Succeeding Together

Strategic Plan 2023-26

Second Step Strategic Plan 2023-26

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Contents

Introduction

We are delighted to introduce the Second Step Strategic Plan for 2023 to 2026. We're excited about the next phase of our development as an organisation that continues to strive to deliver high quality services to some of the most marginalised people in our society. Despite the challenging environments all organisations are facing, we are keen to use this time to make the most of some significant opportunities for the people we support.

So much has been revealed about inequality throughout the pandemic at a local, national and global level. We are committed to doing everything we can both internally and externally to tackle these inequalities constructively, by developing the way our services are delivered, and also by tackling the root causes and social determinants that underlie them.

The NHS agenda of integrated working across boundaries fits well with our focus on joined-up care and on supporting people with mental health needs who can easily fall between organisations. We're keen to make sure we take every opportunity to play our part in creating strong and successful partnerships over the next three years. We're particularly proud to bring our learning from Bristol's Changing Futures[1] and Golden Key programmes[2] to our work as an experienced and supportive system partner.

We continue to work through the things we learned through the challenging times of the pandemic, and it is this learning that forms the core of this Strategic Plan. We are keen to embed these cultural shifts to make us a more inclusive, trauma-informed, and enabling organisation. We are also committed to ensuring coproduction with our clients continues to drive improvement in services. To this end our overarching theme and value for the plan, and for the next three years, is **succeeding together**.

We hope that this plan inspires you as much as it does us, and you will join us to seize these opportunities. Please do get in touch if you would like to discuss any part.

Graham Russell, Chair of the Board   Aileen Edwards, Chief Executive

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[1] www.changingfuturesbristol.co.uk/
[2] www.goldenkeybristol.org.uk/

Second Step – who we are

Second Step provides community mental health and wellbeing support to people across the Southwest[1].

We work alongside people with more severe mental health needs, and those with common mental health issues as well as people facing multiple disadvantage.

Our services are recovery and strengths-based, and psychologically, adversity and trauma-informed. We believe through hope and courage people can find ways to change their lives for the better. Our role complements and adds value to other agencies and we strive to be a good system partner.

Throughout our work, we aim to reduce mental health inequalities and promote inclusion, in partnership with other agencies.

We work with people holistically, supporting them to navigate into other services and providing practical support such as housing where we can. We aim to build people's resilience and agency, enabling them to develop their ability to manage their own situations, including connecting with their communities and their own lived experience.

Our continued focus is on supporting people to achieve long-term positive change.

We work actively within the mental health, homelessness and complex needs sectors, locally and nationally. As the lead delivery agency for Bristol's Changing Futures programme, we work in partnership to transform services for people facing multiple disadvantage, and to influence future policy and funding at local and national levels.

Taking a system-wide perspective, understanding blocks and barriers and listening to the experiences of our diverse client group, Second Step is informing and enabling the system to change to support some of our communities' most vulnerable people to achieve more fulfilling lives.

Established in 1987, Second Step is rooted in Bristol and has branched out to work with communities in the Southwest of England[1].

We say more about how we work, and the key features of our services, in Appendix 1.

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[1] Currently Bath and North East Somerset, Bristol, North Somerset, South Gloucestershire and Somerset.

Our mission

We promote mental health and wellbeing by supporting people and communities to build brighter futures.

Our strapline

Putting mental health first.

Our vision for 2023: Succeeding Together

We will bring the best of our organisation, staff, client and partner resources to deliver services that improve the lives of people with mental health needs, and those facing multiple disadvantage.

We will do this by focusing on four strategic priorities:
- Building an inclusive culture where everyone thrives
- Embedding trauma-informed practices so people have the best experiences and outcomes
- Actively valuing lived experience and working in partnership with our clients
- Being an enabling organisation where everyone contributes fully to improve services and the system as a whole.

Our values

Believing in Hope and Courage
Recovery becomes a reality when we are confident, courageous and inspire hope in one another. In this way change happens and we can achieve great things.

Succeeding Together
We're at our best when we work together - staff, clients, carers and partners - making the most of each other's talents and strengths.

Building Trust
When we act with integrity, when we strive to be honest with ourselves and those around us, we can build strong bonds of trust.

Celebrating Diversity
We value our differences, understanding that being kind and respectful to each other makes us strong.

Learning and Growing
By listening and thinking about how we can learn from our actions, we can help create real change for ourselves and inspire those around us.

Strategic priorities

Second Step will focus on four key areas over the next three years, in order to achieve the organisation's vision and mission. These areas are our strategic priorities:

1. **Building an inclusive culture where everyone thrives**

2. **Embedding trauma-informed practices so people have the best experience and outcomes**

3. **Valuing lived experience and working in partnership with our clients**

4. **Being an enabling organisation where everyone contributes fully to improve services and the system**

Strategic priority 1: Building an inclusive culture where everyone thrives

Why is this important to us?

There are long-standing inequalities in mental health, and across wider systems and society. We know these have deep and lasting impacts on people with mental health needs and those facing multiple disadvantage.

