Hackathon Report
Live well for longer

make
better
happen

Specially prepared for you by team ice

What we did

An engagement experience designed to bring clarity and accelerate change and develop an effective specification and strategy to support the Cheshire East Team in developing their place-based system of care and self care.

ICE Creates facilitated a hackathon session with 18 stakeholders from Cheshire East.

Powered by Clean Language, live graphic scribing and theme capture, the session was designed to bring key community members together to explore and co-design what needs to happen to enable people in Cheshire East to live well for longer.

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LIVE WELL FOR LONGER

Cheshire East Council

CONFIDENCE

ABLE TO ASK FOR HELP

SELF CONFIDENCE & CONFIDENCE IN SERVICES & SUPPORT CHOICES

ACTIVE & ACCESSIBLE CHOICES

THINK OUTSIDE THE BOX

CREATIVE PROBLEM SOLVING

SENSE OF CONTROL

OVERCOME BARRIERS & MAINTAIN HOPE

NEW START AT ANY AGE!

NAVIGATION

1. KNOW WHERE TO LOOK
2. IT'S ACCESSIBLE IN DIFFERENT FORMATS

PLAIN ENGLISH

NO RED TAPE

AGREED PRIORITIES COMMON PURPOSE SHAPE TO PEOPLES NEEDS NOT OURS

CREATED NOT IN SILOS

SUPPORTED TO UNDERSTAND CHOICE

CLARITY OVER WHAT CAN BE EXPECTED

CONTEXT/ABOUT ME

QUALITY OF LIFE

WHAT DO YOU WANT TO DO?

MANAGE TRAVEL & ACCESS

LISTEN TO INDIVIDUALS & COMMUNITIES

FLEX & ADAPT TO SUIT NEEDS

EVEN GENERATIONAL NEEDS

THINK ABOUT COMMUNICATION CHANNELS THAT ACTIVELY JOIN THINGS UP

LOTS TO DO

PEOPLE WANT THE SIMPLE THINGS

"THE CONFIDENCE TO NAVIGATE YOUR WAY AROUND ALL THE STUFF THAT WORKS FOR YOU"

LISTEN ALWAYS & ACT ON WHAT WE HEAR

THE POWER OF WORDS

"CAN I DELIVER WHAT IS BEING CALLED FOR?"

REFLECT OUR & OTHER RICH CONVERSATIONS

MAINTAIN INDEPENDENCE KEEP PEOPLE INVOLVED!

INVOLVED IS LIKE... LISTEN INTERPRET

TALK ABOUT & TEST OUR IDEAS & PLANS

GO BACK TO PEOPLE

ACTION

CHANGE & RE-CHECK ALONG THE JOURNEY — BECAUSE THINGS CHANGE

INVOLVED PROPERLY CONTINUAL RELATIONSHIP CONVERSATION

YOU SAID... HOW ABOUT THIS?

PERSONALISATION POLICY

PEOPLE ARE MORE LIKELY TO ADHERE IF THEY ARE INVOLVED IN SHAPING THINGS FOR THEMSELVES WHICH SAVES MONEY AS THEY LIVE BETTER

TAILORED SERVICES MEET NEEDS

STATUTORY DUTY BEST USE OF RESOURCE

HELP ME LIVE HOW I WANT TO LIVE

SENSE OF CONTROL, CHOICE & TAILORING TO ME FEEL RESPECTED

"I WANT TO UNDERSTAND SO I CAN GET WHAT'S BEST FOR ME, TO DO WHAT MATTERS TO ME"

ACCESS TO GOOD QUALITY CARE ★★★★★

OPEN & TRANSPARENT ABOUT WHAT IS & ISN'T AVAILABLE & WHY THAT'S THE CASE

USE DIFFERENT PLACES, PEOPLE & SPACES

DECENCY TO ASK & LISTEN FACE TO FACE FOLLOW-UP PLANNED ACTIONS

INVOLVED IN DESIGNING THE HOW

CHOICES

ONE PLAN MAKE PERSONALISED CARE BUDGETS REAL & AVAILABLE

CONSISTENTLY

DRIVER

REDUCE DEMAND COSTS OF ESCALATING RELIANCE ON SERVICE

PEOPLE TOLD US OF THEIR ASPIRATION FOR LIFE

IMPROVE OUTCOMES

MOTIVATION

ABLE TO DO THE THINGS THAT ARE IMPORTANT TO ME

MAINTAIN INDEPENDENCE

DO THINGS FOR MYSELF

STAY WELL!

