

Let it go

Power to the people in
public services

**Liz Kendall MP and
Steve Reed MP**

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Think differently about the state

Public service reform has long been derided by some on the left as unnecessary, technocratic and harmful to public sector workers. Worse still, an electorally calculated sop to the middle classes. While rejecting the characterisation, the controversy from past reforms should not deter a debate on how the public sector must continue to change. In fact successes of past reforms should only encourage Labour party members to discuss where next to take public services.

Progressives should make no apology for being concerned to ensure that public services are of sufficient quality, offer flexibility and choice, and that the middle classes do not feel forced to pay for private alternatives. That is, after all, in the interests of everyone. As the United States' safety-net approach demonstrates, poor public services are services for the poor.

But to view public service reform simply through the prism of retaining middle-class political support is to miss the point. It is the poor – those for whom Labour claims to fight the hardest – who are the greatest victims of low-quality public services. Traditionally, it is their estates where policing is at its least responsive; their GP surgeries which are understaffed and overstretched; and their schools where standards are lowest. In government, Labour did much to challenge this with, for instance, its push for greater choice in the NHS, and academies and programmes such as London Challenge focused on the most deprived areas.

That, too, is the focus of the public service innovators profiled in this special Progress supplement. As Jim McMahon, leader of Oldham council, makes clear, his passion for reform is fired by a desire to help those who are 'actually being let down by the system but don't complain about it because maybe they're not equipped to complain about it'. Many of these people, he fears, 'don't even know they're getting a rubbish service ... because that's all they're used to'.

Similarly, Josh MacAlister, the founder of Frontline, which is seeking to encourage high-flying graduates to train as social workers, wants to address the 'really, really poor' outcomes that children who need social workers still face. As he says, 'If you're a kid who's got a social worker you're probably 10 times more likely to be excluded from school. Only seven per cent of kids who are in care get to university; a quarter of the young prison population were in care when they were younger.'

Meanwhile, Gill Ruecroft and Sarahlee Richards have pioneered the use of personal health budgets in Northamptonshire, focusing on those with mental health problems, while Hilary Cottam's organisation, Participle, has reengineered work with troubled families in Swindon, answering a call to help people described as the 'canaries in the coal mine of the welfare state'.

As Labour prepares for government, it should look to those who have spent the past five years not simply opposing the coalition but delivering real change on the frontline of public services. While the work of each is very different, there are five broad lessons which can be drawn.

First, start with people, not institutions. As Cottam tells us, the key lesson is that 'everything – the thinking, the action, the design – needs to start from the point of view of people, not the institutions and how to reform them.' That, she admits, 'sounds so basic but it never happens'. Ruecroft and Richards detail why traditional approaches to mental health service delivery are failing to 'make any sense to the way [people] live their lives' and how a personalisation agenda can overcome that.

Second, promote partnerships between users and staff. Too much of the coalition's rhetoric around reform has suggested that public service workers are the barrier to raising public service standards. That is a false choice, which Labour should reject. As McMahon – who makes clear that he rewards success, not failure – suggests, most workers in poor services are as frustrated and trapped as the users of them. Creating a 'culture and the conditions where people can actually innovate' is key to addressing this. Moreover,

the whole of MacAlister's work is underpinned by the premise that the quality of public service workers is intimately tied to the quality of the public service.

Third, austerity is no excuse. Each of our innovators shows that, despite the toughest of financial constraints, outcomes can be improved. Indeed, as Ruecroft and Richards suggest, while personal health budgets are cost-neutral, they offer the prospect of better results and reduced spending, with

more savings possible if the opportunities for prevention they outline are realised. Too often, though, as Jayne Moules, coordinator of Newcastle city council's families programme, points out, the government departments or local authorities 'who make the investment don't get the benefits', so there remains a real question about where the costs of upfront preventative investment fall.

Fourth, think differently about the role of the state. The Tories continue to believe that there is a linear connection between a smaller state and better public services. The real link, though, is with a smarter state. What might that look like? MacAlister's conception of a state which 'sets some really big and clear tram tracks and [then] lets wise people make good judgements within those tram tracks' captures it well.

Finally, Labour needs to learn to let go. Perhaps the greatest obstacle to the success of the next Labour government is not financial but psychological. Labour, explains McMahon, is still 'not used to allowing for difference'. 'We use the language of postcode lotteries, because we're scared of different places receiving different services. But actually the communities across England are so complicated and complex that you couldn't even have a one-size-fits-all for Greater Manchester.' That is not the voice of a London-based thinktank, but the leader of Oldham council, chosen as last year's council leader of the year. Labour should heed it.

EDITORIAL

It is the poor – those for whom Labour claims to fight the hardest – who are the greatest victims of low-quality public services

People, not institutions

We need to listen to how public services impact on people, however uncomfortable that may be

In an era of tight budgets and increasing demands, what does it take to ensure public services meet public needs?

This collection of interviews is intended to help address this question by listening to those who are already answering it in practice.

We need reform of public services not just because money is tight, but because we need to find new ways to give people better support. Often that means giving people more control and a bigger say over the public services they rely on.

Oldham council leader Jim McMahon offers a powerful insight into how to do better for less. Faced with a collapse of trust in politics, he suggests that confident political leadership begins with a simple idea: 'Just listen'.

That is advice we are happy to take.

This publication includes people who have shown how listening carefully to the people they are trying to help gave them a deeper understanding of their changing needs. They found insights that helped both staff and service users improve the quality of public services because people on the frontline have the best understanding of what needs to change.

As Hilary Cottam argues, 'Everything needs to start from the point of view of people, not institutions'.

These interviews make the case for public services that constantly ask how they really impact on people's lives and how those supposed to benefit from them feel about what is on offer. It is not always comfortable to get this kind of feedback, but it is vital to hear it if we want to make sure public services are as effective as possible and have the popular support they need to survive into the future.

The changes our interviewees are making are driven by a common belief that when users and providers of public services make choices about responsibility and power together they can radically improve services and outcomes.

Whether it is social workers giving children access to better opportunities in life, helping vulnerable older or disabled people choose the kind of life they want to live, or supporting people with mental health problems to choose their own path to recovery, the voices in the pages that follow demonstrate the power of the state not just to redistribute resources but to act as a counterbalance to inequalities of wealth, health and power.

The challenge for us all is to make sure that more of our public services reach that high standard, and, just as important, to be frank about when they do not. At a time of shrinking resources, the one freely available resource we can harness to help public services become more effective is people's own experiences of their lives and the services they rely on. As Gill Ruecroft says, for people with mental ill health, services can too often fail to 'make any sense to the way they live their lives'.

This can be a hard path to take. Those of us on the left are proud of the ethos and social purpose of public services.

But we weaken the case for public services if we neglect the criticisms, disappointments and ideas for improvement that service users can offer. Giving people a stronger voice and more control will lead to greater innovation and even variation as different communities in different parts of the country try out new ideas. We welcome that as an opportunity to learn together. We welcome, too, giving people more control over the decisions that affect their lives because we understand that helping people become more self-reliant means they have more control over their own destiny and the chance to be more aspirational about what they want to achieve.

