swindon Partners identified as most problematic, staying in empty council accommodation on some of the estates. Eight weeks were spent experiencing the lived reality of the families’ lives: doing the school run, shopping on the high street, spending social evenings in the local pub, searching for their children after dark and witnessing negotiations with loan sharks. We also gave families cameras to film ‘things we wouldn’t know about them’ and discovered family members who were keen horse riders, actors, maths whizzes, novel writers and artists. Finally, we sat on their sofas as a succession of policemen, social workers, learning support officers, housing officers and others made their calls.

Simultaneously we began to map the State's interventions in these families' lives. In Swindon we found that there were 73 services on offer for families in crisis, run from 24 departments. Unable to identify any family that had been successfully transitioned out of social services, we began making visual maps with front line workers of the families' history with these services. In one case 18 years of interventions with one family were mapped around the walls. The pattern in this family's case, as in others, was for repeated interventions driven by crisis – once an immediate crisis was managed, hard pressed front-line workers would divert their attention elsewhere, until a further crisis demanded their attention. All families had risk management plans, but we did not see families who had a sustained plan for developmental change.

In addition to analysing the interventions services had made in families' lives, we observed current working patterns of front-line staff and reviewed the existing deployment of public resources. We found that, typically, front-line workers spent 74% of their time on administration, 12% on liaison and just 14% of their time on work with family members. Most of this 14% face-to-face time was spent on data collection, to fulfil the remaining 74% (the demands of the forms), rather than in relationship-building and engaging in people's lives to find out how they could best serve them. These figures changed slightly from service to service, but remained fairly constant.⁴

Conversations with front-line workers at first elicited the despair workers feel towards families: 'this family will never change'. The gulf between families and workers was evident. As the work progressed and, in particular, as the visual maps of past interventions took shape, the process of plotting the lives of families well known to workers, led to a collective sense of disbelief that so many hours, so much stress, had led to no change. The local evidence plotted by the workers themselves and the insights generated by Participle, opened up a powerful space for change in Swindon from the frontline to the senior management team.

Within this space we started to prototype a different way of working with families themselves and with those on the front line.

Prototyping: family led solutions

Working with a smaller group of four families, we began to create a different approach together, based on the fundamental premise that families needed to develop their own solutions and that, in order to do this, they needed to develop high trust relationships with those working with them and repair relationships within their own family.

The first step was building a team. We asked front line workers if they would like to work in a different way, and those who volunteered were interviewed by the Participle team and family members. The involvement of family members in the selection process is still core to the Life programme.

⁴ This alarming state of affairs where on average 80% of worker time is spent in servicing the system itself has been recognised by a 2012 government enquiry into child protection led by Eileen Munro (see the Munro review of Child Protection May 2011, and Progress Review May 2012), however as Professor Munro has herself acknowledged progress on changing this culture and behaviours has been slow.

The families were looking for individuals who would talk to them 'without a script'. They were looking for honesty, for conversations that would be free of jargon and condescension. Designing the interview format, families chose real life examples – 'what would you do when my son starts kicking off?' Typical responses circled around official guidance: call a manager, exit the home safely etc. The person who said she would not be quite sure what to do, but would try to calm things down and get a conversation going, as she might do in a friend's house in the same situation, was selected by the families.

A team took shape, drawn from a range of services, with a group of individuals who were open to sharing their own life experiences and working in a new way with families to build authentic relationships.

The next stage was one of activities with families and workers. With parents and children, we went paintballing, ate together at McDonalds, started to repair homes and gardens and wherever possible we involved others in the community. There was a core belief that the crises facing the families we were working with could not be seen as individual problems, but needed to be seen in the wider context of a society that has winners and losers and where social inequalities were widening.⁵

In the intensive prototyping phase we were successful in reaching out to other members of the community and challenging the stereotypes that neighbours held. Much of the work – particularly that spent clearing gardens and other spaces – seemed closer to community organisation projects than a family service and members of the community responded, which, in turn, gave families who felt ostracised and socially isolated, the courage to take further steps.

In one early incident we were thanked by a neighbour for moving one particular family whose son was perceived as a menace. When we explained that no move had taken place, and that the son was in fact now in school, the reputation of our work and openness to our approach spread on the estate. As the work has grown, it has been harder to maintain this community aspect, but it remains our belief that in an ideal world this would be a core part of working with families.

Practical activities built trust within families, who immediately started to tell us that they were talking more, listening more and were enjoying themselves – often for the first time in living memory. The activities were also fundamental to building the trusting and open relationships between the team and families necessary for the deeper work to begin.

Core to this process was a subtle shifting of the professional/family power balance through asking the families to decide how they wanted to use the team's support and what they wanted to change. This was initially a disconcerting experience for both families and workers. But in not bringing an agenda, encouraging families to talk about their own aspirations and making them feel those aspirations were valid, the families defences started to fall away. They saw the changes they wanted to make and moved into action.

⁵ Here Life draws on the analysis of Wilkinson and Pickett in *The Spirit Level* (2010) echoed by Layard, Marmot and various earlier United Nations reports. This is thinking which echoes that of Amartya Sen, the author of the capabilities approach.

Together families and the team started to build life plans. Some families spoke openly about the difference between these plans and the plans they had previously experienced, which often seemed to them like a collection of different services' agendas which the family were asked to ratify in their own words. There was a sense of ownership: "they helped us make the plan ourselves", "it shows us we have drive, that we want to accomplish things". Indeed what was most striking was that with trusting relationships in place, families did want to foster their capabilities and showed us they had the courage to change.

Around these core activities we tried numerous other community-based experiments to create local opportunities: groups to do up the neighbourhood, to share child-care, to go out in the evening. We also had a small fund to support community enterprises with some success. Some of these experiments were abandoned over time (the enterprise scheme was not legal for those on benefits), others were folded into what became the Life programme.

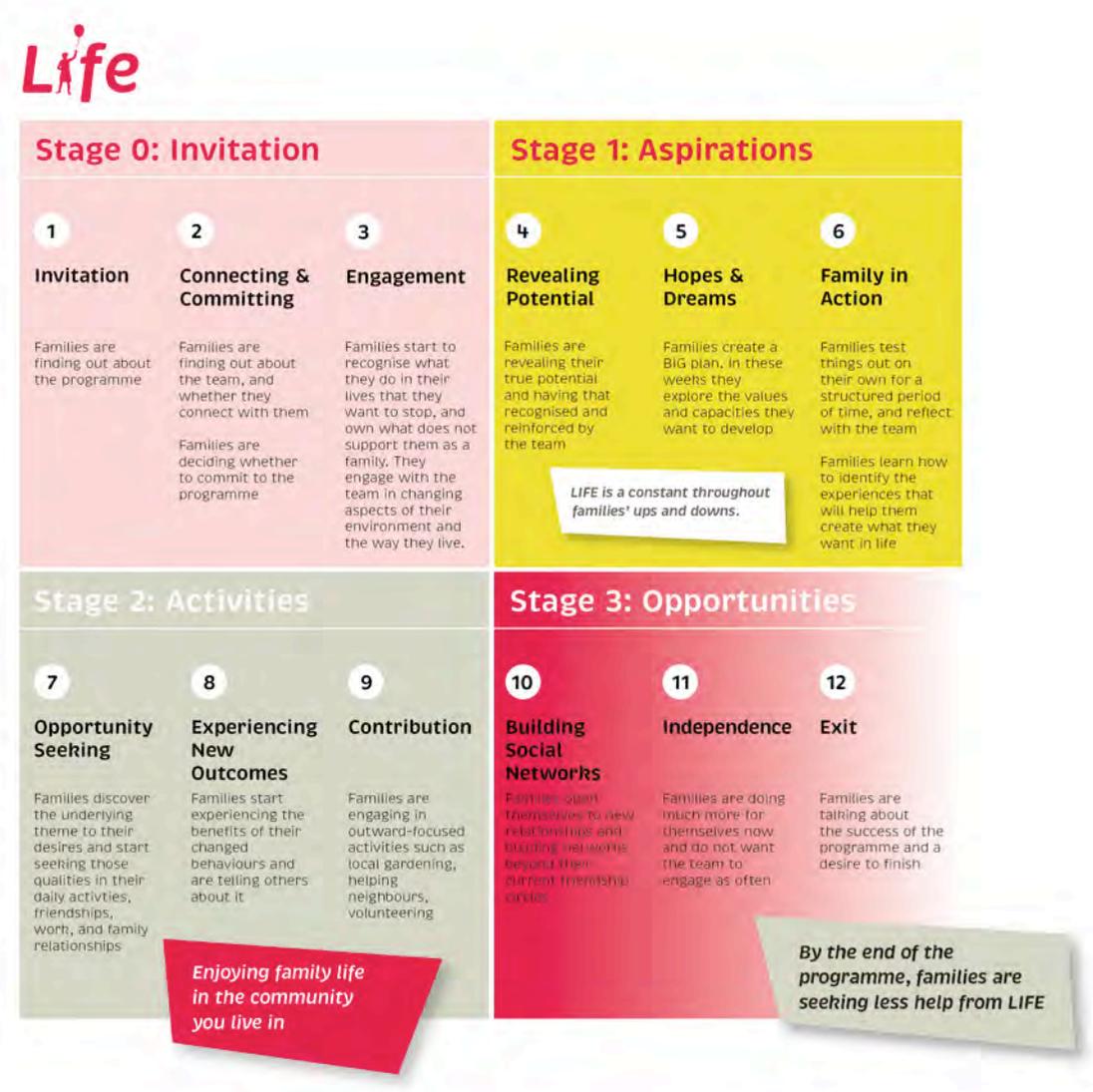
Within 12 weeks we had saved Swindon an estimated £250k through the prevention of eviction orders, two children no longer needing protection plans and attending school, the reduction in anti-social behaviour and, in one case, a child who was about to be taken into care was able to stay with their family. Families who had previously been considered too recalcitrant to engage with social services were taking the important steps to change their own lives and were recommending the Life programme to other families and to their wider family members.⁶

This early concrete success was important in building momentum within Swindon and buying the space for Participle, Swindon leadership and the Life Team to develop the programme further. At the same time the systemic barriers to change and the importance of leadership were becoming increasingly evident. The reality of the challenges facing families at times led to tension in the relationship between Life and other services. Families who needed another chance to remain in their homes, or who were ready to return to school, despite their reputation made visible the fault lines between the targets and demands on hard pressed services and the needs of vulnerable families who had been opened to change. The creation of a Life Forum where professionals and leaders could share and resolve these tensions was important in moving forward. The critical role that engaged leadership would play in opening up services to change at all levels was evident.

⁶ This process of families drawing in other family members – estranged partners, children who have left home, aunts and so on – continues and is to be welcomed. We have however started to count family members as opposed to families since it led to early concerns that we were not increasing our numbers although the reality was more people were coming through our doors.

Synthesis: a four stage Life programme

By 2010 the core of the current Life programme we are working with today was in place. Life is a developmental programme, based around 4 broad stages: Invitation, Aspirations, Activities and Opportunities. The programme is team based – a team rather than a key worker engages with families, working to a core set of principles we call the Fundamentals. The programme and the Fundamentals are described in more detail in Annex A.



In Swindon during the early years, the Life programme was supported by a series of culture change workshops facilitated by Participle and drawing in staff from all levels across Swindon Partners: health, housing, police, social services, the fire department and education. These workshops were championed and attended by Swindon leaders who saw Life as important for driving culture change across services, given the systemic barriers alluded to above. These workshops were well received, stimulated debate and raised awareness of the programme within Swindon.

1.3 Life: the core characteristics

Aristotle argued that the difference between a good political arrangement and a bad one is its success in facilitating people's ability to lead 'flourishing lives'. We might think it axiomatic that public services would be judged in the same way, but the reality in Britain today is very different. When the full horror of the baby Peter Connelly case came to light, the then Secretary of State, Ed Balls, did not promise that he would ensure every child would flourish, he promised us the best child protection system in the world. In 2013 family services are judged against their ability to manage risk and deliver short-term outcomes; a culture which is being further entrenched through payment by results mechanisms which can only function within a framework of clear transactional goals.

In this context Life tries to strike a balance. Life is a developmental programme – its purpose is to enable families to enjoy long, healthy and creative lives. At its core is a belief that most families, whatever their circumstances, want to, and can, develop core capabilities if given the right set of trusted relationships. To deliver Life you need to build this trust, to 'be the change'.

Life simultaneously recognises that a mature society needs to manage risk and Life has always paid the closest attention to safeguarding working closely with children's services in each region (we have detailed our approach in Annex D). We have found that as a result of the time and care taken to build relationships, children and parents have often disclosed a great deal more to Life Teams than over years of involvement with other services. This can potentially result in escalation to child protection services but what is critical is that unlike siloed statutory services, Life Teams stay alongside families and work across 'thresholds', supporting (and challenging) families through this difficult process. Life Teams do not have the statutory authority to take children into care but this has happened in partnership with social care, where it is agreed to be in the best interests of children.

The families we work with, as described in the case studies, have often suffered long term neglect or abuse; the parents have frequently had difficult childhoods themselves, have rarely been able to hold down regular work, have long histories of instability including frequent house moves and suffer from a wide range of physical and mental health issues. When we meet them, they are socially isolated, angry, locked within, and we might say addicted to, a pattern of repeated crisis within every aspect of their lives and relationships. Crisis has not only become the norm but has also created a strong sense of identity for families which is hard to break.

Changing these long sustained patterns is difficult and it takes time. Family development is not linear. It is our experience that very often it takes a year for sufficient trust to be built and for the real issues to emerge, and at that point families can appear to go backwards. Life has been built around an acknowledgment that we need to sustain a sense of momentum whilst allowing families to lead and to develop at an

appropriate pace - that families will go backwards as well as forwards, sometimes several times before a more sustainable stability can be established.

In the section that follows we share the key aspects of the Life conceptual framework. In the following section, Section 1.4, we reflect on what we have learnt. For more information on the Life Programme itself you can contact Life HQ directly through our website www.alifewewant.com.

Family Led

Life shifts the power relationship between professionals and their institutions and families and communities. It is a family-led programme, which means starting where the families themselves are and facilitating a process, as opposed to commanding change around pre-existing service targets. Families are therefore supported to create their own plans and lead their own change, albeit with an awareness of the many plans surrounding them from the many services involved. Critically, these plans are not just about stopping or reducing 'problem behaviour' but, in keeping with a capabilities approach, identify individual family members' aspirations, talents and goals and work towards a more positive vision of the future.

“We used to ask for help, but it never really helped, it just kept stuff the same. Life actually helps us, and it's about us. It's helping me to build my family, not tear it apart. The whole family is working together to make changes. I reckon no one thought we could change, but things are getting better really fast. We have a future: I wonder what's next.” -- Life family member

Open Invitation

Life starts with an open invitation. We have seen families who were previously resistant to statutory interventions, open up when offered an opportunity as opposed to being threatened with a sanction. In other cases persistence is required. One Life Team Member spent two months visiting a parent and sitting on the doorstep with a thermos flask until she was finally let in to the family home. Some families can take up to six months to accept the invitation, a further crisis often being the moment of opportunity.

The invitation is critical to the Life approach (and often initially met with suspicion by those in statutory services, who cannot believe that families who have traditionally put their energy into evading services will accept the invitation). The invitation sets a different tone – putting the family-led philosophy into practice from the first interaction. Equally importantly, it enables the Life Team to expend effort at the right moment. Where our prescribed process has been followed, no family has ever refused the invitation, although one family in Swindon came back after a year to take it up when they were ready to engage and having seen the impact on others.

