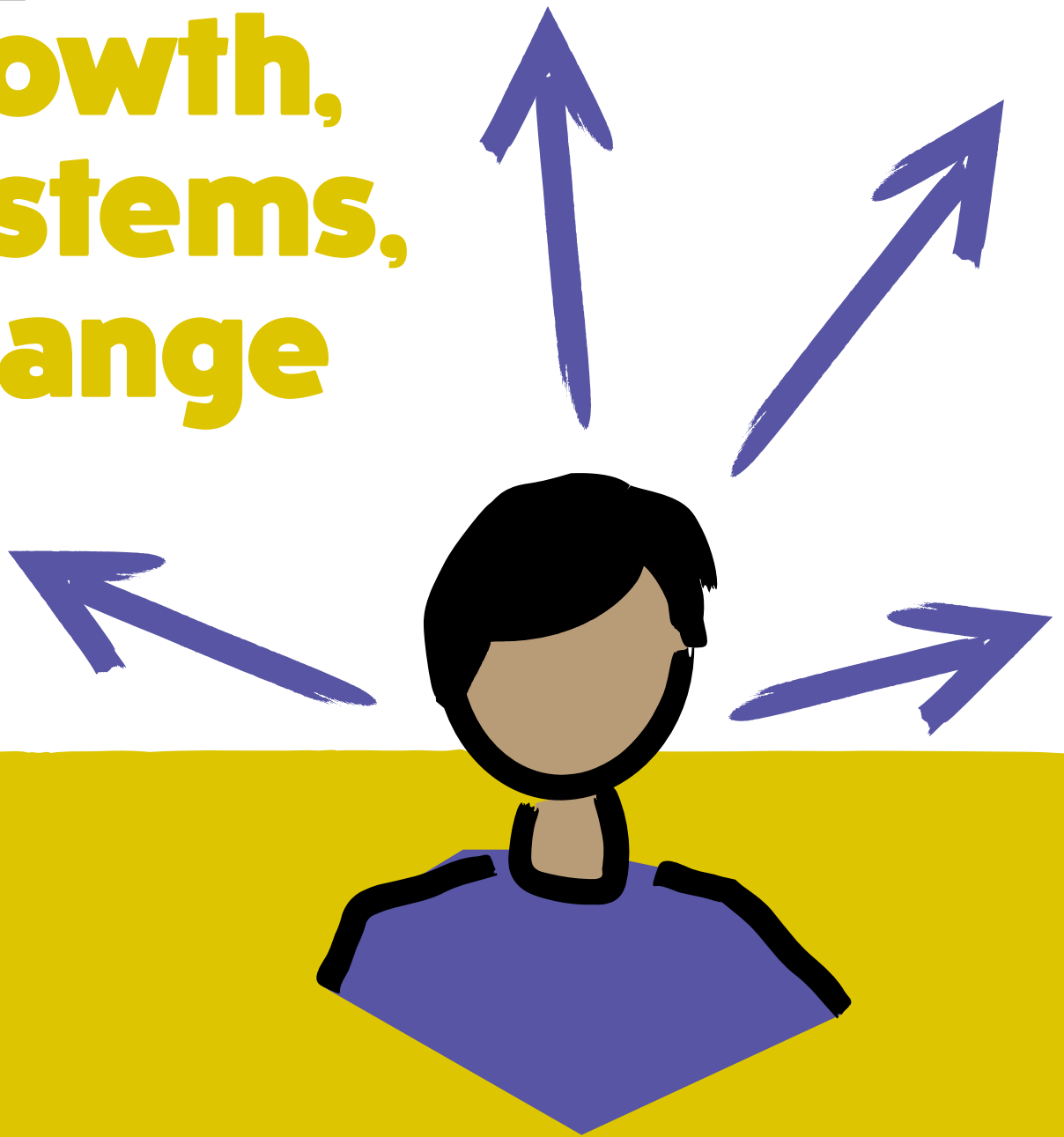


Likewise

Learning Report 2021

**Growth,
Systems,
Change**



Funded by:



the
Tudortrust



Lankelly Chase

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Introduction

This year has been one in which Likewise has grown in terms of both size and approach. We've delivered more hours of support to more people than ever before, and have been working with the local mental health system in ways that might not have felt possible just 18 months ago.