ENABLER

JUST TO BE ABLE TO SPEAK TO A PERSON

PEOPLE HELPING PEOPLE

BEFRIENDING CONFIDENCE IN KNOWING WHO TO CONTACT + HOW + IN THE SERVICE

20 MINUTE ENVIRONMENT

LESS TIME REDIRECTING

EARLIER INTERVENTION & PREVENTION IS MORE EFFECTIVE & EFFICIENT & IMPROVES LIVES & OUTCOMES

DIRECT & EFFICIENT

GET WHAT I NEED AS SOON AS I NEED IT!

MY CHOICE INDEPENDENCE FIND + DO THINGS THAT ARE IMPORTANT TO ME!

DIFFERENT CHANNELS FOR DIFFERENT PEOPLE

ONE STOP SHOP TRANSPORT? TAXI DRIVERS LIBRARY RE-USE?

ON THE STREET HUB ON THEIR TURF!

WHO'S ALREADY IN THEIR LIVES

ACTIONS

INVEST IN PRACTICAL EDUCATION ABOUT SELF-CARE + SELF WORTH

MAKE FUNDING & RESOURCES WORK TOGETHER

COLLECT OUR ENABLERS

PRIORITISE ENABLERS WITH COMMUNITY REPRESENTATIVES

RELOCATE ACTIONS

JOINT PLAN

SHARE & CONTINUE TO SHAPE THE PLAN WITH PEOPLE AS WE GO IDENTIFYING THE PARTS THEY & OTHERS CAN PLAY

COMMUNICATION IS CLEAR & ACCESSIBLE! TELL PEOPLE IT'S IN THEIR HANDS!

NETWORK

TRANSPORT

3RD SECTOR

FAITH GROUPS

COMMS & ENGAGEMENT

healthwatch

OUR COMMUNITY

HOUSING ASSOCIATIONS

MEDIA

FIRE SERVICE

SCHOOLS & COLLEGES

DEMONSTRATE

PEOPLE WILL TELL US

MEASURE FROM DAY 1

DEMAND

Celebrate SUCCESS

The Stakeholders

18 stakeholders were involved in the hackathon for 'Live Well for Longer' in East Cheshire.

There were individuals from all areas of East Cheshire with a range of roles including individuals from the community development team, public heath, commissioners, community coaches, transformation work and NW ambulance.

At the start of the session, all stakeholders were asked to state their 'three words for the week', which are illustrated in the word cloud to the right.

Enthusiastic
Hardwork Stressed
Tired Helpful Inspired
learn Happy Dust Over
Residential Knackered Forward
Willing Busy
Noise Exciting
Cloudy Bloody
Nice Motivated
nonesense Life Positive
Rainy Always Fab
Worry

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DEMAND

a behaviour focused planning tool   **Driver   Enabler   Motive   Action   Network   Demonstrate**
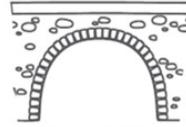
DRIVERS - are the 'what really matters' from the commissioners or system perspective. Drivers make the anchor for change commitment from commissioners and providers and often identify outcomes
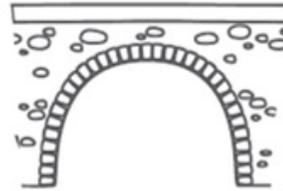
ENABLERS – determine what will help enable this to happen across the integrated place and system to help meet the drivers. It is what enables the co-production of all players.

MOTIVES – what is motivating the people we need to take action to make this change happen? Often communities or patients etc.

In the hackathon we altered the order questions asking first about the system drivers, followed by the motives for people and enablers last. The reasoning behind this was to ensure that we were able to establish the motivational factors for each theme, before exploring ways to make the behaviour change happen.