Through the first phase of our work on addressing racism, where we focused on our staff group, we've shown our commitment, honesty and passion for working together to bring positive change. Our staff tell us we are making progress. We know there is a lot more to do to create a truly inclusive culture, where everyone – our clients, our staff, and our partners - can really thrive. It's vital we embed and build on the advances we've made and maintain our momentum.
We will be in the best position to achieve this by ensuring we have a diverse staff and leadership group and by harnessing the diversity and richness of everyone's talents.

What does this mean for us?

Progress our work on addressing racism
We will forge ahead with the next phase of our addressing racism work, where we will focus on improving the experiences of our clients.

Develop and deliver a new diversity and inclusion strategy
Our learning from this, and from our addressing racism work with staff, will inform the development and delivery of a new equality, diversity and inclusion strategy for the organisation. The new strategy will look at how we strengthen what we do across all aspects of our work, and the actions we will take to embed this, and have a lasting impact.

Strengthen engagement with underserved communities
We will improve our understanding of the experiences of people in underserved communities. We will ensure our support is tailored to their cultures, aspirations and changing needs.

Complement our partners' strengths
We will strengthen our collaboration with diverse partners, to fully understand and value the different roles we play to deliver a comprehensive and inclusive offer. We will work hard to ensure there is an integrated way of providing services to meet individual needs.

We will develop and implement a Digital Inclusion Plan to support people to connect digitally, and to help tackle digital poverty.

Improve our data collection
We will improve our data collection, and how we use it, to demonstrate the impact we are having, and to drive further positive change.

What does success look like?

- The composition of our staff group and leadership group is more reflective of the communities we support
- We have better data and use this to improve services and influence system change.

Strategic priority 2:
Embedding trauma-informed practices so people have the best experience and outcomes

Why is this important to us?

When people have a positive experience with us, the conditions are created for them to achieve more fulfilled lives and the best possible outcomes. We know how vital it is that we really listen to and understand people's stories and experiences and are continually informed by what they tell us.

We aim to deliver high-quality trauma-informed[2] support across all our services, so we are consistently doing our best for people. The fact that people are facing very challenging times makes it even more important that we do more to support people's wellbeing and ambitions.

We are proud of the progress we are making in putting trauma-informed practice at the heart of what we do. We are fully committed to embedding our psychological, adversity and trauma-informed adversity approach across the organisation, and will work to ensure it continues to influence wider learning and change. This includes opportunities to intervene earlier, before people reach crisis point.

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[2] https://www.gov.uk/government/publications/working-definition-of-trauma-informed-practice/working-definition-of-trauma-informed-practice

What does this mean for us?

<u>Build on our Psychologically, Adversity and Trauma-Informed (PAT) strategy</u>
We will fully implement our PAT strategy throughout all our services to ensure we operate trauma-sensitive practices and skills in managing safe relationships, with well-supported staff, and in assessing, creating and supporting our clients' safety.

<u>Continue to learn and influence</u>
We will continue to innovate service models and work in partnership to influence wider change. More people will receive integrated support, in the right place at the right time. We will build on the learning from our Alliance work in Bristol North Somerset and South Gloucestershire (BNSSG) and Somerset, and our learning from Changing Futures about My Team Around Me and how we can intervene earlier with clients.

<u>Strengthen coproduction</u>
We will continue to strengthen coproduction with the people we support, so their voices inform the ways we work with them, and they have a greater sense of control and empowerment.

<u>Diversity awareness</u>
We will continue to recognise the complexity of people's lives, with consideration of cultural, gender and historical contexts, and work together to build people's skills, confidence, agency and hope.

<u>Housing as a priority</u>
We recognise the vital role safe, stable housing plays in people's quality of life and futures, and we will review our housing offer.

What does success look like?

- All our clients report that they feel listened to, and have a positive, safe experience with us, with better engagement and outcomes
- Staff report feeling better supported for delivering psychologically and trauma-informed services and can evidence increased skills
- Working with partners, we can see more integrated care and services.

Strategic Priority 3: Valuing lived experience and working in partnership with our clients

Why is this important to us?

When we listen and learn from the people we support, we deliver better services and have a bigger impact on their lives. What's more, when we draw on people's

diverse skills and talents, we achieve more together. This makes us stronger as an organisation and more successful at influencing change in the system.

We believe transformational, system change only happens when people with lived experience of the system are equal partners.

What does this mean for us?

Strengthen client and carer voice
We will strengthen our client and carer voice, internally and externally, through improved methods of engagement. This will include introducing new ways to improve our client insights and feedback loops.

Improve coproduction
Strengthen coproduction with our clients and the involvement of carers, to have a bigger voice and influence throughout the organisation and through our external partnerships. This will include applying the learning from Changing Futures.

Implement new Peer[3] Strategy
We will value and benefit more fully from people's lived experience by creating more opportunities for people with diverse backgrounds and life experiences to move into volunteering and paid roles with us. We will achieve this by implementing our updated Peer Strategy.

