BRIGHTON & HOVE COMMON AMBITION

Initial evaluation report: November 2023

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What BHCA Overcame

- "Too many barriers"
- "Too complex to engage"
- "Won't produce actual change"
- Experience of homelessness results from - and leads to - trauma
- Being trauma-informed enables
 participation

Slide 1

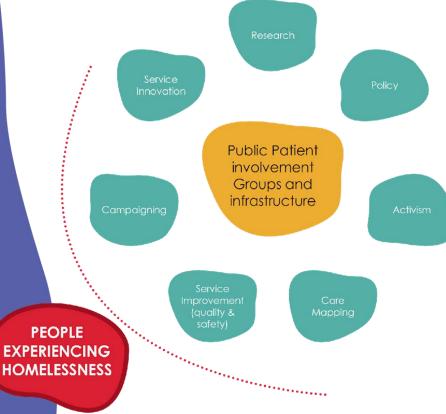
What BHCA have done

BHCA Journey: Capability Building



*Design sprint: a focused development project that aims to refine, ideate, prioritise, design, build, implement and iterate (where needed) an output e.g. a service specification; a service improvement agenda; a social media campaign; a training resource.

How is this different?



Slide 2

Trauma-Informed, lived experience-led co production and groupwork practice reduces barriers

Supports voice, recognition and capability

Enabling lived experience-led design

Recognition and voice

Empowerment and group formation

Capability building: group, personal, system level

Mapping and knowing

Ideating and designing

Consultation and co-design with specific services

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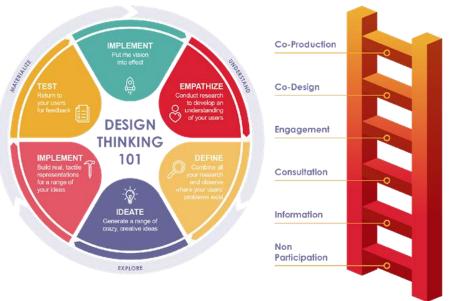
BHCA 3 years

	Name	Design	Development	Implementation	Iteration
1	Route to roof	~			
2	Housing pathway Design	~	× .	~	×
3	Medical training: health inclusion module coproduction	~	*	*	*
4	Coproducing research	~	×	~	-
5	Homeless hub service specification	~	Υ.		
6	Coproduction training	· •	×	 Image: A second s	-
7	Being trauma-informed training	forthcoming			

BHCA Design Sprint: System Resources, Training and Specification

BHCA Consultations

	Name	
12	Arch Move on and Outreach services	×
13	Multiple complex needs transformation programme	×
14	Brighton and Hove street sheet consultation	×



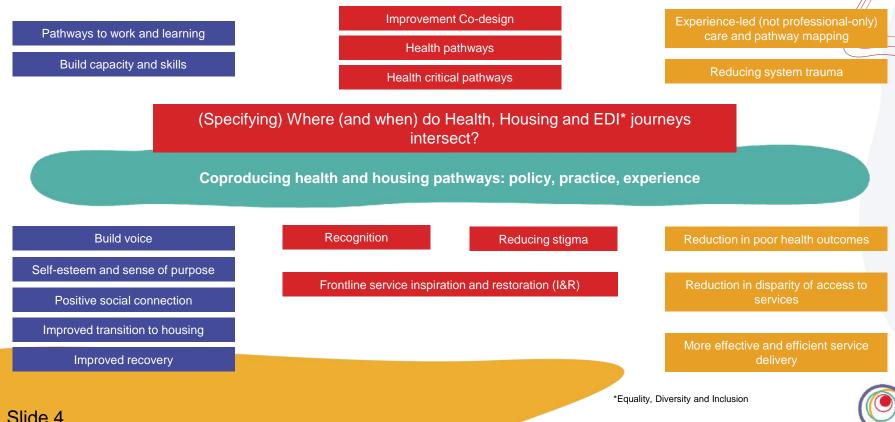
Fulfilling Lives South East (2020) / Arnstein 1969



BHCA De	esign Sprint:	Building	our Voice
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	Name	Design	Development	Implementation	Iteration
8	World Homeless Day Social Media Campaign 2022	~			~
9	BHCA website coproduction	~	~	×	
10	Manifesto points for MPs	~	×	×	
11	Comics coproduction/ design	4	~	~	

A System Value Map of BHCA

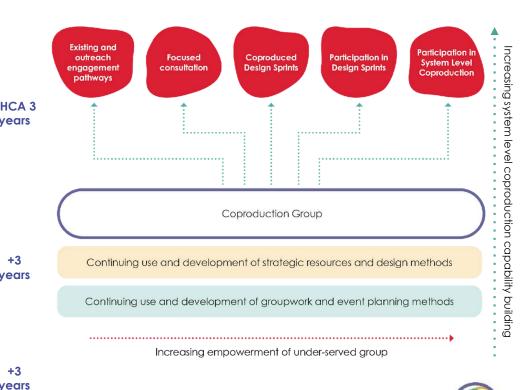


Timescales and logic model

	Recognition and voice	ł
	Empowerment and group formation	
	Capability building: group, personal, system level	
	Mapping and knowing	1
	Ideating and designing	
	Consultation and co-design with specific services	÷
	Co-design iteration and implementation	
	Co-evaluate service improvement	
	Embed service improvement	÷
	Sustain (or reiterate/re-design) service improvement	ł
/	Disseminate to other local sites	
5	Potential for measurable effect on population health inequalities	

Slide

Logic of sustainability



What are the risks and barriers?

Risks of short termism

• 7 months to start up and build capability; 3-6 months to 'end well'

Financial risks

- Repeated costs of 'start-up' and 'ending well'
- Ongoing costs of system-induced trauma

Management risks

- Loss of management, service delivery and specialist participatory expertise
- Risk of demands for 'cheaper' delivery models for trauma-informed interventions
- Short termism repeatedly undermining what is attainable (outcomes/) impact for a vulnerable group
- Risk of legacy loss and mis-management postproject

Ethical risks

- Loss of trust with lived experience community
- Measure of low ethical commitment of systems to listen to lived experience voice
- Independent PPI infrastructure for vulnerable group not supported to build

Health system risks

- Continued worsening of health inequality and disparity
- Continued high costs of homeless healthcare
- Continued future need for urgent, pandemicinduced response
- Continued pressure on NHS services



Slide 6





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