We strengthen our case most when we build services that hear their users' criticisms and then use them to make improvements step by step, day in, day out. The best organisations listen and learn. That principle must be at the heart of every public service.

Giving people more control means parliament and politicians having less control. For old-style politics, rooted in the desire to take decisions about people, that is a huge challenge. But we must seize the new politics of empowerment because, as these interviews show, it has the power to transform the lives of people and their communities, and even to restore trust in a broken politics.

In his Hugo Young lecture last year Ed Miliband urged Labour to make the case for people-powered public services. He spoke of friends who, in trying to get desperately needed help for their son, felt 'they were standing alone in the world'. There are new ways to bring people together so no one feels isolated, and everyone feels they have the power they need to make the change they want to see. That is what the new politics is all about.

The lesson of this publication is we can improve people's lives by listening to them, involving them in decisions about their own lives, and bringing them together with others who share their life. At its heart it is about giving people more power, and that

has been a central principle of Labour politics for as long as our party has existed. The Tories want to roll back the state, but our goal must be to change the role of the state so that it is more directly under the control of the people who rely on it.

Liz Kendall MP is shadow minister for care. Steve Reed MP is shadow minister for home affairs



Paul Heartfield

'Change or get out of the way'

Josh MacAlister is spearheading a revolution in social work empowering both families and practitioners

Three years ago only 10 Oxbridge graduates applied to go on social work courses. In 2013, 200 students from Oxford and Cambridge alone attempted to join Frontline, a new programme designed to attract some of the country's highest-achieving graduates into what its founder and chief executive, Josh MacAlister, calls 'one of the most difficult jobs in Britain'.

MacAlister began to develop his thinking on social work recruitment five years ago while working with vulnerable children as a teacher in challenging schools in Greater Manchester. The profession, he wrote at the time for Progress, had been 'left as the poor sister of teaching'. 'Children's services were battered by endless news stories of child neglect and instead of supporting the profession we oversaw years of finger pointing,' MacAlister argued.

A Teach First graduate, MacAlister was attracted by the scheme's philosophy – a ceding of power by the state and recognition that it is not always best placed to fix problems – and the resulting collaboration between government, business, and the third sector. Combine that with Teach First's focus on raising the status of the teaching profession and its creation of thousands of lifelong champions to tackle disadvantage in Britain's schools, and MacAlister believed he had identified a model which could have a similar

transformative effect on social work – the public service which the country's most vulnerable children are most reliant upon.

Five years on, with recruitment for the second cohort of aspiring social workers under way, Frontline's chief executive wants to 'reposition social work as a prestigious, demanding, attractive career choice'. But his real goal is a much wider one: to tackle the 'really, really poor' outcomes that children who need social workers still face: 'If you're a kid who's got a social worker you're probably 10 times more likely to be excluded from school. Only seven per cent of kids who are in care get to university; a quarter of the young prison population were in care when they were younger.'

The solution, suggests MacAlister, is to 'help move the children's services system away from the more recent culture of assessing and referring to a position where it's about changing families'. In order to do this, however, it is crucial to empower social workers so that they can 'introduce change [into the] system so that the family can change'. 'Your responsibility is to change the family dynamic to reduce risk and improve life outcomes, or get out of the way,' he argues.

MacAlister's vision has been strongly influenced by the radical redesign of children's

services pioneered by the London borough of Hackney 10 years ago. Its focus on social workers managing their caseload as a team, rather than individually, and the notion of 'systemic family therapy' – working with the whole family, not simply parents or children – has, he says, 'really influenced' Frontline's approach. 'What Hackney has helped us do is show us how social work can work really well.'

Not that he views Hackney as a one-size-fits-all model. 'There are lots of different ways that [social work] can work really well,' MacAlister believes, 'but there's a set of ingredients which are about clear leadership; very high expectations and standards that social workers need to meet or they need to move on; and a very clear practice model.'

So what is innovative about Frontline? 'What Frontline does is it finds people who may not have considered social work before, puts them through a rigorous selection process, educates them in a different way to do social work and then places them in a different context to be successful,' MacAlister explains. In order to 'get great people' – what its chief executive calls 'the right mix of grit and warmth to be able to do the job' – Frontline is 'really, really selective'.

MacAlister makes no apologies for the rigour of his programme's selection process as he reels off the day-to-day challenges social workers face: standing up in court to make a case; going into homes and holding competing

'We need to help move the children's services system away from the culture of assessing and referring to a position where it's about changing families'

Josh MacAlister is concerned about ongoing 'really, really poor' outcomes for children



Sarah Lee/Guardian



Frontline looks for 'grit and warmth' in its trainees

Ewan Shears/AdobeStock.com

ideas about what could be going on while not getting too married to a hypothesis at an early stage; writing 'really clear' reports that convey to someone who has never met the family what is going on and what the risks are; and building relationships extremely quickly in potentially hostile situations. In the face of all of these, he says, social work should be viewed as 'intellectually demanding'.

Last year 2,600 graduates and people changing careers applied for just 100 places on Frontline's two-year leadership programme which, following an intensive five-week residential course, places them in a local authority child protection scheme in Greater London or Greater Manchester. The first year qualifies participants as a social worker through direct work with children and families. The second year leads to a master's qualification as people work as newly qualified social workers.

But it is not just the toughness of the selection process which is innovative, so, too, argues MacAlister, is the focus on 'practice learning': how to train social workers to do their job 'really well'. He cites traditional training methods which see aspiring social workers observed three or four times on a pass-fail basis, while their grades are still determined by exams and essays. 'On Frontline your grades are driven through the quality of the work that you do with families. We get academics to go out into local authorities and teach in practice so that it's bringing the university into the practice environment. We – and this sounds like it should be obvious and done on all courses – observe practice and grade people against practice,' he says.

What does that mean in practical terms? Frontline works with local authorities to

identify the most able practising social workers, promotes them to become team managers, but insists that they do not move away from practice into management, and then provides them with training. The team manager is assigned four Frontline trainees. MacAlister describes how they then 'form a unit where they share a caseload together that's risky: it's got court proceedings in it; got Section 47 investigations with the police in it; and it's got quite complex abuse or neglect cases. And for a year this team work that caseload with the support and supervision and oversight of a consultant social worker, but with the exposure of the risk.'

Unsurprisingly, Frontline has faced resistance from many social work academics in the university sector. They complain it is too elitist, selective, expensive and undermines current university provision. MacAlister suspects other motives, however: 'Frontline, if it works and is successful, is a threat to that market. At the centre of the criticism is a fear that the implication of this being successful is they've spent some of their career doing something which could have been put to bed easier.' Local authorities, by contrast, have been big supporters of Frontline.

