Welcome to our annual impact report. Read on to learn more about the work we do in collaboration with our clients and partners, the way we do it, and the difference it makes to health, wellbeing and economic outcomes across the UK.

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A MESSAGE FROM OUR CO-FOUNDERS

Claire Kennedy and Simon Morioka  
PPL Co-Founders and Managing Partners

This report tells the story of our 2021 but also highlights themes that have shaped and driven our world and our work over the past 14 years.

At its heart, PPL has always been about purpose. It is core to who and why we are. For us, it is about promoting better health, wellbeing and economic outcomes through the projects we help to shape and deliver, the funding we are able to provide, the time we volunteer, and the partnerships we convene.

At PPL, we have always believed that there is important work to be done and that we have the privilege of being able to do it.

Our work in the last year has included supporting the London Covid-19 vaccination effort, helping to co-create the future of local government, co-ordinating person and community-centred care across the UK and Isle of Man and, last but by no means least, working to tackle inequalities and build sustainable communities.

At PPL, we have always understood that in order to change things, you have to do something.

When we partnered with New Local for the Stronger Things 2021 conference this year, we created a postcard for the event that summarised this perfectly with the famous Teddy Roosevelt quote – ‘Do what you can, with what you have, where you are’.

We believe that every time that we choose to act, to make a connection, to do things differently, creates the possibility of something positive that would not have happened otherwise.

After two years where doing anything has often felt impossible, our belief in doing ‘what you can’ feels more important than ever in continuing to achieve real and meaningful impact.

We are committed to doing even more next year. As a social enterprise, we already reinvest over 50% of our profits in our mission to improve health and wellbeing across the UK. As a leading consultancy, we focus constantly on the quality of all the work we do in collaboration with our clients and partners.

This year, we were proud to become a certified B Corp, joining a global community of organisations dedicated to continuously improving our impact and to doing business better.

Looking to next year, we are working to launch a new charitable foundation which will help to ensure that the social impact funding we generate forms part of a long-term investment in local people and communities.

Read on to learn more about that change we are proud to be helping to make. And, if our way of working resonates with you, please do get in touch. We’d love you to be part of the PPL journey and help us achieve our ambition to do even better.

Claire Kennedy and Simon Morioka, PPL Co-Founders and Managing Partners

• 97 projects across the UK and Isle of Man
• Over 55,000 hours of client advice and support
• 1,200 hours of volunteering and pro bono time
• £65,000 of £140,000 from our last year’s social impact fund distributed so far
• £81,000 of new funding generated to support social impact in 2022
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WHAT DOES IT MEAN FOR US TO BE A SOCIAL ENTERPRISE?

PPL exists to promote better health, wellbeing and economic outcomes across the UK working with individuals, communities and the organisations that support them.

Since joining Social Enterprise UK in 2019 we have updated our formal commitments. These represent the additional ways in which we are working to achieve social impact, alongside the projects we undertake with our clients and partners to improve public services and outcomes.

As an organisation we are:

- **Re-investing a minimum of 50%** of our profits each year in schemes to provide direct support to communities throughout the UK.
- **Supporting other social enterprises and the voluntary and community sector**, including through how we work together; share knowledge, resources and learning; and target our own spend.
- **Providing each member of PPL staff** with up to 10 days per year of paid time to volunteer with the organisations and causes which have particular meaning for them.
- **Building on our existing quality and environmental standards** and exploring further opportunities to enhance these, including through our journey as a B Corp.
- **Producing an annual impact report** that captures the key impacts of our activities across all the ways in which we work.

We are grateful to all of those we worked with in this period, as clients and as partners in change across the UK and the Isle of Man, including:

- ABF The Soldiers’ Charity
- Bexendale
- B Lab UK
- British Assessment Bureau
- Buurtzorg Britain and Ireland
- Cambridge City Council
- Cambridgeshire County Council
- Care City Innovation C.I.C
- Central London Community Healthcare
- Children’s Trust
- COBIC
- Collaborate CIC
- Commit and Act
- Confederation of British Industry
- Cordis Bright
- COVAX
- Crossroads Isle of Man
- Dartford and Gravesham NHS Trust
- Department of Health & Social Care
- East and North Herts NHS Trust
- Edge Health
- Engage Britain
- Epsom & St Helier University Hospitals
- Excellent Development
- Gmserv
- Greater London Authority
- Greater Manchester Health and Social Care Partnership
- GoodGym
- Hackney Council
- Harrow Council
- Health Education England
- Health Foundation
- Healthworks Associates Ltd
- Helpforce Community C.I.C.
- Home-Start Southwark
- Innovation Unit
- Isle of Man Government
- Kaleidoscope
- King’s College
- LaingBuisson
- Lewisham Council
- LiveWell Mastermind
- London Borough of Waltham Forest
- London Councils
- Macmillan Cancer Support
- Manx Care
- Management Consultancies Association
- Ministry of Justice
- Mutual Ventures
- N.A. Wilson
- National Voices
- NEL CSU
- New Local
- NHS Confederation
- NHS England
- North East London ICS
- North West London ICS
- Nuffield Trust
- Office for Health Improvement and Disparities
- Oxford University Hospitals NHS Foundation Trust
- Prisoners’ Education Trust
- Reigate and Banstead Women’s Aid
- Royal Borough of Greenwich
- Royal National Orthopaedic Hospital NHS Trust
- SCIE
- Slung Low Limited
- Social Enterprise UK
- Social Finance
- South East London ICS
- South London Cares
- SSAT
- Stockport MCP
- Surrey Care Trust
- Surrey County Council
- Surrey Downs Health and Care Partnership
- Surrey Heartlands ICS
- Swedish Chamber of Commerce
- The Health Foundation
- The Integrated Care Partnership
- The Royal Mencap Society
- The Royal Marsden NHS Foundation Trust
- Traverse
- UCL Partners Ltd
- University College London Hospital NHS Foundation Trust
- University Hospitals Sussex NHS Foundation Trust
- Walsall Healthcare NHS Trust
- Warwickshire County Council
- X-Emergency Services
- X-Forces Enterprise
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### OUR VALUES

Everything we do is driven by our values. Click on each value or read on to see an example of how we put this into practice in our work last year.

