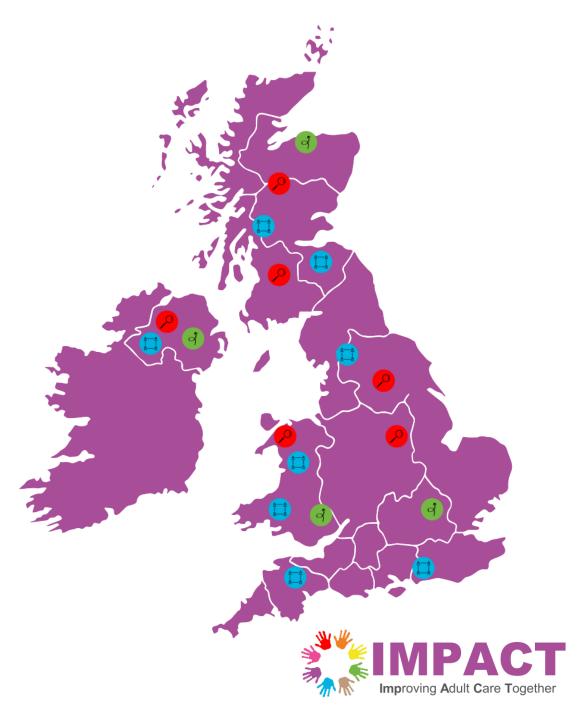




- IMPACT (Improving Adult Care Together) is a £15m centre (2021-27), funded by the ESRC and Health Foundation
- IMPACT works right across the UK to implement evidence of what works in the realities of local practice and people's lives
- 'Evidence' includes insights from research, lived experience and practice knowledge. Lived experience is built into everything we do
- Led by 14 leading academic, policy and practice partners, across the four nations (including lived experience)
- IMPACT has four delivery models: Demonstrators, Facilitators, Networks and Ask IMPACT
- We work in the realities of local practice, using learning to influence national policy/practice ('national embedding')



### Our four key aims

- Increasing the use of high-quality evidence, leading to better care practices, systems and outcomes
- Building capacity and skills in the adult social care workforce to work with evidence of different kinds to innovate and deliver better outcomes
- **Developing relationships** between a wide range of stakeholders across the sector, to improve outcomes for people who draw on services and their families
- Improving understanding of what elements of evidence implementation do and do not work in practice, and using this to overcome barriers



**Demonstrators** focus on major strategic issues and longterm change. 'Coaches' work with a local system to facilitate .cilna. an evidence-informed change and embed lessons. in national policy and practice.

**2022-23** – Asset-based approaches 2023-24 - Integrated health and social care teams, wellbeing of PAs, managing waiting lists 2024-25 - Culture of prevention; day opportunities; C lived experience framework; public perceptions; reducing violence; social work practice; transition from children to adults

**Networks** focus on complex but everyday practice issues. Local groups all work on the same practical issue, with learning shared and scaled across the country.

2022-23 – Choice and control, values based recruitment

2023-24 - Wellbeing of care workers, hospital discharge, rural services, remodelling the "front

door", leaving long-stay hospitals, care homes and local communities 2024-25 - Care technology; carers, care transitions and co-production; lived experience and strategic commissioning; recovery-based approaches in mental health; strengthening inclusion and anti-racist practice; support to overcome 'thorny' commissioning issues

Facilitators lead more bottom-up, evidence-informed change in a local service.

> 2022-23 – Personalisation and people from BME communities; care technology; end of life for carers of people with dementia 2023-24 - Recruiting more men; tackling loneliness; reducing admissions to mental health hospitals; preventative visits for people aged 75 2024-25 - Boosting employment; joint work with housing; Family Group Decision Making; hoarding and self-neglect; improving support for carers; supported living and choice/control

> > Ask IMPACT identifies 'hot topics' and produces rigorous, but accessible and very practical guides to the evidence. Aims to built a trusted repository over time.

