Review of Research Evidence to Inform the Implementation of the Carers (Scotland) Act 2016

Dr Ailsa Cook, Director, Outcome Focus

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Summary Points

- The Scottish Approach to Public Service Reform recognises that public service delivery needs to reflect and engage with the complexity of people's lives and is influenced by multiple factors across the system.
- Whilst recognising the need for consistency of approach across Scotland, local organisations need to take a flexible approach to implementing policy, such as that taken forward in the Carers (Scotland) Act 2016, responding to local issues. This requires intelligent leadership at all levels and a supported workforce.
- Developing a robust understanding of the system in which the Carers Act is being implemented at local and national levels can support implementation.
- Building networks and coalitions at local and national levels will be important for implementation, particularly where there is conflict around the policy.
- National approaches to monitoring and evaluation should reflect the complexity of the implementation process and foster learning, development and improvement at local and national levels.
- There is considerable expertise on collaborative approaches to learning and improvement in Scotland. It is important to adopt approaches that are suited to the context and tasks for implementation.

Background

The Carers (Scotland) Act ("the Carers Act") received Royal Assent in February 2016. The Carers Act will commence in April 2018. Amongst other things, the Carers Act requires integration authorities to:

- provide support to carers based on identified needs which meet local eligibility criteria;
- work with carers to develop an adult carer support plan or young carer statement based on needs and personal outcomes; and
- provide information and advice to carers.

In a presentation at a Carers Act Development Event in November 2016, and as captured in the high-level implementation plan for the Carers Act, the Scottish Government Carers Team identified drivers that need to be in place to help ensure effective implementation of the Act. These include:

- integration authorities get information about the Carers Act and associated guidance and regulations;

- staff across the sector have the knowledge, capability and skills to work with carers in the ways prescribed by Act, and set within a wider context of the integration of health and social care using the self-directed support approach and principles;
- carers are aware of their rights and empowered;
- all partners create the conditions required to enable change to happen at local and national levels.

Implementation of the Carers Act will be part of a wider shift within public services in Scotland towards more co-productive, preventative, personalised and collaborative ways of working. The potential of the Carers Act to make the positive changes desired is influenced by the effective implementation of a number of other key policy imperatives, in particular:

- integration of health and social care;
- shift of balance of care away from hospitals and residential care to home;
- increased focus on personal outcomes; and
- effective implementation of Self-directed Support.

About this paper

This paper brings together a diverse literature in an accessible way to explore what the evidence tells us about how best to address the specific implementation tasks required for the Carers Act. The literature on which the paper draws is substantial, coming from disciplines as diverse as management studies, health care, implementation science and political science. The review does not attempt to be exhaustive, but instead draws together key findings from significant and well regarded projects and reviews. Links to resources are included in the references to stimulate further reading.

The review is presented in two sections.

The first section considers the context for policy implementation and explores three significant approaches to understanding context of relevance to the Carers Act: working with complexity; understanding systems; and ambiguity and conflict. The section concludes by pulling out specific recommendations based on this research.

The second section examines research that can help inform the implementation of specific aspects of the Carers Act, such as communicating the messages from the Act to organisations, workers and carers. . This section draws together a very large body of research and to maximise accessibility presents this in a table showing evidence based strategies to address specific policy tasks. The section concludes with a discussion of the implications of this research for the implementation of the Carers Act.

Section 1: Understanding the context for implementation

Over the past twenty years there has been a significant shift in the way that policy implementation is viewed. The limitations of exclusively top down approaches to policy implementation have been recognised (Sheil-Davis and Wright (2015) and the important role that local organisations play in adapting and embedding policies within their local systems highlighted (Butler and Allen, 2008).There has been a pronounced shift towards understanding policy making as happening in complex systems, where multiple factors operating at individual, organisational and societal level, interact in unpredictable ways to influence policy outcomes. This section examines key insights from the policy implementation literature about the way in which context shapes policy implementation.