Using DEMAND
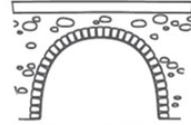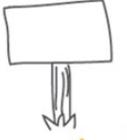
Driver   Enabler   Motive   Action   Network   Demonstrate

From previous insight work we are aware that there are 3 key themes around living well for longer:

1. Confidence

2. Navigation

3. It's about me/ My context

During the hackathon, these themes were further explored using the DEMAND tool in order to develop an actionable plan that is co-designed, person centred and aligns with the organisational needs.

In the first half, stakeholders explored the demands, enablers and motives– the HOW and WHY.

Whilst in the second half, the actions, network and demonstrate aspects of the tool were explored which provide a more tangible plan of how the change can occur, who can be involved and how its success can be measured.

The WHY **driver** for confidence

The key **drivers** which were identified in both breakout room discussions are listed below:

- ➢ **Reducing demand** on social care and healthcare services, which in turn will increase the capacity around early intervention services, allowing for better allocation and management of budget.
- ➢ **Equality across the system** – for people with different ethnic backgrounds, different ages, different health concerns. Ensures the same quality of care is provided to everyone, thus improving the outcomes for residents.

'The driver for us as organisations is that reducing demand, managing the budget, as well as improving outcomes for people' **SK3***

'A driver for us as a system, is we want equality of care that we're providing' **SK1***

*Represents an anonymised participant from the hackathon.

The WHY **motive** for confidence

The key **motives** which were identified in both breakout room discussions are listed below:

➢ **Independence** – people want to feel confident to go out and do activities and things for themselves, but also to access services by themselves, which retains their own dignity and reinforces their self-worth.

➢ Having the confidence to continue doing activities independently also improves residents' **wellbeing and happiness.**

➢ **Reassurance for family and friends**, as when an individual feels confident, others in their life will also feel confident, which is important as lots of residents, especially older adults want what's best for their family and don't want to worry or trouble them with things.

'[residents'] physical health has declined, their mental health has declined and they've become lonely, become isolated because they're just in a position where they haven't got the confidence in the services that are out there because they have not used them for a long time and they haven't got their own confidence to get out of the house' **SK1***

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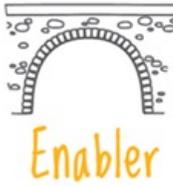
The HOW for confidence

The key **enablers** which were identified from the breakout room discussions are listed below:

- ➤ **Community connectors and social prescribers** are vital as they give confidence to residents and provide them with support when they need it, whether that is attending services or answering questions.
- ➤ **Making every contact count -** stakeholders should go the extra mile and when they are visiting a resident they should speak with them and look around their home to try and identify any needs which they may have, adopting a holistic, person centred approach rather than a medical one.
- ➤ Having someone residents can **speak with over the phone or face to face**, who will be **open, honest and transparent** with them and provide them with **accessible information** will not only increase residents' confidence in the service, but it will increase their own self-confidence too. As residents want someone to speak with them not to them – they want to **feel involved** and part of the conversation.

'Every contact counts – if a district nurse is going in to give a B12 injection, don't just give the B12 injection, look around the house, look at your person, what are they saying to you? Is there something that you can sign post? Is there something you can bring back to the office, to the care community?' **SK5***

*Represents an anonymised participant from the hackathon.

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The WHY driver for navigation

Driver

The key **drivers** which were identified in both breakout room discussions are listed below:

➢ **Early intervention prevention** – if residents are able to navigate services correctly, they should be able to get help earlier which will **reduce the demand on the more demanding and expensive services**.

➢ By simplifying navigation, the number of **disgruntled people can be reduced**, **inappropriate service** use can be **reduced**, along with the **friction in the system.**

'Reduce the amount of disgruntled people' **SK1***

'A driver for us is ensuring that people access the right support at the right time... because we might be creating demand in a certain area because we haven't been clear in terms of how people are able to access the support in the right point in time' **SK3***

*Represents an anonymised participant from the hackathon.