We have developed our learning programme and built our community, nuancing and refining our thinking as we meet the reality of new circumstances. As such, there has been a lot to process and a lot to learn.

In this report, we begin with a brief overview of who we are and how we define our work – it is familiar, but has gently shifted. We then move into the details of what we have achieved and the outcomes we have supported across the different areas of our work, before looking at the challenges we have faced and the ways we have navigated them. We hope this tells an honest story about an organisation managing change in a way that is always open to learning, always considering context and challenge, and always seeking to be as human as possible.



LIKEWISE OVERVIEW

Likewise was founded in 1988 as the Holy Cross Centre Trust to support the marginalised, socially excluded communities around Kings Cross. The simple vision at the start was to address the need for companionship, support and a place to meet. The intention was to create a community space for all people to be safe to be themselves, where we tried to be alongside people rather than doing things 'for' them.

The threads of working alongside people in an informal environment, prioritising relationships, being human, and creating a meeting place for people experiencing mental ill health and social exclusion are all continued by Likewise today, as we work with hundreds of people a year to support their wellbeing.

We recognised that public services aimed at addressing mental health and other complex issues were often focussed on achieving a predetermined target outcome for a specific issue, rather than taking a holistic approach to looking at the complex reality of people's lives. This created fragmented and dehumanising experience for people using and working in these services, leading to poor outcomes and burnt out staff.

To resolve these issues and deliver better support, we work hard to see people in their fullness, providing them with a sense of acceptance and belonging. We maintain a learning mentality to ensure we stay open to the complexity of individuals and their situations, and think in terms of a pragmatic and flexible 'doing' that is defined by the complexities of our clients' lives rather than any specific remit or rigid 'solution.' We put relationships before outcomes, in the process actually enabling more positive outcomes to emerge. And we emphasise the importance of emotional intelligence, recognising and reflecting on the role of our

own feelings and how this plays out in the work – this allows for the kind of neutrality and openness that enables better decision-making, flexibility, and genuinely person-centred care.

We believe more human organisations deliver more human services, and so have a unique workplace culture with structures and tools that allow our principles to flourish at the frontline. This includes an experiential learning programme, rich reflective spaces, and a way of relating to each other that allows us to genuinely bring ourselves into work. We do not shy away from challenge and discomfort, but hold these openly and in spaces of care. As a result we are better able to recreate this emotional intelligence with our community and support people to make the changes in their lives that matter to them.

As such, there are two overall aims to our work:

1. To help people finding life difficult (emotionally and practically) to better navigate it, feeling a sense of acceptance and belonging.
2. To influence change in the health and care system so that organisations and services become more human, adaptable, and responsive to people's lives.

These aims are achieved through three interconnected strands of our work.

1-to-1 support

Embracing the complex reality of people's lives, we provide 1-to-1 emotional and practical support to around 260 people, at home and in the community. This is delivered through our Pod model – a structure whereby a full-time staff member (Pod Leader), paid support workers, and volunteers operate together to provide support for clients. Pod Leaders play the key role, building relationships with all clients, supporting the rest of the Pod team, and organising the

support delivered, but anyone using the service can have support from any member of the Pod. This allows for cost-effectiveness, decreased dependence on individuals, and more flexibility and autonomy within the work.

This year, this has been delivered across three services:

- **6-8 Sessions:** A longstanding contract with the London Borough of Camden to deliver short-term preventative emotional and practical support over 6 to 8 hour-long sessions for people struggling with their mental health.
- **Floating Support:** A long-term, paid-for service for people who want person-centred, flexible support. Charged at £20 per hour, with many people paying for it through personal budgets.
- **Support and Connect:** A service run in partnership with Mind in Camden for the Camden and Islington NHS Trust. People are referred from primary and secondary care for emotional or practical support. Initial work will be for up to 10 sessions, but with flexibility so service can be continued or paused.

Learning programme

An experiential learning programme, supporting volunteers and placement students to contribute to our community centre and 1-to-1 work, whilst equipping them with the emotional intelligence, skills and experience needed to better manage their own wellbeing, meet difference with acceptance in their personal networks and become leaders and influencers in the social care system.