Working with complexity

The Health Foundation (2010) found that taking a complex adaptive systems approach can be useful for managing change in health contexts. Begun et al (2001: 256) characterise complex adaptive systems, such as the health system as being:

- dynamic;
- massively entangled with lots of interdependencies and interactions;
- emergent and self-organising, evolving new ways of working; and
- robust, adapting to the context to be fit for purpose and functioning.

Complex adaptive systems may function very effectively, but are, by definition, unpredictable. This requires leaders in complex systems to be intelligent and responsive, using networks and relationships to manage change (Greenhalgh et al, 2004).

Working in systems that are complex and adaptive creates challenges and opportunities for policy makers and implementers. One key challenge is that it is not possible to take an intervention from one context and implement it in another, without a local process of adaptation, which necessarily changes the intervention (e.g. Wandersman et al, 2016). The dynamic relationship between context and intervention also creates a challenge when seeking to determine "What Works", leading many commentators to argue that a more sensible question for evaluation is "what works where, when and for whom" (Pawson and Tilley, 1997). For example, a review of approaches to evidence use found that whilst champions were a key determinant of organisational innovation, it was not possible to create simple evidence based guidance as to what an effective champion looked like, as this was influenced by the nature of the intervention and local conditions (Greenhalgh et al (2004).

Implementing policy in the context of complexity also creates opportunities for local innovation. Butler and Allen (2008) describe the "possibility space" that complexity opens for local innovation, and argue that making clear to organisations that they can determine implementation creates opportunities and fosters creativity. This theoretical insight has been supported by a recent evaluation of the Scottish Social Services Council Self-directed Support (SDS) workforce development programme (Cook and Morton, 2016) which found that action learning approaches[1] helped people understand their local system and empowered them to work creatively to implement change.

Understanding systems

Developing an understanding of the local system is widely recognised as an important first step when implementing policy in the context of complexity. As a result, numerous approaches to system mapping have emerged. For example, Gopal and Clarke (2015) have developed a collaborative approach for mapping actors within a system, which enables organisations to identify the interactions and interdependencies shaping the implementation of a policy.

In Scotland, an approach to system mapping has been championed that draws on evidence from the behaviour change literature to understand the factors across the system that influence whether an individual changes behaviour. This approach also applies to complex sets of behaviours, such as those required to implement the Carers Act. Darnton (2008) reviewed 60 different behavioural change models and identified 18 factors as important in influencing change across three different

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[1] Action Learning Approaches bring people together across organisations or issues to reflect on experiences of practice and identify learning for the organisations and for future practice.

contexts. These are summarised in the following 'ISM model', which forms the basis of the ISM Behaviour Change Tool developed by the Scottish Government (Darnton and Horne, 2013).