Government faces a particularly acute challenge with children's services, in particular in terms of encouraging innovation. High-profile scandals involving children such as Victoria Climbié and Peter Connelly in Haringey, who suffered abuse, neglect and death without effective intervention by social workers, led to huge amounts of new, somewhat rigid, process and procedure. But such after-the-event regulation, while understandable, ignores some of the core issues facing children's services. 'The answer

at the moment to make social work better isn't to make more regulation, guidance, process or central government intervention,' suggests MacAlister. Instead he advocates that the state should 'set some really big and clear tram tracks and [then] let wise people make good judgements within those tram tracks'.

Providing some of those 'wise people' is the task MacAlister has set for Frontline. 'Many of them will stay in social work and some will leave,' he says of his brainchild. 'But we're a bit like Teach First: inviting people to join a programme where they get a shared experience for what's happening with some families in this country, and have the ability after the programme to do something about it, whether it's in social work or outside in policy, business, law, the media. And so the aim would be, in 10 years' time, to have not only social work positioned as a really prestigious career choice, up there with law and teaching and medicine, but also that we've got a network of thousands of people who have gone through this.'

About:

- Josh MacAlister is chief executive of Frontline
- He first pitched the idea on the Progress website in an article in August 2010
- Frontline has been dubbed the 'Teach First for social work'
- Frontline trains top graduates to bring about change within families
- The programme aims to raise the status of social work

'You need to know when to let go'

We need to 'think family' and work back from there, argues Jayne Moules

From unemployment to drug and alcohol dependency, the public sector's approach to supporting families struggling with multiple problems is often silo-driven and disjointed. The 'families programme' is Newcastle city council's local manifestation of the government's 'troubled families' initiative, which is headed up nationally by Louise Casey, dubbed 'respect czar' under Labour when she ran the Respect Task Force after a successful stint in charge of the antisocial behaviour unit. The programme is designed to help families to overcome multiple challenges – such as truancy, worklessness, youth crime and antisocial behaviour.

Jayne Moules, coordinator of the families programme in Newcastle, describes the initiative as 'thinking family – thinking again about how we work less in silos to be much more family-focused'. Her team currently works with around 300 families a year, who meet the government's centrally determined criteria.

'From the outset, it was about identifying families that had particular characteristics', describes Moules. 'Where there was antisocial behaviour, where there was criminality in the family, where they was poor attendance or poor behaviour at school ... or adult unemployment'. The government identified around 120,000 families nationally as meeting these criteria and the council was given funding for its share of the national target to deliver.

The data-driven approach of the initiative is helping the council to target support proactively where it is needed, reveals Moules. 'That's the other significant change about this. In Newcastle we haven't adopted what we would call a "referral culture". It's us identifying the families. It's really data-driven.' The programme uses a variety of datasets across different organisations to drill down to the family level. 'We've used postcodes as our common denominator if you like', explains Moules. 'Then we've used our youth offending data, our housing provider data and our data around antisocial behaviour.'

One of the things that inspired Moules to lead the Newcastle families programme was her experience in the Sure Start unit. 'Being asked to lead on the troubled families agenda did feel [like] an opportunity to continue the integrated working journey we'd been on ... trying to work holistically.'

Though Moules initially found the focus on targets and outcomes for the family challenging, she believes it has led to a radically different way of looking at public service delivery. 'In the nearly three years that we've been delivering the programme, having very prescribed outcomes per

family has been one of the gems of the programme ... Not about delivering a percentage increase in this, that or the other, but it was actually individual families that needed to improve outcomes.' She continues, 'I suppose it's been a revelation, because my natural instinct three years ago was: "Oh God, this feels very prescriptive".'

Central government has determined 'what' local authorities need to achieve through the programme, but the 'how' has been left to local practitioners, one of the key characteristics that Moules believes has contributed to the success of the programme. 'It's galvanised people ... To get the family to be improved in terms of absolute outcomes, you have to work with the police, with probation, youth offending teams, schools, health and so on ...'

When launched in 2011, the term 'troubled families' drew criticism from a number of organisations, including the British Association of Social Workers. Newcastle has consciously avoided the tag to ease the approach to the families involved. Moules elaborates on how this works in practice: 'What a practitioner would say to a family is, "You are a priority family for us because you have a number of things going on and with your consent we'd like to work as a team."'

Moules believes this team-based approach works for practitioners, as well as the families

Louise Casey, former 'respect czar', heads up 'troubled families' nationally



REX

'I think there's been a winning of hearts and minds of the practitioners who work with families'

involved: 'It's been apparent over the past few years that some agencies are much more comfortable in working as a team around the family; identifying that they have their professional skills but actually that they don't have to do everything.' Each family has a lead practitioner – a first port of call for families – who can help draw in expertise from a variety of agencies able to meet their needs and create the right framework for the families to succeed.

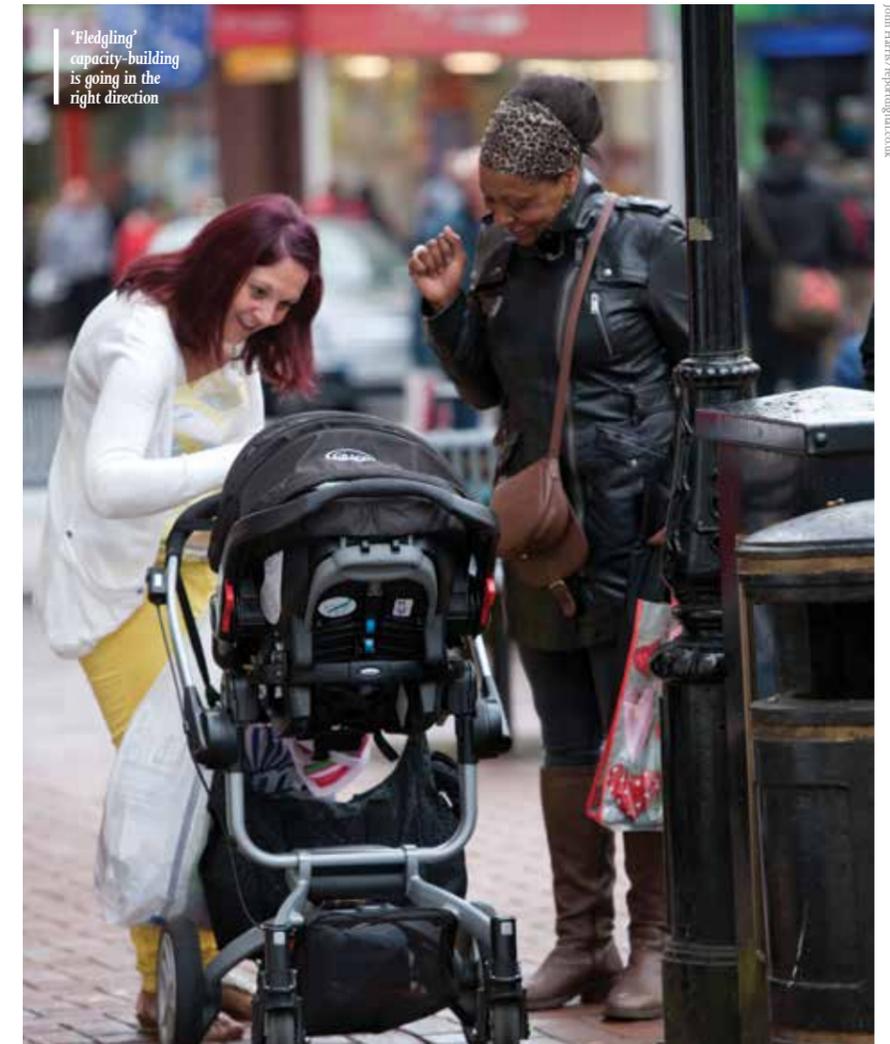
There have been challenges along the way. One of the difficulties encountered by Moules and her team has been data protection and information-sharing: 'It's a challenge because there's so much interpretation about what data protection means and even at a local level we have different guidance, different information, [different] governance for every organisation and they tend to be fairly risk averse ... It's been about winning trust and confidence on a personal level ... You just have to get people to trust you.'