Community programme

Our community hub in Swiss Cottage offers a safe space for people to explore a range of wellbeing activities and events, whilst creating opportunity for connection, relationship, belonging, support and the coming together of a genuinely diverse and vibrant local community.

These strands combine and interconnect to deliver support that is flexible, human, and caring.

Key numbers

Hours, by service

	2019/20	2020/21
Floating support	6,351	6,248
6-8 sessions service	407	321
Support and Connect	419	3,199
Informal support	119	151
Creative therapies*	300	423
Community activity*	100	208
1-1 session total	7,296	9,919
Total	7,696	10,500

Clients, by service

	2019/20	2020/21
Floating support	86	90
6-8 sessions service	58	72
Support and Connect	122	230
Informal support	32	28
Creative therapies*	35	64
Community activity*	44	86
1-1 session total	257	382
Total	264	445

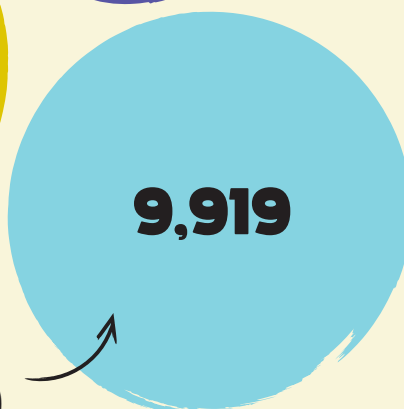
**Creative therapies and Community activity 2020 are estimates as recording practices for these only fully developed for the year 2020/21*

Hours delivered

Total hours delivered
(37% more than last year)



By 52
placement
students



One-to-one support
(36% more than last year)

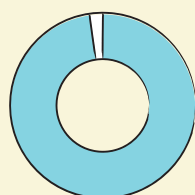
People accessing
Likewise services



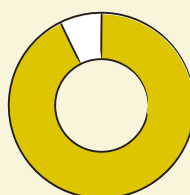
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Additional staff
members

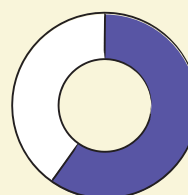
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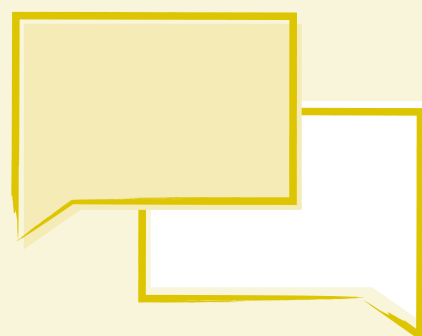
**98% client
satisfaction**
for Floating
Support



**93% reduction in
hospitalisation**
for Support and
Connect clients

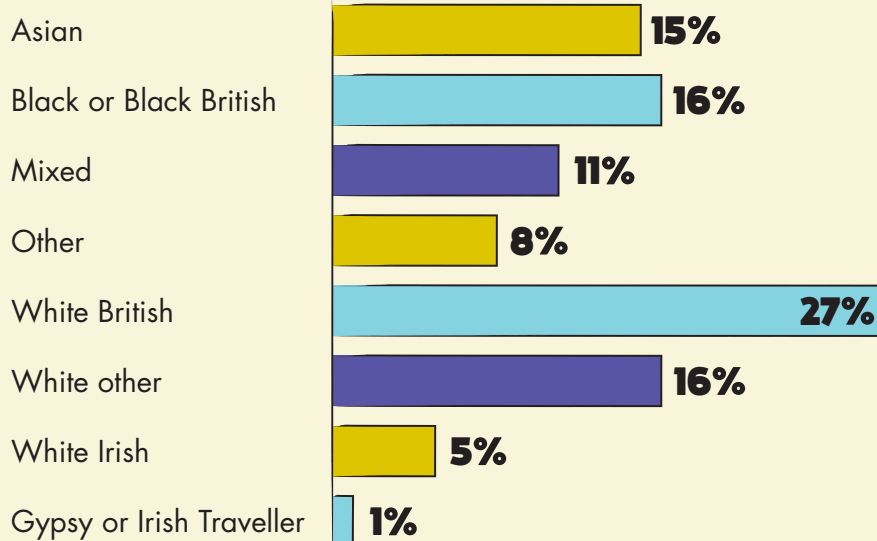


**60% of Support
and Connect clients
linked to community/
clinical spaces**



- Staff report better relationships with community and clinical partners.
- Feedback points to increased client agency and increased capacity for clients to do things themselves.