In other areas of Participle's work, we have noted how 80% of the resources and effort are usually expended in the first interactions with any service, yet at this time those on

the receiving end are often either too stressed, nervous or angry for the interventions to have much impact. Making a genuinely open invitation and being persistent but patient in supporting that opening for change is critical. The invitation is the foundation of an authentic relationship between the family and the team .

“Well when other services come round, it’s as though, before they do anything, they will get all their books out, all their pads and that, the pen! ...I think the first time when [Life Team member] came round there was no pressure, first it was just like having a chat.” -- Life family member

“If they would have worked differently I wouldn’t be here now. They let me – I don’t know instead of pushing me and all that pushy, pushy they let me come to them. I know it’s taken a long time.” -- Life family member

Developmental: The capabilities approach

The United Nations defines development as a process of enlarging people’s capabilities, acknowledging there are two sides to capabilities: their formation and the use people make of them. Life is focused on supporting families to independence, as opposed to fixing a crisis or managing a risk. The programme aims to support a shift from intensive involvement with re-active, costly, enforcement based interventions to pro-active use of universal and preventative services. For some families, being fully independent from services might not be realistic but a ‘healthier interdependence’ with services is the goal. However, it is important not to underestimate what people can achieve – some family members have astonished everyone with changes they have so far been able to make in their lives.

In order to achieve healthy independence, both the aspirations and activity phases of Life are focused on building a set of core capabilities⁷: for inner confidence and self esteem (what we call health and vitality); for the development and sustaining of healthy relationships; for working and learning and for wider community participation/integration.

Taking a developmental approach to families implies that we are not only concerned with finances and material issues, but more fundamentally with creating an enabling environment within and around the family to make it possible for family members to enjoy healthy and creative lives. On a practical level this means Life is about income and work, but also about people, relationships, love and joy.

“It’s because they realise what everyone is capable of doing...they open the door into a different direction, where you wouldn’t have gone without them in the first place” -- Life family member

⁷ This capability approach rooted in the work of Amartya Sen and Martha Nussbaum underpins all Participle’s work. The approach is accessibly described in Nussbaum M, *Creating Capabilities* (2011) Harvard University Press.

Tools for planning and priority setting

Life has a simple but effective set of core tools: the Life Plan, the Talking Triangle and the Life Star. These tools support family members to talk about different aspects of their life, identify their aspirations and make realistic short and long-term plans to achieve them. The core tools help people visualise their own progress, reflect on setbacks and support the team and families to have difficult conversations. Beyond the core tools, there is a broad and flexible toolkit of bespoke resources for families and teams to support the development of capabilities and the stages of the programme.

“At the beginning it’s a bit weird because you don’t know what it’s all about, but when you’ve done about two or three and you look back on them you can see how you have either gone up or how you have felt bad one week when you done them and you can compare them. It’s good because you can see, oh yeah I’m better on that one this week.” -- Life family member

“They were helpful in like putting down from when I started. Its just the thing of looking back to how far you’ve come really...it is good to turn around and look back and see like from the start.” -- Life family member

A therapeutic approach

Undiagnosed and untreated mental health problems are a barrier to sustaining change in almost all Life families. Given that the roots of mental health and wellbeing are social, economic and medical we have attempted to bring together a broad approach.

Despite the high level of mental health problems, many Life family members have not had access to appropriate support. The reasons are many: therapeutic services may not be locally available, thresholds for statutory mental health services may be too high or waiting lists too long. In addition, family members themselves can be reluctant to seek support, either because they are fearful of the consequences or because they do not know how to access it. When they do have access to a service, they are often unable to keep the structured, clinic-based appointments usually required by services such as Child and Adolescent Mental Health Services (CAMHS).

It is well-established that it is the accumulation and interaction of multiple problems that is the most damaging to families, such as the ‘toxic trio’ of substance misuse, domestic abuse and mental ill-health, and this certainly holds true for many Life families. A not un-common life history would be that of the mother who grew up in care, had children when she was a teenager and went on to experience a series of domestically abusive relationships. Unsurprisingly, she had very low self-esteem, bouts of depression and had developed an alcohol addiction as a way to ‘self-medicate’ in adulthood. One of her children was showing signs of severe emotional and behavioural problems in school. In the example above, the family wasn’t registered with a GP, the usual referral ‘gateway’ for mental health support, and the only time the mother had seen a mental health professional was when it was mandated by children’s services (and even then it wasn’t to offer support but to make a psychological assessment). After several months the

child had an appointment with CAMHS, but would sit in silence each time until they were eventually discharged.

From an early stage in our work we saw how central deep therapeutic work was both for individual family members and within families. We saw some striking changes in family relationships, for example in one case enabling a child to come out of care and re-join their family. In another, disclosures of previously unknown abuse were made that resulted in children being taken into care. Helping parents work through their own histories of childhood abuse or neglect and poor parenting and the impact this has on their own relationships has been a key feature of this work. Louise Casey visited some Life families as part of her tour of effective family support programmes and notes in her report 'Listening to Troubled Families' that 'the most striking common theme that families described was the history of sexual and physical abuse, often going back generations'.

In all of these cases it was the relationship between family members and the Life Team that provided the context and safe, trusting space for these issues to emerge. However, we recognised that the nature of these sensitive, challenging and deep-rooted issues required high-level therapeutic expertise. Through a relationship with the Tavistock and Portman NHS Trust, Participle has developed a model whereby we can bring this expertise to provide direct support to the Life Team and families in their own space.

'Live Supervisors' are therapeutically trained professionals (usually psychotherapists or family therapists) with extensive experience of child and family work. Their role has been designed as a flexible but tailored therapeutic resource for Life Teams, which provides Life Team members, who do not usually have backgrounds in mental health, the supervision to guide their very difficult work. This may be through holding reflective team discussions on family work, providing training on a particular mental health issue or visiting a family directly with a team member.

Our relationship with the Tavistock has therefore enabled us to design a structure where a therapeutic approach can be accommodated within families' lives. We are able to bring this deep work together with the more day-to-day practical and social support, such as introducing structured bed times or trying out new activities. Bringing expensive, high quality clinician time into the Life Team makes sense at a time of scarce resources – our experience has been that families are open and ready.

Dr. Rita Harris, the director of Child and Adult Mental Health Services at the Tavistock explains; "Low self-esteem manifests in a lack of self efficacy, parental authority and depression...you must address these issues if you genuinely want to unlock behaviour change and improve outcomes for these families...this model allows this vital work to reach people in very profound need who would otherwise never set foot inside a clinic to access these services. The continued support and supervision we provide helps team members work in what can be very challenging and emotionally charged environments".

The Life Team

In each location where Life is operational, a small core team of workers are selected, trained by us and seconded into a local Life Team. Family members sit on the interview panel, along with representatives from the Council and Life HQ. In some places this has been a local family member but in other areas where local relationships with families have not yet been established, family members from other Life Programmes have taken part (a valuable development opportunity). Existing front line workers are invited to apply for the roles and they are interviewed against a set of core skills and qualities that we have now developed into capability-based competencies (see Annex B). Typically, Life Team members come from a wide range of services: housing, police, social work and children's services. They are drawn by the promise of doing the work they originally started their careers to do – bluntly, they want to support change not fill out forms.

Life HQ provides initial training of new Life Teams. The training is highly experiential demonstrating the Life principles and tools through people's own personal and professional experience and examples from Life. Where possible members of families that have "graduated" or are part of the Life programme attend. One member of the Swindon team described the process as 'stripping away the system'. Others have said it is more like peeling back the layers of an onion, gradually revealing 'the person behind the professional'. Team members are invited to 'be the change', to bring themselves to the work and to share their own life experiences, in a way and at a time that is appropriate. Time and again family members talk about how this has resulted in a qualitatively different kind of relationship and feeling of support and empowerment.

"When they suggest something to you from their own knowledge that has happened to them in their past and that is really good because it's like if they can do it, you can do it sort of thing." -- Life family member

"He was doing his job but it was I'm not here because I have to be, it's because I want to be. I'd say that made another big difference." -- Life family member

"Everyone here, doesn't judge anybody and that is a main quality, not to judge people because you don't know what they are really like until you get to know them." -- Life family member

Life Teams work as a reflective unit around the family. This team around the family approach is unusual in the UK context, but feedback from families and teams is that it is hugely beneficial.⁸ It enables the benefits of a key worker model to be maintained, with one to one 'key worker' relationships between individual family and team members but within a framework of a whole family, whole team relationship that keeps a holistic perspective of family needs and progress. This enables families to draw on the skill-set and knowledge of the entire team and ensures that there is more than one mind at work

⁸In her recent Working with Troubled Families report, Louise Casey sets out what she sees as the five 'Family Intervention Factors' that are the hallmark of effective family support projects. These are said to be a dedicated worker, dedicated to a family, practical 'hands on' support, a persistent, assertive and challenging approach, considering the family as a whole (gathering the intelligence) and a common purpose and agreed action. The Life Programme encompasses these principles and indeed builds on them in working with the most troubled families through the team around the family model and by taking a deeper and more developmental approach to family circumstances and long-term sustainable change.

in picking up dynamics and issues, minimising the risks of collusion and drift. It also enables greater consistency for a family, as they do not need to rebuild relationships if a worker is on leave or moves on and always ensures they have a network of support. It also means that team members frequently work together engaging in activities with multiple family members or helping the family work on their relationships. Supervision remains critical to enable interrogation, challenge and reflection and to support a strong and supportive team culture.

“It makes you feel a lot more comfortable because, say, if that person is not in when you call, then, you know whoever can help you out like and I don't know it's just a lot better really, it makes you settle in more I think. [My children] are really comfortable [with] all of them and have started to do some 1:1 work now.”
-- Life family member

Infrastructure: the Life Hut and the LifeBoard

The Life Hut grew from our own house in Swindon. Where possible Life Teams have worked out of a 'home' in the locality, which has provided a safe space for families to be, to cook, for children to play, and for families to meet team members and each other. Being able to take family members out of their homes to experience different ways of being as well as continuing to work within homes and community spaces has proved extremely beneficial in helping families open up, reflect and get a different perspective on their lives. The Wigan team leader has described 'the power of a brew' and this homely atmosphere has underpinned the relational nature of the work.

If sofas provide the context for deep conversation, it is technology which offers the promise of a different way of working, offering the potential to free time for front line relationships. In our Swindon research, it was clear that technology had become a constraint rather than an enabler for frontline workers. We set out to design a prototype platform that would be simple to use and would support and enable new ways of working with families. The LifeBoard, as we called our prototype, was made possible through a grant from NESTA.

A key and distinctive element of the LifeBoard was an interface for family members in which they could share their journey on the Life Programme. LifeBoard aimed to be a shared platform, breaking down some of the barriers between workers and families, in contrast to traditional systems. Team members could record their interaction with family members in daily logs, ensuring a clear audit trail of work and time spent with families. Our capabilities framework was embedded within these logs so team and family members could document progress and track the development of capabilities with ease. Each log was also connected to a time-tracking system that collated the 'time-split' of the team and a safeguarding flagging function. Finally, the Admin Level function aimed to give the manager and data lead an overview of family progress and all data.

In our initial prototype, we had perhaps underestimated the culture change represented by this kind of technology, even for a team specifically set up to break barriers and do things differently. The family facing function was particularly radical and we found team

members reluctant to share it with family members initially. In some cases this was because they felt that technology was intimidating for family members, but it was unclear how much this was a concern of the workers or the families. We found that where workers felt confident with LifeBoard and used it collaboratively, family members engaged, but the more common experience was that workers would 'write up' contact with families after seeing them in a more transactional echo of former systems. Accessibility was also an issue with very few families having regular access to the internet and team members not initially equipped with high quality mobile technology.

After extensive consultation, the second prototype of LifeBoard stripped the platform back to a more basic model that focused on its use as a recording tool. The family-facing interface remained but with two core Life Tools, the Life Star and Life Plan. Team members valued having a 'bespoke' platform and felt that it reduced the amount of recording and focused more usefully on insights and capabilities. As LifeBoard has been rolled out in three further Life locations, we have gained consistent learning about its strengths and weaknesses and the benefits and challenges of developing this kind of new technology.

1.4 Learning from Life

The Life Programme exists to support fundamental change within the families we work with. We measure our work to be sure we are making a difference and in the same way that we ask our families to be open, we want to be open ourselves, sharing our lessons with others in the sector. We share here reflections on our practice and some thoughts on measurement. More detailed cost studies and data follow in the second part of this report.

‘How does Life work?’ or, sometimes with more challenge, ‘does Life work?’ are questions we are frequently asked. At Participle we work iteratively in cycles of practice and learning and we embarked on a period of reflection and codification to assess what we had learnt to date and where we might improve and re-iterate our work going forward. This section summarises the insights from that process.

Does the Life Programme work for Families?

Finding the families to work with has been challenging. In Swindon we found broad consensus as to which families were most problematic – they were known by name and were geographically concentrated. We started to scale our work based on the premise that we would find this pattern in all Local Authorities, which has not been the case.

In practice we have found that there is not always consensus as to who the families are with agency-held data not always in keeping with front-line knowledge. In short, Local Authority partnerships do not always know who the families in chronic crisis actually are in their region. For this reason, we had to expend considerable effort on supporting the actual identification and nomination process in each region, before families were invited to take part. Because we are a small organisation, this delay in identifying families (up to six months in some cases) has a deleterious effect on the work we can do (our partners have engaged us for a two year period). In future work we would ideally develop a community audit tool where the community themselves might identify families most in need of our support. We have seen such a tool working effectively in another context with the homeless in New York.⁹

Once we have identified families we have found that our Open Invitation has been a core strength of the programme and been particularly effective in engaging families that were previously seen as hard to reach. For some families, engagement at the early stage may have been as much about ‘wanting services off their back’ as really signing up to change, but this has developed as they get further through the programme. The only refusals we have experienced have been in one location where our suggested nomination and invitation process was not followed – the learning is detailed in the location case studies in the second part of this report. Our invitation process has succeeded in opening families to change and the early results of our work in all locations have been positive.

⁹ See <http://cmtysolutions.org>

Sustaining change has been much harder, as might be expected. The iterative nature of our work however means that we have been able to make incremental changes to the existing Life Programme strengthening our tools and the programme framework to provide more structure and support for the teams when setbacks occur. Ideally we would also see Life Teams able to access more direct therapeutic work for family members when needed at this stage, though this is not something our partner authorities always feel they can currently afford.

There is a difficult balance to be kept between setting up a programme in such a way that the expectations for families and workers are kept high – this is particularly important in a context where families have traditionally not been expected to change – and realism given the entrenched nature of the difficulties faced by families. Since setting up Life we have learnt from the US context that a five year period is seen as more realistic for developmental work which is to be sustained.¹⁰ Whilst accepting that we might have set overly ambitious parameters, we can still see that successful exit from the Life programme has been achieved.

In the one location where Life has been running for two years or more, families have made and sustained positive changes in their lives. Five families have exited the programme in total, with two families exiting because children were taken into care or a family residential placement. Three families have ‘graduated’ from the Life Programme as a result of making significant and sustained positive changes in their lives including children going back to school, parents accessing work and training, improved housing conditions and family relationships. In practice these families are still occasionally in touch with the Life Huts (in one family’s case after a gap of almost two years) and in some cases volunteer on the programme supporting others.