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Cambridge City Council’s vision is ‘One Cambridge – Fair For All’.

In achieving this vision, the Council has set out three key strategic priorities – tackling poverty and inequalities; addressing the climate emergency; and achieving a sustainable future for local services in Cambridge.

Local people in Cambridge are confronting existing and new challenges in the wake of the pandemic. At the same time Cambridge City Council, in common with many other councils, has identified significant and growing financial pressures on its services.

Council leaders, recognised a pressing need for significant change to ways of working in order to improve the experience of services and outcomes for both local communities and staff, whilst also delivering investment and sustainable returns for Cambridge.

PPL are working closely with council leadership and in-house teams to co-develop the Our Cambridge programme.

The Our Cambridge programme is designed to transform ways of working, embedding collaboration with communities and local partners. The aim is to put people at the heart of everything the Council does, creating a prosperous, sustainable and fair future for everyone in Cambridge.

In the last year our team have worked to model costs and benefits and to develop a multi-year framework for the council to ensure that the £4.1m business case will deliver meaningful and sustainable change against each of the three strategic priorities.

The programme now covers three key workstreams that touch on every aspect of the Council’s work.

Following approval of the overall plan and business case, we have worked closely with colleagues from across the Council to enable rapid programme mobilisation.

This has included developing projects and supporting initial service reviews in priority areas, as well as organisational development aimed at engaging staff around the change and facilitating a dialogue with key stakeholders throughout the programme’s development.

We are proud to have played a part in helping Cambridge to develop its ambition for ‘One Cambridge – Fair For All’ into a living programme of activities and work, co-designed to benefit all communities in Cambridge and to deliver a better future for all.
Waltham Forest Council developed its Public Services Strategy in 2020, during and in response to the Covid–19 pandemic.

In 2021, Council leaders recognised the need to refresh and reset this strategy, building on learning from the previous year to focus on creating an exciting and positive future for Waltham Forest in the wake of the pandemic.

A joint PPL / New Local partnership team supported council leaders through a series of workshops and development sessions to co-create a new strategic programme for the council.

Recognising that time was of the essence, the team worked closely with key stakeholders to demanding timescales. Through these sessions, in just over two months an ambitious vision and key priorities were established, as well as the programme of work to deliver on this vision.

The programme has already delivered several key achievements including an exciting cultural programme following the opening of ‘Fellowship Square’; a set of modern job fairs; the launch of the Climate Emergency campaign, including the first every Climate Emergency Youth Summit; and the launch of a new model to prevent violence against women and children.

Key elements of the “reset” strategy include building on the council’s experience of the pandemic to broaden and deepen its engagement with volunteers and develop Community Power locally.
In 2020/21 our team continued to support the response to the Covid-19 pandemic.

From October 2020 to March 2021 this included helping to establish and operate the Programme Management Office (PMO) for the London Covid-19 vaccination programme, with a focus on planning, launching and supporting delivery to those aged 75 or older and/or clinically extremely vulnerable in the region.

In addition to providing programme management support, the team was also focused on supporting NHS staff wellbeing across the programme, including co-ordinating wellbeing activities and “Time to Talk”.

At PPL we talk often about the fact that there is so much important work to do in the areas we support and that we are privileged to be a part of it.

We are very proud to have been able to support the regional vaccination effort in this way, working with a large programme as a small part of the delivery of three million vaccinations across London, including to the most vulnerable in our society.

The impact of the establishment of the PMO for London was also felt more broadly. The mobilisation plan was shared to help with the plans of other areas across the UK and support the rapid setup of vaccination efforts elsewhere.
In the summer of 2021, PPL worked with the London Health and Care Partnership, which includes the Regional NHS England Team, London Councils, the GLA and Office for Health Improvement and Disparities, to understand integration in London’s health and care system. The aim was to capture learning from the pandemic, as well as the prior history of integration in London, to develop practical recommendations and support to future joint working and improvements in health and wellbeing across the capital.

Our work started with a critical literature review covering the period both prior to the Covid-19 pandemic and subsequent research looking at the challenges and changes that have occurred across London since March 2020.

The project engaged extensively across London, including representatives from all five of London’s Integrated Care Systems, NHS, local government, voluntary and community sector organisations, as well as patient and community representatives.

The final report, co-developed with and building on extensive input from across London, is structured into five key sets of recommendations – the Purpose of integration in London, establishing local Priorities, the primacy of Place, establishing shared Pounds, and developing collaboration amongst Providers – collectively known as the “5 Ps” framework. Intrinsic to all of these is a sixth P, People, encompassing both professionals working in health and care in London and the communities they serve, recognising their vital role in changing how we work.

The framework provides a practical basis for taking forward better integrated, community and person-centred care across a population of 9 million people, with a commitment to putting tackling inequalities at the heart of everything we do. Endorsed by senior system leaders in November 2022, it now forms a basis for developing our integrated care systems and borough-based partnerships from 2022 onwards, in a way that is respectful of local differences but with shared values and shared learning at its heart.
In 2021 we marked the 14th year that PPL has been supporting the development of person and community-centred care across the UK, working with local authorities; NHS commissioners; acute, community, mental health and social care providers; GPs; and voluntary and community sector providers, as partners in delivering better integrated care.

Despite all of the work in this area, we know that many people continue to experience dis-integrated care and that pressures on local services and communities continue to grow.