LESS TIME REDIRECTING

EARLIER INTERVENTION & PREVENTION IS MORE EFFECTIVE & EFFICIENT & IMPROVES LIVES & OUTCOMES

DIRECT & EFFICIENT

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The WHY motive for navigation

The key **motives** which were identified in both breakout room discussions are listed below:

- ➢ People want to **maintain their independence** and **continue to lead the lifestyle that they have chosen to,** which would increase their confidence and self-worth once again, and they can do this if they are able to navigate the system successfully and get the help and information they need quickly and independently.

- ➢ When people are unwell and require the use of service they do not wish to be travelling far to get help or reach those services, instead they prefer to be close to home, in their community where they **feel safe**, have **trust** in the services and a sense of **familiarity** wherever they go.

- ➢ Some residents may **feel patronised** when trying to navigate the system, whether that is due to difficult systems, websites or conversations, which take away their power and respect. Whilst **good navigation** makes people **feel empowered and respected**, which increases their confidence.

' The motives are independence again… and maintaining your lifestyle and a lifestyle that you choose, your options for that' **SK7***

*Represents an anonymised participant from the hackathon.

The HOW for navigation

Enabler

WHAT MAKES US HEALTHY

The key **enablers** which were identified from the breakout room discussions are listed below:

- **Empowering people to make behaviour change** which is backed up by the Pareto principle 80/20. There are **local navigators** that have "done it" and know their way around and we need to find them and **set them free to navigate for others**.
- Providing residents with **clear and simple** access to information is key, as at the moment they become overwhelmed with all of the options and default to visiting their GP as it is the simplest and easiest choice.
- Additionally, information should be provided in **different formats for different people** including **physical copies** for older individuals who may not use the internet a lot, **translations** for individuals from different countries and **considerations** should be made **for visually and auditory impaired** individuals too, ensuring it is accessible by all.
- Creating a o**ne-stop-shop** in the community where residents can go and access a range of services or where there are also **system navigators** that provide education and help residents understand information, and navigate the system without removing their power or respect.
- Alternatively, **already existing services** can be **improved and expanded.** For instance, a **library** is considered an important service which provides education, allows for friendships, confidence and trust to be built over time and for groups to be held. Here, **system navigators** can also be put which will have specialist knowledge about navigating the system and accessing information which residents will be able to access easily.

'People have said that almost like that one stop shop just going there getting the info, being signposted and then being followed up' **SK2***

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The WHY driver for it's about me/my context

The key **drivers** which were identified in both breakout room discussions are listed below:

> **Working collaboratively** with residents by listening to their ideas and wishes, incorporating them and feeding back to them about the changes that have been made as a result of their input will make the residents feel heard and **increase their engagement within the service**.

> **Statutory duty** to meet people's needs should be built within services, combined with **good use of resources and public funds**, it will **reduce demand and save money** as people will be living better and their needs will be getting met earlier on before they have become more complicated.

'A driver is definitely around designing services to meet the individual needs as well as community needs, but I think it goes back to some of the care acts because it is a statutory requirement for us to do and provide choice and control' **SK3***

*Represents an anonymised participant from the hackathon.

The WHY motive for it's about me/my context

The key **motives** which were identified in both breakout room discussions are listed below:

- ➤ Residents want to **maintain their lifestyle and motivation** for as long as possible and services should be understanding and supportive of this.

- ➤ A lot of people, especially older adults are being disrespected and spoken to without dignity, which is wrong. Individuals should have their **choices respected** whether that is accessing or not accessing a certain service, as this allows them to **feel in control and empowered** in their lives.

- ➤ Residents want **access to good quality care and services**, however that is not always easy as sometimes they get forwarded from call handler to call handler and are unable to reach the correct department, which makes it a **difficult and frustrating** experience for them as they **feel lost** and don't want to be.

- ➤ When services are working for individuals, and are considering their needs, they increase the **trust between the individual and the service,** making them feel understood and safe.