To know the full circumstances of the families is to be more surprised that they can make such massive change, than that they are still linked to Life. It is clear however that a successful exit means fostering greater networks of peer and community support. Whilst these aspects of the work were core to the early experiments in Swindon they were not sustained as part of the Life Programme and this needs to be revisited. The Wigan Life Programme has started to facilitate peer support groups such as a young women’s group and a dads group and have also adopted a community development approach by creating the Life House as a hub for wider community initiatives such as employment and counselling services, which is an important development.

Life was set up as a family programme – the intention was to support adults and children. Teams have had notable success in engaging with wider but significant family members such as current and ex-partners, grandparents and adult children. Whilst child safeguarding measures were always present, we noticed in our early work that, in an effort to redress the balance with services that focused exclusively on children, the emphasis had shifted perhaps too much away from younger children in particular. With the addition of the Tavistock’s expertise, this early imbalance in the Life Programme was addressed and the composition of the Life Team restructured to ensure sustained

¹⁰ See, for example, the research from Project Match in Chicago (www.pmatch.org/five_year_welfare.pdf)

emphasis on, and expertise with, children. All of our programmes now contain this mix of child and adult experience and every family have members of the team focused on the needs and interests of both children and parents.

Does Life work for families? The overwhelming response of the families who are engaged with Life is 'yes'. Life offers an approach where families feel safe and dare to develop. From the perspective of Life HQ and Participle however the verdict is more nuanced. It is clear that there are elements of the Life Programme which are unique and are allowing a space for real change to take place. At the same time we can see that aspects of the programme could be further developed to enhance exit and sustained change. We are now working on iterating the Life Programme in order to strengthen these areas.

Feedback from team members:

"Most of us, whatever we've done in our lives, someone has showed us the way - so it's about doing that, showing people the way who've never really had anyone do it"

"Families have been entrenched in rubbish behaviour for their whole lives and it is hard to change that and it's not always nice. But I've done that too – I've made changes in my life and it matters that I've done that, as a Life Team member"

"On occasion the parent's crisis can overshadow the children...always have to be careful to retain balance in families...for the teenagers, it's sometimes giving them a glimpse of life outside their family but it's hard and can be sabotaged – they can't always make that break for independence"

"We try to keep the level of change throughout the family consistent – we're mindful of family members changing at a similar rate – it can be quite destructive when people are changing at very different paces"

"Families have a chance to experience through a team approach, what it's like to have someone whose care for you is genuine, who will support you with the sticky stuff or dark things that can be hard to express and admit, and who will offer you consistency and commitment"

Feedback from family members:

"They just highlight certain things that aren't normal and right and [I] shouldn't have to live like that"

"No-one really supported me before, that's why I found it difficult to stop drinking. I tried to stop on me own but it's hard...I want to move off this estate cos my circle of friends, they're all still drinking. Everyday drinkers. Whereas I'm not now - it's been hard"

"I felt like I couldn't get me word across to anyone...I feel a bit more like they listen to me now. I'm not quite sure why it's like that. It's annoying that they listen more to the professionals than me, but they do"

“For me, it’s more practical things. But all the practical things built up with mental things. With coping with things, you know?...I know they’re professionals but it has been like a friend really. It has helped to have somebody there to support me, cos I’ve been on my own with children for 4 years”

“As soon as everything started to get on top of me, I’d just leave everything. I’d just ignore it all. That’d been going on for years”

“They tell me to get off me butt sometimes...she’ll come in and say ‘I’m working with you but I can’t do it, you’ve gotta do it”

“Well, I’m not as stressed. I was depressed a lot in past cos I was forever thinking my kids were gonna be taken and that ruled me life a lot”

“I rang the police. Normally I’d think, nah I wouldn’t tell....I do trust a lot of people now. Even the woman I sign on with. We’re best buddies now”

“They are encouraging me to get out there and to make friends, join groups. The more confidence you’re building up, the better your life is getting...I will go out and do that”

Does the Life Programme work for team members?

It has been core to the philosophy of Life that the people and skills needed for this difficult work are to be found at the front line of our public services. However, in order to do the work they see as their vocation, they need to be liberated from the structures of existing systems. The challenge, in other words, is one of systemic culture change.

It is clear from those who come forward to apply to join Life Teams that our philosophy chimes at the front line. Police officers, social workers, housing officers; all those who come to the interview process want to work in a different way. We have also found that briefings are an important opportunity for workers to select themselves out, as well as in, with assumptions about low case-loads and fun activities dispelled by the intensive and demanding nature of the work.

The seconding process has been challenging in practice. Not surprisingly line managers are not best pleased to find that an individual they might see as the strongest in their team is to be seconded for two years, particularly when funds might not be available to back-fill the position. Again, delays of several months can take place whilst these issues are smoothed out with our partner authorities. At the same time, in an era of job cuts, those seconded to the Life Team can become nervous and feel that they should return to their original jobs. Personnel change in a small unit that needs to cohere as a team, and who have been intensively trained to form a team identity, is difficult and expensive and remains an issue that we constantly grapple with.

Working with very troubled, sometimes frightening, families takes courage, emotional strength and resilience. These qualities cannot be taken for granted and there are

reasons that professional masks have developed – the reality of our Life family lives can often seem too much to bear and the disappointment when families move backwards as well as forwards is extremely stressful.

In the early stages of Life we often attracted team members whose own life experiences could be close to that of the families. This was initially helpful in building relationships and many team members found their involvement enormously beneficial, feeling empowered to make huge changes in their own lives. However, the team also experienced high levels of sickness and disruption in these early days and it became clear that emotional resilience and literacy were important qualities to have as a Life Team Member, as well as robust support and supervision.

We are now better able to identify the skills and resilience needed and our selection process takes account of this. The introduction of the Tavistock Live Supervisor and a monthly one to one CAMHS supervision slot for all team members has been significant in terms of on-going team development, holding the team together and allowing them to sustain their very challenging work. Close working between the team manager and Live and Clinical Supervisors has been particularly important in supporting and developing the team members' ability to manage the impact of the work. Whilst we would still maintain that those closest to the front line have most to offer this work, the skills sets and qualifications of the Life Teams today are also higher and more varied than initially, with an equal emphasis put on personal qualities and relevant professional experience of working with families in chronic crisis.

The inclusion of social workers and health professionals has been particularly important in ensuring teams are genuinely inter-disciplinary and have a range of skills and expertise from housing and crime to health and social care backgrounds. Teams draw on the specific knowledge of each member but are not limited by their specific job titles. Social workers have been seconded to Life both as generic Life Team members and case-holding social workers and this has facilitated closer joint working with statutory services and understanding of child development and family support.

For those inside the Life Team it can feel as if they are doing a very difficult job under the highest levels of contractual uncertainty – something that is not always visible to the leadership who have championed Life and brought it to their locality. To those who are not in the Life Team it can seem, when viewed from a distance, that the work is extremely easy; teams work with smaller numbers and have the freedom to focus on direct work and activities which are a particular source of jealousy and antagonism between the Life Teams and other statutory servicers.

Taking the family numbers issue in particular, we purposefully focused the programmes on small numbers of families in its first iteration but there is a sense at Life HQ that the guidance of starting the work with 10 families has become a ceiling and Life Teams could potentially manage twice this number moving forwards. The rivalries beyond the case-load issue are more complex and harder to address. Life does challenge the norms of other service provision, it needs to ask some services to stand back to enable the space for direct work and it sometimes needs to bring other services in or keep services involved who want to 'close' the case. Neither of these help the Life Team to

work easily with their peers but partnership working is critical in order to make Life work and avoid the duplication of multiple interventions it was designed to overcome.

The nature of the work, the sometimes difficult relationships with other agencies and the change in personnel, make the role of team leadership absolutely critical. The strongest work is unsurprisingly taking place where the strongest team leaders are in place. Core skills for this role include both team management and the ability to lead by example and work with families. The latter has been particularly difficult for some of our team leaders to sustain in a culture where leadership is not associated with time at the front line.

Strong relationships are at the core of the Life Team approach. There is a fine line between building positive and supportive relationships with families and keeping eyes wide open to potential risks. This is a balance that Life Teams are constantly striving to achieve. In the early stages of Life's development there was a sense that the Life Team could take the concept of being family-led to extremes. Again, this emerged in opposition to the many enforcement agendas often surrounding the family but could sometimes create unhelpful divisions. Whilst we would not want to appear sanguine, our current partners appear to have overcome these early difficulties. Improved tools, knowledgeable and resilient teams, shared learning and partnership working have all supported this process. This is also a place where the challenging oversight of Life HQ as a 'critical friend' can have a strong role to play.

Of course what the team actually does matters and our core approach is evidence based.¹¹ Research shows that successful programmes set out their content and activities in a clearly logical way and link them with the outcomes they want to achieve. The contacts the Life Team have with families are at a level of intensity that enables change to happen, not a desultory occasional burst of activity to avert yet another crisis. They work comprehensively on risks and strengths and with all family members. These are all principles that underpin what is working in the Life Team approach

Does Life work for team members? Team members tend to vote with their feet. Life programmes have had relatively stable and consistent teams, something teams anecdotally report is in contrast to many statutory services they work with who have considerable staff churn. Those who stay with the work derive enormous satisfaction from seeing the change they support. Quality supervision of Life Team members is critical to a high functioning and sustainable team who are motivated in part by the development of their own capabilities.

The evidence to date suggests that, as we first hypothesised, many can do this work if the right systems are in place. It is too early to tell how long any individual can sustain such a difficult role. Swindon have taken the decision to 'refresh' the Life Team composition in order to give others this valuable development opportunity and enable current team members to bring their learning back to former teams. What we cannot yet tell is the extent to which those team members who return to the front line in their original service position are able to champion a Life approach within the constraints of current systems.

¹¹ Small, S.A., Cooney, S.M., & O'Connor, C. (2009), Evidence-informed program improvement: using principles of effectiveness to enhance the quality and impact of family-based prevention programs, *Family Relations*, 58, 1-13.

Feedback from team members:

“This experience with Life takes me back to the reason I initially got into this profession. My previous role felt like treading water...it was highly frustrating. I have learnt so much from being with Life”

“It's not just a job this, it's people's lives...there's nothing like this – my last role was just so different...this work is really all about the grey areas - the people who want everything to be black and white and come from more rigid ways of working, don't always like it”

“Recruiting the team carefully is key...really important to have a strong team and get to know each other and support each other well – we have to be able to be honest with each other about things”

“Most, if not all, at some point during their involvement had a moment of connection, where they felt that they were being respected, acknowledged and cared for, these moments were just as powerful for us as it was for them. What was challenging was measuring our expectations for change”

“Many workers have developed much deeper understandings and insights into the difficulties faced by whole families by working in this way”

“You go home on a Friday night and think I've lived and breathed with this family for a week”

“It is a leap of faith and you need to feel safe to do it – so you need support from the team, clinical and live supervision and support from your manager – you need all that around you so you can take the leap to go on that journey”

“I feel like [the Live Supervisor] is on my shoulder when I'm doing visits...she has enhanced the skills I have and helped me to develop – that's what a good supervisor is”

“Supervision is about time for us to discuss whatever it is you want to talk about – it's not an easy job, it's the hardest thing I've ever had to do – you can talk about your caseload, a family member who might be getting under your skin or you can talk about your own stuff - the quality is excellent”

“Supervision helped me to reflect on the impact of the work on me...it stopped me from burning out”

“I've been honoured to be a part of this programme and despite how incredibly difficult and frustrating it has been at times, because of what I've been able to learn, and the good that I know has been achieved for some family members....I'd do it all over again”

Does the Life Programme work for Local Authorities?

Our partner Local Authorities are brave. Life as we have noted is about systemic culture change and there are few if any incentives for leaders to challenge their own systems in the way that Life entails. We have been fortunate to work with a number of inspirational leaders however the Life Programme remains vulnerable when these leaders move on. This challenging, culture-changing work needs to be led from the top with vigour and sustained commitment.

In each Life Programme, teams have amassed numerous examples of barriers and blockages within the wider system: head teachers who will not accept the children of families they know to be trouble, gaps in support services for families with learning disabilities, endemic mental health issues for which there is no provision, a culture of managing crisis and information, rather than gripping and solving issues, and much more. Our most ambitious partners have embraced the dilemmas and difficulties this work exposes and are working directly with this learning to think about ways to improve how they design and deliver a range of mainstream services, from social care to housing. This learning element to each programme is central to the Life approach, but quite different to many 'traditionally commissioned' family support programmes.

Our Local Authorities invest in Life for different reasons. The cost saving argument is never the only reason for Life but always at the forefront of a conversation with local leaders and politicians. Life presents every authority with a cost saving matrix and the potential cost savings in any Local Authority of having a Life programme are significant.

Achieving these cost savings is, however, complex for three broad reasons. Firstly, Local Authorities cannot realistically cash many of the savings that accrue. The Wigan father of three who explained to us, "...the cost of one person being in prison for a year is £120,000. To save one person going to jail, which they have done with me, has saved that money. They should put it into something like this where help is given and needed. Crime, police, housing total that up for just one person would fund this for 12 months..." is a good example of a real saving that Wigan will never see, despite their upfront investment in the Life programme. Many of the savings delivered by Life, accrue to the Exchequer and central government budgets, rather than to the Local Authority directly.

Secondly, the numbers in the Life Programme are small. This means, for example, that whilst within Swindon the needs for Anti-Social Behaviour Orders (ASBOs) declined, the likelihood that the service might still be perceived as necessary for other families within the authority made it difficult to decommission or even reduce the level of service provision. It is important to note that the perception of what services are necessary is also a complex political equation meaning that the decline of service use does not directly translate into the de-commissioning of a service and therefore cost savings.

Finally, the complexity of the work itself defies any simple cost saving calculations. One family with several children needing to be taken into care can spike cost saving figures for one year. However from a developmental point of view we would see this as a success of the programme – interventions being made in the right place, where the need was not previously apparent. Our partner regions (where these cases have happened)

would agree since their motives have always been about better lives for vulnerable children and families.

We have already referenced the way the wider context of our work within Local Authorities has changed with the launch of the Troubled Families Unit. Each of our partners has had to find the best way to juggle the demands of high numbers and the requirement to fulfil payment by results criteria with their desire to provide deep, sustained work for their most vulnerable families.

Independent local government expert Sue Goss presciently described her fears, following a visit to Swindon Life in 2011 that, ‘now we have some real evidence of success, we need to make sure that the Life Team’s approach is not ‘buried’ by process control, professional caution, and a focus on short-term savings’.¹² The challenge is not always insurmountable. In Wigan, the Life Programme is part of the authority’s overall programme of work for Troubled Families, called Confident Families. The learning from Life has directly influenced the overall approach, whilst the Life Team have continued their intensive work.

In Two Tier regions it has appeared to be more difficult to provide the space for both approaches. Leicestershire hoped to set up a Life Programme in the Charnwood District in 2011 but were unable to continue given their need to immediately and dramatically scale family work across the County as a result of the TFU agenda. In Colchester where we are working with a committed District Council, the creation of a new County-wide service to work with much larger numbers of families with complex needs as part of the Troubled Families agenda has similarly posed a number of challenges but in this instance we are working together to adapt our model as we seek to find a solution that maintains continuity for families and embeds the Life approach more widely.

Does Life work for Local Authorities? It is still early days, but where our partners have stuck to the core tenets of our programme – what we would call fidelity to the model – and channels of communication have remained open and frank, we have strong outcomes. The case studies that follow present our outcomes and the different local experiences in more detail.