The following are some of the key lessons from our recent work:

1. **It’s all about people**

   There has been significant investment and advancement in areas such as Population Health Management as ways to better understand, predict and respond to local needs. Such data and techniques can be enormously powerful but are no substitute for understanding the diversity, wants and needs of the individuals who make up our organisations, systems and communities. Early, broad and authentic conversations are key to understanding why – when we all want to do a good job – such positive intentions often fail, to overcome the barriers to better ways of working and to deliver real improvements in people’s health and wellbeing.

2. **A shared vision is not enough**

   We have been talking about integration within and across health and care services for long enough that most people who are involved in local partnership development can articulate strong and similar visions for what “good” might look like. However, without a clear narrative that connects this vision to the daily experiences of patients, carers, service users and frontline professionals – that explains how “tomorrow is going to come to the aid of today” – it is likely to remain just that, a vision of what could have been, always just out-of-reach. Through co-designing a clear and specific narrative built around lived experience, we can help establish a clear roadmap based on the priorities and outcomes that matter to people’s lives, and the broad coalitions that are needed to deliver.

3. **Working in partnership is hard**

   The pandemic has seen a step-change in the way in which we work and how all those involved in health and care have engaged with each other, with voluntary and community sector partners, and with communities themselves. However, we can already see how the pressures on individuals and organisations are starting to re-assert themselves and how they threaten some of the shared purpose and ways of working that have developed in this period. Whilst there are huge benefits to working in partnership, we must also recognise the costs – and the importance of being able to resolve conflicts, negotiate complexity, make and implement joint decisions, and share risks and rewards. The most robustly-structured partnership agreements are no substitute for developing a culture of joint working that extends beyond the exceptional leaders that often sit at the heart of the best of our current integrated care systems. Empowering people to acknowledge the challenges and to work through them will help them achieve the benefits of better integrated care.
DEVELOPING EFFECTIVE PLACE-BASED PARTNERSHIPS

Build to scale

There is nothing wrong with starting small and it is critical that partnerships can evidence the benefits of people working differently, be that in delivering “quick-wins” for local people or through prototyping new ways of working that show the possibilities of change. However, too many of our partnerships stall at this stage – establishing “walled gardens” where we feel comfortable working together whilst most people’s experiences of care remain unchanged. Scaling means having in place the shared governance, infrastructure, funding and organisational development to enable the many to benefit from integration, not just the few.

It’s still all about people

For too long, our partnerships have been structured around statutory institutions and a belief that, if only they can construct the right “pathways” of care, then better outcomes will follow. The experience of Covid-19 has been a painful reminder of the terrible effects of inequalities on people’s health and wellbeing, the vital role people play in their own health and care outcomes, and the impact of failing to hear what people are saying they need from local services. Only through effective and ongoing community engagement and empowerment will we achieve real and lasting improvements in people’s health and wellbeing and, in turn, ensure our health and care systems are sustainable for the generations to come.

OUR WORK WITH PLACE-BASED PARTNERSHIPS THIS YEAR

In Harrow we supported the ongoing development of the borough-based partnership, including their work to put patients and citizens at the heart of the partnership and to re-affirm shared commitments, one year on.

In Lewisham we provided support to co-develop a shared approach to community and citizen engagement, with a focus on ensuring previously seldom-heard community voices form a key part of partnership development moving forwards.

We have continued working with Surrey Downs and East Surrey on place development, co-designing a vision, purpose and values, identifying key areas of development, and creating roadmaps for change.

In Dartford, Gravesham and Swanley we are co-developing a model of care as well as a collaboration model to help them to achieve their shared goals and ambitions as a partnership.

We worked with Hammersmith and Fulham to strengthen partnership working and co-develop the next stage of a delivery programme with engagement from local communities.
A UNIQUELY MANX APPROACH TO INTEGRATED CARE

We are very proud to have supported the Isle of Man this year on its journey to becoming the "best small island health and care system". We supported the design and delivery of the Health and Social Care Programme, which aims to help everyone in the Isle of Man live happier, healthier and longer lives by transforming the way in which health and care services are structured and delivered.

We have supported the Isle of Man since 2018 to fully redesign and integrate its health and social care system, alongside our partner Gemserv. Our work with the Isle of Man this year included:

• Expert guidance to enable the Isle of Man to create and implement new governance, creating a separate provider body - Manx Care - out of the Department of Health and Social Care. Manx Care went live on April 1st 2021 after months of planning.

• Working closely with the Isle of Man Treasury to set up financial regulations to ensure Manx Care has suitable financial operational independence and control.

• Facilitating professionals and people with lived experience to work together to redesign care in line with best practice, covering diabetes, cardiovascular disease and stroke.

• Coaching primary care leads to test out working together to provide enhanced dental care, dermatology, mental health, and first contact practitioners for physiotherapy.

The Health and Social Care Programme will continue to deliver change into 2021/22, ensuring that the Isle of Man’s health and care system remains on a clear path to improved outcomes and experience for local people, as well as financial sustainability. The programme is setting out and delivering a unique approach to integration, building on best practice and adapting to the unique context of the Isle of Man.

Our ambition is to create a high quality, integrated health and care service that organises care around patient and service user needs, delivering the right care, in the right place, at the right time. A service that, from prevention to cure, works together to keep people well; gives equal prioritisation to health and social care; and is one of the best 'person-centred' sustainable health and care services.

Manx Care
Over the past year, organisational development has been an urgent priority for many organisations looking to support their people to adjust to a “new normal” for ways of working and to perform well under the continued strain of the pandemic.

For us, organisational development is as much a mindset as a set of practical interventions. Through all our work, we focus on creating safe spaces where people involved in change can share their views, take ownership of and agency in helping to shape the change they are trying to achieve, and feel engaged and motivated to create a better future. Recently, we have been working with place-based partnerships in East Surrey and Surrey Downs, using organisational development techniques and interventions to support the development of place-based working and the integration of organisations and teams.