Some partners expressed anxieties about whether this approach delivers efficiencies, particularly when their own funding is contingent on delivering against their individual objectives. Moules is adamant that it delivers better outcomes for families and longer-term benefits for the public purse. 'But what I think is difficult is that people who make the investment don't get the benefit'.

This is a real challenge for public service reformers. Investing in early interventions like families programmes of this kind may offer potential savings for the criminal justice system, welfare spending and the NHS, but these services do not contribute to the cost of the programme. One of the strengths of the troubled families initiative is that it has given direction, funding and freedom to local authority programmes – like Newcastle's – to tailor a local approach that generates benefits for the families and the taxpayer in the long term.

Moules also argues that cultural and attitudinal change has been part of the challenge. 'Some of the barriers have been people saying, "Well, that isn't my business".' One of our targets has been employability and working with families who are a long way from the labour market and trying to work with them ... People would go: 'Well, that has nothing to do with me.' Moules argues that it is about persuading practitioners to realise the impact they can have individually and collectively on the life chances and opportunities of families on the margins: 'I think there's been a winning of hearts and minds of the practitioners who work with families.'

One of the next steps for the Newcastle families programme is to 'build capacity' within the local community. Moules and her team have been working with Action for Children and Barnardo's to recruit and train local people to become family support volunteers. 'We're not talking about



John Harris/openpractical.co.uk

parachuting middle-class volunteers into hard-pressed areas', maintains Moules. 'We thought it was better to challenge local people from disadvantaged areas because, as they say themselves, "When you go home on a Friday night, we're still here".' It is still early days for this approach, which Moules describes as 'fledgling', but she is determined to keep investing in local volunteers 'because it feels instinctively right.'

It is not just the local community that Moules wants to empower to make a difference. The programme offers the families themselves a chance to take control of their own lives: 'One of the prizes we want to offer families is to say "By getting to this point you won't need us – we'll be out of your life."'

Moules also has a message for public servants themselves working on the frontline. 'We've trained 200 practitioners and some of them need to think about letting go. Let go of a family. Know when to back away because they're managing and they don't need you any more.' Providing a clear goal for practitioners to feel they are working towards – that families actually exit the programme

and see real improvement in their lives – is perhaps one of the elements which is so galvanising. 'I would think, "Well, what is my job's purpose here"?' Moules asks only partly rhetorically. 'Some of it is to do myself out of a role with this family.'

About:

- The families programme is Newcastle city council's response to the government's 'troubled families' programme
- It is a multi-agency programme building on existing services and using a key worker-mentor model
- The approach is about thinking about the whole family, with named key workers and sustained support
- An innovative use of data to identify families characterises the approach
- Building 'capacity' is an important next step for Newcastle

'I would have been angry too'

Labour needs to learn to let go, says **Jim McMahon**

If we had gone into marriage guidance counselling at that point,' says Jim McMahon of the relationship between Oldham council and its residents two years ago, 'the counsellor might have said: "Do you know what, it might just be time to part ways".'

Oldham was not, says the man who has led it since May 2011, unique, but the disconnect between the local authority and those it was supposed to serve was 'probably more evident in Oldham than in many other towns'. That relationship – which McMahon admits was 'terrible' – was apparent in the fact that, at 22 per cent, Oldham had the worst customer satisfaction in the country.

But even that pitiful figure does not quite do justice to the depths to which relations had plunged. 'In some ways, that was only a number,' argues McMahon. 'You could feel in the way people treated each other, in the way that people spoke to each other, that the relationship had just broken really.'

As scrutiny committee chair – a post he believes he was given because he was 'loud' and needed to be kept 'busy' – McMahon saw first hand how bad things had become. A controversial plan to demolish poor housing, splintering the communities which lived there, had provoked deep anger. McMahon had carried out a review and planned to meet residents to discuss it. The council and police both advocated cancelling the meeting. 'People had a massive mistrust of authority. I said: "Well, now we've agreed to do it, if we now don't do it then all we're going to do is reinforce the distrust of authority".' With police riot vans outside, the meeting went ahead and 'quite a lot of angry people' showed

up. 'When I heard what people were angry about I thought: "Do you know what, I'd be quite angry too if I was in that situation",' he recalls.

Councils and their residents cannot, of course, simply divorce. Instead, as the man who was recently named council leader of the year, notes, they need to find a way of 'reconciling and rebuilding'. Over the past four years, that has been McMahon's focus. Thus far the results are impressive: residents' satisfaction has increased threefold to 66 per cent. But McMahon does not plan to rest on his laurels: 'We're not where we need to be,' he suggests. 'We want to be in the mid-80s which is probably about 10 points higher than the national average.'

McMahon's focus on radical reform and devolving power has not only won him national recognition, the leadership of the LGA Labour group but also a place on Labour's National Executive Committee, to which he was elected by fellow councillors this summer. McMahon believes that, as it prepares for power, the national party can learn from those who have actually been governing during a time of austerity. 'My belief is that local government has moved at a rate of knots in a way that has left other government departments in the dust, really.' Many parts of central government – he cites both the Department for Work and Pensions and the NHS – have 'not modernised anywhere near enough'. 'The deficit isn't going down

because we're paying for failure,' he argues. 'People need to start being paid for success.'

There is, though, a realism to McMahon's empowerment agenda. 'There's always going to be a role for some kind of convenor/arbiter, because the community isn't one, the community is often conflicting and the community doesn't always put its long-term interests ahead of its immediate interests ... But that's not the same as the council doing everything, and I think, particularly for Labour councils, we're used to determining our vision of what we believe should happen and then we do it to people.'

'Local government has moved at a rate of knots in the way that has left other government departments in the dust'

His experience in Oldham taught him 'just how dismissive authority can be'. True leadership, he believes, is about 'helping people through a process if it's inevitable [but] if it's not inevitable it's about being flexible enough to change course and not feel as though that's a U-turn'.

McMahon's aversion to more traditional 'town hall knows best' forms of governance does not, however, stem from weakness or insecurity. 'It's confident political leadership. So I'm confident enough to say: "Do you know what, I have no idea – tell me"'. And I just listen.'