What does success look like?

- Clients and carers report that their knowledge and experience is having a meaningful impact within the organisation. Every service has a STAR (coproduction) Group
- More people use their lived experience within the organisation in staff or volunteer roles
- People with lived experience report how they are having a wider influence on service and system improvement.

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[3] We class peers as people with lived experience that are employed at Second Step.

Strategic priority 4: Being an enabling organisation where everyone contributes fully to improve services and the system

Why is this important to us?

We want our culture to be truly enabling. For us this means it must fully reflect our values and create the conditions for everyone to give their best and have great job satisfaction. This is vital for achieving lasting improvements at client, service and system levels.

Our staff and volunteers are our greatest asset. With our sector facing significant workforce challenges, we want to be creative in offering more opportunities for people to move into jobs with us and stay with the organisation.

Through our Mental Health Alliance work in Bristol, North Somerset, South Gloucestershire, and Open Mental Health in Somerset, we have learnt about working in new, more integrated ways, in collaboration with our partners. Through our role in Changing Futures, we are learning more about the most effective ways to collaborate and support people experiencing multiple disadvantage, and to bring about system change.

We have strong local knowledge and partnerships and want to continue to be a good system change partner.

What does this mean for us?

New Reward and Recognition Strategy, and Recruitment and Retention Project
Our staff are our most important asset and highly valued. We know that staff are struggling with the cost-of-living crisis, and we are working to support them by implementing our Reward and Recognition Strategy, which will look at renumeration and other benefits. We will improve our workforce resilience through our Recruitment and Retention Project. This will include growing our own staff skills through a strong development programme. We will also increase volunteering opportunities.

Enabling staff at every stage
We will further develop an enabling culture for our staff, informed by the Calderdale[4] principles, which optimise the workforce by enabling staff to work to the top of their scope, with effective skill sharing and delegation. We aim to achieve a clear balance of autonomy and accountability.

Staff support and wellbeing
We will make it easier for staff to communicate and share learning across the organisation. We will continue to improve the ways we support staff, and therefore satisfaction and wellbeing. We will move our Bristol office to a new base, to enable better collective working, which will serve the whole organisation's needs.

Client support
We will continue to walk alongside our clients, enabling them to build their strengths and aspirations.

Being a good partner
We will continue to develop our Alliance work, knowing our strengths and how we can best complement our partners, providing compassionate and generous leadership, and building our resilience as a system partner.

What does success look like?

- Clients report improved confidence, a sense of agency and hope
- We achieve improved staff recruitment and retention rates
- We are part of strong, inclusive, sustainable alliances, working effectively in collaboration with partners and people with lived experience.

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[4] https://calderdaleframework.com

Our principles and strategy for business development

Alongside our strategic priorities, we will continue to find ways to meet more people's needs and continue to develop our service offer.
The following **principles** underpin our approach:

- Growth into new areas must be led by significant sustainable contracts
- We seek to do things in partnership, where that enhances quality and impact
- Business development and operations work hand in hand to plan for growth
- We balance our capacity to deliver when taking on small innovation contracts.

Our strategy

To have a continued focus on working with people with moderate to serious mental illness and multiple disadvantage.

To know our strengths, and how we complement partners, to deliver an integrated offer.

To improve and consolidate our services, and seek new income sources to enhance and strengthen our offer and impact – understanding that quality improvement and growth go hand in hand.

To be open to opportunities, and to expand and strengthen our position as mental health and multiple disadvantage partner of choice for the Voluntary, Community or Social Enterprise (VCSE) sector, NHS, Social Care and Local Authorities.

To develop our role and place as partners in the mental health/social care transformation agenda, how we work together, and to provide leadership in any collaboration.

To work with our partners to develop our partnerships with the BNSSG VCSE Mental Health Alliance and Open Mental Health. We will draw on this learning for future opportunities.

To improve our relationships with specific place-based communities, and communities of interest, to serve our clients better.

To build on the vital role that stable housing plays for the people we support to thrive in their communities, we will refresh our Housing Strategy, including consideration of move-on for clients, and our partnerships.

How will we achieve our strategic priorities?

Our four strategic priorities are underpinned by actions required to deliver a successful Strategic Plan. These actions are categorised within our five core organisational pillars:

1. Excellent Services
2. Organisational Development
3. Infrastructure
4. Meeting More People's Needs
5. Speaking Up for Mental Health

By aligning actions to our organisational pillars, we are able to focus the strategy across all parts of the organisation. It means we can also optimise the use of resources to achieve the best possible outcomes and impact for Second Step and its clients. Each action will be supported by an internal SMART plan and key milestones.

