

**Care Services Improvement Partnership (CSIP)  
North East, Yorkshire & Humber (NEYH) and North West (NW)**

**Everybody's Business Managed Learning Network (EB MLN)  
Participants' Evaluation**

**Executive Summary**

September 2007

**Background the EB MLN:** The *Everybody's Business Integrated mental health services for older adults: a service development guide* was published by the Department of Health (DoH) and Care Services Improvement Partnership, (CSIP) in November 2005. In September 2006 the Managed Learning Network (MLN) for Everybody's Business (EB) Service Development Guide (SDG) was established across the two northern regional development centres (RDC) CSIP to support local delivery of Everybody's Business. The purpose of the EB MLN has been to drive forward the SDG in the two regions, reflecting the priorities and needs of local health and social care communities, whilst also addressing national priorities and policy directives. EB MLN members were to:

- drive forward key themes from Everybody's Business
- be a source of advice in their local area
- ensure one day a month is used effectively and that value is achieved in the delivery of the EB SDG themes.
- challenge their locality's 'status quo' and contribute through the network to the wider older people's development agenda
- identify other networks within their locality and ensure mutual information is communicated
- be responsible for bringing one learning action or experience across identified themes to bi-monthly team meetings
- work closely with colleagues in the network and share experience.

**The EB MLN evaluation – purpose and method:** The purpose of this EB MLN participants' evaluation was to examine the work MLN members had undertaken individually and as members of the theme groups and to assess the usefulness of a number of components of the MLN, including meetings, the website, the Let's Respect campaign and the buddy system. CSIP also wanted to establish the level of interest in continuing the MLN and the level of support participants might have for continuing as members. A qualitative survey was distributed to all EB MLN participants via e-mail with a covering letter. Participants were asked to type their responses and e-mail the completed survey. Graphs and tables have been drawn up for quantitative data. For qualitative data, themes were identified and example comments selected to illustrate points raised. A full 76 page report provides a detailed description and analysis of the results.

**Sample description:** Twenty-eight of the 47 participants in the combined NEYH and NW EBMLN completed surveys providing a 59.6% response rate. This is an acceptable return for a survey of this nature. Of this sample, 19 respondents worked in the NEYH region and eight from the NW region, with

one person working across both regions. Survey respondents worked in 27 different organisations and represented people from across health, social care and the voluntary sectors working in a wide range of roles. This meant that a diversity of views was obtained and the sample provided a good cross-section of the membership of the MLN as a whole.

**Joining the EB MLN:** People had found out about the formation of the EB MLN from a variety of sources and this indicates that CSIP had been successful in raising the profile of the MLN and achieving a diverse membership. The majority (n = 20) of people had already been working on EB SDG and were already engaged with the agenda.

**Attendance of MLN meetings:** The majority, 96.4% (n = 27), of respondents had attended at least one MLN meeting and of the 25 respondents who rated the usefulness of MLN meetings all of them found the meetings useful to some degree (see figure 1). Sessions provided by invited speakers at both the combined NEYH and NW meetings and at regional meetings had been useful and valued. Participants in the MLN have disseminated information from both speakers and colleagues through a wide range of networks and have used information to guide a wide range of locally based work.

A qualitative analysis was undertaken of all the aspects of meetings mentioned as useful and these were grouped into 36 factors. The factors were then analysed and could be broadly grouped into four themes:

- Interaction with others
- sharing
- knowledge acquisition
- collective work, learning & problem solving.

Seventeen respondents shared ideas for improving MLN meetings. These included suggestions for: an open surgery/ problem solving slot at each meeting; to share updates on good practice outputs informally at each meeting, through bulletin/ideas boards /display tables which can then be accessed at lunch/break times; and more networking time.