While not dismissive of their concerns, McMahon is careful to differentiate between 'self-selecting campaign groups' who are 'loud and ... the issues they pick are usually quite narrow' and those who are 'actually being let down by the system but ... don't complain about it because maybe they're not equipped



True leadership is 'being flexible enough to change course and not feel as though that's a U-turn'

to complain about it'. Many of these people, he fears, 'don't even know they're getting a rubbish service ... because that's all they're used to'.

Faced with deep cuts in central government funding, Oldham has proved that, even in the most difficult of circumstances, services can be improved. In social care, the council opted to 'reset the market'. Four hundred staff were transferred from the council's provider into a new ethical care company. Shunning the 'race to the bottom' which characterised the private home care market, users received longer appointments at a time of their choice, while pay and conditions for staff were improved. Oldham Care and Support has won contracts from the private sector, and increased its staff to 600. While the council wholly owns it, the board is balanced between staff and councillors and it drives its direction. User satisfaction is, he says, 'very high', while 'family focus groups' ensure relatives are reassured that 'we're around when they're not'.

'We compete on cost because what people say is, within reason, we will pay a bit more to get quality in that market ... The price difference is only £1 something an hour per visit, so it's marginal in the scheme of it. But the overheads that we are able to do for the trading company are very low, and our directors don't drive round in posh cars,' explains McMahon.

McMahon has also begun to transform services for troubled families and the long-term unemployed. His approach is one of 'tough love': 'What we say to people is ... you will be able to determine for yourself what package of support you want to improve. So what's happening now is where your kids

aren't going to school and you're not going to work and every second Friday it's a domestic where the police are being called out – that is no way to live. It's got to stop, and it either stops because you decided it's got to stop, and we'll support you to do that, or actually we have got quite a large stick here and you're not going to like it. Now for some people you have to play the stick, but most people actually just want to find a way through it.' McMahon understands why many are reluctant to wield that stick – which can involve benefit sanctions or loss of tenancy – but is unapologetic about his approach: 'I don't think any benefit system should be about propping up people that just don't want to contribute, but it should be about supporting people who [want to],' he argues. Since Oldham took control of the work programme success rates have risen from 3-6 per cent to over 50 per cent.

McMahon jokes about some staff in previously failing services belonging to a 'troubled professionals' programme but says many have embraced his reforms: 'Quite a lot of people [are] really empowered by it because they recognise that it wasn't working [and] they didn't quite know what to do about it. They were in this kind of mammoth institution that put them in a box, and even though they might have tried to do their best within that, they ... didn't feel they could do anything about it. What we've done now is to create the culture and the conditions where people can actually innovate,' he suggests.

McMahon believes the lessons for Labour nationally from Oldham and other local government innovators go deep into the party's psyche. 'In the Labour party we're not used to allowing for difference. We use the

language of postcode lotteries because we're scared of different places receiving different services. But actually the communities across England are so complicated and complex that you couldn't even have a one-size-fits-all for Greater Manchester. It's got to be community-led depending on the issue.' He fears that Labour has still not 'got its head around' that fact. 'The party believes that it can dictate centrally what it wants to happen, how it's going to happen, and how people will be paid and judged for it. What we need to do is decide what country we want, and what standards we want, and then empower more communities to innovate, to deliver that. We'll hold them to account, and we'll make sure that the public in particular can judge whether the local authority and other public providers are delivering.'

About:

- Jim McMahon has been leader of Oldham council since 2011
- He is leader of the LGA Labour group and a member of Labour's NEC
- McMahon is a former chair of the Cooperative Councils Innovation Network, pioneering a co-op energy switch scheme to use collective buying power for residents
- Oldham residents' satisfaction has risen threefold
- McMahon urges Labour to learn to 'let go' and allow areas to innovate



Participle's Circle project has saved public services money

'So basic, but it never happens'

Debate about public service reform departs from the wrong starting point, says Hilary Cottam

The key lesson,' begins Hilary Cottam, 'is that everything – the thinking, the action, the design – needs to start from the point of view of people, not the institutions and how to reform them.' She pauses briefly. 'That sounds so basic, but it never happens.'

Cottam is founder and chief executive of Participle, an eight-year-old organisation which designs and helps to launch projects to demonstrate what the next generation of public services should look like. While it is probably best known for its Circle programme – membership-based services open to those over 50 which specialise in social activities, learning and health and wellbeing – Participle's work has ranged across youth services,

'troubled families', and unemployment. Its approach – which focuses on motivating 'deep participation' and encouraging social connections and contributions – is both radical and challenges the assumptions and beliefs of many more traditional public service reformers. Thanks, however, to championing by the likes of Jon Cruddas, Tessa Jowell and Maurice Glasman, this relational approach to welfare and public services has begun to find expression in Labour's thinking.

Participle's chief executive is, however, critical of the manner in which the future of public services is currently discussed. 'There is a fundamental challenge with the way that the public service debate is positioned in Britain

today,' she argues, 'in that it focuses almost exclusively on the fiscal challenge and financial reform, on the one hand, and reforming institutions, on the other hand.' This, Cottam suggests, is 'the wrong starting point because the world has changed so significantly'. Instead of attempting to restructure existing institutions, she advocates 'starting with [the] problem we're trying to fix and then thinking what kind of other systems we need to design'.

But Cottam believes that too great a focus on the financial also misses the fact that many of the challenges Britain faces are 'cultural rather than financial'. 'They're such bigger questions than resource,' she continues, 'so actually you're missing half the picture with this narrow

fiscal focus ... and half the opportunity.' Those cultural issues – social isolation and 'a general crisis in relationships' – may rarely feature on the domestic policy agenda but they underlie some of the biggest political challenges, such as how to tackle inequality. 'There are new social expectations which are very different,' she suggests. She cites the fact that people now need a mobile phone to get a job interview. Moreover, she argues, 'you need social soft skills that people don't talk about but still reinforce certain systems in terms of who gets into networks and who doesn't.'

Participle's approach is inspired by Amartya Sen's notion of 'capabilities', a focus on helping people develop a set of core capabilities that will allow everyone to lead flourishing lives and be fully able to contribute to, and participate in, society. It is, Cottam admits, a conception of public services which is not necessarily easy to build. 'You have to grow it, you can't make it, you can't give it, you can't command it. That is really challenging for modern politics.'

In practical terms that means the organisation starts its work by 'basically spending time embedded in people's lives,' explains Cottam. Whether working with families in Swindon or older people in Southwark, 'our work starts [by] having Sunday lunch and playing bingo ... really looking at the grain of people's lives'.

The Circle project was designed by talking to 200 older people in south London. They told Cottam and her team that, 'they wanted somebody to take care of practical small things, and they wanted a rich social life by which they didn't mean a paternalistic befriending, they meant making friends and interacting in a way that we all do through our lives.'