Developing a culture of integration with Surrey Downs

The journey to integration is not a new one for Surrey Downs. Since 2016 they have been laying the foundations for partnership working, from Epsom Health and Care’s @home service supporting people to get well at home where possible through to the establishment of Surrey Downs Health and Care, their six Primary Care Networks and a Partnership board. Surrey Downs have strengthened their relationships and commitment to integration through this work, particularly during the challenges brought about by Covid-19. We are supporting them to further deepen and develop partnership working as they continue on this journey and prepare for new statutory ICS arrangements later this year.

Throughout this journey, Surrey Downs developed a clear ambition, vision, values and purpose. They were in a position earlier this year to start to consider how to bring this work together into a unified culture.

They wanted this culture to be one that celebrates the unique contribution that each individual resident, member of staff, team and organisation brings to the Partnership, while uniting them under a common identity and shared narrative.

This year we have worked with Surrey Downs to support them to develop this shared culture and narrative through a series of engagement and co-design activities.

This culture model was supported by a narrative created through the conversations we had conducted with multiple people over several months.

We are now working with Surrey Downs to translate this cultural narrative into real change and behaviours on the ground at all levels of the system including the board, operational managers, staff, communities, lay partners, volunteers and residents.
For this to be effective, staff will need to challenge themselves to treat people with dignity, considering the whole person, looking beyond the immediate symptoms or needs. This was summed up by one clinician who, after visiting someone in their home to support their health needs, realised in hindsight that he should have asked himself ‘but what are we going to do about the mould?’ that was affecting her home and, inevitably her health.

Excerpt from Surrey Downs narrative
East Surrey has been on a long journey towards achieving integration. Throughout this journey, the health and care partner organisations working locally have maintained a strong focus on delivering high quality care. They have fostered excellent clinical relationships across the system but have not always been able to achieve consistent system working at all levels. They recognised the importance of coming together as a place and shared a strong commitment to delivering their shared ambitions for their population in partnership.

We have been working with East Surrey to support them to develop a shared vision and identity as a partnership, in order to aid the delivery of shared priorities. Working in the context of Covid-19, and the challenges of bringing large groups of people together around post-its and flipchart paper, we supported East Surrey to create an approach to engagement that did not depend on everyone being in the same room at the same time but that kept the power of collaboration and shared ideas.

We used a methodology we call the ‘Big Conversation’, which involved a series of engagements across a number of platforms including workshops, discussion fora and an online whiteboard to maximise opportunities for people to connect and share ideas across East Surrey.

As a result of this engagement, we were able to bring people together to co-design East Surrey’s vision, values and behaviours, a new visual identity, and a set of agreed priorities to support East Surrey in delivering their new model of care. More importantly, the approach has built new relationships and developed existing ones across the partnership. This has enabled key people to have more honest and challenging conversations about how to develop East Surrey as a place, built on a foundation of trust.

Overall PPL were a fantastic team and I am really grateful for their support. We have had feedback from system partners that East Surrey is unrecognisable from where we were before and I can categorically say that we would not have got to where we are without PPL.

Sumona Chatterjee, East Surrey Place Based Leader, Surrey Heartlands Integrated Care System
WHAT DIFFERENCE HAS DEVOLUTION MADE FOR HEALTH AND CARE IN GREATER MANCHESTER?

Greater Manchester’s local care approach aims to deliver the greatest and fastest improvement to the health and wellbeing of the 2.8 million people in Greater Manchester. The Greater Manchester Health and Social Care Partnership (GMHSCP) aim to achieve this through an integrated approach to commissioning and service provision across the health and social care system, with an emphasis on place-based ways of working.

Since 2019, PPL has been a part of the partnership delivering the evaluation of the local care approach for six of the ten localities in Greater Manchester. The evaluation aims to understand and report on the impact of the local care approach.

This year we completed the evaluation and shared the key findings with GMHSCP. Our evaluation explored all aspects of the local care approach, from the neighbourhood model that has underpinned service transformation through to the role of GMHSCP itself and system leaders in delivering better care.

Delivering this evaluation was made all the more challenging by the Covid–19 pandemic, which had a huge impact on the people of Greater Manchester and on its health and care system. The enormous change experienced in 2020 – 2021 limited our ability to compare data from year to year and meant we had to quickly rethink ways of engaging people remotely and under time pressure. It was also an early test of the new ways of working that the localities were putting into place as part of the local care approach.

The evaluation found many positives in Manchester’s pandemic response, not least of which was the new local integrated infrastructure’s ability to support system decision-making and joint working during the pandemic. Our evaluation recommended that as the local care approach continues to develop, the localities and GMHSCP must build on the positive work begun during the pandemic, including maintaining a focus on working with the VCFSE sector and on addressing inequalities.

Our approach drew on the best expertise of the partners involved and adapted flexibly to circumstances. The evaluation has helped GMHSCP to understand the impact of their work to deliver on devolution and plan their next steps for health and care for Greater Manchester.
How can we get it right first time for children and young people’s mental health?

Children and young people’s mental health services is one of the fastest growing specialties in healthcare, with referrals per 100,000 population doubling over the 8-year period from 2012/13 to 2019/20. The Covid-19 pandemic has only added to this pressure, with almost half of 16-to-24-year-olds showing new symptoms of psychological distress in April 2020, including feelings of anxiety and isolation and a loss of coping mechanisms or motivation.

Getting it Right First Time (GIRFT) is more important than ever if children and young people’s mental health services are to meet the needs of children and young people with the resources available. GIRFT is a national programme designed to improve the treatment and care of patients through an in-depth review of services, benchmarking and presenting a data-driven evidence base to support change.

