

# Applying behavioural insights to adult social care

It isn't rocket science but do it consciously

15<sup>th</sup> March 2018



Behaviour change is implicit to managing demand

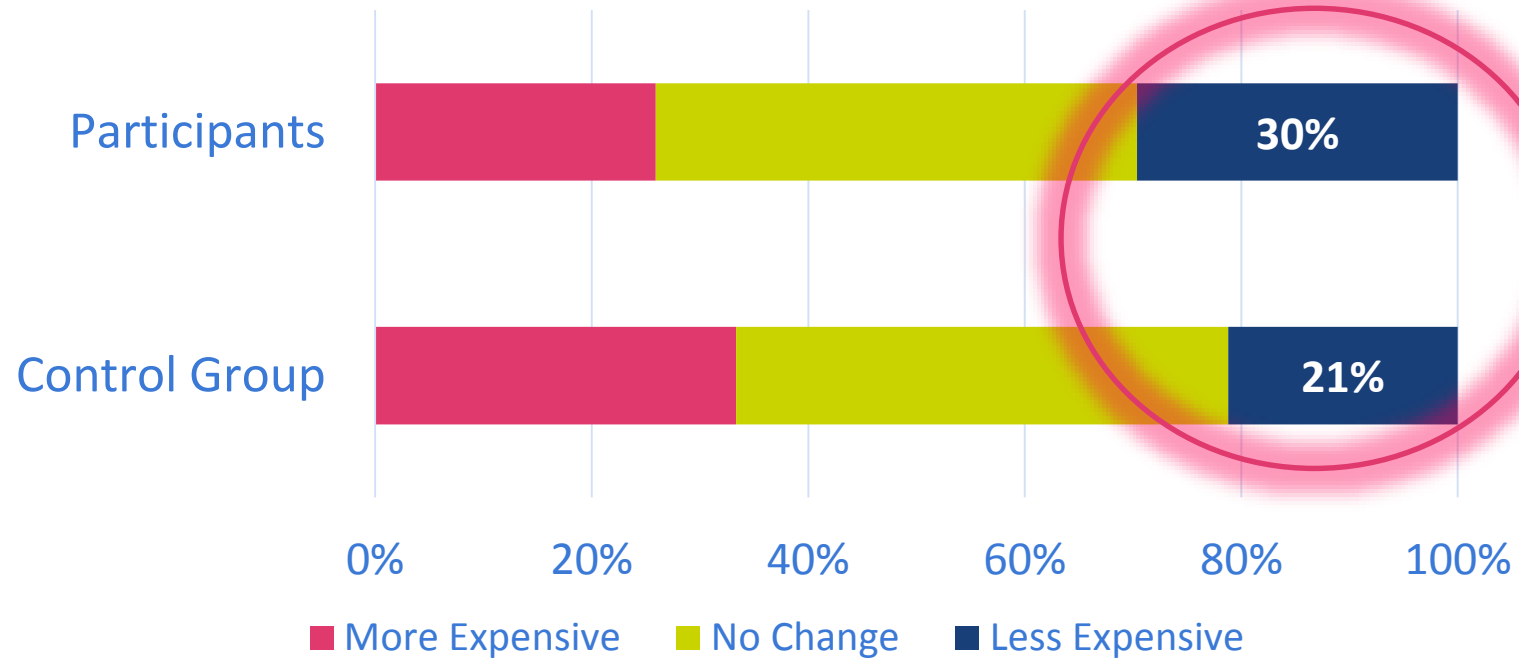


$$17 \times 24 = ?$$

We respond  
instinctively to the  
cues provided

It can be easy to achieve a quick impact...