See how everything links together here:
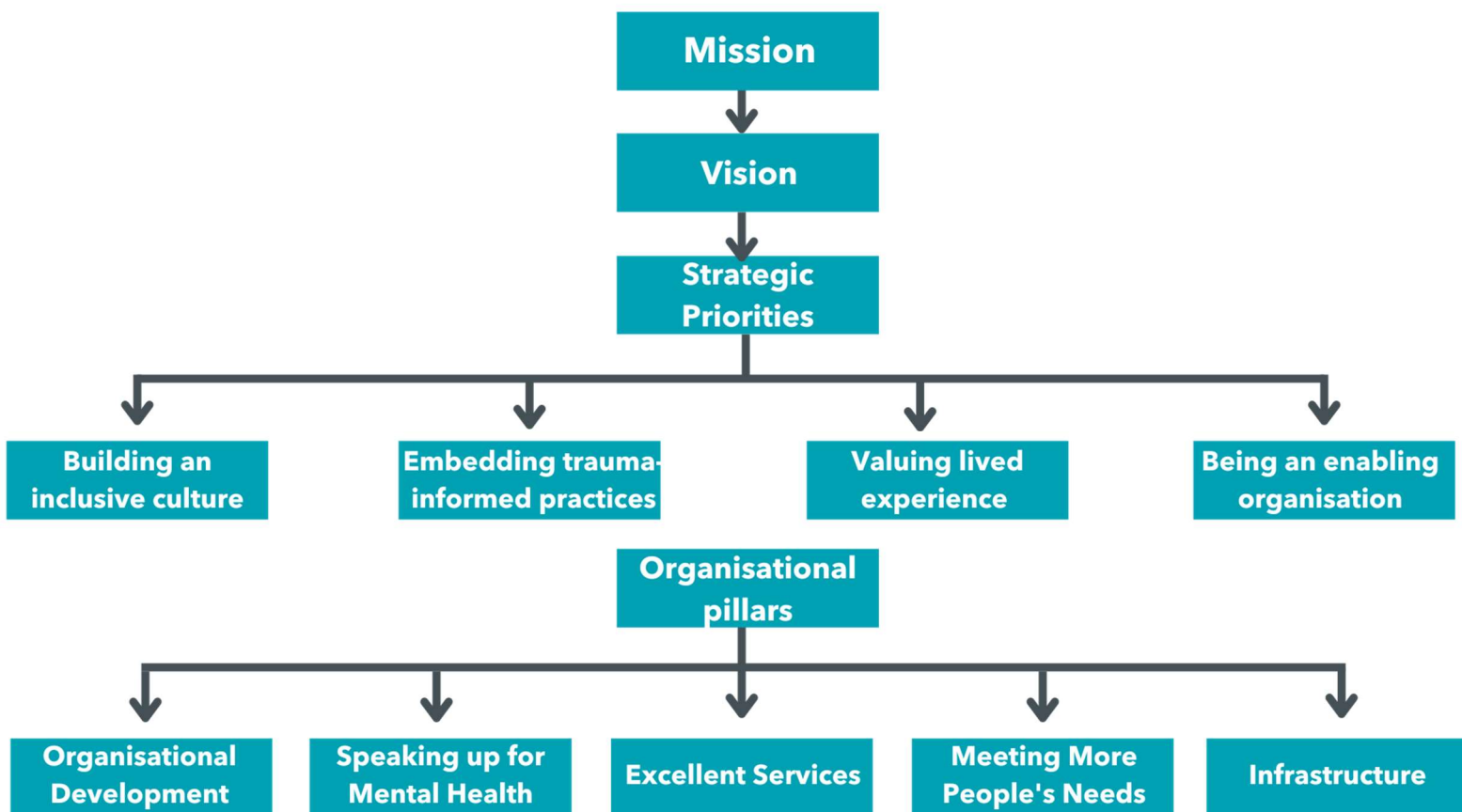
Activities

Excellent Services and Innovation: Deliver excellent and innovative services for clients	Activities – how we will achieve excellent services	
	1.1	Implement our Psychologically, Adversity and Trauma-Informed Strategy
	1.2	Develop and implement a Digital Inclusion Plan for clients, to tackle digital poverty
	1.3	Pilot, evaluate and roll out new client insight activities, more meaningful and timely feedback loops
	1.4	Implement phase 2 of our Addressing Racism strategy, focused on our clients, and build on this to have a wider equalities strategy
	1.5	Develop a more in-depth understanding of underserved communities and their needs
	1.6	Review our existing housing services and offer
	1.7	Improve relationships with specific place-based communities and communities of interest

Organisational Development with motivated and talented staff: Improve the performance and quality of how we support clients	Activities– how we will achieve quality and performance	
	2.1	Implement Phase 1 of our Addressing Racism Strategy
	2.2	Implement our Reward and Recognition Strategy
	2.3	Update our appraisal system to improve staff performance and satisfaction
	2.4	Implement our Recruitment and Retention project to improve workforce resilience
	2.5	Implement our updated Peer Strategy
	2.6	Progress our EDI Strategy, informed by Addressing Racism work
	2.7	Grow our own staff skills through a strong development programme, (e.g. apprenticeships, formal qualifications)
	2.8	Further develop an enabling culture, informed by Calderdale principles, with clear balance of autonomy and accountability