Feedback from team members:

“A lot of services walk around on eggshells, especially with families who are classed as chaotic, dysfunctional, whatever you want to call them – they’ll take the easy option – slap an order on or what have you – but this project is trying to tackle the root causes...services are shaped around doing things to people – getting quick results and quick changes, it’s a fixing model, but it’s a broken one“

“To sum it up in a nutshell, the relationship is everything, without that Life would be just like every other family intervention service out there...the fact that as professionals we can be human, and express care and concern, take time to get to know and almost be a

¹² Sue Goss described herself as “blown away” by what she saw in Swindon. See blog post at www.opm.co.uk/changing-family-lives-in-swindon/

part of the families that we support are all contributing factors to this programme being different”

“Being able to think outside the box – do things other agencies can’t do...flexibility is useful – we can say, let’s start a group or drop-in, trying different pieces of work...each thing we do with families isn’t brain surgery but as a package, it’s about creative use of resources”

“It’s tough to evaluate a constantly shifting service – Life works because it’s not standardised, it’s tailored to each family”

“What every team has learned is the importance of understanding, really understanding, what is going on for these families....If we are going to act on this, we need to pull together neighbourhood resources and being brave enough to get rid of people...so often we end up feeding the system rather than looking at the system”

“We need to stop working in our silos and to our own targets and start working with families where they are at – not working against each other. We need to enhance the assets in our communities, integrate the resources available and work around each family, not each service”

“It’s unrealistic to measure things like cost now - the costs I care about are 15 years down the line when the young people we work with have families of their own - that’s when there will be a difference, not now...when I bump into these kids when they’re adults, that’s when I’ll know whether I can be satisfied or disappointed”

Technology and the LifeBoard

It is Participle’s hypothesis (as set out in our mission statement, Beveridge 4.0) that technology so often deployed to cut costs in existing ways of working, holds the key to underpinning new ways of working. Here we summarise what we have learnt in this context from the LifeBoard.

Design Issues: We developed the technology using our user-centred design approach, working with frontline staff and family members. Whilst this works well with new service designs, with technology it proved more problematic, and we did not foresee this issue at Participle. The reality of how people said they wanted to interact with the technology, and how they actually did so once the system had been built, was very different. Except for the basic (admittedly most important) functions, people simply didn't use the platform in the way they said they would, and this was only evident when team members were presented with the technology post build.

Organisational Spread: The development of the LifeBoard with the Life Team went relatively smoothly. However, as soon as it was gaining some traction, a number of different parts of the local partnership engaged, with a set of different issues being presented by different groups. Whilst almost all members of these wider departments recognised both the value of the innovative nature of the LifeBoard, and the value to the

front line staff, this was not sufficient to overcome organisational concerns over how different systems integrate with each other.

The Emerging Cloud: We used a cloud-based system, which meant that both families and frontline staff, in multiple locations, could access their own version of LifeBoard. Although the highest attention was placed on designing in security, the relatively new emergence of the cloud based system still created unease, given the sensitive nature of the data.

Power of the Incumbent: Swindon had just rolled out a new large case management system across the whole Authority, in which all staff had just been trained. This was at significant cost to the council. To develop a system in parallel was problematic, not least because it meant that some members needed to input into both systems. Whilst there was an offer for the incumbent system to take on some of the LifeBoard functionality, this was not implemented.

Interface Design: We received feedback that the LifeBoard interface, both visually, and in terms of content, was a much more sympathetic design than existing systems. Teams preferred to use the LifeBoard, but the reality of the still existing case management system meant that system took priority.

LifeBoard is ambitious in seeking to transform the way professionals record their work with families and involve families in this process. This is a complex and challenging task. Our experience of prototyping the LifeBoard has shown us that: it reduces time spent on administration; it focuses the team's recording on insights, progress and capabilities and it enables a level of transparency and contribution from families that is rare and genuinely supports the goals of the programme. Our aspirations for future development of the LifeBoard would include developing it as a mobile app to overcome accessibility issues, digitizing the full suite of Life Tools and developing dashboards to improve the aggregating and reporting of data across programmes. We know that LifeBoard needs significant development and investment to be fit for purpose at scale but feel that with this it has the potential to be a truly transformational tool for workers, families and Local Authorities.

Part 2:

Scaling Life – the Case Studies

Whilst the Life Programme is rooted in the practicalities of specific families and communities, our intention has always been to design an approach that might be replicated in any context.

To this end we have extended our partnerships in order to learn from different contexts and we have underpinned our work with a measurement framework that can both track family progress and serve as a benchmark for comparisons with other initiatives in the field.

The Life Programme Measurement Framework

The Life measurement framework collects cost saving data, metrics on the capabilities fostered within families and we ask our partner authorities to collect standard outcome data around our families in order that we can make comparisons with outcomes from other approaches. A fuller explanation of our measurement framework and our capability measurement tool can be found in Annex C.

Collecting data has proved to be possible but difficult. Some of our partner authorities are reluctant to share data between services and with us, even in anonymised form. It has been a challenge therefore for us to collate comprehensive and comparable outcomes data across Life Programmes.

Capabilities are notoriously hard to measure and our own early capability measures were not robust enough – the Participle framework was re-interpreted by local Life Teams and families, which led to challenges in capturing the data.¹³ Our initial capabilities measurement framework was purposefully qualitative with key indicators embedded in the LifeBoard as open spaces for team members to identify examples of how family members were developing their capabilities. This gave us a rich qualitative data set with which to develop a more robust capability measurement framework and we have designed new tools to capture the data and provide clearer guidance around the capabilities model. However, these improvements have not been in place long enough to yield data. The LifeBoard, designed to simplify the collection of data, has also faced challenges as previously discussed.

¹³ Nussbaum herself comments: 'The difficulty is that the notion of capability combines internal preparedness with external opportunity in a complicated way, so that measurement is likely to be no easy task' [ibid 2011; p61]

Life HQ: a structure for scale and replication

In March 2011 Participle established Life HQ as a Community Interest Company, with the aim of expanding and developing the Life Programme through a further series of pilots in new locations. Our partnerships to date have been based on a two-year engagement during which Life HQ supports the development of a local team who work with the first ten Life families. We received scaling support from the Social Enterprise Investment Fund (SEIF).

Life HQ is a small team responsible for supporting Life locations with the operational set-up of Life Teams, including the recruitment and initial training of the Life Team, the establishment of measurement processes and technology, participation in a multi-agency steering group and on-going support and guidance at operational and strategic levels. Based at Participle, Life HQ draws on the expertise of Participle's senior management team, innovation process and capabilities approach. Life has worked best where it has been given the breathing space to establish a different way of working but has been integrated within the local system, with clear lines of local management and oversight and open, committed and collaborative relationships at all levels.

The case studies which follow have been written in collaboration with, and the permission of, our partner authorities and include some early outcomes data that our partners have collected and agreed to share.

2.0 Wigan Life

“Unless we begin fundamental reform of public services the outlook in this age of austerity is grim indeed. We need to face the challenge of reducing dependency before we can make sensible savings in public spending.

I became aware of the successful work with troubled families of Participle in Swindon and, when I learned they were looking to test their model in other Local Authorities, was keen they came to Wigan. I was hopeful of early results but the Participle model builds firm foundations to ensure success is sustainable. So when I recently visited our joint "Life Project" in the most disadvantaged part of Wigan, I was a bit apprehensive. I need not have worried. The presentations by the multi-disciplinary team followed by the local families who were engaged showed how much their lives had been turned round. Not only had the project achieved better outcomes but the interventions were less expensive. It really was saving us money. We are expanding the work of the Life Project into other deprived parts of the Borough on invest-to-save funding.

I was proud of the input of the Wigan members of the team but, without the expertise, support and encouragement of Participle, we would not have been able to make these improvements as easily. It has been a very positive partnership and I hope it will continue as we tackle other areas of reform”
-- Lord Peter Smith, Leader of Wigan Council

Wigan is one of the largest largest metropolitan districts in England with a population of about 300,000 people. Once home to the industrial revolution, Wigan is now a vibrant and much-changed borough but still has significant areas of deprivation; a fifth of Wigan’s children live in poverty and in the ward of Wigan South child poverty figures stand at 30%. It was here in February of 2012 that Wigan Council and partners turned two converted council houses on the Worsley Hall estate into a community hub to launch their first Life Programme.

An open recruitment was held, with briefings for over 100 staff across agencies in order to attract frontline workers from a wide range of backgrounds who would be truly committed to working in the Life way. The initial Wigan Life Team comprised a manager seconded from early intervention and prevention, a nurse from a youth offending institute, a positive activities for young people worker, a housing officer and a part-time data lead from the Council’s business transformation unit. A police officer, a parenting worker and a residential worker from social care later joined them. Most recently, as part of a partnership with the local children’s services team, one of their social workers has joined Life and will be case-holding Child in Need plans for Life families as well as providing advocacy, advice and guidance on Child Protection plans and safeguarding issues.

All ten families who were invited to join the programme accepted the invitation. Unlike many statutory agencies, the team have engaged and worked with anyone who might have an impact on a family’s ability to change, from grandparents and adult children

through to ex-partners. This currently comprises 75 family members; 43 children and 32 adults.

Wigan Life is run from the Life House, which is within walking distance of all the families on the programme. The Life House is two council houses knocked together, with a garden and no signage marking it out as a government office. Inside, as well as one-to-one meeting rooms, there is an open-plan kitchen and living room and an open room with a pool table upstairs.

It has become the fulcrum for families who feel able to turn up there in a crisis; they have held birthday parties there and also help garden, decorate and cook with the Life Team. It has also acted as a safe meeting space for parents not allowed unsupervised contact with their children.

The garden space was one of the early catalysts for family change and sparked desire and motivation in families to clean up their own environments - starting with the external before the internal. A team effort of family and Life members working together made this a reality and set the scene for the working relationship. Families talk about building very different relationships with the Life Team to those they're accustomed to having with other service professionals. They talk about strong relationships of both trust and challenge, in which supportive but also difficult conversations can take place.

Wigan Life reinforces how important not only family but also staff engagement and commitment is to Life's success. The Wigan Life Team embody the qualities of dedication, empathy and willingness to drop professional distance that we ask of all secondees. The manager is a particular asset to the programme - leading by example - and demonstrates the importance of strong local leadership. She knew the local community well and is committed to the Life approach and making a long-term difference to the lives of local families in chronic crisis.

Wigan spent 100% of their Community Budget funding on Life; so the programme's focus was very concentrated on setting up the Life Team within the system, as part of a broader plan to streamline and re-model service provision for families.

Life sits at the 'crisis-and-social-care' end of the family support spectrum next to the Gateway service: Wigan Council's redesigned multi-disciplinary, early intervention service for families of 0-19 year olds. It is now part of the core service offer for families in Wigan South and has been clearly integrated into existing systems including the Council's Troubled Families programme, locally called Confident Families, with whom it shares a steering group, so key Life learnings will inform this programme of work.

The success of Wigan's first Life Team means that Wigan are replicating the community hub model in another area of Wigan. A house has already been sourced and a team is being recruited. The Wigan Life Manager will work across both sites with senior team members appointed and Wigan have clear aspirations for the Life model to expand more widely across Wigan.

**WIGAN LIFE
OUTCOMES***

1-YEAR SNAPSHOT
2012-2013

50 FAMILY MEMBERS

£132,802
SAVINGS**



20%
of families with
severe housing
problems has a rent
payment plan in place



↓ 35%
decrease in
families with
school attendance
issues



↓ 33%
reduction of
families living in a
household with
domestic abuse



↑ 80%
of Life families
addressing
housing issues



↓ 8%
decrease in
children with
poor or no school
attendance



↓ 22%
reduction in children
with Child Protection
(CP) or Child in Need
(CIN) plans



↑ 25%
increase in
families
developing skills
to be work-ready



60%
of families with CP
or CIN Plans
de-escalated their
service involvement



↓ 50%
reduction in
families with
reported crime
or ASB



↑ 100%
of families have
increased their
attendance at health
appointments



↑ 75%
increase in
families seeking
support for
mental health or
substance
misuse issues

*For more detailed outcomes data, please see the annex.
** Estimated cumulative cost reduction to date

Some reflections from Wigan Life Team members:

“Confidence and self-esteem are the first things as nothing else much changes before they do...it's about seeing things in people that they don't see in themselves”

“Change comes from a place where you want to change and know how or believe it is actually possible”

“It's about containment really – these families haven't got anybody else to hold them. Modelling behaviours and new ways of dealing with problems are also really important”

“What we are doing is supporting family members to develop – developing their awareness of what is going on and developing their ability to get to the right place”

“Families still doubt us even after two years of constant and consistent support - there is so much suspicion and mistrust in these communities”

“The time element is huge – working intensively, flexibly and creatively with families requires low caseloads, in many ways it's that simple”

“This is not always about changing lives, sometimes it is about managing risk and knowing what's good enough - but there's a big difference between managing risk and ticking the boxes that say you've tried to manage risk...we're lucky – we don't have to deliver a set service, we don't have waiting lists with 4,000 people or huge caseloads”

“Some of the parents we work with just aren't capable of doing some things and in some cases we've had to escalate to child protection plans as they've always avoided intervention do need it”

“Some of our addicts have shown no change in two years – change happened when we escalated it”

“Exit should be an open door - we need people to feel confident that they are where they want to be and feel able to deal with things themselves”

“In an ideal world, there would be a Life Team in every locality – they would support families that are stuck in services who no-one knows well enough to know what's actually going on”

Wigan family experiences

For reasons of confidentiality all names have been changed.

Sarah's story

When she was told about the Life Team, Sarah felt like she'd hit rock bottom. Sarah had first been involved with children's services when she gave birth at 17. She was now 24 and her 4 children were all on child protection plans, she was in an abusive relationship and the family were living without gas and electricity; "I was being threatened all the time with my kids being taken. I have always tried to do the best I can and sort of try to get them off my back but I wasn't getting nowhere to be honest. They wasn't listening to what I wanted and my views, back then." At meetings she became very upset and had a hard time expressing herself. In the midst of this, she found out she was pregnant again, which terrified her; "I was petrified...and scared my kids were going to be taken off me."

The Life programme started for Sarah with an outing to the beach with her children and the Life Team; "That was the first time... the kids saw that I took them on a day out and that means a lot because I've always wanted that and I've never been able to because I don't drive and because I've got so many children". After this positive start, Life Team Member Jess began to visit Sarah but she was still very wary. Over time, as Jess shared some stories and difficult experiences from her own life, Sarah began to trust her and open up; "It makes it much easier when they've told you about their life and what happened to them; you can begin to tell them what's going on with you."

Eventually Sarah felt like she could share her biggest fear: "Well obviously [Jess] could tell I was pregnant...she asked me and I said no... I was seven and a half months along... I just began to believe she really wanted to help me. She could see how down I was. I admitted to being pregnant and she said "Thank you for telling that and opening up to me. I'm going to help you. Don't worry, no one's going to take away your children away from you.' I hadn't heard that before. She said 'Whatever you want to do with your life, I'm here to help you achieve that. You are doing brilliant with your kids.' It reassured me. That's when I started opening up." Jess talked to children's services about the pregnancy when Sarah was too afraid to do it and when the baby was born but the gas and electricity were still off, Jess arranged for the baby to stay with her grandparents and dealt with the electricity company to get the power back.