### Outcome of the first iteration of the interventions at ASC reviews

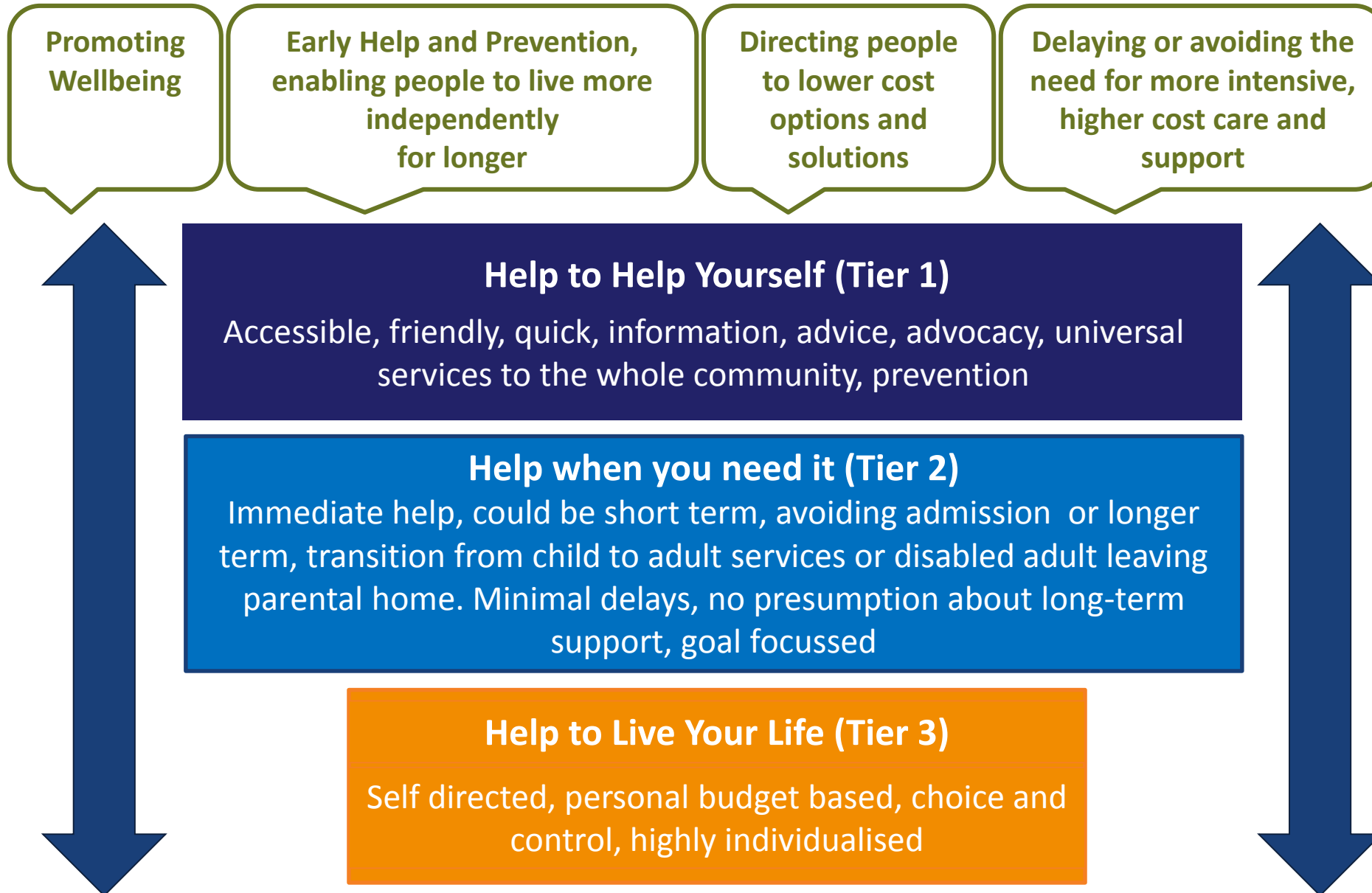


But more challenging to have sustained impact

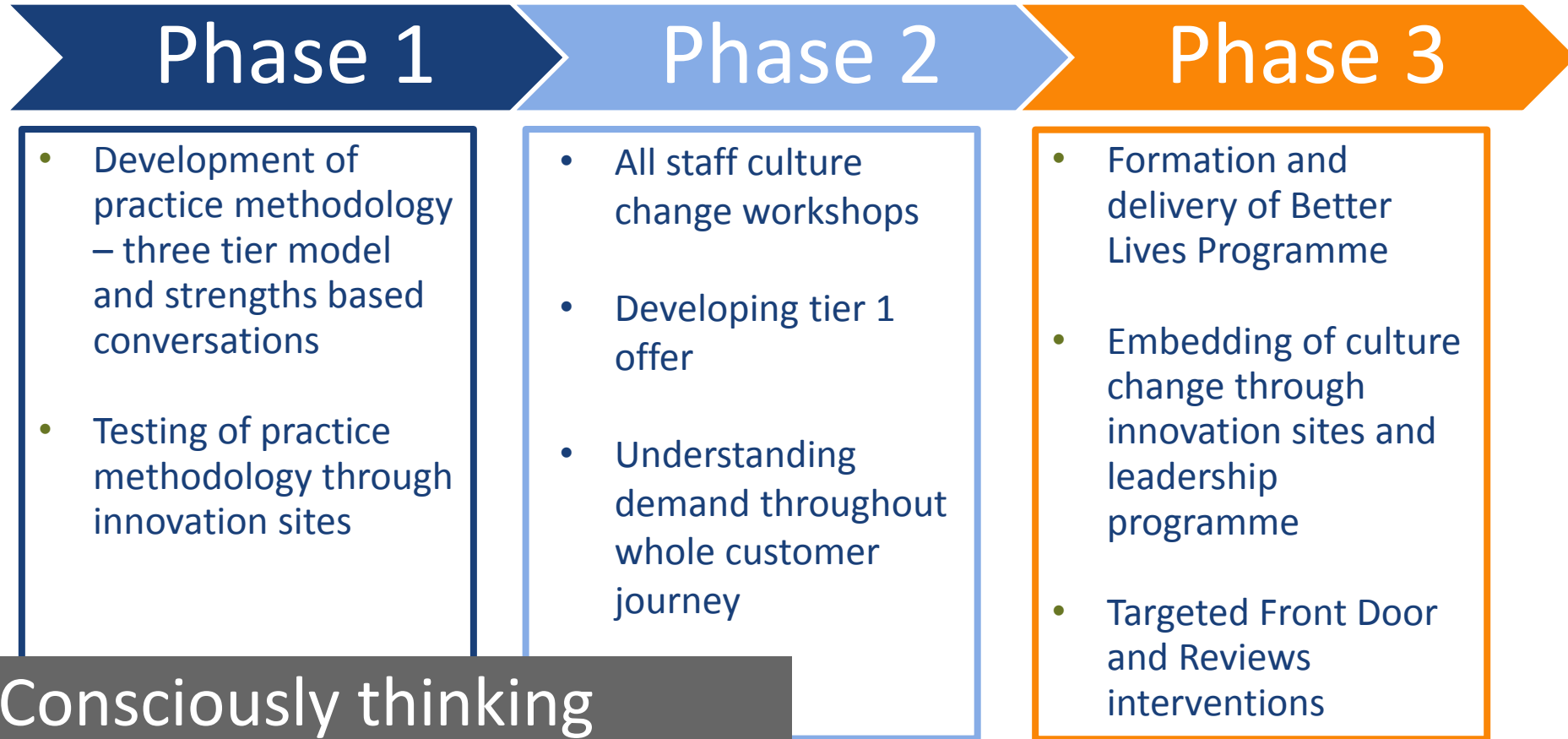
# Bristol City Council's experience of applying behavioural science consciously



# The 3 Tier Model for Care and Support



# Bristol City Council's journey



Consciously thinking about behavioural science has been essential to successful delivery.

And reinforcement has been key!



# Phase 1

## What we were aiming to achieve

### Current state

- High Demand and long waiting lists
- Citizens not sure what's happening and their situation may change while waiting
- All cases defaulting to full Care Act assessment
- Following assessment many people not eligible for service
- Assessments are deficit rather than strength based
- Too many people receiving tier 3 service who may not have needed it
- Inconsistent approaches between practitioners
- Not fully compliant with Care Act
- Overspending

### Future desired state

- Our staff's behaviours have changed resulting in:
- More people living independently at home for longer
  - Consistent use of strengths based 'support conversations' with citizens
  - Not defaulting to full Care Act assessment
  - Three tier model being fully embedded
  - More people accessing tier 1 or 2 support
  - No waiting lists
  - proportionate
  - initial
  - Consistent
  - Compliant
  - Make a

Understanding the desired future state is vital


# Barriers to success




'To suggest that we are not working this way is patronising'



'We covered Strength Based Approaches the first few months of social work training'



'Similar changes in the past which didn't work'




'We already do this'



'This is just a way of cutting services for people and I don't agree with it'

Identifying and unpicking barriers to change will lead to more impactful results

An illustration on a blue background showing a group of business professionals in motion. On the right, a woman in a brown suit carries a large orange arrow pointing right. To her left, a group of men in dark suits and women in dark dresses are walking and running in various directions, suggesting a dynamic and forward-moving organization.