As part of the development of the GIRFT report on children and young people’s mental health services, the National Clinical Lead detailed a list of areas where there is observed unwarranted variation in services. Business intelligence teams took this information and identified potential areas to improve productivity and value along the pathway in order to improve patient outcomes. Deep dive visits, involving clinical and managerial staff, then provided an opportunity to explore the underlying causes of unwarranted variation.

PPL played a key role in bringing the document together, working to combine analysis of NHS datasets with conversations that emerged through deep dive visits into a clear and robust set of recommendations. This meant the GIRFT process, a far-reaching and broad evidence-based exercise, resulted in a single accessible document that could be shared with NHS teams nationwide.

At least 70,000 additional children and young people received mental health care in 2021

In 2020, one in six children and young people aged 5-16 years were identified as having a probable mental disorder.
Articulating an evidence-based case for moving children and young people’s mental health services upstream is one key impact of PPL’s work on the GIRFT report. Crisis avoidance emerged as one key means of improving outcomes for patients and productivity for the system concurrently. Here, the GIRFT report evidenced what many clinicians have been observing anecdotally for years. The report highlights a discrepancy between the deep evidence base demonstrating the efficacy of intensive community-based interventions, such as early intervention in psychosis services, and the inconsistent provision of these services across the country.

Suggestions for approaches, including centring care around community care coordinators, draw on best practice from across England which the report makes easily accessible for clinical and management teams looking to improve their services. A powerful case for joining up pathways to reduce admissions to inpatient units looks at how Care, Education and Treatment Reviews (CETRs) have been used to avoid admissions for people with a learning disability and recommends this approach be rolled out for all children and young people.

Similarly, whilst crisis-avoidance looks to stop children and young people entering inpatient services, the GIRFT report also recommends developing a clear strategy on reducing the proportion of young people remaining on inpatient units for more than 60 days. Changing how the NHS commissions inpatient units to focus on outcomes rather than cost per bed day forms a key recommendation that will incentivise services to work holistically towards improved outcomes. Effective and seamless step-up and step-down services and the development of a functioning integrated inpatient model again depends on effective communication between acute and community services. The report the report emphasises the role that new Integrated Care Systems can play in enabling this.

The report’s recommendations leave no stone unturned, identifying actions for staff across the NHS, from commissioners to service managers to frontline workers. Quality improvement (QI) philosophy was central to the development of these recommendations. The recommendations themselves look to enshrine a QI approach in all NHS teams working in CYPMHS. The report recommends improvements in data collection to accompany new pathways; forums that provide all staff the opportunity to contribute and act on ideas for improvement; and training that develops staff understanding of the nature of systems and continuous systems improvement.

The evidence-based approach to creating change will support local health systems in moving forward with these transformative recommendations with confidence and momentum. The GIRFT report on children and young people’s mental health services will be published in early 2022 whereupon its impact as a set of recommendations to be rolled out nationwide will be felt, first by health and care teams and then by the children and young people whose mental health needs will be met earlier and more effectively.
In March 2021, Mencap commissioned PPL to work with them to review their Information and Advice service.

Information and advice is a key part of the work that Mencap delivers. Learning disability is a complex subject and finding the right support can be challenging. People with a learning disability, their families and their carers, really value the support that Mencap provide, and the charity wanted to make sure that they had a clearly articulated vision for this vital service.

Mencap wanted to ensure that they were maximising the potential of partnerships with other providers of similar services. They also wanted to consider how to use the insights gained from conversations with people with a learning disability to influence other parts of Mencap, as well as regional and national decisions.

Over six weeks, we undertook an intensive process of research, analysis, stakeholder engagement and stakeholder mapping. Our review brought together existing data and new insights from a deep-dive into customer experience, as well as facilitating conversations within Mencap across three countries.

The recommendations that came out of this work will support Mencap to continue to improve the information and advice available to people with learning disabilities and their families.

Through conversations with other service providers, it is clear that there is a willingness to form stronger, more connected relationships with Mencap in order to provide people with learning disabilities, their families, carers and others with the right support.

Knowing when and who is the right organisation to signpost people to has been identified as one of the key things that could create a better experience for people seeking guidance and clarity from Mencap.

Excerpt from review
Digital transformation is critical to improving staff experience and outcomes for patients in the NHS. Previously, PPL worked with Western Sussex Hospitals Foundation Trust and Brighton and Sussex University Hospitals NHS Trust on their digital strategies, which have led to tangible improvements in digital capability and capacity, staff experience, and outcomes for patients, helping the Trusts to make the most of their digital tools and capabilities.

However, the previous digital strategies are approaching the end of their intended terms. This year PPL worked to develop a new digital strategy for Sussex. The recent merger of the two Trusts into University Hospitals Sussex NHS Trust (UH Sussex) creates a unique opportunity to bring together shared resources and make Sussex a leader in digital health.

The new strategy sets out the focus and a tangible action plan for the next five years to fulfil the Trusts’ vision of equipping patients, empowering staff, enabling innovation to reflect and evolving as an ICS that connects care around the patient.

We have been supporting UH Sussex on the development of a new combined digital strategy, to reflect:

1. Progress to-date and the priorities of UH Sussex for the next five years.
3. National direction and guidance on digital transformation.
4. Opportunities to use digital technologies to support innovation.

To form the strategy, we engaged with frontline clinicians, senior executives and IT staff across UH Sussex, as well as bringing in local strategic context and wider national guidance and strategies. The Digital Strategy will be used by UH Sussex to steer and prioritise focus and investment in Information Management and Technology over the next five years. The strategy sets out how UH Sussex will use technology to empower their staff, patients, carers, communities and partners in working together to improve health and wellbeing.
Engaging and involving communities and local people in their health and care is vitally important to delivering improved care and is at the heart of City & Hackney Integrated Care Partners’ approach. For the last three years, PPL has worked with partners COBIC and Cordis Bright to conduct an independent three-year evaluation of the overall Integrated Commissioning Programme in City & Hackney.