**2022-23** – Recruitment and retention

2023-24 – Lessons from COVID-19, hospital discharge **2024-5** – Integrated teams; preventing abuse; Training; self-funding

## Hosting a future IMPACT project

- We have launched a **national application process** to identify the sites and services who will work with us in 2025-26 (starting from **Sept 2025**)
- The application needs some local preparation but the process itself is very light touch.
- It closes on 20<sup>th</sup> November 2024 and the full details are on the IMPACT website
- We are running two online briefings to answer any questions (we'll also make the recording available) – and can book a one-to-one call to discuss further if this would be helpful
- We're looking for a wide range of organisations (all types and sizes) and locations, across the UK
- We particularly welcome applications from organisations that might not normally come forward (e.g. community- and user-led organisations, small organisations, organisations that might be struggling a little and really benefit from the support etc)



#### **Potential Demonstrators**

- Developing new models of home care (moving beyond 'time and task' approaches to ones which build around people's lives, focus on outcomes and create social value, all of which might involve a shift in funding, care planning, training and skills)
- Supporting more of a research culture in adult social care
- Climate change either reducing social care's contribution to climate change or planning ahead who might be particularly affected by climate emergencies
- Tackling poverty either of people who draw on care and support or of care staff
- Improving the support offered by community teams and the voluntary sector to people who are experiencing mental health crisis
- Boosting re-ablement and/or intermediate care often part of a 'home first' approach





#### **Potential Facilitators**

- Supporting staff to deliver compassionate care
- Improving support for people with dementia and their families
- Improving staff training (including scope to co-design and co-deliver training with people who draw on care and support)
- Improving support for people who are LGBTQ+
- Care and support for people who are homeless
- Encouraging young people to develop careers in social care
- Support for carers of people with mental health problems or of older people
- Developing practice leadership in social work





### **Potential Networks**

- Providing support to people who fund their own care
- Delivering social care in coastal communities
- Citizen leadership (people who draw on care and support being supported to take up leadership responsibilities, as we seek to design social care systems around the priorities and interests of people with lived experience and communities)
- Exploring the use of artificial intelligence in adult social care
- Meeting the social care needs of refugees and asylum seekers
- Breaking down barriers between different 'service user' groups, by promoting more intergenerational and whole family approaches
- Improving retention of staff
- Using data to improve services

NB each Network has around 5 local groups taking part – so there is 5 times the success rate with an application to be part of a Network!



### What IMPACT provides (Demonstrators and Facilitators)

- IMPACT recruits, funds and manages staff who are based in your local service, facilitating evidence-informed change in the realities of local practice/people's lives
- Each project has an additional budget to enable additional participation of people whose voices are seldom heard and to get lessons learned into national policy and practice
- These staff members can be employed one of our five lead Universities but could also explore secondments from policy, practice or applied research (roles are typically 50% fte over 12m so <u>ideal for secondments</u>)



# What IMPACT provides (Networks)

- A local Network co-ordinator receives an honorarium they are often a senior person or key local leader who is already wanting to work on this topic. The Network provides helpful support, structure, momentum and learning
- IMPACT pays for venue/refreshment costs
- We can support **participation** by paying for things like travel, replacement care, PA support etc if this helps people contribute
- The IMPACT team provides initial evidence/briefing etc and shares learning across the different groups
- Networks allow organisations to **connect** with other, similar organisations across the UK
- They have some additional funding to influence national policy/practice
- They re-contact sites at a later date to see how things have gone since the Network we hope that lots of Networks will continue to meet over the longer-term where this adds value locally



## What you need to apply

The host site:

- Provides a **desk/office space** for the worker
- Commits to principles of co-production and to enabling staff to attend events (where feasible)
- Has senior support and commitment
- Agrees to learning being shared and contributes to evaluation/keeps in touch with us afterwards to help us find out what happens next

Networks are convened by a local co-ordinator

We've learnt that **timing is important** – it works best when you're definitely going to work on something, but it isn't too fixed in stone



Find out more about our projects, people and progress, and sign up to our monthly newsletter:

www.impact.bham.ac.uk @ImpAdultCare