Over two years of on-going support for her and her children, Sarah has gradually built up her confidence and made many big changes. She is no longer involved with children's services and has recently ended her relationship and moved into a refuge with her 5 children; "I see more now. The ways my partner were like, with abuse, certain traits that I wasn't seeing...you think it's normal because it's an everyday thing, but I'm more aware now of what he was doing, and how to get out of that situation". Jess has also helped her overcome a fear of the dentist to get her teeth fixed, which were badly damaged and made her self-conscious. Sarah calls the team a "lifeline" and says "I'm more settled, and in a better environment, and the kids are happier. This is all due to Life... They helped me achieve everything I wanted to achieve, for myself and for my

children.” She would like to find a stable home and maybe go to college; “I’ve learnt that I can provide a decent life for my kids and I am doing the right thing”. Although she still wants and needs support “I can see that time coming when I will, you know, stop doing the work with the team. It’s just a work in progress I think, it takes time”

Charlie’s Story

When first encountering the Life programme, Charlie was homeless, in and out of prison, and had been taking drugs for 22 years. He only had contact with the rest of his family “when I needed something.” The Life Team had been working with Charlie’s ex-partner and children and Charlie’s youngest son told the Life Team that he was really worried about his dad. He had been missing school to go and look for him on local estates. Life Team Member Joe decided to drive around and see if he could find and talk to Charlie; “I got in the car then he brought me [to the Life House] and gave me a cup of tea and a slice of toast and we just had a chat and he told me that my sons were worried about me and things like that, because I looked a state... I was near death. Plus, I had the police looking for me, I was in debt up to my eyeballs. It wasn’t a life you wanted to live, simple as that. When you’re a drug addict, people just look at you like you’re the scum of the earth and nothing else. He didn’t do that. He just sat down, had a chat with me and said if you want we will help you.”

Charlie was hiding from the police having broken the terms of his probation; “[The Life Team] just said ‘Listen, just hand yourself in, get it done and we will sort it out when you come out. We will be there for you when you come out’- and they were. Joe was waiting at the gate for me with my son...I got a card, my first father’s day card in there.” When Charlie was released, he was facing a seemingly impossible wall of challenges – he was homeless, had no source of income and was still addicted to drugs. Charlie’s Life Team Member “took me straight to DSS and got me signed on... then straight away we went to the housing place, got me signed on the housing register, got me a bed for the night at a homeless shelter...then he took me for something to eat and just stayed with me for the whole day really.”

Charlie cites the steadfast support he’s had as the key to being able to start changing his life; “If you’re stuck, he will just have a little word in your ear and it’s just a big difference having someone there to support you. Knowing someone’s there to support you...it just makes a big, big difference”. He completed a detox and was linked up with the Community Drugs Team. The Life Team also helped him repair family relationships, making contact with his older daughter, who he hadn’t seen in 20 years, and his grandson. He was shown how to use a computer and can now speak to his family who are all abroad. Charlie ended up moving back in with his children and ex-partner for a while but has just got his own house, which he decorated himself and says is “Heaven. I walk in my door and I think, this is mine. And I’ve done this.” His sons have joined him and are no longer embarrassed to bring friends home.

Two years in and he describes his time with the Life Team as “Quite a journey. Good journey. Helpful journey.” Although the Life Team are still involved with the family, Charlie has less contact with them now as feels “I’ve moved on with me own life and

things have got better.” Things aren’t easy for Charlie and his children. There are daily struggles - to stay off drugs, to sort out family relationships, to find work - but his life has improved immensely. Of Joe, Charlie says “[he’s] been through a lot with me. And he’s been there every step of the way. I wouldn’t be where I was if it wasn’t for him, I can say that with my hand on my heart.” Of the Life Team, his view is simple; “If it can do this for me, you know, and I was a hard case, believe me. From where I was and where I am now. If they can do this for me, they can help a lot of people.”

Grace’s story

When Grace was told about the Life Team, both her eldest daughter and son were involved in anti-social behaviour and crime and were not attending school. A mum of 4, she was still in a relationship with the father of her 9 year old child but it was a difficult one; “I went through domestic violence, mental violence, mental torture. The kids not going to school, threatening me, bullying me. It was awful.” Grace had an extremely difficult childhood, having experienced abuse from her parents and then again when she was in care. She went on to have abusive partners and spent time in a refuge when her children were young. She didn’t feel that anyone had done enough to protect her and was very wary of services; “Growing up in care, I didn’t trust social services... I put up a big front and taught my kids how to put up a big front too... I’ve moved house twenty-two times so they couldn’t find me.”

When Grace heard about the Life programme, she was extremely suspicious. It took her months of low-level engagement before she very slowly began to trust the Life Team. “Instead of pushing me and all that pushy, pushy, they let me come to them. I know it’s taken a long time.” She was surprised when they kept visiting, despite her frequent evasion of contact but eventually was faced with an ultimatum; “they turned round to me and said, right if you don’t engage we’re gonna have to basically get rid of you. And I thought oh god, I need help. I can’t hide this secret anymore, it’s too much hard work. So I told them.” Far from the reaction she expected, Grace found that “the more I told...the more help I got.”

Although Grace began to trust the team and allow herself to ask for help, it was difficult for her to change old patterns and get beyond the feelings of fear and shame she’d felt throughout her life: “I thought ‘Why are they not looking at me as if I’m a dirty cow? Why are they not looking at me as though I’m filthy?’” Initially Grace thought it was too late - her children were nearly grown and she said that they should have been on the Life programme years ago. She recognised that the domestic and verbal abuse her children had witnessed had a big impact on their current behaviour. The Life Team supported her to become more assertive with her children and put clear boundaries in place; “I don’t want to be walking on eggshells anymore with my family. I want that to stop. I want to be in charge, not my kids.”

To her surprise, the Life Team Member she has worked best with was a police officer; “but [she] doesn’t come in my house and she’s a cop. [She’ll] come in and she’ll just sit in my house and have a brew....I can tell her anything... she’ll come to meetings with me at school. Stand up for me, saying ‘She’s trying her best.’” There have continued to

be many challenges and crises in the two years since Grace first met the Life Team. Sometimes they have had to bring in other services, but they always let Grace know; “I’d sooner them be straight with me like that than sly... You’ve got to have straightness, you know, it’s not nicey nicey nicey. It doesn’t always work.”

Grace ended the relationship she was in and is now with a partner she feels is more supportive. Her children are attending school and she is keeping up with the terms of the parenting contract. She has completed a teenage parenting course and has been linked in with a project that helps people into work; “I’d like to work with women or men really, who’s been through DV. Or kids who’ve been through abuse.” Her family are about to exit the Life Programme and Grace is feeling positive about the future; “I’m a lot stronger now than what I were...I think I can sort it out now, because I’ve got help and I can trust who I have got help from.”

Jill’s story

Jill has three children aged 4 to 18. Her eldest has muscular dystrophy and has used a wheelchair since he was 10. She was struggling to cope with the additional demands of caring for him and her other son was also struggling to deal with his brother’s condition. He started to go off the rails, getting into trouble with the police and was eventually given an ASBO. There were lots of services involved with the family but Jill found it all overwhelming; “all different people, it was a nightmare. It was horrible. I just felt like I was repeating myself all the time...I felt like I couldn’t get me word across to anyone.”

Feeling more harassed than helped, Jill began failing to turn up for appointments; “It was just a mess. Everything was just upside down. Things would start stressing me out...then as soon as everything started to get on top of me, I’d just leave everything. I’d just ignore it all.” Although Jill’s parents lived nearby, her dad was ill and she felt that “she didn’t really have any local support.” Her son’s condition deteriorated and he needed an operation. Although her parents lived nearby, her dad was also ill and she “didn’t feel like I had any real support”. Jill began to drink and asked to be referred to a drug and alcohol service. When she couldn’t always attend the sessions, professional concerns escalated and a child protection plan was put in place. This was a huge stigma for Jill; “I don’t do anything apart from concentrate on the kids so for me, it was horrible to be on the register.”

For Jill, what the Life Team did was pretty simple but no other services ever really had; “they looked at everything what needed to be done and seen how they could help me with it.” Simple actions like getting Jill a diary and helping her plan for appointments, as well as actually attending them with her or looking after her daughter while she did, made a huge difference. “For me, it’s more practical things. But all the practical things built up with mental things. With coping with things, you know? I’m not as stressed out...so I’ve not blocked everyone out.” The Life Team also advocated for Jill in meetings and built her confidence in communicating with services, ending the cycle of non-engagement and escalating professional concerns; “I think professionals can like get their voice heard better, as it was a nightmare getting anything like that before – they

wouldn't listen to me at the doctors or anything...I feel a bit more like they listen to me now."

Jill says that her children now have a lot of trust in the Life Team but they were initially wary, as they "didn't like being questioned so much [by social services]...but with the Life project, they talk to them, they don't question them." One team member worked one to one with Jill's teenage son and got him involved in their boys group. He has not got into trouble with the police since. The Life Team's in-house drug and alcohol support worker has also been able to help Jill get on top of her drinking. The Life Team's ability to work as a joined-up team around the family has generally made things much clearer and simpler; "all the services I was involved with before – this has all been put into one here, it's just slotted into place...I only see them as much as I need to – it's not confusing."

Although the Life Team usually come to her, Jill likes knowing that she can pop in to the Life House if she needs to; "sat here, I feel relaxed...I don't feel that stigma with Life like I did with other services...the kids think the Life Team live here!" Although she has only been working with the Life Team for six months, Jill feels that the team's support has enabled her to get her life back on track; "I'm a lot happier now cos I'm not as stressed. I've been helped to do things. I'm more organised with my life. Kids are happier cos there aren't loads of professionals coming in. I'm more relaxed and comfortable."

Anna's story

Anna has 2 children, Dan 14 and Tina 10. When she got involved with the Life Team her son Dan, who has ADHD, wasn't attending school regularly and had been given an ASBO. Both Anna and her partner had problems with drinking and there was a history of domestic violence, which had been witnessed by her son in the past. Anna was facing eviction and a fine as a result of her son's behaviour and truanting and "I just didn't know where I were, I was sick of police coming knocking on the door all the time."

Although she "had different agencies coming and going in me house all the time," none seemed to be able to offer much actual support. Social care told Anna "there's just anti-social behaviour, there's no real risk of harm". She was then referred to an early intervention service and found her adviser helpful but "they're just so busy so they just come once and then you don't see them for ages." They referred her on to a parenting programme "but that didn't work for me – they didn't talk about children with ADHD...when they said to take away his playstation to discipline him, he trashed his room." Eventually, "it all just got on top" and Anna got help to go into detox. When she came out, someone said "there's a place called Life open and it'd be really good for your family and I thought - yeah anything, gimme some support." Rather than lots of services coming to her about different issues, Anna is now able to access all the services she needs – health visiting, alcohol support and a social worker – in one place. What's more, the Life House is just around the corner from where she lives "which is just so helpful."

What Anna most values about the Life Team is that they "never come into your house and tell you what to do. They don't boss you. It's support if I need it and I just feel secure

I think.” Another big difference is that “there’s always somebody that always sees ya. And they actually come with ya.” Whether it was driving her son to a hospital appointment that would’ve taken two buses, waiting when he came out of Court or spending the morning with her as she tried to get him to go to school, their ability to listen but also to provide intensive practical support has been a lifeline; “If it weren’t for them, I would’ve just given up.” Whereas other agencies “have never seen what it’s like and probably thought, it wasn’t that bad “[the Life Team] saw, they know what you’re going through.”

Her son has also built a relationship with Life and “knows if he’s anything on his mind, he can come here himself and he has done...he comes round and says, can I see [a Life Team member]? He goes to a boys group here too. He likes coming.” Since he got an ASBO, there have only been a couple of incidents of ASB. Her daughter is “no bother” but has been struggling with homework so is having some one to one sessions to help her keep up with that. Anna has stayed away from alcohol (“I don’t want to go back to drinking”) and the Life Team’s alcohol worker has also helped her partner and Dan’s dad stop drinking too; “I get on better with his dad as we used to argue a lot but now we drink less and his behaviour is better...my partner has calmed down too and is a lot better.” They have also linked the family in to a raft of activities in the community. Dan goes to a boys group (“He likes coming”) at Life and also attends football sessions (“they don’t mess about there and it’s good to know he’s not on the streets.”) Tina attends a local dance club and Anna has been going to a craft group and doing meditation at the Life House.

Anna now feels much more positive about the future and can see that she won’t always need the support of the Life Team; “I feel like, it’ll be alright...I feel a lot better than I did, yeah I do. I don’t know if we’ll be working with [the Life Team] in 6 months but in a way, I hope we’re not and we’ll just look forward.”

Kelly’s story

Kelly is 38 and has three children - a daughter aged 10 and two boys aged 15 and 18. Things started to go downhill for Kelly after her sister died. Kelly had been very close to her sister and felt grief-stricken after her death. She started drinking as a way of coping and this gradually got worse and worse; “I was drinking a lot when my sister died, every day really.” Kelly wasn’t close to the rest of her family and her only friends on the estate where she lived were also daytime drinkers. She was drinking so much that she “didn’t realise the effect it was having on [my children], I just wasn’t thinking about it.” Social services got involved then the Gateway service, who then told Kelly about the Life Programme.

For Kelly, Life is the only service that has been able to provide the support she needed. It is the combination of practical and social support with specialist help for alcohol and mental health problems, provided all in one place, that she feels marks Life out from other services. Her Life Team member has helped her manage her anxiety by going with her on practical errands; “she goes shopping with me and that...she’s just given me a lot more confidence.” She has also been seeing a counsellor and an alcohol worker at the

Life House and has reduced her drinking considerably. Kelly's daughter also comes to the Life House to do activities; "my daughter was affected by the drinking as well and the Life Team work a lot with her about that." Although her sons haven't engaged with the team, the door is always open.

Kelly describes everyone in the Life Team as "caring and understanding" and says that "they don't judge you or nothing like that." This felt different to other services she had worked with; "when I had a social worker, you could just sense it, it made you feel scared. You could just tell a difference, and it proper scared me". Instead, Kelly looks forward to Life Team visits; "It's good that really, knowing that they are coming...not in a bad way but in a nice way."

Kelly thinks "other services could learn from this – the judgement, the caring. They could learn summat off Life. Be a bit more passionate I suppose that would be better. It's been solid all the way through." One of the things Kelly has taken to the most is the Life Team's use of Tools to help her reflect on her life and help her plan for the future; "They're good, I like them charts. When you read it back, it shocks you kind of, your actual feelings coming out." She really enjoys tracking her progress as "you can see things have changed, you can tell from looking through the charts, they've changed a lot...when I first come it was about a 1. I think it's about a 6 now, I'm getting there."

Kelly sees Life as "more of a support network, you know. No-one really supported me before, that's why I found it difficult to stop drinking... sometimes I just pop in here for a brew, you know?" As well as the impact on her health and parenting, she feels that "we've got closer as a family." Kelly is not close to her extended family and in some ways feels that "The Life Team's all I got." But she stresses that the Life Team have tried very hard to reach out to her family and even brought her mother and sister to the Life House to ask them to support her more over Christmas, as this was the most difficult time for her following her sister's death.

Kelly does worry about the Life Programme coming to an end. She is very clear that she still needs and wants their support but acknowledges that she is moving forward gradually; "they're helping me get to that place now but I've still not fully got there... it changes me just by being here you know. Eventually I think that will help keep me on track."