The effects of Circle have been practical and measurable. Tapping the support of both volunteers and paid helpers, the project's 'virtual home ward' scheme, for instance, helps prepare people's homes in readiness for their hospital discharge or treatment at home. Practical assistance such as mounting a key safe, moving a bedroom downstairs, keeping people company or setting up technology in the home have been proven to help bring down hospital admissions and speed up discharges.

But, Cottam notes, Circle can also point to rather less quantifiable, but perhaps more important, outcomes. 'As those communities

have strengthened, the communities have replaced [the] role' which Circle was playing. 'By building those communities and by strengthening those social bonds, other things start to happen.'

Although very different, Participle's work with troubled families in Swindon has shown similarly positive results. It began with a call for help from the town. 'I was told: "Look, I've got families, generation after generation, they are sort of like the canaries in the coal mine of the welfare state. They're not being served, will you come and see what you will do?"' Living alongside 10 such families on one of Swindon's most problematic estates, observing both their lives and the work of frontline public service workers – from housing officers to the police and social workers – who interacted with them, proved revealing. 'Understanding really what it felt like on their sofas when public service

'We need to start with [the] problem we're trying to fix and then think what kind of other systems we need to design'

worker after public service worker came in to call and deliver a message and leave,' was vital, Cottam recalls. 'Through that process we began to construct a different way of working with the families themselves. That evolved into a four-stage programme that operates today: of inviting families in, opening them to change, fostering the core set of capabilities and then supporting them to use those capabilities to come back into school or whatever.'

Once again, the needs and desires of public service users are key. 'The most critical difference about the programme,' Cottam argues, 'is [that] it is actually led by families themselves and they determine what happens to them within the programme ... Rather than bring existing services together round the family, which would be seen as the normal step forward, what we've done is allowed families to drive where they're going.' The impact went beyond the families Participle was working directly with. 'Families began to refer themselves to the programme – families that had disappeared off the radar or families that

had one mobile phone to evade social services and another to talk to their friends,' Cottam says. Moreover, such families, 'really need support and are at risk, they report themselves in and we discover who really is at risk and build high-trust relationships'. She considers the key to this was that the power over their lives and how to address their problems was placed back in the hands of the families.

The Swindon project, called Life, also proved highly revealing about the public service workers. 'We

did exactly the same sort of anthropological study alongside frontline service workers,' Cottam explains. At its conclusion, Participle told the staff they were spending 80 per cent of their time servicing the system and only 20 per cent doing any actual work and made them an offer: 'If you work with us we will construct a system around you whereby 80 per cent of your time is spent actually doing work and actually engaging with people.' It was an offer that, both in Swindon and elsewhere in the country, Cottam believes public service workers were all too keen to take up: 'We run interviews with existing frontline staff who want to join our team and, I kid you not, they queue round the block ... There is a hunger on the frontline to actually do work ... I mean, no one actually joins public services to fill out a form and sit in a meeting, do they?'

Participle's approach, claims Cottam, saves its local authority partners money. Circle, for instance, cut costs in social and adult care budgets. Indeed, the organisation provides its partners with an annual statement detailing the savings. Her concern, however, is that few of them are then reinvested in developing such innovative approaches. There remains, she says, 'too much money in old ways of doing things ... but what hasn't happened is there are no real mechanisms of transfer to get that capital into the new ways of doing things'.

Moreover, there is not enough focus when budgets are set on the 'really long time horizons that this kind of work needs, because to make these shifts is very complicated'. There is, she claims, 'no national imagination about how things could work better' and is clearly frustrated that lack of resources means Participle is not able to work with the 20 or so local authorities which want to adopt Circle.

Politicians, moreover, may talk the rhetoric of reform but, believes Cottam, until they change the criteria on which success is measured and judged, too little will change. 'If everybody and the institutions still get judged by the old system then, obviously, everybody's going to [uphold] the old system.'

About:

- Participle seeks to develop new models for a 21st century welfare state
- One of its best-known projects, Circle, is a membership organisation open to anyone over the age of 50 with a mission to build and support the capabilities of its members to lead independent lives
- Amartya Sen's notion of 'capabilities' is a central tenet of Participle's approach



Hilary Cottam, founder of eight-year-old Participle

'It's a partnership between clinician and service user'

It is likely that people's lives have been saved thanks to personal budgets, say **Gill Rucroft** and **Sarahlee Richards**

Anne, a mother and grandmother, had been using mental health services for over 10 years and had a history of self-harm and overdosing. In the year before she had her personal health budget, she had made six attempts to end her life, had been a frequent caller to the crisis team, and had a number of inpatient stays in a hospital. Three years ago, Anne became one of the first people to join Northamptonshire's pilot for mental health personal budgets. In those three years, she has made just one call to the crisis team.

'Anne didn't want to keep on trying to commit suicide,' explains Gill Rucroft, continuing healthcare and personal health budgets commissioning manager for NHS Nene and Corby clinical commissioning groups. 'But traditional services did not meet all her needs.' Anne and her care coordinator had noticed that a 12-week course of clinical psychotherapy had 'really helped her' – but, when it came to an end, 'she fell off a cliff again and was back in hospital'. Twelve weeks was all that the NHS could offer.

Having a personal health budget – which allowed Anne to pay for on-going therapy might, quite literally, have saved her life. She no longer needs to see her care coordinator much any more and she has now reduced her psychotherapy: twice-weekly visits have fallen to once every three weeks.

Northamptonshire was one of the 20 original government personal health budget pilot sites established by Labour in 2009. Personal health budgets are an amount of money that go towards the support of an individual's health and wellbeing needs. Personal health budgets are planned and

agreed between the individual, and/or their representative and their clinician. The personal health budget is then authorised by the local clinical commissioning group. Following an independent evaluation, the success of the pilots led the coalition to begin a national rollout of the scheme in 2012. From October 2014, anyone entitled to NHS continuing healthcare – a package of care arranged and funded solely by the NHS for individuals who are not in hospital but have complex ongoing healthcare needs – has a right to have a personal health budget.

Personal health budgets have led to a shift of power into the hands of service users. 'It's a completely different approach', says Rucroft. 'It's a partnership between the clinician and the person, who is an expert in the impact that the long-term condition has on their life.' The data collected shows that, while people use about 40 per cent of their budget on direct payments to purchase things they were not previously able to receive, 60 per cent of the budget is still used to buy traditional services, such as a community psychiatric nurse, or occupational therapy. Outside of continuing healthcare provision, personal health budgets are available to a very small number of people.

Although very different from Anne's, the story of Peter shows a similar positive outcome for personal health budgets. A former member of the armed forces who had become a businessman living in the United States, Peter's 'world fell apart' when he had a stroke

which damaged the part of his brain used for remembering things. His marriage broke down and, because he has trouble reading his post, he fell into deep financial difficulties. 'When I met him,' Rucroft recalls, 'he was completely on his own, severely depressed and he had tried to commit suicide a number of times.'