This year, we worked with local residents to understand their experience of the Integrated Commissioning Programme. The programme aims to provide a personalised range of services and a single management structure for each of City & Hackney’s eight neighbourhoods.

It was critical to engage a number of different and diverse groups within City & Hackney in the evaluation to truly listen and gain an understanding of their different experiences of the Integrated Commissioning Programme.

Our evaluation approach was rooted in collaboration. We developed our tools and methods as partners and tested these thoroughly with key people from City & Hackney before putting them into practice. We then worked with local groups and forums where residents were already gathering to meet and collaborate in order to understand how resident engagement is working in City & Hackney and what could be improved.

Based on our findings, we were able to make tailored recommendations for City & Hackney about how they could do even more to bring a wider range of people into the conversation. These recommendations will help the Integrated Care Partners address challenges and improve future resident engagement in a way that is meaningful for and reflects the experience of local people and support City & Hackney to continue to deliver on their commitment to co-production.
Helpforce was created to improve the lives of healthcare staff, patients and our communities through the power of volunteering. PPL and Helpforce have been working together since 2019. This year we put in place a unique partnership arrangement to formalise our collaboration. Partnership working is key to how we work at PPL, and we wanted to celebrate our partnership with Helpforce in this year’s report. PPL Consultant Titilayomi Adesanya sat down with Paddy Hanrahan, Strategy and Innovation Director at Helpforce, for an interview on volunteering, Helpforce and our collaboration.

Titi: Why is volunteering critical to improving health and care outcomes?

Paddy: Volunteering has been an integral part of the NHS since its formation. We are fortunate to have so many people that love the NHS and want to volunteer to help where they can. But with the NHS under greater pressures than ever before, we recognise that we need to do it properly. We need to maximise the potential for volunteers to better support the whole system. If volunteering is not linked to outcomes, then we are missing out on a massive opportunity.

One of the key challenges that the NHS is dealing with at the moment is the massive shortage in workforce. Volunteers are never a replacement for staff, they are additional. They should however be seen as an extended part of the workforce. The health and care sector needs to identify how to make the most of this additional resource. It is about letting the community in and letting

What were Helpforce’s top achievements this year?

1. Reaching and working with more organisations.
2. Successfully launching Adopt and Adapt, a service that allows hospital trusts to adopt high impact volunteering roles more quickly using a programme that we developed.
3. Launching the Insight and Impact (I&I) service, a primarily digital-based service that helps organisations evaluate the impact of their volunteer roles and programmes.
Titi: What has Helpforce been doing over the last 12 months?
Paddy: Our key achievement this year is that we are starting to achieve scale. We now work with a lot more hospital trusts and other organisations across integrated care. Some of this is due to Covid-19. We have stopped travelling as much so are able to utilise our staff more effectively. Additionally, this period has forced us to invest a lot more in digital. We now have more digital services, which has helped us reach more organisations.

Titi: What has the PPL/Helpforce partnership achieved in the past year?
Paddy: The Insight and Impact (I&I) service was developed and launched with the support of PPL. We began working with PPL when we were looking to launch and when we were building the digital aspect of the service because we did not have the internal team capacity to do this. We really valued the support PPL provided to both launch and scale up the service within the last six months. In addition to this, we worked closely with PPL on the Volunteer Innovators Programme (VIP) evidence review, which was a key enabler for the I&I service.

Titi: Can you tell us a bit more about how the development of the I&I service worked as a partnership project?
Paddy: A member of the PPL team, Mark Brooker, joined Helpforce on secondment in July 2020 to supplement our team with additional capacity and the expertise needed to deliver the main VIP evaluation report required by NHS England. Having contributed to the completion of this work, Mark has remained with Helpforce throughout 2021 providing advice and assistance with the design and implementation of the service in an interim I&I Lead role. This secondment was coupled with additional support from the PPL team, most notably in the form of a review team which drew out key lessons from the Helpforce approach to VIP.

Helpforce’s ambition to accelerate the growth and impact of volunteering is one that PPL shares. By working with expert partners like Helpforce and other VCFSE organisations PPL aims to ensure that the importance of volunteering, as part of the solution to many of the challenges faced within health and care, is widely recognised. Together we will continue to champion volunteers and the outcomes that they can help to achieve.
Spotlight on volunteering with Stem in Africa
- By Titilayomi Adesanya, Consultant

Stem in Africa (SIA) is an organisation that provides children and young people, particularly those from less privileged backgrounds, with opportunities to explore science, technology, engineering and mathematics. Along with their passion for educating children, SIA is committed to being a key driver in the race to beat climate change in Africa. To achieve this, they have decided to build a science hub in Nigeria using recycled plastic bottles and shipping containers. This hub will provide a space for young Nigerian students to innovate and collaborate.

Extremely impressed by their vision, I began working closely with SIA in 2021. Together, we delivered a public health session to improve health awareness amongst over 100 children and young people in Lagos and successfully organised a beach clean-up that took place at Elegushi Beach. With 35 volunteers and support from Recyclan Nigeria, we managed to collect 25kg of plastic, all of which is being used to build the science hub.

This work has allowed me to apply skills that I have learnt from project work as well as our ‘How We Learn’ programme to a cause that is extremely important to me. I look forward to more opportunities to work with the SIA team in the coming year.
PPL DRAGONS’ DEN

This year PPL trialled our first ever Dragons’ Den. The Dragons’ Den gave colleagues a chance to pitch to PPL to donate up to 10,000 to a cause of their choice. The rest of the team acted as “the Dragons”, debating the merits of each pitch and determining how the social impact funding would be donated.

Pitching was open to everyone and we had both Analysts and Associate Directors taking part. Four colleagues made their pitches to the full PPL team.