Infrastructure: Ensure the organisation is efficient and well organised	Activities - how we will be an efficient and well organised organisation	
	3.1	Secure office space to meet long-term requirements
	3.2	Implement internal communications plan so staff can communicate more easily and effectively across the organisation
	3.3	HR Information systems improvement

Meeting More People's Needs: Support growth and new business	Activities - how we will achieve organisational growth	
	4.1	Articulate our strengths and how we complement our partners
	4.2	Seek new income sources to expand successful models, enhance and extend our impact, including a PAT training offer
	4.3	Work with our partners to develop the BNSSG VCSE Mental Health Alliance and Open Mental Health in Somerset
	4.4	Further develop our work with people facing multiple disadvantage, informed by Changing Futures
	4.5	Strengthen our position as partner of choice for VCSE sector, NHS, Social Care and Local Authorities
	4.6	Refresh our Housing Strategy, to include consideration of move-on for clients, and our partnerships

Speaking up for mental health: Put the voice of clients at the heart of external and internal communication	Activities - How we will speak up for mental health	
	5.1	Improve our client insights and feedback loops, and methods of engagement, so we are learning more fully from their experiences, and strengthening client and carer voices
	5.2	Strengthen coproduction with our clients and the involvement of carers, to have a bigger voice and influence throughout the organisation, through our external partnerships and communications
	5.3	Update our external communications strategy

Appendix 1: How we work

At Second Step, we know that paying attention to *how* we work with our clients, people with lived experience, our staff and partners, is key to our success as an organisation.

Our overall guiding principle is that we are a well-resourced, resilient, enabling organisation providing excellent, quality, sustainable services and achieving high levels of satisfaction amongst our clients and staff. This principle helps us stay focused on what we are aiming for, to be most effective.

Our values drive the way we deliver services and how we work with people. The feedback from our clients, our staff and our partners highlights that this makes a real difference to people, and what we can achieve together.

We have worked together to best describe what we believe Second Step is good at:

- We support people with moderate and serious mental health needs and experiencing multiple disadvantage, to develop their self-care and living skills
- We walk alongside people to enable them to develop their confidence, agency and hope
- We are skilled in assessing, creating and supporting safety
- We have excellent local knowledge and relationships with other agencies. We work in partnership to deliver integrated support
- We support people to connect with their communities and develop their sense of belonging.

We ensure the following features are at the heart of how we work, to make our services effective:

Psychologically and Trauma Informed
- We operate trauma sensitive practices and are skilled in managing safe relationships, with well supported staff.

Diverse and inclusive
- Building on our Addressing Racism and EDI work, we ensure our services are inclusive and culturally informed.

Holistic and strengths-based

- We recognise the complexity of our clients' lives and work with people to identify their skills and resources.

Valuing lived experience and client involvement
- We value the voices of people with lived experience, promote coproduction and client involvement in every service, and throughout the organisation.

Informed by good practice, learning and feedback
- We learn from people's experiences of our services, develop new ways of working, and strive to deliver high quality services throughout.

Appendix 2: External influences

This is a summary of the external environment relevant to our work at three levels: With our clients, as an organisation, and our contribution at system level.

The information has been drawn from local and national research and reports and covers headlines on need, policy direction and commissioning intentions.

Cross-cutting themes

The following factors impact the people and communities that Second Step works with:
- Cost-of-living crisis
- Growing inequalities
- [5]Growing numbers in 'deep poverty' where the top risk factors are worklessness, ethnicity, disability and living alone.

Alongside this, the following are set to impact this further:

- Recession
- Cuts to public services, including Adult Social Care. Includes Local Authority review of service rates in line with Fair Cost of Care guidance
- Pressure on the health and social care system, with significant workforce shortages, overload, recovery from impact of Covid 19
- Likely general election in 2024.

Mental and Physical Health

Need

[6]One in four teenagers aged 17-19 has a mental health difficulty, an increase from one in six in 2021. One in four young people with mental health difficulties had experienced bullying online.

The most prevalent mental health issues in adults are depression and anxiety. [7]While one in four people will experience a mental health problem of some kind in each year in England, some groups are more likely to be affected, including:

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[5] Going Without: Deepening Poverty in the UK, Joseph Rowntree Foundation
https://www.jrf.org.uk/report/going-without-deepening-poverty-uk
6 Centre for Mental Health, December 2022
7 Mind

- People who identify as LGBTIQ+ who are between two-to-three times more likely than heterosexual people to report having a mental health problem
- Black or Black British people - 23% will experience a common mental health problem in any given week compared to 17% of White British people. Further, [8]African Caribbean men are many times more likely than their white peers to be identified with severe diagnosable mental health conditions, more likely to end up in costly and restrictive mental health crisis settings, and also over-represented in other areas of the system: excluded from school and in contact with the criminal justice system.