A personal health budget enabled him to employ somebody for a couple of hours a week to help him pay his bills, and this began his road to recovery. The purchase of a satnav from his budget – his cognitive problems meant that he easily got lost even when driving locally – had a transformative effect. Today Peter drives to national events about personal health budgets – speaking at a national conference last year – as well as visiting stroke groups in different parts of the county. 'He

wouldn't be able to do any of that without his own satnav, it's completely changed his life,' says Rucroft. 'It's also changed other people's lives because he's helping other people who have had strokes and he now feels his life has purpose.' Peter also now delivers personal health budget training to Northamptonshire mental health staff.

Traditionally the NHS can only offer a limited menu of services to people. Rucroft continues, 'Some people with long-term complex mental health conditions live chaotic lives and these approaches do not make any sense to the way they live their lives and sometimes fail to meet people's real needs.'

'Some people really embrace the idea of the customers and patients taking control and some people find that challenging'

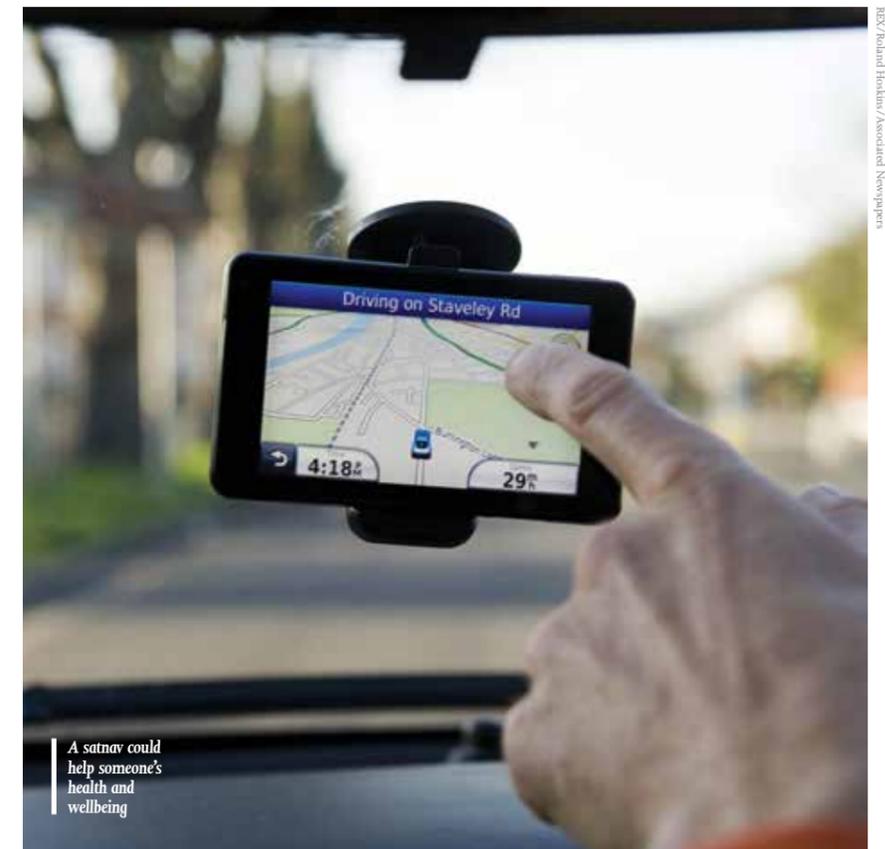
Her CCG colleague, commissioning lead Sarahlee Richards, believes the key is personalisation. 'It's about people being part of their community, using their own resources and assets. The sort of things that Peter has purchased has enabled him to meet his own health and wellbeing outcomes in a way that makes sense to him and fits with his life. It is not always possible for traditional services to respond in this way.' Richards hopes that, when the NHS sees what people are buying to meet their needs and achieve outcomes, traditional service delivery may change.

'People can be quite nervous about having a personal health budget to start with, taking responsibility for it and providing receipts for purchases,' reflects Rucroft. She is confident, however, that this will change over time. 'We feel that, once people understand personal health budgets and all staff are using a personalised approach, people will be supported to write their personal plans and manage their long-term conditions. They will then gain confidence to manage a personal health budget.' To assist this the CCGs support a peer network so that those who already have personal health budgets can provide mentoring and advice to those considering them.

There can be resistance to personal health budgets from some healthcare professionals, Rucroft goes on to say. 'There's quite a lot of fear that people won't need or choose their services any more but, once they understand the benefits for the person, on the whole professionals are really supportive.' Richards agrees: 'Some people really embrace the idea of the customers and patients taking control and some people find that challenging.'

Concerns regarding managing risks have been largely addressed. Personal plans are written in partnership with the clinician and the personal health budget plan has to be clinically agreed. There may be an occasion when a person chooses to take a risk, which the clinician finds challenging to agree. Risks and mitigating actions may be discussed at a panel but, if the person still wishes to take this risk and fully understands the implications, it is recorded in the plan. But this occurrence is rare thanks, says Rucroft, to the good relationships that are developed through this new approach.

A nurse by background, Rucroft welcomes the fact that personal health budgets are challenging the traditional 'very directive model' of



A satnav could help someone's health and wellbeing

healthcare and believes it will lead to better outcomes as clinicians are encouraged to look at the whole person – 'How they live their life [and] what's important in their life'. They can then support the person to devise different ways of achieving their health outcomes that fit in with their particular lifestyle.

Not only is there the potential for better outcomes, there is also the prospect that personal health budgets may reduce avoidable costs. The budgets are cost-neutral, consisting only of what would have been spent on traditional care. 'If the person's health and wellbeing improves,' says Rucroft, 'which it often does, the budget is adjusted to reflect the change in their needs.' She emphasises,

however, that the personal health budget will also be reviewed and, if necessary, increased if a person's long-term condition relapses and they need more care.

Richards describes the potential for increasing cost-effectiveness over the longer term through prevention. At present, personal health budgets are offered to people who are in secondary health services. She

would like them to be available in primary care. 'We could then prevent problems by supporting people to manage their conditions and stay well, staying out of secondary services and reducing the use of inpatient beds and calls to the crisis team.'

Richards understands that, for some people with a traditional view of health provision, Peter's purchase of a satnav may appear a strange way to spend health money. An outcome-based health system, she says, should be about supporting a person to manage their condition and improve their health and wellbeing. On those criteria, few could dispute Peter's choice.

About:

- Personal mental health budgets were first piloted under Labour in 2009. They play an important preventative role, reducing people's need to use inpatient or secondary services
- Personal budgets can be used creatively for people to meet their health outcomes
- Personal budgets empower people by supporting them to manage their health and wellbeing in a way that makes sense to how they live their life



Ian Nicholson/PA Wire



Time to leave
Whitehall
behind

Paul Hearfield

Let it go

Politicians can no longer pretend we can fix everything from the centre

Those of us on the left are advocates of the power of common endeavour to improve lives. Whether it is the NHS, social security or social housing, the history of social progress shows that it is through a common resource that individual needs are often best met.

Historically, the central state has been the key actor in delivering these advances. However, the interviews we have conducted suggest a different approach will be required in future. As Hilary Cottam of Participle says, 'Everything – the thinking, the action, the design – needs to start from the point of view of people, not the institutions and how to reform them.'