The causes included Home-Start Southwark, a local charity supporting vulnerable families, Commit and Act, a charity supporting women and girls in Sierra Leone, and Goodgym, a charity that encourages fitness whilst supporting local communities. The PPL team deliberated before deciding to split the funding across three causes.

Rather than pitching for funding, the fourth pitch asked for time and consideration to be given to establishing a PPL social investment fund – watch this space!

As well as a fun team event, we hope that the Dragons’ Den donations will make a real difference to impactful causes.
THE IMPACT OF OUR DONATIONS

We spoke to some of our charity partners to gain an in-depth understanding of the impact of our donations and how we can maximise this impact going forward.

Q: How was PPL’s donation utilised and what was its impact?

Over 12 months, PPL’s donation was used to fund activities and venues for social clubs, the establishment of and ongoing support for five Love Your Neighbour matches in South London, as well as signposting, interventions and referrals for 275 older neighbours in need of assistance with housing, medical, financial or other care.

South London Cares

Overall, we have been determined to conduct ‘business as usual’ as far as possible, as our beneficiaries have still been facing a plethora of issues and often require our immediate support. As you would expect, we have drawn substantially from our reserves to sustain our grant-making and will certainly continue to feel the economic impacts of the pandemic in the future. We therefore continue to rely on the generosity of our supporters such as PPL to reach all those in need – thank you.

Major-General (Ret’d) Martin Rutledge CB OBE

ABF The Soldiers’ Charity

Q: How can organisations such as PPL best support charities and organisations like yours?

Receiving unrestricted donations is so valuable. Often when we receive donations from organisations, they want the money to be spent on a shiny new project but our main expenditure is paying the salaries of our staff who are supporting women and grants often don’t cover this.

RBWA

Q: How can we rethink fundraising processes so that money quickly gets to where it is most needed?

Direct donations are good. Some people want to restrict their donation but it is much better for us if the donation is unrestricted because then we can decide what the best use of the money is at that time. Direct donations are also quicker and less time consuming.

Children’s Trust

This year, we have supported the following organisations through our donations:
DONATIONS 2020/21

This chart shows the split of causes that funding is supporting.

In 2020/21 we released £64,747 from our reserves to support voluntary and community sector organisations across the UK and internationally.
01. A message from our co-founders
02. What does it mean for us to be a social enterprise?
03. Our values
04. Delivering impact

05. The way we work
BECOMING A B CORP

In 2020/21, PPL became a certified B Corp. We joined a global community of organisations measuring and improving our social and environmental impact in every aspect of our work.

PPL has always focused on making a positive impact not just for our clients, but also for our staff and our community. In 2019/20, we formally became a social enterprise, recognised by Social Enterprise UK. This was an exciting step for us in further aligning the way we work as an organisation with our values and the impact we want to achieve. It also included a commitment to donate 50% of our profits to charities.

In the spirit of the growth mindset, we reflected on ways in which we could continue to enhance our impact and took the decision to apply to become a B Corp. We are delighted to say we were successful.

After a rigorous certification process reviewing our impact on our communities, workforce, environment, customers, and governance, we became a certified B Corp. As a B Corp, we balance purpose with profit and are legally required to consider our impact on our team, our clients, our suppliers, our community, and the environment.

Being a B Corp allows us to communicate and share our values and further ingrain them in our structure, culture and processes. It also helps us truly reflect on our impact and actions, and encourages us to make changes that will move us closer towards our goals.
BEST FOR THE WORLD FOR WORKERS

In 2021, our first year as a B Corp, we were recognised as being Best for the World in the Workplace category. This means that globally PPL is in the top 5% of all B Corps for providing the best workplace environment for our team.

PPL is a people-focused organisation, both in terms of the services we provide to our clients and in how we think about our own team. The B Corp certification process ensures that the company’s relationship with its workforce aligns strongly with our values as an organisation.

It therefore gives us particular pride that, in our first year as a certified B Corp, we were recipients of the ‘Best for the World’ award in the workplace category. This means our score in the workplace category of the B Impact Assessment placed us in the top 5% of the over 3,500 certified B Corps globally.

The category measures how the company in question treats its workers through compensation, benefits, training and ownership opportunities. The category also focuses on the overall work environment within the company by assessing communication between management and workers, corporate culture, job flexibility, and worker health and safety practices.

We were delighted to receive this accolade. PPL colleagues have worked to ensure continuous improvement in our workforce policies, procedures, and professional development offer.

We see professional development as core to our social impact mission. Our in-house, CMI-accredited consultancy training programme, How We Learn, is a key part of this. Over the past year, we have worked through the challenge of continuing to deliver this training remotely.

PPL believes in the value of co-production in the work we do for clients and in how we improve our own organisation. Equality, Diversity and Inclusion working group, represent initiatives driven by employees and supported by the management team.

B Corp accreditations are rolling and subject to constant reassessment so we hope to use this success as a frame to situate the choices we make every day as part of our ongoing ambition to keep challenging ourselves to do more.

In 2020/21 PPL also supported the NHS graduate management scheme by hosting two graduate trainees for three month flexible placements. Sophie Hinsley, NHS Graduate Trainee, said "The transferable skills I have learnt during my flexible placement with PPL will be invaluable for both my personal and professional development in the NHS. I look forward to sharing the knowledge from the How We Learn training, such as the project planning methodologies and tools.

Also I have increased my breadth of knowledge around health inequalities and how Integrated Care System support can help to address the wider determinants of health in the NHS.

Finally, it has been a pleasure to work amongst such a hard-working group of people and I will take forward their drive and passion with me in my career! For any future NHS Graduate Management Trainees, I recommend a flexible placement at PPL. The support, learning opportunities and project variety are a great way to explore new skills and experiences on the scheme."
At PPL we are committed to providing an inclusive workplace and to ensuring that all of our team are treated equitably. We believe that it is only through encouraging and valuing diversity that our organisation, our clients, and the broader society, of which we are all a part, will ultimately prosper.