In our Bristol community rehabilitation and recovery and assessment services, we have seen an increase in acuity, risk levels and complexity of people's mental ill health. Our Hope suicide prevention service has seen an increase in demand. Nationally, 50% of mental health problems are established by age 14, 75% by 24[9].

Locally, [10]Bristol's rates are higher than national for mental ill health, suicide, self-harm admissions, and reduced life expectancy for men, and [11]mental health service users attend A&E three times more than the wider population. [12]Bristol's rate for depression rose to 13.5% in 202/21- significantly higher than in 2019/20 (12.6%) and the England average of 12.3%.

The link between mental health and physical health is well established with those experiencing severe mental illness dying between 15 and 20 years younger[13]. In terms of inequality, those with long-term health conditions are 23% less likely to have the digital skills for life[14].

There is growing recognition of the mental health impacts of loneliness and links to deprivation[15] . Certain risk factors increase our chances of severe and lasting loneliness that can affect our mental health, including being unemployed, living alone, having a long-term health condition or disability, living in rented accommodation, being from an ethnic minority or LGBTQIA+.

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8 https://www.centreformentalhealth.org.uk/blogs/against-odds-putting-young-black-mens-wellbeing-first
[9]Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. Archives of General Psychiatry, 62 (6) pp. 593-602. doi:10.1001/archpsyc.62.6.593.
[10] Health and Wellbeing in Bristol 2018 (Joint Strategic Needs Assessment)
[11] CCG data for BNSSG, 2018
[12] Health and Wellbeing Profile 2022/23 (Joint Strategic Needs Assessment)
[13] British Medical Journal https://bjgp.org/content/67/663/436
[14] Good Things Foundation: Good-Things-Foundation-2021---Digital-Exclusion-and-Health-Inequalities-Briefing-Paper.pdf
[15] Mental Health Foundation MHAW22-Loneliness-UK-Report.pdf (mentalhealth.org.uk)

Community and family connections are disrupted by rising levels of homelessness, insecure housing and mental health problems.

Policy direction

Nationally, the government launched its [16]Major Conditions Strategy in early 2023, which includes mental ill health. This sets out a shift to integrated, whole person care, building on measures in the NHS 10-year plan. Areas of focus continue to include new models of crisis services and for severe mental ill health; a move towards place-based multi-disciplinary services aligned with primary care; suicide reduction roll-out; and elimination of all inappropriate out of area placements.

In BNSSG Integrated Care Board, there is a focus on health inequalities.

The BNSSG Mental Health and Wellbeing Strategy (June 23) is to align with ICS Strategy. Themes include:
- ACEs, and treatment that is trauma-informed
- All age mental health strategy
- Anxiety and depression
- Serious Mental illness.

AWP's 2023 Strategy has been out for consultation. We await publication and understand it aims to transform services to become more integrated.

Housing and homelessness

Need

The [17]Kerslake Commission warns that progress made during the pandemic in reducing the numbers sleeping rough through Everyone In could be lost with the impact of cost-of-living pressures, and calls for more cross-government action.

Reflecting this concern, according to an [18]official count, the number of people sleeping rough in London has jumped 24% in the past year (2021 - 22). In Bristol, the [19]number of people who had slept rough at any time within a three-month

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[16] https://igpp.org.uk/blog/article/government-announces-new-nhs-strategy-tackle-major-conditions-and-diseases
[17] Kerslake Commission Report September 2022:
https://usercontent.one/wp/www.commissiononroughsleeping.org/wp-content/uploads/2022/09/KRSC_Progress_Report_0922a.pdf
18 The Guardian: Number of people sleeping rough in London up 24% in a year | Homelessness | The Guardian
19 Data from Bristol Outreach Service

period was 175 during October to December 2021, rising to 200 in January to March 2022. [20]A total of 28 homeless people died in the city in 2021, compared to 18 the previous year.

In [21]rural settings, rising homelessness is described as an 'unseen crisis', with a 24% increase in rural rough sleeping in 2022, compared to the year before[22]. In [23]Somerset, the biggest reason for contacting the local authority by homeless adults was loss of an assured shorthold tenancy. In Bristol, rental prices are rising faster than the national average.

[24]New research finds that homelessness disproportionately affects Black and Minoritised Ethnic households, mainly people from Black and Mixed Ethnic backgrounds.

Overall, there is a continuing lack of affordable housing and an increasing gap between market rents and the Local Housing Allowance.

In the [25]Bristol adult and young people accommodation Pathways, the highest support need continues to be mental health at 79% (663 people).

Policy direction

The new [26]national rough sleeping strategy continues the move towards early intervention and integrated models, with closer working between Housing, Homelessness and Health.

While there is some investment in new homes, there is a significant gap in availability of truly affordable housing, against growing demand. The affordability gap is compounded by the continuing and growing disparity between market rents and Housing Benefit levels.