This powerful insight is shared by all of the public sector innovators we talked to. Their experiences suggest that when you move from the national to the local, from the 'mass' to the individual, and from the

state to the family, the role of public services as an agent of change looks and feels very different.

Five main themes emerge from the interviews.

The first is a clear understanding that, despite its best intentions, sometimes the state is not very good at doing what it is supposed to do.

When Gill Ruecroft and her team introduced personal health budgets for patients with mental health problems in Northamptonshire, it was because existing services were not improving people's lives or getting to the root causes of their problems. When Cottam worked with troubled families in Swindon, she saw 'what it really felt like when public service worker after public service worker came in to call and deliver a message and leave'.

Discussing weaknesses openly and addressing the need for change should always be welcomed by those who believe in public services. The people we interviewed showed that encouraging users and staff to be frank about problems acts as a spur to better service provision, not a reason to be sceptical of the value of common endeavour.

Looking back, Labour failed in the 1970s to respond to growing discontent among council tenants by creating new models of public housing provision that better met their needs. This failure opened up the space for the Conservatives to develop a solution which was purely market-based and individualistic. The lesson is that if Labour fails to adapt public services to new circumstances, falling public confidence allows the Tories to destroy them. We cannot repeat that failure in this century.

The second theme is the need to challenge views about the value of a 'big state' presence in people's lives.

Education aside, most people do not want to constantly interact with the state. We would rather be healthy than have to use health services. We would rather be employed than deal with social security. Most people are grateful they do not have contact with social services.

When you look at things from this perspective the challenge is often to help individuals and families extricate themselves from the services the state provides – not because the service is unnecessary but because the need for it symbolises problems that need to be fixed, and that the ultimate goal should be to remove the need for the service in the first place.

As Jayne Moules says of her work in Newcastle bringing together all of the different agencies that interact with families with complex needs, 'One of the prizes we want to offer families is to say "by getting to this point you won't need us, we'll be out of your life." Getting to the point where you don't need services, you don't need to be scared.'

Moules' work suggests that, in many cases, what each individual needs is a route that takes them away from close connection with the agencies of government and towards greater self-reliance. The paradox is that finding this route requires the state to be at its very best.

The third theme is that the key to making lasting change lies in giving people real power and control over the decisions that affect their lives and the services they use. This is the new politics of empowerment, which offers the potential not just to improve public services but rebuild trust in politics too.

When public spending is being reduced, it is all too easy for any change to be attacked as cuts-led, but, in truth, changing services to better meet people's needs would have to happen even if funding were more readily available. People are no longer prepared to be the passive recipients of whatever is offered to them. They want, and they deserve, the right to be involved in decisions taken about them. We need to realise, too, that decisions about public services will be better if they are informed by the experience and understanding of people on the receiving end.

This is not about shrinking the state but about giving people the ability to decide for themselves how they want the state to be present in their lives. The Tories have an ideological imperative to roll back the state; Labour's challenge is to change the role of the state so it becomes a flexible tool that helps people improve their own lives on their own terms.

Fourth, there are many ways in which a state that hands real power to its citizens could prove to be more cost-effective. Whether it is through personal health budgets that reduce the use of emergency NHS care, or effectively integrating all the support for troubled families to prevent problems from developing, giving people greater power and control can reduce the need for extended use of more expensive services.

Empowerment offers Labour the chance to marry fairness with greater efficiency. Every pound spent ineffectively is a pound not spent on securing our economic future or helping those with the greatest needs. As our colleague Stella Creasy has argued, wasting money is not a progressive value. An ineffective state which fails to listen to people can have wider consequences too. As the old ways of doing things fail, people's confidence in the state breaks, which can leave the door open to simplistic but false solutions propagated by the far-right or the far-left.

The fifth and final theme is that the challenge to do better can be very disruptive. That is as true for the private sector as it is for the public sector.

Jim McMahon 'reset' Oldham's social care provision by creating Oldham Care and Support as an ethical care company. He shows how different models of service provision can be just as challenging to private sector failure as to weaknesses in the public sector. Addressing failures of both sorts is a powerful incentive for those who seek greater equality.

For practitioners, change can require understanding that well-trodden paths and long-established ways of approaching things may not always have been the most effective in terms of making changes that last. Making such a change might involve different ways of working and different cultural attitudes. It will seem risky and even dangerous. Change is always perceived that way, but that does not mean we can ignore the need for it.

As Ruecroft says, public sector staff are 'quite nervous about [change] to start with' and 'there's quite a lot of fear that actually they won't be needed any more'. Similarly, Josh MacAlister reports resistance

In truth, changing services to better meet people's needs would need to happen even if funding were more readily available

from social work academics who he argues have 'a fear that the implication of this [ie new ways of working] being successful is they've spent some of their career doing something which could have been put to bed easier.'

The political changes that are required to give people more power and control can feel just as unnerving. We come into politics to change things for the better but

for too many this means directing change from the centre without realising how taking control over people's lives and communities can leave them incapacitated and weak. The new politics of empowerment needs politicians confident enough to understand that their challenge is to win power so they can give power away.

Making the case for change is always hard. When you cannot answer the question 'What will you do about problem X?' with a firm, national promise, it becomes harder still.

This is perhaps why, in McMahon's words, 'We're not used to allowing for difference. We use the language of postcode lotteries, because we're scared of different places receiving different services.' Ultimately, though, McMahon argues that the public will see for themselves whether a programme is working. As he says, 'The public can judge whether the local authority and other public providers are delivering'.

To a large extent, the last Labour government used central targets and increased budgets to drive public service reform. We need to move on from the New Labour era not because it was wrong for the time but because the world has changed and we now face new challenges in reshaping services so that they better meet people's needs when there is far less money around.

This may not be as daunting a leap of faith as it appears. Trust in politics is low. Pretending we can fix everything when we cannot breeds scepticism about politics and politicians. There is no need to treat people as children by pretending there are simple answers to everything. A more mature political discourse would accept that the state and its citizens need to work together to find the right answers.

The people we have interviewed have shown a willingness to embrace criticism, then push past nervousness and the natural fear of change to hand power to those who know their own situation best. They have used the energy that this transfer of power unleashes to improve services without increasing costs or demanding increased budgets. We need to listen and learn from them, just as they have listened and learned.

Liz Kendall MP is shadow minister for care. Steve Reed MP is shadow minister for home affairs

LGA Labour Group

**The LGA Labour Group.
A national voice for Labour local government.**

We campaign for power to be devolved out of Westminster to local communities, fair funding for local services and a stronger role for local councillors. We support Labour councillors through training, development and advocacy. We act as a platform for ideas and arguments for all those committed to an effective localist element to Labour politics and policies. The Group is led by Cllr Jim McMahon and all of our group officers are elected by Labour Councillors.

We have an active programme of training, events and conferences. We produce policy publications, best practice books and training guides. We work closely with the national party, Trade Unions and Labour MPs.

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