Our Equality, Diversity and Inclusion (ED&I) group was created in 2020 to ensure that we continue to champion ED&I and maintain an inclusive environment within PPL. The ED&I group work closely with the management team to drive forward internal initiatives and explore ways we can bring our learning into the work we do with clients. There are representatives from across the organisation, from Analysts through to Associate Directors, and the group meet regularly with a rotating chair.

1. **Blind recruitment and wider advertising:** To try and reduce unconscious bias, we have adopted a policy of removing names and other identifying features when we conduct our CV reviews. Additionally, for our entry level positions, we have advertised much more widely than the traditional avenues to encourage people with different backgrounds to apply. We have enhanced our assessment criteria to better measure people on their abilities and potential.

2. **ED&I monitoring:** We have started tracking demographic information in our annual staff survey and in our recruitment rounds. This allows us to not only understand the make-up of our current team and the people that apply to PPL but to also track changes over time to identify if there are blockers or potential issues we need to resolve.

3. **Disability Confident scheme:** As a Disability Confident Committed employer, we offer an interview to anyone who declares they have a disability if they meet the minimum criteria for the role. We make reasonable adjustments where required to enable people to participate equally in the recruitment process and we work with members of the team to anticipate and provide reasonable adjustments to enable people to thrive at work. We are now working towards achieving level two of the Disability Confident scheme.
EQUALITY, DIVERSITY AND INCLUSION UPDATE

We have begun to establish ways of bringing our ED&I agenda to our work with clients and have expanded our portfolio of work around inequalities. The findings from our recent projects have highlighted the need to support clients in ensuring that community engagement is representative of people from different backgrounds and that all voices are being heard.

**Our work with South East London Integrated Care System**

In 2020/21, PPL supported South East London Integrated Care System (SEL) to understand and address inequalities in children and young people’s mental health services. The project focused on two key groups of young children disproportionately affected by mental health inequalities in South East London – black and mixed heritage boys responding to trauma and distress, and black and mixed heritage children of parents with poor mental health. This focus allowed the team to take an intersectional approach to understanding the causes of inequalities.

The PPL team worked closely with SEL to:

- Engage individuals, communities and partners to identify priority areas for collective investment and action.
- Understand and share existing developments and best practice.
- Facilitate a co-design process with system partners and experts by experience to develop an agreed set of actions for 2022/23.
- Bring people together to create ownership for the change.

Taking an inequalities lens, and focusing on what can only be achieved together, provided a valuable framework to address mental health inequalities through system working, building on relationships and ways of working established but not effectively embedded during the pandemic crisis response.

Moreover, quality improvement techniques, including driver diagrams, laid the foundations for continuous improvement in two areas of health inequality and encouraged teams to think holistically about the causes and effects of inequalities in these areas.

SEL now stand poised to implement future plans, working directly with young people, their families and professionals across organisational and geographic boundaries. SEL will strengthen the case for greater upstream investment while using cross-partnership assets and resources, to share and scale learning and innovation and to make shared, measurable progress in addressing inequalities across South East London.
EQUALITY, DIVERSITY AND INCLUSION UPDATE

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Our work with Lewisham Health and Care Partners

PPL supported Lewisham Health and Care Partners (LHCP) to review and develop new approaches for more inclusive community engagement. The aim of the project was to amplify the voices of seldom-heard groups and ensure that everyone in Lewisham felt able and welcome to get involved in and contribute to engagement around their health and care services. The project supported LHCP to develop a shared plan for next steps around citizen and community engagement and activation.

The PPL team spoke to people across the system in Lewisham, including primary and secondary care providers; communication and engagement leads and the CCG, council and several VCFSE organisations supporting refugees and older people; mental health service providers; young people in alternative education; and disabled residents.

Informed by this engagement and by best practice research, we developed a shared approach for inclusive community engagement in Lewisham aimed at building trust and supporting marginalised communities to exercise their power, while also recognising the limits on funding, time and capacity available.

The final report and recommendations are grounded in the feedback and engagement we heard from people in Lewisham about what was working well and where the areas for improvement were. The team also co-developed a clear set of short, medium and long-term actions and a roadmap for delivering change that LHCP can take forward in partnership with communities in order to ensure that future engagement is even better and more inclusive of seldom-heard groups.
THE WAY WE WORK

AWARDS

PEN National Awards 2021: The Patient Experience Network National Awards are the first and only awards programme to recognise best practice in patient experience across all aspects of health and social care in the UK.

PPL won the 2021 PEN award for ‘Best Charity / Social Enterprise’
This award was given to the leading charity or social enterprise entry overall and recognises an organisation’s overall contribution to patient experience across the submissions entered. We were extremely proud to receive this award. It has inspired us to do even more to improve patient experience as part of our work with clients and partners.

PPL won the 2021 PEN award for ‘Commissioning for Patient Experience’
For our work with Surrey Downs Health and Care to open the NHS Seacole Centre to manage additional demand during the Covid-19 pandemic. The NHS Seacole Centre provided phased increases in additional community bed capacity for Surrey Heartlands at a time of unprecedented additional pressures.

PPL were runners-up in the ‘Engaging and Championing the Public’ category in 2021
Alongside our partners National Voices for our work together on understanding patient priorities during and beyond Covid-19. We set up an online platform to hear the voices of those living with ongoing health and care needs during the first phase of the pandemic. We then worked with people with lived experience to distil these into a set of first-person statements that express what people who use health and care services expect these services to look and feel like.
If after reading this report, you feel as though you share our values and vision and would like to work with us at PPL, please do get in touch.

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