'When people are in crisis it's ever so confusing.. there needs to be one central point where somebody is able to deal with those needs' **SK8***

'We need to think about that choice and control in a broader context, and there is also a choice not to access services as well...because if I [resident] want to be independent as long as possible there's a choice' **SK3***
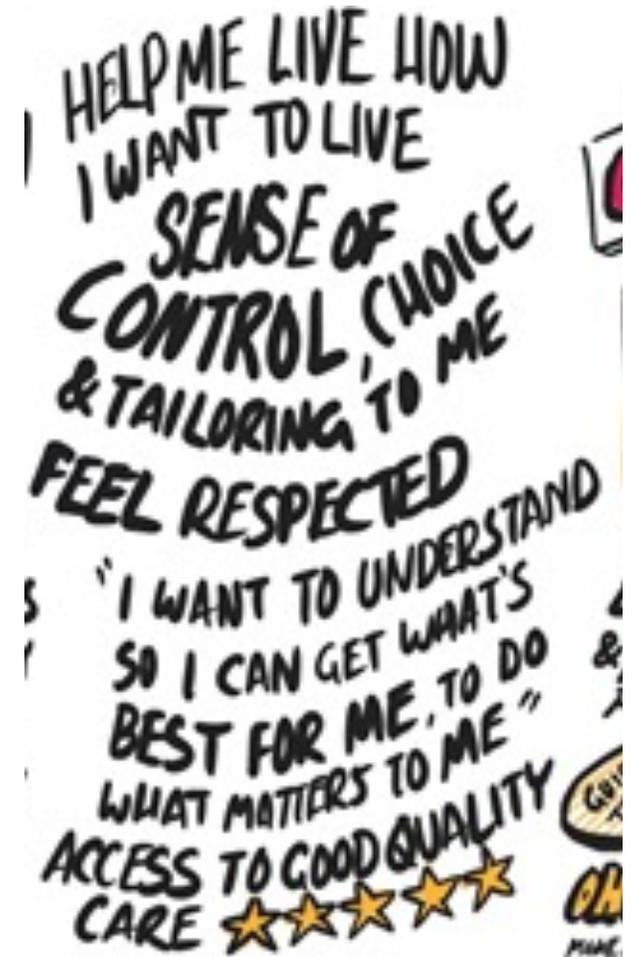
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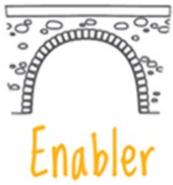
The HOW for context/ it's about me

- The key **enablers** which were identified from the breakout room discussions are listed below:

  - ➢ Being **open and transparent** with residents about their options and choices even when there is limited or no choice and communicating this with them.

  - ➢ **Guiding people** through their choices, by taking the time to explain information where necessary to ensure they understand it. Whilst also **considering failing eyesight and hearing** and **accommodating such individuals** and their specific needs.

  - ➢ Recognising people who use services to be on the same playing field as the commissioners and treating them as **equal partners**, by keeping them **involved** throughout the whole project. This way residents **feel heard, valued** and that they are **contributing to the bigger conversation.**

  - ➢ By **recognising the assets that you have**, and **combining budgets, resources and contracts** a more effective and efficient service can be provided for residents.

  'Sometimes its how you or me in this role interpret or translate that information to a point where they [residents] are okay with it, they get it straight away within the tiny bit of time you've spent with them. I think they massively value that.' **SK4***