2.1 Lewisham Life

“Our aim for Lewisham’s Community Budget was to align and pool resources across our partnership to continue to develop effective and efficient ways to support families with complex needs. We were particularly keen to learn about the experience of the most complex families in our Borough and partnered with Life HQ in order to work with a small number of families in crisis. We have valued the opportunity to understand the needs and experiences of these families and are capturing and utilising the learning from the Life Programme and the Life Team to embed this across our early intervention and family support services for children and families.”

-- Warwick Tomsett, Head of Commissioning, Strategy and Performance, Lewisham Council.

Lewisham in South-East London, is the second largest inner London borough and in 2011 was home to approximately 275,000 people. Lewisham has a slightly younger age profile than the rest of the UK. Births in Lewisham increased by 34% between 2000/01 and 2009/10 and will continue to increase at a similar rate for the next five years. Deprivation is increasing in Lewisham. The 2010 Index of Multiple Deprivation ranked Lewisham as 31st out of 354 Local Authorities in England compared to a rank of 39 in 2007. 35 (out of 166) of Lewisham’s super output areas are in the 10% most deprived in the country, and 85 are in the 20% most deprived in the country. It is estimated that 20,355 children (aged 0-18) live in poverty in Lewisham. The 2011 census shows that 36% of all households in Lewisham with dependant children are lone parents.

Lewisham has been Life’s most challenging location. Difficulties in Lewisham have underlined both the challenges and the importance of fidelity to the Life Programme if it is to be effective, in particular the importance of following our set-up process.

Lewisham started their work from the premise that they already have a well-embedded approach to early intervention and targeting families in need and wanted to ensure that the Life Programme worked as a key partner in this approach. One impact of this was that instead of following our recommended approach of a multi-agency nomination process, children’s social care’s senior management provided a shortlist of families who they felt met the Life criteria.

The Local Authority also ran a different local audit process to that suggested by Life HQ, which seeks to identify if families are open to change and draws together a long-list of families should those first invited fail to respond and engage in the programme. In practice, in contrast to Wigan, Swindon and Colchester, a number of families refused the invitation, disengaged or became unsuitable (e.g. moved away from the area) and this meant the team on the ground had to wait several months for more families to be nominated.

The Life Team was drawn from children’s services and is led by a manager with a background in social work and training, two social workers seconded from family

support and intervention, an inclusion worker, a youth offending worker and a children's centre worker made up the rest of the team. The team do not have a 'home' but are housed in a centrally located children's centre after a stint in the central social care offices. They are working with families across Lewisham, with most work taking place within families' homes and the community rather than the centre. Lewisham felt a central location would not have been appropriate for most families to travel to, and would not have met the need that is dispersed across the borough.

The Life Team have worked with 7 families and 32 family members (8 adults and 24 children). Despite the clear challenges, a number of benefits of the Life approach have still accrued: strong relationships have been built with previously resistant families who have engaged and often shared more information than was identified by other services, helping to address a number of issues such as undiagnosed mental health problems and additional safeguarding concerns. The Lewisham Life Team has been dedicated, resilient and resourceful, for example developing and adapting new tools to use with family members including those with learning difficulties. Team members cited the whole team approach and the supervision provided as being particularly valuable in their work with families and their own personal and professional development. Our key learning remains that Life's selection and engagement processes are vital to the programmes success. Cohorts must be high-cost, high-need, at-risk, and chosen through multi-agency referrals.

Lewisham family experience

For reasons of confidentiality all names have been changed.

The Driscoll family have a long-term history of chronic neglect. They were involved with social care, education, health and targeted family support services. Single mum Sara was agoraphobic and suffered from anxiety. The family home was in a very poor condition and the circumstances were having a profound and negative impact on her ability to act as a good parent to her four children, who also had considerable additional needs. There were concerns for the children's health (one child hadn't seen a GP for six years, another needed urgent dental work), education and life chances: her two eldest children were NEET, others had issues with truancy, while the youngest has a learning disability and attends a special school. It took two months of weekly visits from a Life Team member, who would sit on Sara's doorstep with a thermos of coffee, before Sara even let her into the house. The children and Sara have now developed really strong relationships with team members. The Life Team helped the eldest children enroll in college courses and the youngest daughter's school attendance has improved. Targeted Family Support and the Child in Need plan have both been closed and Sara is starting to identify the changes she would now like to make in her life.

LEWISHAM LIFE OUTCOMES*

1-YEAR SNAPSHOT
2012-2013

32 FAMILY MEMBERS

£85,088
SAVINGS**



71%

families addressing their
issues with rent arrears
and finances



10%

adults has actively
sought work and
found part time
employment



↓ 29%

reduction in
number of children
subject to Child
Protection Plans



3

eviction orders
were stopped



66%

of children have improved
their school attendance
where previous issues
existed



↓ 36%

decrease in family members
reported to be involved in
crime or ASB
(including four children
reducing ASB and one parent
attending classes/counselling)



2

children pursuing
further education /
employment
training

*For more detailed outcomes data, please see the annex.

** Estimated cumulative cost reduction to date

2.2 Colchester Life

“I chose to bring the Life Programme to Colchester as I felt that it offered exactly the kind of innovative and pioneering approach we needed - enabling a frontline team to work intensively with families, break away from bureaucracy and spend more time focused on families’ aspirations and capabilities. I was impressed with Participle’s track record of setting up Life Programmes in partnership with other Local Authorities. We have brought together a strong multi-agency senior team who are committed to learning from Life and ensuring that we really do change our cultures and systems to bring about the best outcomes for families. Even though it is early days in Colchester, we are already capturing and acting on the learning from the first five families on the programme and identifying ways to sustain and mainstream this approach in the future.”

-- Ann Hedges, Executive Director, Colchester.

Colchester is the newest Life project, established in May 2012. It is also the first Life Programme that is being coordinated at district rather than county or unitary council level; Colchester chose to invest its share of money allocated by Essex County Council for pilots around families with complex needs in Life as a tool to change lives but also to innovate around system change and to explore new ways of partnership working.

Colchester’s model involves partners from the voluntary sector – two of the five-strong team are seconded from local voluntary services (a manager with a background in drug and alcohol support and housing and a frontline worker with prior experience of the army and mentoring). Other team members come from social work, housing, community nursing and health. The team is located in a former resource centre next to a school in a deprived ward of Colchester. Office furniture has been removed in favour of more family-friendly space.

Whilst still in its early stages, Colchester is already looking at ways to sustain the model in the long-term, including how to work with 8 new Family Solutions teams being set up by Essex County Council as part of their response to the Troubled Families programme, although it is unclear at this stage whether Life will continue alongside or as part of this initiative.

The team are now working with 5 families and 26 family members (comprising 19 children and 7 adults). All of the families nominated have a high level of current need and risk, including 2 families who were facing impending eviction. They have been supported through the process by the Life Team and are now both in new homes. The project sponsor and chair of steering group visits the team bi-monthly to identify opportunities for the system to work differently - a recent example was developing a different service response to an evicted family.

Some reflections from Colchester Life Team members:

“We build up a good relationship with families – it’s about trust and having the relationships in place that enable challenge. It’s about empowerment”

“Some families we thought were engaged weren’t really engaged, we’ve had to deal with that...people say they want to change but they actually can’t always handle it”

“There have been clear pockets of success but more about the children and teenagers – a couple of young people have really changed, they’ve responded well to workers, gone to college, got jobs, they seem really empowered – but it took a long time and a lot of persistence”

“What we’ve probably been to an extent is their missing parent – we’ve given them coaching and guidance, worked on applications, helped to get to exams...it’s been about continuity, keeping our promises – and in some cases, it has given them a glimpse of life outside their family”

“Having people from different professional backgrounds works really well as they can share insights and experiences to feed into the work...I have never shared so much about information, the work, myself – anywhere I’ve worked...we’ve been able to learn so much from each other”

“It’s about getting families to use local facilities and be part of the community – they don’t leave the house – we can offer that practical support to do that, other services don’t have the time“

“Professionals are only aware of fraction of what happens in family life. The amount of time [spent] with families highlights complexity and risks that other professionals don’t see”

“Live Supervision has fed in ideas and strategies and different ways of approaching things and asking questions – e.g. formulations, building confidence to challenge...the reflective discussion is non-judgemental and empowering and has helped us to develop and get understanding so that we can then use that with families”

“I came into this project because I’m passionate about working with vulnerable and chaotic families...when I see it’s worked for them, that gives me satisfaction and hope”

Colchester family experiences

For reasons of confidentiality all names have been changed.

Claire's story

Claire is a single mother aged 44, who lives with her 19 and 18 year old sons and her daughters aged 10 and 8. She has another daughter who is 15 and in foster care. Her older sons have come back to live with her after being in care as teenagers. The family have a very long history of social care involvement, domestic abuse and neglect. When they got involved with the Life Team, the younger children were on child protection plans and had poor school attendance and the boys were spending all day, everyday at home with no plans or prospects.

The Life Team have worked intensively with the family, supporting the boys with health issues including substance misuse and helping them to take part in positive activities such as football and horseriding as well as supporting the youngest son to apply to and attend college. They have also worked with the girls in and out of school to improve their school work and attendance and have worked a lot with Claire on boundaries, parenting and managing the family finances. Claire says that she “didn’t have much of a support network before as my parents live far away and some of the friends I’ve had haven’t always been the best for me.” She feels that the one to one support from a Life Team Member has “taught me how to deal with things better and let me think about and talk about myself, I’ve never really had that.”

The family liked the fact that they could all work with someone different; “it’s good to have different people working with kids - they all have their own needs and issues,” but also the fact that the team did a lot with them together as a family. They started the work with a very practical family activity – painting and decorating one of the bedrooms – but also did some fun activities “that other professionals would never do,” like playing top trumps together, going crabbing on the coast or going roller-skating. Claire felt that this really helped the whole family get to know and trust the Life Team as well as bond more as a family. Although she didn’t want to talk for her sons, she could tell that they have built up positive one to one relationships with Life Team Members who help them with practical things like getting to appointments as well as helping them think about their past experiences and also their hopes for the future.

Claire feels that family relationships have improved but recognises that there is still a long way to go and things have not been plain sailing – with the boys getting into trouble with the police and struggling with their drug use. Claire feels that through working with Life she has realised that sometimes her guilt about what happened to her children before has sometimes made it harder to parent her children now. She feels that other services haven’t helped with this, as they constantly focus on the past without, in her opinion, helping them achieve a different future: “We’ve all made mistakes under pressure but Life Team don’t judge you for them... Life is totally different to other services like that, they don’t push you but they treat you as a family – there’s a different atmosphere.”

Sadly, after a period of relative stability and some really positive progress, things have started to get worse for the family again, with the Life Team raising serious safeguarding concerns. Repeated social care referrals were made but not accepted and so the difficult decision was made by the team to close the family to the Life Programme. They were then re-opened to social care and the Life Team hopes these issues can be addressed so that some of the progress they made can be sustained.

Rita's story

Rita is a 44 year old single mother who lives with her 75 year old mother and her 7 year old son. She also has a 14 year old son who lives with his father. The family have a history of domestic abuse and social care involvement. When they got involved with the Life Team, the family were living in one room in a relative's home after their house had been repossessed and Rita was experiencing mental health problems. Her son had behavioural problems that she was finding it hard to manage. Rita remembers the Life Team visiting and thought "it sounded good, I wanted to give it a chance."

For Rita, a real asset of the Life approach is working as a team around the family as everyone brings something different, professionally and personally. Rita chose a team member who could help her with housing and benefits issues but another team member helped with bedtime routines and behaviour and another showed her how to access benefits that she didn't know she was entitled to. They also did lots of activities with her son, many of which she says she hadn't thought of doing but now would on her own, and provided lots of practical support to help her manage his behaviour including accessing CAMHS.

Rita feels that her experience with Life is very different from her involvement with social care. Whilst she acknowledges that in the past she had let things get very bad and did neglect the home a lot, she feels that no-one acknowledged what she was doing well or how much she loved her children; "I just felt I was judged and I was the evil mother that wasn't doing anything for my children." Rita describes the Life Team as 'a support network' and values the relaxed relationship they have with the family; "they come round and make themselves at home...and they're not snooty – you can be yourself, get upset, whatever." She thinks a good Life Team member is hands-on, has empathy, the ability to listen and share their own life experiences and is persistent. She says that she has given them "permission to nag" and describes her chats with a team member as "covert counselling...they help without you really realising."

After a year of working with the team, Rita felt that she made some really positive changes and did not need the intensive involvement of the Life Team anymore. When asked where she would put her family on scale of 0 - 10 if 0 is the worst things can be for the family and 10 is living the life the family want to live, Rita thinks that they were a 3 when they first got involved with Life and they are now a 7. She is aware that she needs some support with her son's behaviour and to move to somewhere more stable, but has been linked in to services that can help with this. Rita thinks that the ending should be positive and a celebration of achievement and would definitely encourage other families to get involved.

Annie's story

Annie lives with her 16 year old daughter Kim and her 2 year old son. She also has two grown-up older children, a 15 year old daughter in foster care and a 5 year son who lives with her ex-partner. The family have a long history of involvement with social care, domestic abuse, debt and rent arrears. When they got involved with Life, Kim said that she wanted to be taken into care and leave school. She had no friends and would spend all her time at home in her room, except for some violent outbursts that damaged doors and walls. The family had just been evicted due to rent arrears and property damage and Annie "felt like everything was closing in...until the Life Team came on-board."

The Life Team supported the family to make the move to the B&B they had been assigned, half an hour from Colchester. Annie found the eviction over-whelming and says that she wouldn't have coped without the wrap-around support of the Life Team. After a month of living in one room, the Life Team's advocacy and the intervention of the Steering Group, helped secure the family a flat back in Colchester. Although it took Annie a while to "really open up to [Life Team members] as I needed to really get to know and trust them, I do now." She has really grasped the opportunity, getting on top of practical issues such as budgeting and looking after the flat, putting routines in place at bedtimes and building a positive relationship with her older daughters; "You're thinking...what is it I want to do to make things better?"

Kim has also undergone something of a transformation. After initial reluctance, she bonded with a Life Team member over music; "you could tell the connection was there...she just knew who she wanted to work with straight away." She "has really come out of her shell," and is now a confident young woman attending an arts college, writing poetry and socialising with her peers. She also gets on a lot better with her mum; "[We] never used to speak, never used to sit in the same room but now we sit together in the evenings, she'll speak to me about things, she goes out with me into town, it's a lot better than what it was."

Annie feels that the Life Team are "always there if you need to talk to them" and their support has helped her feel more confident and capable; "To me, it's about being able to do things for yourself...I'm getting that way now and doing a lot more for myself." This contrasts with her previous experience of services who would "do something for a while then leave." Annie acknowledges that although family relationships have improved and the family home is more settled, they are not out of the woods. She is still having difficulties with her abusive ex-partner and does not feel safe as a result. She also recognises that "me in myself I'm not quite as good as the whole family, there's a lot of work to be done there."

Annie says that she and her family have a much more positive future as a result of working with the Life Team and she can see that they won't need them forever; "I've gone through ups and downs but I feel really pleased with how I'm doing - more confident, building myself back up...I'm doing a lot more on my own now so I think I will gradually get there."