The ISM Behaviour change model
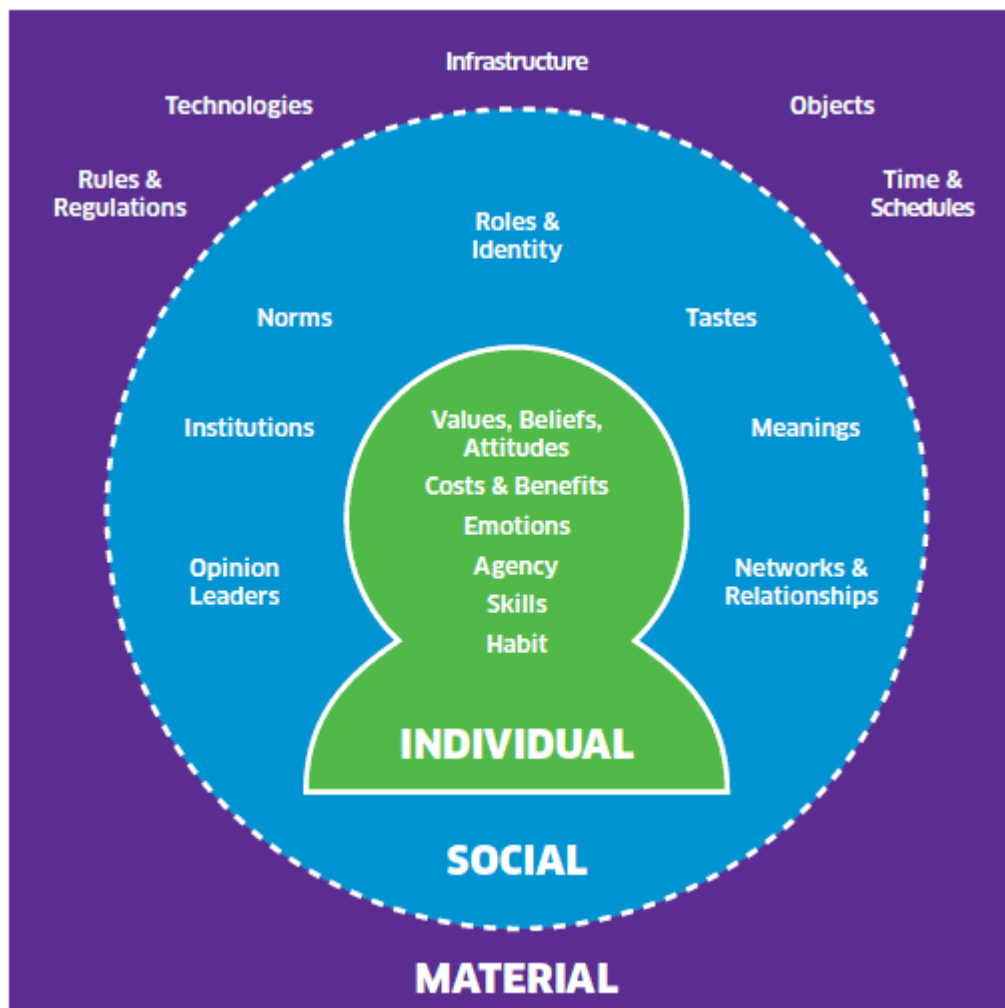
This model was used to analyse the feedback from the national consultation around Self-directed Support (Cook, 2016). This analysis found that people working across health and social care face many challenges in implementing the changes required to move towards more outcomes focussed and collaborative ways of working and that these challenges operate at material, social and individual levels. This analysis showed that whilst much policy and guidance in this area is focussed on the practice of individual staff members, the opportunities they had to work in outcomes focussed ways were heavily shaped by social and material factors. The institutions and organisations that people worked in had a profound impact on practice. The ways that local institutions interpreted national policy and guidance and the status of this way of working varied across the country. Furthermore, it was clear that different people within the same organisation experienced their context and opportunities for implementation differently. The ways in which eligibility criteria, scrutiny, performance management and risk were negotiated locally had a particularly pervasive impact on people's practice. The accompanying paper on personal outcomes includes a more in depth discussion of these issues.

> **Understanding context: Implications for implementing the Carers Act**
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> - The literature on complex adaptive systems suggests that it is vital that the roll out of the Carers Act gives flexibility to local organisations to adapt the recommendations and embed them within their local contexts.
> - Developing an understanding of the system in which the policy is implemented is important for tailoring implementation strategies. The ISM tool has been successfully used to develop an enhanced understanding of system wide barriers and supports to implementing SDS and might be useful for understanding implementation of the Carers Act.

Ailsa – re above. Can the first bullet be changed as the legislative provisions in the Act are mandatory – finding a good way to capture local flexibility within a national legal framework.

Section 2: Understanding the tasks of implementation

Implementation of the Carers Act requires completion of a range of specific tasks, such as communicating the messages, building capacity and skills, spread and scaling up and building effective partnerships. This section highlights key findings from research into these different specific aspects of implementation.