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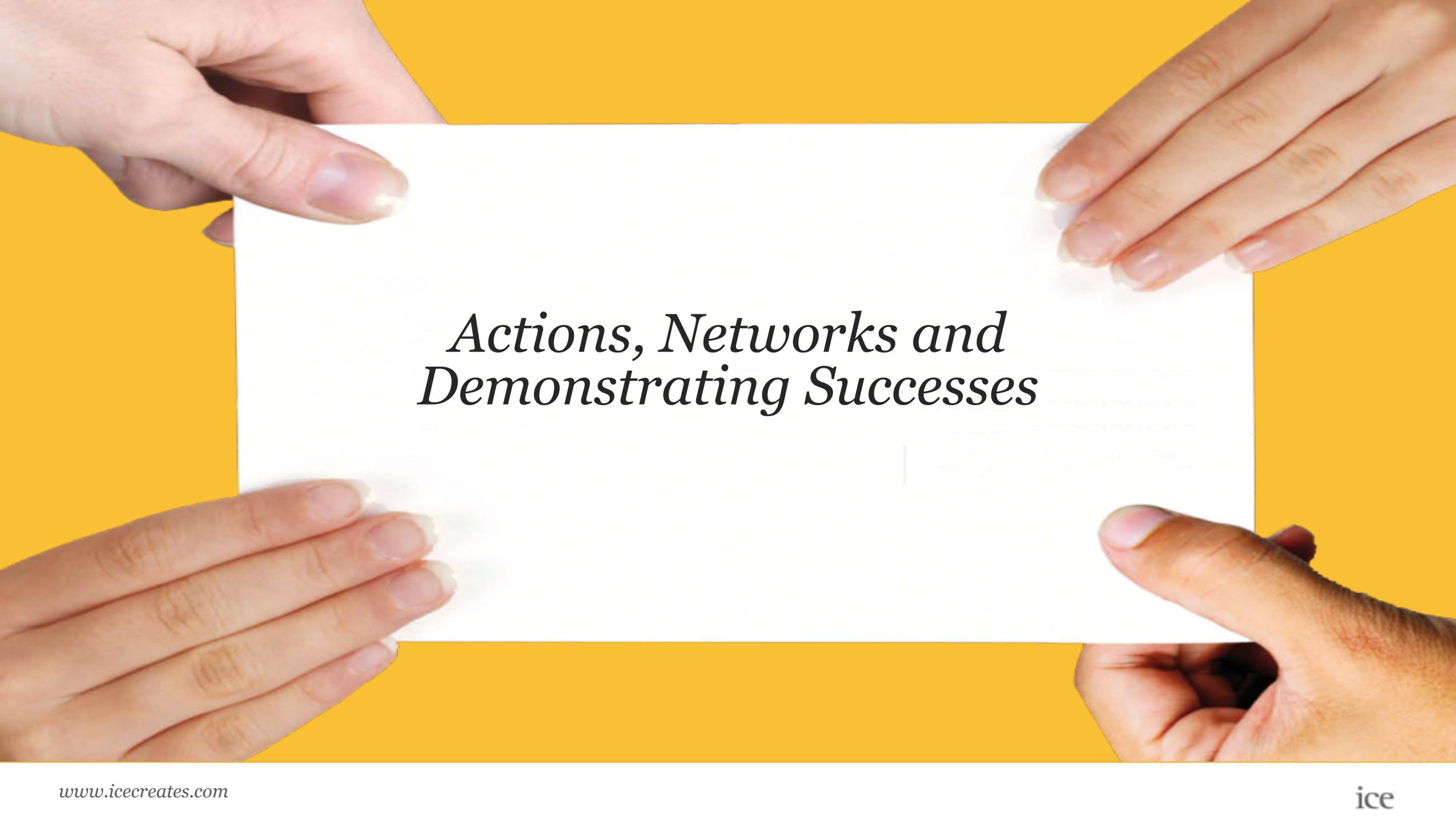
Actions, Networks and Demonstrating Successes

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✏️ What ACTIONS can we take?

The key **actions** discussed during the hackathon are listed below:

➢ Creating a **communication plan** that is aligned and **meaningful to everyone**.

➢ **Continuously involve residents** in the conversations and keep going back to them to **sense check new idea**s and ensure they are **aligned with their needs**, whilst communicating progress in a **clear and accessible way** for all **considering different barriers** such as nationality, age, eyesight and hearing problems, and internet access.

➢ Invest in **hubs or centres in the local community** that will act as hotspots for **educating residents** about self-care and self-worth, and **empowering** them to make the behaviour changes themselves, whilst also providing a **safe space** where residents can feel that they **belong**.

➢ **Current services** such as libraries or visitor centres can be **expanded** to provide residents with access to **support** that is **local, familiar and face to face**.

➢ **Broader activities and projects need to align and join up** their processes so that people are not getting asked the same questions repeatedly, saving resources and **making every contact count**.