**Theme group work:** At the September 2006 EB MLN launch event 10 key themes were identified as a focus for EB MLN working. MLN members signed up to one or two themes and Theme Leaders were appointed. Eight comments regarding improving MLN meetings related to work around themes and suggestions included: providing more structured support to theme groups; allowing longer on the agenda to work in theme groups; focusing sessions on just one or two themes at a time with workshops facilitated by theme group members; having more time for presentations from theme leads to share work in progress and challenges, answer questions and discuss ideas for moving work forward in that theme area. Overall, there was mixed feedback related to the usefulness and output of the ten theme groups. The groups which received the highest ratings for usefulness were: commissioning; workforce; in-patient services; Care Homes, Day Care, Home care and housing group; and service user involvement. Some theme groups have been active and productive, whilst others have been slower to find productive working

arrangements. Time to meet outside of MLN meetings and the wide geographical spread of participants were the two main barriers to joint working through themes. Where themes have been productive, significant work has been undertaken outside of MLN meetings, either through additional meetings or through joint working which has been shared predominately via e-mail. One theme group had been challenged by the breadth of its remit.

**Buddy system:** At the EB MLN launch event buddies had been identified and 21 survey respondents had a buddy. Feedback on the buddy system was very varied. Only 14/ 19 people who rated the usefulness of the buddy system had been in contact with their buddy. Comments indicated that many MLN participants liked the idea of the buddy system and said that their rating in no way reflected on their buddy. But a number of barriers emerged to making the current system universally useful, these included; geographical distance; lack of time; and difference in work focus. There was a suggestion that a clear definition is needed for the role of buddies. One participant provided an example of how an informal buddy arrangement with another MLN member had proved very valuable.

**EB MLN website:** All of the respondents (n = 28) had logged onto the EB MLN website and 22 reported how frequently they accessed the website with the majority of these (n = 11) only accessing the site a few times. The main barrier to using the website more appeared to be time. All respondents (n = 20) had found the website useful to some degree with five people finding it extremely useful, six people saying it was very useful and nine people reporting it was quite useful.

**Let's Respect campaign:** Fifteen respondents have been involved in raising the profile of the Let's Respect campaign. Previous and planned activities were described. Ten people had accessed the Let's Respect website. Sixteen people rated the usefulness of this website and all of these had found the site useful to some degree, with half this sample indicating it was very useful, two people reporting it was extremely useful and the remaining six indicating it was quite useful.

**Continuation of the EB MLN:** The majority of EB MLN members surveyed (82.6%) would like to continue the EB MLN for another 12 months. Over half (n = 15/27) the respondents thought their manager would continue to support their involvement in the MLN and support their further commitment of 1 day per month of their time for work related to the network. The vast majority (93.6%) want the agenda of the MLN to expand to include the National Audit Office (2007) *"Improving Services and Support for People with dementia"*.

## Recommendations

1. The Everybody's Business Managed Learning Network should be continued for another year.
2. The remit of the EB MLN should be expanded to also cover the recommendations from the National Audit Office (2007) report on "*Improving services and support for people with dementia*"
3. MLN meetings should be continued with members being encouraged to make requests for outside speakers / topics to be covered. Consideration should be given to focusing the majority of the agenda on one or two themes per session with related invited speakers in addition to workshops run by theme group members and to having an open surgery / problem slot at each meeting.
4. The organisation of theme groups should be reviewed. More time is needed within MLN meetings to ensure all theme groups are working productively.
5. The EB MLN web-based website should be maintained and MLN members should be continued to be prompted and supported to use this resource. Some members might benefit from more support with IT skills to improve their ability to access this resource.
6. Progress related to the Let's Respect campaign should be continued to be shared. Consideration should be given to inviting MLN members to present their work in this area at an MLN meeting. The Let's Respect website should be maintained and MLN members should be continued to be prompted and supported to use this resource.
7. The Buddy system should be reviewed. This could be made optional, with MLN participants being encouraged to identify a buddy who: works geographically close enough to be able to meet up outside of MLN meetings; works in a similar post or field of OPMH; and / or is part of the same theme group

## References

Department of Health (DoH) & Care Services Improvement Partnership (CSIP) (2005) *Everybody's Business – Integrated mental health services for older adults: a service development guide*. Can be downloaded from

[www.olderpeoplesmentalhealth.csip.org.uk/everybodys-business.html](http://www.olderpeoplesmentalhealth.csip.org.uk/everybodys-business.html)

National Audit Office (2007) *Improving services and support for people with dementia*. London: National Audit Office. Can be downloaded from the website at: [http://www.nao.org.uk/publications/nao\\_reports/06-07/0607604.pdf](http://www.nao.org.uk/publications/nao_reports/06-07/0607604.pdf) (accessed 14.10.07)

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