It is important to note that whilst the research reviewed for this paper was carried out in different settings and contexts, the overarching messages were remarkably similar. Whether you are developing a dissemination strategy, building a partnership or seeking to scale up an intervention, there is a core set of features it is important to pay attention to. These include: communication, establishing clear aims and objectives, including people from across the system, developing tailored systems for monitoring and evaluation, working with culture and management and leadership. Furthermore, as Greenhalgh et al (2004) highlight in relation to champions, it is not possible from the literature to identify specific features of, for example, a leadership strategy that will work in all contexts. The abiding message from the literature is that it is not just what you do, it is the way that you do it that is important (see Cook, 2015, for a more detailed discussion).

The following table shows the main tasks of implementation of the Carers Act and summarises the main messages from the evidence relating to each task.

Task	Key messages	Useful references
Communicate the message	- It was not possible to find specific reviews relating to communicating policy messages to audiences. There is a large body of work around communicating evidence that is largely transferable. - The Alliance for Useful Evidence has identified 6 evidence based mechanisms to get evidence used: build awareness;	Breckon and Dodson (2016) Andrews et al (2015)

	develop mutual understanding; make accessible; foster social interactions; develop skills in evidence use and use structures and processes. • Social marketing techniques and behavioural insights can be effective in creating awareness of the message. • Tailoring and targeting messages, presenting them in ways that are meaningful to local audiences, such as through stories and arts based approaches, increases evidence use. • Creating opportunities for interaction around the messages increases the chances they will be put into action • Social norms are important, thinking about how messages are framed to make it more persuasive increases impact.	
Building capacity and skills	• Effective capacity building is done close to the workplace, supporting reflection on, and in, practice. • Inter professional and collaborative approaches to learning enable participants to build an understanding of the system in which they work as well as networks that can be used to lever change. • Buy in from senior managers is required to ensure that the learning is valued and participants are empowered to put new learning and skills into practice. • Mentoring and supervision can be effective in supporting people to put learning into practice. • Flexible approaches to learning that allow participants to pick and mix from a range of tools enable them to tailor their learning to their own needs and contexts.	Andrews et al (2015) Cook et al (2015) Cook and Morton (2016) Breckon and Dodson (2016)
Promoting Innovation	• Being motivated, open to new ideas and able to think originally in problem solving are the behaviours most strongly associated with innovation in the workplace. • Organisations that actively promote and reward innovation bring about innovation. • Managerial support and working practices are critical in fostering innovation. A national survey found that many public sector workers had little opportunity for innovation. • Leaders who are open, confident and encourage risk taking, promote innovation. • Innovation is more effective when carried out by people in local organisations as opposed to external agencies. • Effective innovation processes involve people with diverse expertise working together to address specific issues. • Teams that take time to reflect on where they are in relation to their strategic aims are more innovative than those that don't. • Innovation takes time and managers that make time for change and allow for output to fall in the short term can expect greater gains longer term. • Adequate resource is required for innovation to succeed.	Klein and Knight (2005) Patterson et al (2009) Page (2014) Schippers et al (2015)

Strengthening partnerships	• There are a number of features associated with effective partnerships (see appendix for a detailed list). These include having clear aims and objectives, being flexible, involving people in strategic and operational roles and involving diverse stakeholders. • There is no one size fits all approach to partnership, local approaches need to be tailored to local conditions. • The motivation for forming a partnership is an important determinant of success. Partnerships that form voluntarily are more robust. Partnerships that are mandated or formed because it seems the right thing to do are more likely to fail. • Many public service partnerships are beset by power issues, in particular, between local or central government and third sector partners. Explicitly managing power in partnerships is important to build trust, which in turn improves partnership working. • Partnerships are dynamic entities that take time to develop and evolve over time. • Effective partnerships require public service leaders who understand and engage with the different pressures on partnership to navigate the best route forward. • Staff need support to work in these complex environments and to find their own path through competing agendas. • Previous experience of partnership working influences the effectiveness of future partnerships with past partnership success increasing the chance of future success.	Cook (2015)
Scaling up innovations	• Scaling up innovations requires that they are adapted to local contexts. • A range of factors influence this process of adaptation, including the time allowed to prepare for scaling up, the clarity of purpose, user friendliness of the innovation and previous experience of innovation. • Integrating innovation into established practice can facilitate the process of scaling up, in particular, by gaining sanctions from established bodies like inspectors. • Sharing information across boundaries is integral to scaling up. Fostering social networks creates positive social norms and allows peer-to-peer learning. • Perceptions that the innovation is highly useful and low risk, facilitate effective scaling up. • Realistic assessments of new skills and responsibilities associated with scaling up are needed. • Approaches to monitoring and evaluation need to be incorporated from the start, be tailored to local contexts and be diverse. • Iterative approaches to evaluation maximise opportunities for learning from the process.	Sheil-Davis and Wright (2015) Greenhalgh et al (2004)