'We need a communication plan that aligns to this piece of work, we need to kind of agree across , how we communicate with people, how that communication becomes meaningful' **SK1***
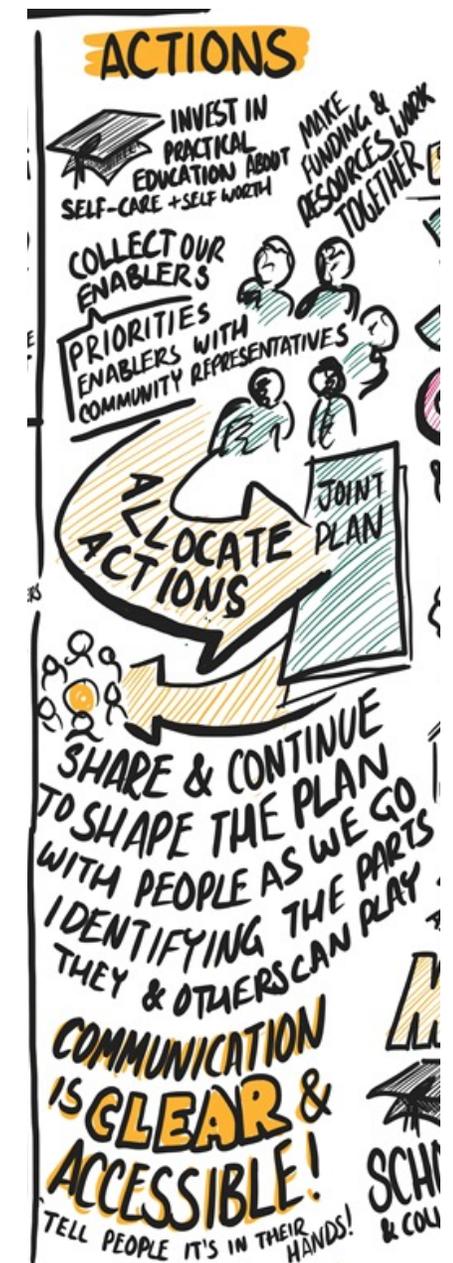
*Represents an anonymised participant from the hackathon.

NETWORK – Who can we work together with?

The key **networks** discussed during the hackathon are listed below:

➤ Public transport - poor public transport in rural areas prevents people accessing help and support.

➤ North West ambulance service and West Midlands ambulance service – can provide transport to some people.

➤ Fire department – can be used to spread the message and increase engagement with it.

➤ Health watch – provide education.

➤ Communications and engagement team

➤ Third sector

➤ Housing associations

➤ Parish council

➤ Local radio stations such as Cat Radio

➤ Schools as parents present with social concerns to headteachers and teaching assistant.

➤ People from the community – they can spread the message through word of mouth with friends and neighbours.

'Everybody - because actually the group we're working for is the largest group in our population, it's the largest increasing group in the population, and actually it's anything that touches those people's lives, so the skill will be… having a plan that has some longevity to it.' **SK7***

*Represents an anonymised participant from the hackathon.

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DEMONSTRATE – How will we know it's working?

The key ways to **demonstrate** success discussed during the hackathon are listed below:

➢ By measuring the impact on the drivers.

➢ People will communicate this with us if we continue to dialogue with them.

➢ Taking a base measure at the start of access figures such as hospital admissions or unnecessary GP calls and then comparing them with follow up figures taken after a period of time for which the actions discussed in the previous slide have been implemented, and seeing if there is a difference.

➢ **Finally, it is important to demonstrate and celebrate success.**

'We'll know it's working by measuring the drivers, or the impact of whatever we're doing is having on the drivers. We need to come up with some measurables that sit along those drivers that help us figure out' **SK1***

'People will tell us, if we are true to what we're saying about continuing that dialogue with communities then we'll be asking them. How are we doing? Are we on track?' **SK7***

*Represents an anonymised participant from the hackathon.