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20 Museum of Homelessness
21 Rural Task Force (national charities and housing providers: https://englishrural.org.uk/rural-homelessness-focus-of-new-study/
22
23 Somerset Homelessness and Rough Sleeping Strategy and Action Plan 2019 – 2023. https://www.southsomerset.gov.uk/media/3408/somerset-homelessness-rough-sleeper-strategy-action-plan-2019-2023.pdf
24 Homelessness Amongst Black and Minoritised Ethnic Communities, Herriot Watt, Oak Foundation, November 2022
25 Homelessness and Health Report, BCC, 2022
26 Ending Rough Sleeping For Good, September 2022

What this means for our clients

With the cost-of-living crisis, the people we are here for face additional risks to their mental health and wellbeing, challenges in maintaining a warm and stable home, and impacts on their life chances.

The most vulnerable, marginalised individuals and communities face growing inequalities.

People need our support more than ever.

What this means for us as an organisation

In the current climate we face a range of internal challenges, including recruitment and retention of a diverse, skilled workforce; planning and continuing to innovate in complex environments and uncertain times, when there are financial pressures and cuts; and ensuring we have a strong sense of identity and our place, across all our services, working as one organisation.

We are committed to building on our Addressing Racism work by developing a broader equalities strategy, and delivering real change and improvements in how we work.

Key points for the system

The Health and Social Care system faces unprecedented pressures. Parts of it are in crisis.

While the VCSE is increasingly recognised as an equal partner alongside the NHS, local authorities and other statutory players, there is a risk of retrenchment and protectionism in those parts of the system which face the biggest pressures in the current climate.

We have a key role to play as a system player, building on our learning from Golden Key, our experiences with provider-collaborative models and new ways of working in partnership, and through Changing Futures.

We face the ongoing challenges of balancing our role and responsibility at system level, with our own organisational interests. These are fundamentally connected. We need to continue to show leadership, invest our time, and continue to find the capacity and resilience to contribute and have an impact at system level.

Commissioning Intentions

Bristol, North Somerset and South Gloucestershire ICB:

The Community Mental Health Programme will continue to be the focus over the next period, with a move to:
- place-based models
- integrated working across primary and secondary care and VCSE
- multi-disciplinary team around the client
- joining of clinical and psychological interventions.

Priorities are improving the primary and secondary care interface and building a better primary care offer, reducing suicides, delayed transfers of care, out-of-area placements and A&E attenders, providing crisis provision spaces, and on prevention, looking at the role of social prescribing and wellbeing colleges.

It is intended to review and replicate the Community Rehabilitation model to cover all of BNSSG.

Overall, the direction is towards long-term contracts, recognition of wider determinants of mental ill health, locality models with local anchor organisations and strategic partnerships. We need to understand at which level our services sit.

Somerset Integrated Care System:

In Somerset, the vision for the next 10 years is for all organisations to work together as a partnership to create:
- A thriving and productive Somerset that is ambitious, confident and focused on improving people's lives
- A county of resilient, well-connected, safe and strong communities working to reduce inequalities
- A county infrastructure that supports affordable housing, economic prosperity and sustainable public services
- A county and environment where all partners, private and voluntary sectors, focus on improving the health and wellbeing of all our communities.

We will continue to build on our existing partnership and alliance work, across the county and at local level.

Opportunities in the Bath, Swindon and Wiltshire ICB area:

In terms of Alliance development, there may be opportunities to extend our work into the Bath, Swindon and Wiltshire ICB area.

Local Authorities:

A major theme is the strategic and operational realignment of health and social care, with the new structures of Integrated Care Boards and Integrated Care Partnerships.

The direction of commissioning is towards a tiered approach for flexible community support and housing support with the aim of enabling people to remain independent in their homes, as well as specialist provision for hospital step-down and for preventing hospital admission. The need for more community spaces for move-on and step-down, alongside the shortage of in-patient beds, raises a question about what role we play, and how we make best use of our housing. This will be addressed within the review of our housing strategy.

Bristol's significant budget deficit in adult social care is expected to have an impact on recommissioning of existing services and funding for new services. The Local Authority review of service rates in line with Fair Cost of Care guidance will impact here. The intention is to review commissioning of social care services through a framework, and there may be opportunities for specialist lead providers in mental health. Homelessness Pathways services will be recommissioned in 2024.

In Bath and NE Somerset, social care services are to be recommissioned in 2024.

In Somerset, the move to a unitary authority from April 2023 is a significant change. The vision for people with complex needs is of moving away from traditional supported housing, to supporting people to thrive in stable homes in their communities. There is recognition that to achieve this requires working differently and building capacity across the system.

In relation to preventing rough sleeping, there are DLUHC monies available for innovation. There is also a further year's funding available to extend the national Changing Futures programme, which may present an opportunity for Bristol.

At national level, there is a commitment to enabling better access to treatment for people who are at risk of prison, with criminal justice money available for a dual diagnosis offer, working with drug and alcohol agencies.