	• Leadership and influence need to be multi directional, not just top down. Distributed and participatory approaches to leadership are associated with success. • Conflict and unresolved tensions around the innovation can get in the way of scaling up.	
Monitoring and evaluation	• It is important to build in approaches to monitoring and evaluation early in the intervention process. • Approaches that place an undue emphasis on judging performance have been shown to foster 'perform or perish' environments that undermine quality of care. • Evaluation and monitoring approaches that focus on learning for improvement can foster transformation across an organisation. • It is not possible to directly attribute outcomes to interventions in complex systems and approaches that seek to do this are both time consuming and foster gaming and other unintended consequences. • Theory based approaches to understanding the contribution of activities to outcomes are more manageable, generate learning and promote assets based and partnership approaches. • The outcomes of complex interventions can take many years to be realised and effective monitoring and evaluation strategies capture progress to outcomes as well as factors helping or hindering achievement of policy goals.	Patterson et al (2011) Miller and Barrie (2016) Cook (2017) McPherson et al (2015) Cook (2015)

Supporting people to make the change

Review of the evidence around these key tasks for implementation highlights the complexity of the task at hand. Effective approaches to implementation bring clarity and purpose whilst empowering people across the system to make change. Collaboration is a key theme running through this evidence, as is the importance of establishing and using social networks to both create and normalise change. Effective leaders in this space are confident, open, allowing teams to take risks, whilst being mindful of and actively managing power differentials and conflict through the process.

A recent report by Needham and Mangen (2014) described the core competencies of the '21st Century Public Servant'. This report highlighted the diverse demands of the job and argued that public servants need to be 'municipal entrepreneurs' working fluidly, combining the ethos of 'publicness' with an understanding of commerciality. They need to have both technical skill sets and the general skills required to communicate and work co-productively, whilst taking the time to reflect on their own practice and learn from that of others. The report highlighted the need for effective approaches to staff development and support that enable people to develop these skills and to work in these ways.

Findings from a recent survey of the Scottish Social Services workforce found a mixed picture in relation to the readiness of staff to make changes to implement any new significant policy such as those required to implement the Carers Act (Iriss, 2015). This national survey found that whilst most people (86%)were happy in their role and felt that their role matched their values, they reported

increasing pressures and a decrease in resources available to support the clients they worked with. The project presented a picture of a workforce managing high workloads and increasing demands to innovate and change services. Feeling that they were improving outcomes for people and recognition of their efforts were identified as important to ensuring that workers continued to feel valued in their role.

Approaches to supporting implementation

In Scotland approaches to support the health and social care workforce to make change include:

- Improvement Science, a structured approach to working collaboratively in an action orientated way that emphasises the value of using well refined tools and protocols to understand organisations, plan, test and evaluate the effectiveness of change (e.g. Health Foundation, 2010).
- Collaborative Action Research, an action orientated approach that supports practitioners and managers across organisations to test initiatives, whilst sharing learning and building a body of evidence as to the difference made and what helps make change (e.g. Miller and Barrie, 2016).
- Action Learning Sets, a collaborative approach that supports reflection on action and the identification of strategies to address specific change issues (e.g. Cook and Morton, 2016).
- Appreciative inquiry, a collaborative, action orientated approach to understanding what is working well in organisations and how good practice can be spread (e.g. Sharp et al, 2016)