Leadership is key to  
embedding the  
changes

## Phase 1 Achievements

### Positive impact

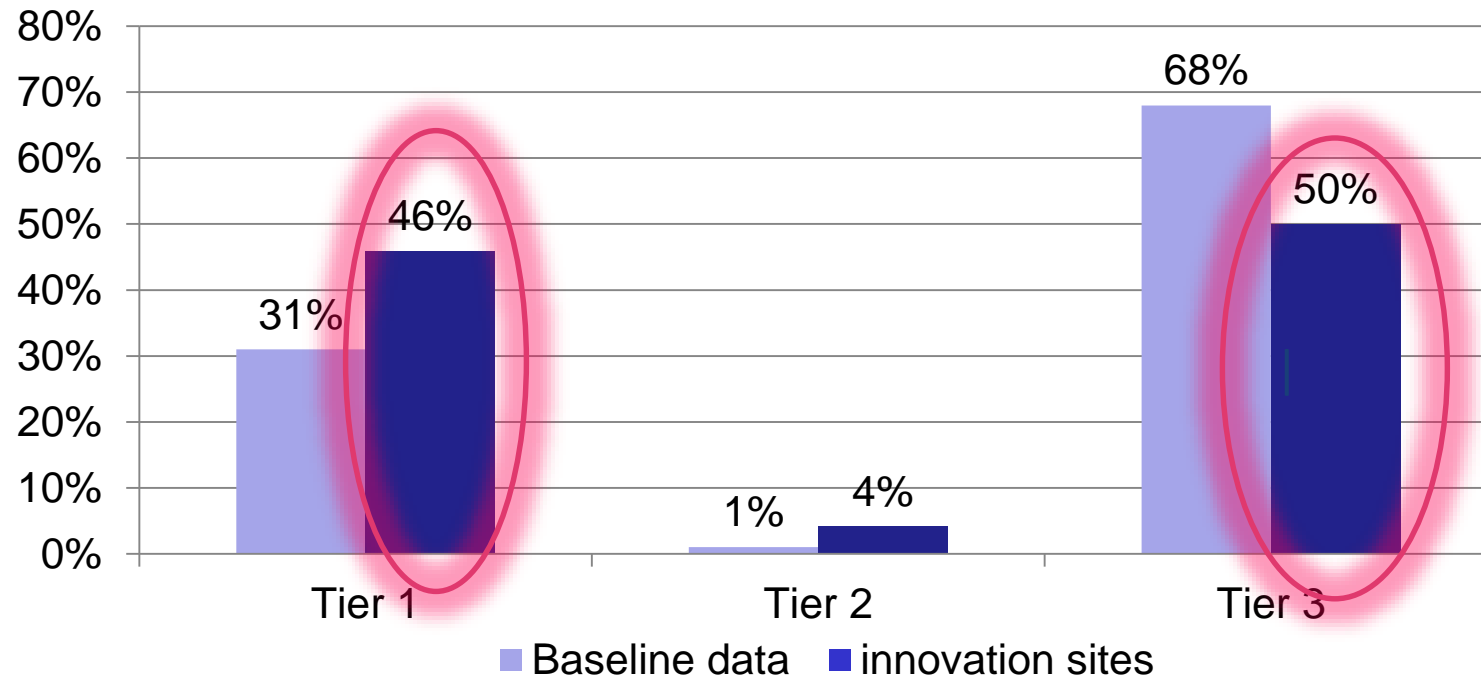
- Ability to meet savings target of £1.6m to 3.5m or 1.5 to 3%. Largely attributed to the effectiveness of the Support Conversation
- 52% of new users are not requiring any RAS assessment.

### First team outcomes 2 years on

- An efficient and productive team
- Fast and responsive duty system
- Consistent low waiting list using the model
- Continued reduction in the number of referrals closed with tier 1 offer
- Reduction in spend on social care budget using the model

# Outcomes of the Support Conversation

Comparison of baseline and Innovation sites by % spread of services



# What worked well

Co-production  
with frontline  
staff

Practitioner Lead  
involved  
throughout

Management  
leadership

Easy to sell  
principles to staff  
due to value  
base

Testing through  
innovation sites

Positive feedback  
from citizens

# Learning

Behaviours need to  
be reinforced

Full roll out harder  
to achieve results  
with less project  
resource

Need to invest in  
long term impact –  
hold your nerve and  
convince others

# Activity

In groups consider a change scenario in which you would want to influence the behaviours of your colleagues.

## How would you establish their behavioural baseline?

- What information would need to be gathered?
- How would you gather this?
- How would you share the findings to your colleagues?



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