Appendix 3: Input from stakeholders

Using questionnaires, phone interviews, staff meetings and events, workshops with our client coproduction groups and client support meetings, we gathered a range of input about what people want to see in our next strategic plan. We used this input, as well as feedback on our strengths and areas for improvement, to develop the activities found on pages 13-16.

Here you can find a summary of the feedback we received.

Key messages from clients:

Improved digital accessibility:
- Website, offices, IT literacy/digital inclusion/WiFi enabled accommodation.

Cost of Living:
- Improved staff expertise: benefits, mental health knowledge for advice/guidance services
- Continued use of small grants.

Lack of affordable housing/housing crisis:
- Need more diverse housing options.

Employment pathways:
- Links between STAR, volunteer and employment.

Upskilling staff:
- Suicide, self-harm, hoarding and OCD.

Key messages from staff for us as employers:

Consistent focus on improving staff wellbeing:
- Improved diversity in the workplace
- Responding to cost-of-living crisis
- Office space – office move
- Return to in-person working
- Improved staff retention.

Remove barriers to staff working at their best by:
- Improving communications

- Improving Human Resource systems and processes
- Evidencing service impact .

Maintain momentum developing/embedding organisational strategies:
- Peer, Psychologically, Adversity and Trauma-informed, Addressing Racism and system change.

Strike right balance between innovation and service development e.g. :
- Growing successful services e.g. Comm Rehab, Primary Care Recovery Navigator, Crisis Alternatives
- Sharing learning between services/Local Authority areas
- Expanding volunteer offer.

Key messages from external stakeholders:

Our organisational strengths are seen as:
- Having excellent, high calibre staff
- Being experts in our field
- Being a reflective, learning organisation
- Our values are evident in our practice
- We take a system view and work well at system level
- Our focus on Equality, Diversity and Inclusion
- Our support to smaller VCSE partners.

Areas to improve are:
- To continue to work with VCSE partners to share power
- The risk of operational over-commitment – stretching beyond our capacity
- Striking a balance between quality improvement and service growth.

	Glossary of Terms
Brand	A brand is more than a logo, it's a look, a feel and a way of behaving which together with a logo and a strapline defines an organisation's approach and direction.
Calderdale Framework	An evidence-based workforce transformational tool.
Communities of interest	Groups of people who share an identity.
Complex Needs	Two or more problems that affect people's physical, mental, social and financial wellbeing.
Coproduction	Coproduction is the active involvement of people with lived experience of mental health problems in the design and delivery of services.
Equality, Diversity and Inclusion	Equality means making sure everyone can access the same opportunities, whereas diversity means valuing the differences between people, and inclusion is a measure of how safe and welcome people feel in their environment.
Lived Experience	People who have experienced mental health problems and/or multiple disadvantages.
Mental Health	Mental health refers to our cognitive, behavioural and emotional wellbeing - it is about how we think, feel, and behave.
Multiple Disadvantage	As defined by the Dept for Levelling Up, Housing and Communities (DLUHC) in its Changing Futures programme, people experiencing multiple disadvantage have three or more combinations of the following: homelessness, substance misuse, mental ill health, criminal justice involvement, domestic abuse.
Objective	The way we plan to achieve our agreed aims.
Organisational culture	The culture of an organisation is its personality and character. Organisational culture is made up of shared values, beliefs and assumptions about how people should behave and interact.
Outcome	The final result of a particular objective.
My Team Around Me	My Team Around Me (MTAM) is an approach by Changing Futures for working with people experiencing multiple disadvantage who need multi-agency support. The approach is strengths-based and provides the client with a dedicated collaborative team to support their needs.

	Glossary of Terms
Peers	People with lived experience who are employed at Second Step, mainly as support workers.
Place-based communities	Communities living in a specific geographic location.
Primary Care	Primary care includes general practice, community pharmacy, dental, and optometry (eye health) services.
Priorities	A priority is an action or goal which is considered to be more important than other actions or goals.
Psychologically, Adversity and Trauma-Informed	The process of acknowledging the role of adversity and trauma in the lives of individuals and groups of people. We use this knowledge to understand and frame how people cope or survive.
Recovery	Recovery involves the development of new meaning and purpose in one's life as you learn to live with or without the symptoms of mental health problems.
Secondary Care	Secondary care is characterised as treatment that isn't delivered as the first point of contact for an individual.
STAR	Second Step's coproduction groups. STAR stands for Shaping, Teaching and Responding.
Client	A Client is a person who is using or who has used mental health services.
Service User/Client Involvement	Client involvement is the process by which people using or who have used a service become involved in the planning, development and delivery of that service.
Strategic Plan	Strategic planning is a process of mapping out a desired future and translating this into defined goals and objectives over a specific time period.
System Change	System change is an intentional process which addresses the root causes of social problems. It aims to alter the components and structures that cause the system to behave in a certain way.
VCSE	Voluntary, Community or Social Enterprise organisations.
Wellbeing	Wellbeing is the state of being comfortable, healthy or happy and includes whole-life satisfaction, sense of purpose and level of control.

Acknowledgements

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