All of the approaches listed above have been used successfully in Scotland, helping people plan, implement and reflect on change processes. It is of course possible to blend elements of these approaches. For example, the implementation of Talking Points in Scotland adopted an appreciative inquiry stance whilst being founded on collaborative action research principles (Cook and Miller 2012).   It is however important to match the overall approach taken to the implementation task and context in which it is being taken forward. For example, appreciative inquiry has been shown to be effective at bolstering morale and improving confidence in settings where there has been conflict or poor performance in the past. Improvement science approaches are particularly effective in settings where the requirement for change is clear and there is relatively little conflict. Where the implementation tasks are less certain or the context is particularly complex then taking an action research or action learning approach is likely to be more effective in providing more space for in depth inquiry and emergent understanding.

Evidence around tasks: Implications for Implementing the Carers Act

- Review of the evidence shows that implementation of policy, such as the Carers Act requires leaders and staff to work collaboratively and flexibly, tailoring solutions to local contexts, whilst maintaining a clear purpose.
- Building effective networks and relationships to support implementation is a theme emerging time and again in the evidence. This helps foster the social norm that the Carers Act is important and valuable, as well as providing opportunities to share learning and effective approaches.
- Approaches to monitoring and evaluation need to reflect the complexity of the context in which the policy is being implemented and focus on learning and improvement as opposed to judging performance as further reflected in the review of literature on embedding outcomes.
- Straightforward evidence based strategies include: using social marketing and behavioural insights when communicating messages; fostering collaborative approaches to learning and creating opportunity for reflection.
- A wider scan of the literature suggests that being a 21st Century Public Servant requires a complex and nuanced skill set and the support to use it, and in Scotland there is a depth of experience in using collaborative approaches to learning and change.
- It is important to tailor the use of these strategies to the particular context for implementation.

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Appendix 1. Diagram 1: Effective Partnership Processes: Evidence Overview from Cook (2015) Partnership Working in UK Public Services

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Inputs / Resources for partnership:
- Adequate and secure funding
- Effective IT systems that enable information sharing
- Partnership specific management structure
- Sufficient staff
- Previous experience of joint working

Partnership activities:
- Develop and articulate shared aims and objectives
- Clarify roles, responsibilities and lines of accountability at operational and strategic levels
- Establish performance management systems that reflect complexity of partnership, capture range of activity and have focus on outcomes

Engagement/involvement/reach:
- Key staff working at operational and strategic levels are included
- Local communities and voluntary and community sector organisations are meaningfully involved
- Relevant private sector organisations relate to the partnership in appropriate ways

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Stakeholder reactions / awareness:
- The need for the partnership is recognised
- There is commitment to the partnership at operational and strategic levels
- Strategic managers and funders/ central government are realistic about what partnership can achieve

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Knowledge, attitudes, skills and aspirations for effective partnership:
- Different professional approaches and expertise are valued
- Partners are trusted and respected
- Partners feel that relationships are mutually beneficial
- Partners take time to understand the contexts in which each other are working
- There is expertise in project and change management within the partnership
- Staff believe other partners and the partnership as a whole will deliver on objectives

Practices and behaviours for effective partnerships:
- A flexible approach to developing the work, using resources and determining roles and accountability.
- Regular and effective communication and information sharing between partners at operational and strategic levels
- Regular opportunities for joint working, including meetings, joint training and co-location
- Effective and visible leadership at strategic and operational levels
- Involvement of wider partners and staff in development of procedures and policies

- Services / interventions are holistic and responsive, meeting broad needs of populations / clients
- Services provide specialist support where required
- There are appropriate ways of achieving conflict resolution and consensus building
- The partnership engages in continual reassessment of processes and procedures

Final outcomes of effective partnerships:
- Improved health and wellbeing
- Reduction in inequalities
- Reduction in offending
- Equitable access to services
- Avoid inappropriate service use
- Reduction in costs
- Responsive service meeting needs and preferences of clients