2.3 Swindon Life's Development

“Life has been very important in Swindon in highlighting the need to build relationships with families and focus on building capability across all family members. It has been catalytic to help in implementing new approaches. Furthermore learning from Life and Signs of Safety has influenced the new corporate values Swindon has adopted under ‘Stronger Together’. We are now embedding our learning from Life, Signs of Safety and other programmes such as Family Nurse Partnership, into the Troubled Families Programme.”
-- Joy Kennard, Commissioner, Children and Families, Swindon Council

At the same time as working closely with Wigan, Lewisham and Colchester, Life HQ continued to work during 2011/12 with our partners in Swindon as they explored how to build on their learnings and take Life to scale within Swindon.

Five families have exited the Life Programme and three families have graduated from Life. They have built an exit plan and chosen a worker from the team, usually the lead professional from the Team Around the Child and Family, who checks in with them on a regular basis. In this way they are able to contact a single nominated individual in case of setbacks, such as job loss, and don't need to build a new relationship 'in the system'.

Swindon have chosen to embed Life principles and behaviours in existing children and families' services, encouraging their workforce to adopt a capabilities type approach in their existing work and specifically to grow a culture of co-creation.

The Life Team in Swindon has undergone a re-organisation over the last year with team members returning to their substantive posts or moving on to new posts and a slightly new skill mix coming into the team. There is still a PCSO from the police, a social worker and a housing worker together with team members with educational psychology and youth engagement background. The team is now working with up to 25 families who meet the Troubled Families' criteria. The team are also working to support the wider workforce through development and training sessions as well as sharing what has worked for families in the Life Team.

Distinguishing features in Swindon include:

- The Team is now working specifically with Troubled Families, and family plans therefore now have to be led by these criteria rather than family aspirations
- In seeking efficiencies, Swindon is bringing the Live Supervision function in-house rather than drawing on the advice of the Tavistock.

Participle recognises the pragmatism behind this less resource-heavy approach. It can only be beneficial at this stage of Life's development for different ways of embedding Life to be piloted and it will be interesting to continue to learn from and compare the different paths chosen.

SWINDON LIFE OUTCOMES*

1-YEAR SNAPSHOT
2011-2012

48 FAMILY MEMBERS
WHO COMPLETED A FULL
6-MONTH PERIOD

£510,000
SAVINGS**



↓ 60%
decrease in notice to
seek possession



↓ 16%
decrease of
young people
cautioned or
convicted of an
offence for the
first time



↓ 63%
reduction in
police call outs



21%
family members
attached with the
Work Programme
or with DWP
Families with
Multiple Problems



↑ 38%
children/young
people with
improved school
attendance



↓ 24%
reduction of
children/young
people not in any
form of education



↑ 19%
overall increase of
young people
attending
mainstream
education



9%
of family
members
sustained
employment
throughout the six
month period



93%
family members
registered with GP



71%
family members
whose scores
have increased
for well-being as
determined by
the Life Star



↓ 31%
reduction in
number of children
subject to Child
Protection Plans

* This data applies to families who have completed a 6-month period and were still in the programme in 2012. For more detailed outcomes data, please see the annex.

** Estimated cumulative cost reduction to date

Annex A: The Life Programme Framework and Fundamentals

Invitation

Most public service interventions happen at a time of crisis. Once the risk is over, the intervention ends. Our evidence shows that families need to be open to change for it to succeed. The invitation approach has engaged families who had been previously resistant to statutory service intervention.

In the first instance, the Life Team manager travels to a family's home, explains the programme, shares an invitation pack and a DVD made by other families. The family are invited to meet members of the Life Team informally - there are no assessments or forms at this stage. Families are encouraged to identify and plan an activity for the whole family and team to do together and then family members can choose who they would like to work with one-to-one.

Aspirations

This stage marks the beginning of the 'real work' of the Life Programme. While the Invitation stage is about building a foundation of authentic relationships, trust and commitment, the Aspirations stage is about encouraging families to think about the life they want to lead.

The Life Programme looks at each member of the family as an individual with their own needs, interests and aspirations. This starts with each family member being supported to identify their hopes and dreams, build their confidence and start to reveal potential. The three core Life Tools of the Life Star, Talking Triangle and Life Plan assist this process but they are always adapted to the context - it could be drawing with young children or a kick around with a teenager.

These discussions can bring up some difficult topics, as families talk about what may have held them back in the past, and the Life Team are supported by a Tavistock therapist and robust supervision to support family members through these discussions and issues as they arise.

Activities

The next phase supports family members to move into action and start to explore new activities, relationships and routines. The Invitation and Aspirations stages mainly focus on the families' relationships with the Life Team and with each other, but the Activities stage supports families to seek out new opportunities and experiences. This could be starting a training course, undertaking voluntary work, trying out a new hobby, making amends with a neighbour and making new friends in the local community.

Family members can have a high dependency on the Life Team at this stage as they find their feet. Supporting families to establish new ways of doing things can often involve setbacks and is likely to last a number of months. The Life Team walks alongside families and also, crucially, stays there when they inevitably have challenges along the way. This stage is about supporting families to plan and make changes with support as individuals and as a whole family. It focuses on building resilience and capabilities.

Opportunities

The final stage of the programme is about supporting families to sustain the changes they have made and embedding new relationships and activities in their community as part of a family-led exit from the Life Programme. The aim is that activities and experiences that family members tried out in the Activities stage become a new routine and way of life – families have found what works and are supported to stick with it.

Families can often struggle when services close creating the paradoxical incentive to reverse the improvements that have been made, so Life Teams stay alongside but gradually reduce their involvement as families become more independent and capable. This is likely to still mean maintaining some kind of contact but focusing on families as 'graduates' of the Life Programme. Many family members want to come back and support the Life Programme through volunteering, running activities or peer support groups – a developmental opportunity for them but also valuable for other Life families.

The Fundamentals of the Life Programme

These are the key principles that all Life teams sign up to and underpin their work

I Offering an Open Invitation

inviting families to change rather than coercion and sanctions to do so, but being persistent in that offer.

II Being Family Led

Life teams start where families are at and help them identify what they want to change and how – being open to change is a core criteria as Life believes that sustainable change is only possible if is identified and committed to by families themselves.

III Development not Just Fixing

Life teams aim to equip families with the tools they need to develop their capabilities to live healthier, happier lives in the long-term, as well as supporting them to resolve practical problems in the short-term.

IV Co-building Capabilities

The Life Programme aims to help families discover and develop 4 key capabilities - the ability to value themselves, design a life they value, have meaningful relationships and live in their community.

V A Team, Not a Key Worker

Life Teams work as a reflective unit around families as well as building one to one relationships between individual team and family members.

VI Being The Change

team members bring themselves to their work and share personal experiences as part of their professional role.

VII Being Authentic

teams act with compassion and are open and honest in order to build and model real relationships of trust with families - relationships that involve challenge as well as support. This Fundamental was originally 'Being Loving'.

Annex B:

Core Competencies of Life Team Members

Fundamentals	Characteristics	Capabilities
Being Loving	<ul style="list-style-type: none"> • Nurturing • Caring • Compassionate 	<ul style="list-style-type: none"> • Ability to build real relationships based on trust and mutual respect • Ability to model loving relationships • Ability to understand importance of family relationships and dynamics
Being The Change	<ul style="list-style-type: none"> • Self-aware • Authentic • Perceptive 	<ul style="list-style-type: none"> • Ability to share their own experiences, have insight into their own needs and manage the impact of work on them • Ability to use self professionally
Team not a Key Worker	<ul style="list-style-type: none"> • Collaborative • Communicative • Insightful 	<ul style="list-style-type: none"> • Ability to work closely and collaboratively with families, Life Team colleagues and professionals in the wider system
Co-building capabilities	<ul style="list-style-type: none"> • Positive • Empowering • Reflective 	<ul style="list-style-type: none"> • Ability to help people discover and develop their strengths, overcome barriers and learn from setbacks
Development not fixing	<ul style="list-style-type: none"> • Curious • Patient • Perceptive 	<ul style="list-style-type: none"> • Ability to reflect, generate insights and support families to do the same • Ability to hold close relationships with families but still 'see the bigger picture'
Offering an open invitation	<ul style="list-style-type: none"> • Resilient • Persistent • Supportive • Challenging 	<ul style="list-style-type: none"> • Ability to be non-judgemental, open and honest with families • Ability to motivate and support others • Ability to challenge when needed
Being Family-Led	<ul style="list-style-type: none"> • Creative • Flexible 	<ul style="list-style-type: none"> • Ability to encourage and support decision-making and planning in others

Annex C: Life Programme Measurement Framework

Participle is about social impact – bringing about real change in people’s lives at a time of resource scarcity. We have therefore designed a simple, but effective measurement framework, which collects cost saving data, capabilities (created and sustained) and outcome data. Each new region has a nominated data lead who has local responsibility for collecting and collating capabilities, outcomes and cost data for each Life Programme.

Underpinning our work is a vision of the future of public services based on the fostering of capabilities – those things that every citizen needs to flourish in the 21st century. These we judge to be: health and vitality, the ability to work and learn, a set of strong social relationships and a role within community. Our focus on capabilities can be seen as the inversion of the current needs-based approach in which the individual is seen as only a passive recipient of state provided services. Participle’s work to operationalise the capabilities approach is technically supported at Participle by Dr Sridhar Venkatapuram, Wellcome Trust Research Fellow in Ethics and Public Health, and has won the support of, amongst others, David Halpern at Number 10, and the Office of National Statistics.

The central component is a capability framework embedded within the LifeBoard and based around the four key capabilities listed above (translated into Life vernacular as: valuing myself, designing a life I value, meaningful relationships and living in the community). Each of these capabilities are measured through 10 indicators.

LifeBoard is the key tool we use for capturing changes in behaviour that indicate whether families are developing new capabilities. It is where team members record their interactions with families and families can fill out and comment on the core Life tools. The capability framework enables teams to track the development of families’ capabilities as they move through the programme.

It is important that our work can be measured and compared with standardised outcome measures used by existing public service providers. In Life, our outcomes and cost measurement process collates the service involvement of families for the six months prior to Life and then tracks these costs and outcomes throughout their involvement in the programme. All outcome data is currently collected from existing databases held by our Local Authority partners. Historically each of our partners has collected different outcome indicators and we are currently in the process of collating these – a process which has been made simpler by the agreement of a national framework as part of the Troubled Families work.

To measure cost savings, we calculate first what the total spend is per family under the status quo. Then, as the families progress through the Life Programme, we measure

cost savings relative to this benchmark under two headings: direct cost savings and prevented cost savings. A significant challenge in estimating the potential cost savings of the Life Programme is that the data describing what is currently spent on families with multiple issues is fragmented across different agencies, and complete calculations of the costs of engaging and intervening with families are hard to assemble. However, working with 47 family members in Swindon we have created a matrix that maps the costs of services and activities against the various agencies that fund them. We initially identified 24 different council departments and other agencies and over 70 different types of service/activities. We then conservatively estimate total expenditure on these families using a mix of internal Swindon cost data and cost data reported in external research. We have used these calculations of total expenditure to estimate a 'baseline cost' - the costs incurred by the families six months prior to entry into the Life Programme.

To measure cost savings, we track actual expenditure on families for each six-month period after their entry into the Life Programme with the same matrix that we use to establish baseline cost. The difference between the baseline cost for each six-month period and actual expenditure is the direct cost saving attributable to the Life Programme.

Families in the Life Programme are typically on a path of escalation prior to their entry; their circumstances are getting worse. The team works with the families to prevent these escalations and to create space for the family to work on solutions. For example, children not placed in care (which was expected to have otherwise occurred with a 80-100% probability). To measure prevented cost savings Life Team members assess what interventions (and associated expenditure) families would have required were they not on the Life Programme, and the probability that those interventions would have taken place. The prevented cost savings achieved by the Swindon Life Programme are the cost of these interventions multiplied by their probability. In its first two years, 2010-2011, the Swindon pilot achieved direct and preventative cost savings of £1.48m.

When aggregated across families, the variety of data aims to show qualitatively, quantitatively, and graphically the impact of the Life Programme at the family and programme level.

Annex D: Safeguarding in Life Programmes

As with all services working with children and families, safeguarding and child protection is paramount in Life Programmes. Families will often have a history of 'revolving door' involvement with social care and their children may currently have Child in Need or Child Protection plans or have done so in the past. Safeguarding is not something separate to the work of Life Teams and they engage with identifying, managing and reducing risk on a daily basis, in partnership with other services.

All Life Team Members will have an enhanced Criminal Records Bureau check and the team works to the safeguarding procedures of the Local Authority. Team members come from a range of backgrounds and are able to access child protection and safeguarding training through their Local Authority children's services (although they will often already have done this). The Live Supervisor can also provide support and guidance on safeguarding issues and all Life Teams also now have a worker in the team seconded from social care with specific safeguarding expertise.

The Life Team Manager will have referral information on each family, including access to assessments and case files from partner agencies where appropriate. They will inform the team of any relevant risks or concerns prior to visiting families, but the aim is for team and family members to initially focus on getting to know each other with an open mind. Families in our initial research talked about the power imbalance and feeling judged and exposed by the fact that the people knocking on their door knew so much about their background and problems on paper before they met them in person.

Managers do ask if there's anything families would like shared with the team, as the last thing we want to do is make people repeat things they've told services before (this was another feature of our Swindon research). Families tend to like this approach and appreciate being given the choice of what they share and when. Teams also report that this often results in family members sharing much more than is in their 'files' as information emerges in the natural course of conversation and building a relationship.

The team record their interactions with families on the LifeBoard and the platform includes a function to flag adult or child safeguarding concerns, triggering an alert which is sent to the team Manager, who would then always speak directly with the team member to discuss the best way to deal with any concerns or incidents. Risk is regularly reviewed in the 'pod' meetings of Life Team members working with families and safeguarding is considered in live supervision. The fact that team members have relationships with different family members supports the insights into family dynamics and the awareness of risks and issues in each family, minimising the potential for collusion and drift in the work.

As the work progresses, team members will work closely in partnership with children's services. Statutory services often seek to 'close' cases to Life but as we work with

families with the highest level of need, it is not intended as a 'step-down' but an 'alongside' service. Rather, Life seeks to work directly and intensively with families to help them resolve the many problems they are facing, so that these services no longer need to be involved. Sometimes this requires negotiating with services to 'step back' to avoid overwhelming families and duplicating work, such as a family who were not engaging with the direct work that formed part of the child protection plan but were more receptive when actions were re-framed as direct work with the Life Team in their Life plan.

It can also mean asking services to step in or step up involvement and whilst some families have been closed to social care, others have been re-referred or escalated in partnership with Life. This is often the result of families being more open and honest with the Life Team about the issues they are grappling with, examples include a pregnancy and a substance misuse issue that had been concealed from social care. Key to this combination of support and challenge from the Life Team, is the reassurance that they would stay alongside the family to support them through this difficult process.

Families often get referred between different teams and services as their circumstances change but we have found that this can serve to exacerbate difficulties, forcing families to re-build relationships with workers at a time of increasing crisis, or dis-incentivising them to improve as they know it will mean the end of a valued relationship with a worker. For example, one teenager told us that although things had got better in their family, they were worried that the closure of their Child in Need plan would mean that they wouldn't be able to see the Life Team anymore. Whilst concerns about dependency are very real, Life Teams recognise that it is about supporting small steps towards self-sufficiency and independence. Exit needs to be a carefully managed and planned process, led by family members. The teenager went on to say that he recognised that other families needed the Life Team's support, he just wanted to stay in touch every now and then – eventually this might be just an occasional phone call.