Summary Matrix – the WHY

Drivers	Confidence	Navigation	It's about me
Reducing demand on social care and healthcare services, which will increase capacity around early intervention services.	X	X	X
Better allocation and management of budget	X		X
Equality across the system, ensuring the same quality of care is provided to everyone	X		
Early intervention prevention		X	
Number of disgruntled people can be reduced		X	
Inappropriate service use can be reduced and friction in the system		X	
Working collaboratively with residents			X
Statutory duty to meet people's needs			X

Motives	Confidence	Navigation	It's about me
Independence	X	X	
Being happy and well	X		
Reassurance for family and friends	X		
People want to access services within the community where they feel safe, and have trust.		X	X
Avoid feeling patronised, disrespected and powerless		X	X
People want to maintain their lifestyle	X	X	X
Accessing good quality care and services			X

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Summary Matrix – the How

Enablers	Confidence	Navigation	It's about me
Community connectors and social prescribers	X	X	X
Making every contact count	X		X
Be open, honest and transparent when communicating with residents	X		X
Provide residents with accessible information	X	X	X
Empowering people to make behaviour change		X	
One-stop-shop within the community		X	
System navigators		X	
Current services expanded and improved		X	
Recognising residents as equal partners			X
Recognising the assets that you have, combining budgets, resources and contracts			X

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Summary Matrix – the How

Networks	Confidence	Navigation	It's about me
Public transport		X	
North-West ambulance service and West Midlands ambulance service	X		X
Fire department	X		X
Health watch	X	X	X
Communications and engagement team			
Third sector	X	X	X
Parish council			
Local radio stations		X	
Schools	X	X	X
People from the community	X	X	X
Housing associations	X	X	X

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Summary Matrix – the WHAT

Actions	Confidence	Navigation	It's about me
Create a communication plan that is aligned, meaningful and accessible to all	X	X	X
Continuously involve residents in the conversation	X	X	X
Invest in hubs or centres in the local community		X	X
Expand current services to provide support		X	X
Broader activities and projects need to align and join up their processes, making every contact count	X	X	X

Demonstrate	Confidence	Navigation	It's about me
Measure impact on the drivers			
Ask people what they think			X
Take a base measure and then compare at follow-up of access figures	X	X	X
Celebrate successes	X		X

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Your GIFTS from the start of the session

Word cloud: Disruption, Leadership, quo, Bringing, Organisation, Passion, Challenging, Commitment, Amplification, Inquisitive, Coordination, order, Tenacity, status, Curious, Listening, Clarity

- Listening
- Spreading the word
- Taking on board and being able to transact, and where available use NHS funding
- Speaking directly to residents within the community
- Leadership - making it happen
- Supporting all age carers, raising their profile and listening to them
- Ensuring inequalities and residents' health is always considered
- Listening and passing on information from residents to group
- Not taking no for an answer, balance and positivity, encouraging communities and pushing for change where highlighted and needed
- Listening to people and sharing their views
- Supporting the commissioned based services
- Me and positivity
- Listening and 'doing services with' residents rather than 'doing to residents'

Recommendations

1. **Set the mantra for the programme of work to be 'we do with', 'we don't do to'.** Make sure you are all connected and signed up to this way of working and ensure your get buy in for this from senior leaders – they need to be shouting this loud and clear.

2. **With your network, create a vision and a narrative that you all sign up to and support.** Agree how each organisation will work to deliver the vision, hold each other to account for delivering what you have committed to and ensure that the network sees and celebrates the positive impact it is having. Think of ways that you can communicate informally as well as formally, to create trust and rapport. What's App groups are great for simple things like shining a light on something positive that someone has done, sharing a positive thought for the day or even saying 'happy birthday'.

3. **Co-create the action plan with the communities that will deliver it.** Don't fall into the trap of doing the plan without them. Remember that those who create it actually create ownership of it and those who own it go on to deliver it.

4. **Engage citizens** – make them feel part of the process, that they have a voice and that their voice is being heard.

5. **Invest in the development of community leaders** – help equip them with the skills they need to go out and lead their communities

6. **Ensure you can evaluate and celebrate your progress,** make sure that people can see the positive steps you are taking and help make them feel proud of what you are doing together

7. **Map services against needs** – what can your services do to meet need and where else can needs be met

8. **Remember to have fun along the way and be kind to yourselves and each other**, this is about living well and your wellbeing is as important as the people your programme will empower.

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Together we...

make
better
happen

Specially prepared for you by team **ice**