Initially in Swindon the Life Team did not include a social worker but all of our subsequent Life Teams do. Although seconded as generic Life Team members, they bring their expertise into the team and share learning between services. This has been taken to the next level by Wigan who have now recruited a social worker into the Life Team to case-hold families and to lead on safeguarding issues. They are also piloting using the Life Invitation process to complete the social care initial assessment. These are examples of the way in which Life Programmes are innovatively looking at how Life can impact their statutory systems more widely, as well as developing models of what you could call a more relational approach to safeguarding.

Annex E: Case Study Data

The outcomes and cost data provided in this annex about the Life Programmes was provided by our Local Authority partners and was collated by the Life Data Lead in each region.

Swindon Outcomes data

In total, the Swindon Life Programme worked with 16 families and 80 family members between 2009 and 2012 (38 adults and 42 children). Five families exited the Life Programme, one because the children became looked after by the Local Authority, another because a parent and child needed to be assessed in a residential placement and three families 'graduated' from the programme, having made significant positive and sustained changes with the following outcomes achieved:

- Family 1: Parent found employment and children's school attendance increased to 95% with rent arrears being paid
- Family 2: Children attending school and nursery and parent in college placement whilst living independently with no rent arrears
- Family 3: Parent attending university course and children's attendance 90%.

The outcome data presented below is for 2011/2012 and is based on measurement from a baseline for each family covering the six months prior to them joining the Life Programme. This baseline data is compared with data extracted for each family within the last 6 months. The data only includes those families currently on the programme who have completed a full six-month period, comprising 12 families (including an exited family who has returned, measured from original baseline) with 48 family members (22 adults and 26 children).

Education – relating to children/young people aged 5 -16

Attending mainstream education

- There has been an overall increase of 19% of young people attending mainstream education (This is an increase of four young people)
- At baseline 52% of children/young people were attending mainstream education (11 out of 21)
- By 31st March 2012 71% of children/young people were attending mainstream education (15 out of 21)

Children not in any form of education

- There has been a reduction of 24% of children/young people not in any form of education (5 out of 21)
- At baseline 29% of children/young people were not in any education (6 out of 21) and this reduced to 5% (one child) by March 2012
- The figures account for three young people who turned 16 and were therefore no longer statutory school age

School attendance

- Attendance is shown only for those children/young people in mainstream education (16 of 21, of which two are now beyond school age)
- 38% children/young people improved school attendance (6 out of 16 have an improved school attendance against the baseline)
- There has been an increase of 25% children with attendance above 85% (4 out of 16).

Offending and re-offending

There has been a 16% decrease in young people cautioned or convicted of an offence for the first time (data based on 19 people aged 10-18 years)

- At baseline 16% of young people were cautioned or convicted of an offence for the first time but none of the young people were cautioned or convicted for the first time by 31st March 2012
- At baseline 21% of young people were convicted of a subsequent offence and this has decreased to 16% of young people convicted of a subsequent offence
- There has been a 63% reduction in police call outs compared to the baseline (59 call outs compared with 158 at baseline)

Employment – young people (16 -18) and adults

- 9% of family members sustained employment throughout the six month period (2 out of 22 compared with 0 at baseline)
- 21% of family members are attached with the Work Programme or with DWP Families with Multiple Problems (not in place at the time baseline)

Safeguarding

- There was a decrease of 31% for children with a child protection plan by March 2012
- There has been an increase of 35% of children assessed as Children in Need by March 2012
- One child was taken into care in 2011/12

Housing

- There has been a 60% decrease in notice to seek possession (from 5 to 3)
- 1 of 13 families was evicted

Health

- 93% of family members (26 out of 28) are registered with a GP compared with 75% at baseline
- 71% of family members have increased scores for well-being as determined by the Life Star Well-being score.

Wigan Outcomes data

This data applies to the first eight families invited to take part in the Wigan Life Programme in February 2012. The baseline applies to the six month period prior to joining Life and the outcomes were collated for the period September to November 2012.

All the percentages below are calculated in relation to these 8 families.

Service involvement

- All of the families were experiencing multiple issues and were considered to be high risk, need and cost and 'stuck' with current service involvement, with 38% of families reported as having significant histories of non-engagement with services
- 100% of the families invited to take part in Life have engaged with the programme.

Domestic abuse

- At baseline 63% of families had experienced historic domestic abuse issues and 38% of families were currently living in households with domestic abuse
- Of those families experiencing domestic abuse at baseline, between September and November 2012 all families increased their awareness of the impact of domestic abuse, one family is no longer living in a household with domestic abuse and one family are seeking support for domestic abuse issues
- There was a reduction of 33% in families living in a household with domestic abuse

Children's services

- At baseline 88% of families had some form of involvement with children's services and 63% of children had CIN or CP plans
- 38% of the families had parents who had been in care as children
- By November 2012 50% of families had some form of involvement with children's services and 48% had CP or CIN Plans
- There was a reduction of 38% in families involved with children's services, a reduction of 15% in children with CIN or CP Plans and 60% of families with CP or CIN Plans de-escalated their service involvement.

Crime/Anti-Social Behaviour

- At baseline 75% of families had family members reported to be involved with criminal or anti-social behaviour
- By November 2012 38% of families had family members reported to be involved with criminal or anti-social behaviour
- There was a reduction of 50% the number of family members reported to be involved with criminal or anti-social behaviour.

Education

- At baseline 63% of families had children with attendance issues – 23% of children had poor or no school attendance (including 1 school refuser)
- By November 2012 40% of families with attendance issues had improved school attendance rates and 15% of children had poor or no school attendance
- There was a decrease of 23% in families with school attendance issues and a decrease of 8% in children with poor or no school attendance

Health

- At baseline 25% of families regularly missed health appointments
- By November 2012 families were now attending health appointments
- At baseline 100% of families were experiencing substance misuse or mental health issues
- By November 2012 100% of families were continuing to experience substance misuse or mental health issues but 75% had taken up, or were awaiting, counselling or drug and alcohol services

Work

- At baseline 100% of families had no adults in employment
- By November 2012 100% of families still had no adults in employment but 25% were developing skills to be work-ready

Housing

- At baseline 63% of families reported severe housing problems such as neighbour complaints and rent arrears
- By November 63% still reported severe housing problems but 13% had a rent payment plan in place

Cost

- The estimated combined cost of the eight families in the six months prior to involvement with Life was £408,921, with individual family costs ranging from £21,433 to £91,864
- The estimated combined cost in the first six months of the Life Programme was £379,934, showing a reduction of £28,987 (NB not including cost of Life Team)
- The estimated combined cost in the second six months of the Life Programme for these 8 families was £305,106, showing a reduction of £103,815
- The estimated combined cumulative cost saving for the first 8 Life families over 12 months of involvement with the Life Programme is £132,802
- A deep dive into police data showed that the cost of one Life family to the police had reduced from £147,000 from January to July 2011 and £104,000 from July to December 2011 to £40,000 from January to June 2012 (Life got involved in February 2012).

Lewisham Outcomes data

- Invited ten families in total (six in March 2012, four in September 2012)
- Of the first six families invited, five accepted the invitation and one did not
- Of those five families, one left the area after the invitation was made and one partially engaged but withdrew after a few months
- This left three families working with the Life Team from April to September 2012
- Another four families were invited to take part in Life September 2012 (all accepted)

Baseline data on seven Life families (families entered at two time points, February 2012 and September 2012 but data compiled across both):

- 71% of families were affected by housing issues including rent arrears, neighbour complaints, unclean conditions and insect infestations
- 86% of families had school attendance issues (six were not in education, employment or training and three were in pupil referral units)
- 100% of adults were not in work on entry to Life Programme
- 100% of the families were involved with children's services (18 children had Child Protection plans and three children had Child in Need Plans)
- 86% of families had involvement with the Police (with 14 individuals reported to be involved in anti-social or criminal behaviour)
- 100% of families had children with a special education need or learning disability (43% of individuals in the programme had a learning disability)
- 86% of families had issues impacting on their health (including four individuals with chronic illnesses and seven individuals with drug/alcohol issues)
- 57% of families were affected by domestic violence, with 38% living in a household with a history of domestic abuse issues.

Outcomes achieved across these families include:

- Three evictions prevented
- Five families supported with rent arrears and budgeting
- Two families assisted with repairs
- Three children improved school attendance
- One child supported in return to school process following an exclusion
- One parent actively sought work and found part-time work
- Two children moved into further education and/or employment training
- Six children are no longer subject to Child Protection Plans
- Four children that were to become 'looked after' stayed with family
- Four children reduced anti-social behaviour
- One parent attended court in regards to non-school attendance and subsequently attended parenting classes/counselling
- Life supported individuals to access a GP, undergo Health checks, receive mental health appointments, visit an optician, get dental treatment and seek nutrition support
- Two domestic violence incidents were reported to the team by the family involved, and active steps taken to introduce child safeguarding as a result.

Outcomes against baseline for seven families to date are:

- Crime: a 36% decrease in family members reported to be involved in crime or anti-social behaviour (including 4 children reducing ASB and one parent attending classes/counselling)
- Housing: 71% of families addressing their issues with rent arrears and finances (leading to the prevention of three evictions)
- School: 66% of children have improved their school attendance where previous issues existed, such as attendance rate, NEET or exclusions
- Work: 10% of adults has actively sought work and found part time employment
- Children's Services: there was a 29% reduction in the number of children subject to Child Protection Plans.

LIFE PROGRAMME OVERVIEW

4 REGIONS

3 1/2 YEARS

42 TEAM MEMBERS

KEY



FAMILY MEMBERS*



TOTAL DIRECT SAVINGS**



TOTAL PREVENTATIVE SAVINGS

PROTOTYPE

16

2009 Q4

55

2010

£275R

£485R

80

2011

£510R

£735R

151

2012 Q1+Q2

£565,801

211

2012 Q3+Q4 (and Q1 of 2013)

£727,890

* Number of family members worked with as a cumulative total

** Estimated total cumulative cost reduction by the Life Programme

LIFE PROGRAMME OVERVIEW BY REGION

	2009 Q4	2010 Q1+Q2	2010 Q3+Q4	2011 Q1+Q2	2011 Q3+Q4	2012 Q1+Q2	2012 Q3+Q4	2013 Q1
SWINDON LIFE 80 family members (16 families) 23 team members to date (12 at any one time) £510k Total direct savings / £970k Total preventative savings / £1.48m Total combined savings								
LEWISHAM LIFE 32 family members (7 families) 6 team members to date £85,088 Total direct savings								
WIGAN LIFE 75 family members (10 families) 8 team members to date £132,802 Total direct savings								
COLCHESTER LIFE 26 family members (5 families) 5 team members								

LIFE PROGRAMME OUTCOMES*

* Average aggregated outcomes across Life Programmes to date, from available data



Annex F: Update on Our Work – July 2014

At the time of writing this annex, it has now been five years since we started the Life innovation work in Swindon, three years since Life HQ was established and just over two years since the first new Life Programmes started work. We are proud that five Life Teams have been able to support over 200 family members in four areas of the UK.

Along with our partners, we have learned a great deal from this work, not only about supporting families, but perhaps as much about supporting teams and services and how to create the right conditions to enable them to be sustainable and effective. We are particularly pleased that one of our partners is growing and developing their Life Programme as a core part of local service provision, with the two Life Houses in Wigan and Leigh now acting as thriving hubs of integrated support for vulnerable families within each community. From our work to date we have seen that there are three key factors that need to be in place in a local Life Programme for it to work for all stakeholders – families, teams and Local Authorities. Our broad learning to date has been that:

Life works for families if...

- Team members are seconded in to the project with the right personal and professional skills and experiences to build relationships with families that support change.
- Team members are able to work intensively, flexibly and creatively to provide tailored practical, social and emotional support to the whole family.
- Teams can act as a bridge with other services by advocating for families, helping them to navigate the system and joining up and streamlining support.

Life works for team members if...

- They have clear local management and practice structures to work within.
- They are given high quality support and supervision to manage this challenging work.
- They have access to a wide range of tailored training and development opportunities and a wide toolkit to work with in order to feel confident and capable in supporting families.

Life works for the wider system (i.e. Local Authorities and partners) if...

- There is strong, sustained leadership and a shared vision across services at all levels.
- It is clearly integrated into the local service delivery landscape.
- Data and evidence are harnessed to learn from and develop the programme effectively.

The national landscape has changed a great deal in the past five years, with the emergence of the Troubled Families agenda and the impact of drastic cuts in public budgets. Life was designed to be something of a 'trojan horse' in each locality, creating frontline teams to work in a new way with a small number of families in a corner of the system, so as to catalyse wider change across it.

As we note above, this requires strong local leadership, joined up partnership working and a strategic but operationally-informed approach. One of our partners reflected that perhaps Life needed to start outside of the system in order to be able to step back in to it with a clear vision for the work and wider change. We feel that the landscape has moved beyond a social enterprise model for scaling the Life approach. A series of small-scale local programmes, whilst undoubtedly valued by the families and teams who work with them, are unlikely to achieve the pace or mass needed to influence widespread system change, particularly in this era of austerity.

Having said that, we note that there has never been more interest in the principles informing the Life approach: pooling resources around families and communities, forming multi-agency teams to work intensively and collaboratively with the whole family and utilising therapeutic approaches to understand and address root causes of social problems. We believe that the learning from Life can only be realised at scale by three paradigm shifts taking place in the wider system. While this is hugely ambitious, it is far from impossible and some innovative and bold Local Authority partnerships, including our own partners, are currently embarking on ambitious attempts to put these approaches into practice across their services.

We believe the Life approach can work at scale if we:

1. Change our systems

We need to organise services so that they work for and with families and communities, not systems. This requires integrated, locality-based services that understand the reality and complexity of people's lives, enable workers to spend more time with less families and break down unnecessary barriers between services.

2. Change cultures

We need values and principles, not just processes, to inform service provision for families. We need to recruit staff which have the personal and professional skills and experience to work meaningfully with families. We need to enable them to work collaboratively around families and need to support and develop them as they asset they are, with high quality supervision, training and a culture of openness, reflection and learning across services.

3. Change how we measure success

We need to take a more nuanced approach to measurement that starts from the lived experience of families and understands the complex and long-term nature of change. We also need to measure what we are seeking to develop, rather than overly simplistic proxies which can all too easily become targets and lead to perverse incentives. The outcomes for Life Programmes are positive but at Participle, we are seeking to make the case for capabilities – what people are able to be and do – as the future of measurement.

We are delighted that the Life approach has been taken up and advocated by a wide range of supporters in the children and families field, from frontline workers to social work academics and politicians. We have had fascinating and constructive dialogue with many people and are pleased to have played a key role in some of the national conversations currently taking place.

We agree with Brigid Featherstone, Kate Morris and Sue White when they argue for the need to engage with and develop a family support project for the twenty-first century.¹⁴ We are delighted that they have championed the Life approach as a promising blueprint for such a project in their recent book.¹⁵

The challenge now is to knit this learning together and harness it to inform widespread and sustainable system and culture change. We will continue these conversations through our wider work on Relational Welfare at Participle.

Please join us:

www.relationalwelfare.com

www.participle.net

¹⁴ Featherstone, Brid; Morris, Kate and White, Sue (2013). A marriage made in hell: early intervention meets child protection, British Journal of Social Work – this article can be downloaded at <http://oro.open.ac.uk/37437/>

¹⁵ Featherstone, Brid, Morris, Kate and White, Sue. (2014). Re-Imagining Child Protection – Towards Humane Social Work with Families, Policy Press.