50% of clients are from Black, Asian, and Other communities
(compared to 34% across Camden)



Executive summary

Outputs and outcomes



One-to-one support

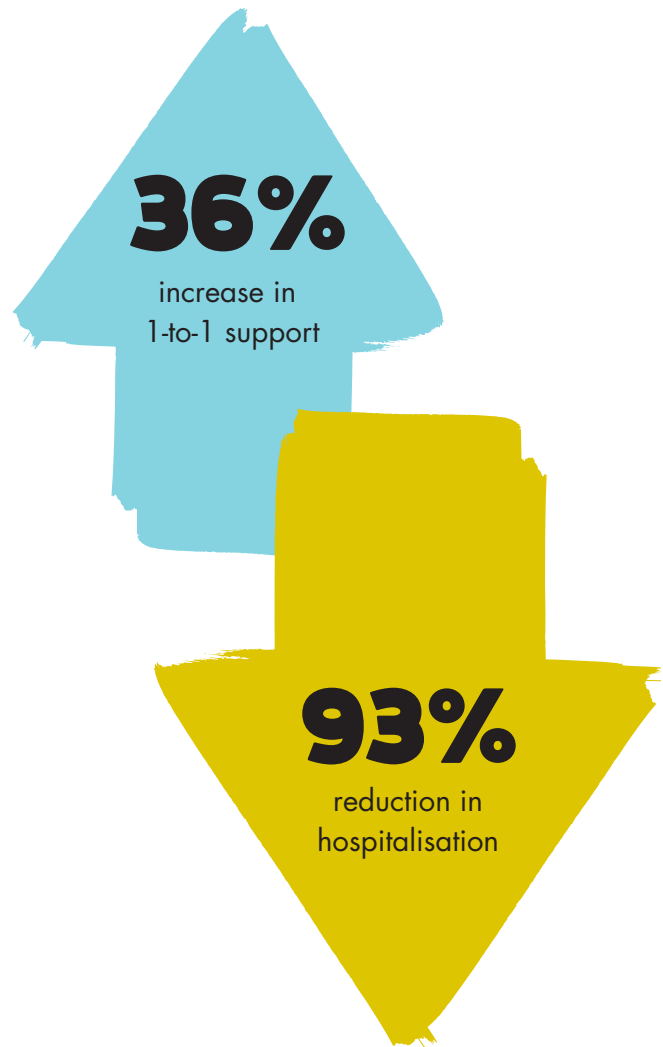
- 36% increase in delivered hours – a total of 9,919
- Feedback points to increased client agency, increased capacity for clients to do things themselves, alongside our consistently high scores in quality of relationships and control of service.
- Increasing emphasis on interdependence has led to 60% of Support and Connect clients being linked in with other community/clinical spaces, with a knock-on effect for other services too.
- Staff report better relationships with community and clinical partners.
- NHS data suggests a 93% reduction in hospitalisation for clients using Support and Connect, with a further 43% reduction in contact with Crisis Teams and 37% reduction in contact with secondary care services.
- Outcomes were strong and varied, covering practical, emotional, social, and improvements in networks of care.

- Outcomes across all services point to more joined-up working and collaboration (eg. medication reviews, safety checks, shared referrals)
- Minor issues were noted around client expectations prior to coming into service (especially with the newer service, Support and Connect), a few people desiring more practical support, and a few people wanting older support workers.

Learning programme

- 52 Placement students have delivered 4,480 hours of support.
- Satisfaction with relationships with volunteers and placement students has increased year on year – currently 88% (from 84% previously).
- Very positive feedback on placement students from clients, valuing their professionalism and kindness, and on the management of the transition between Pod Leaders and placement students.

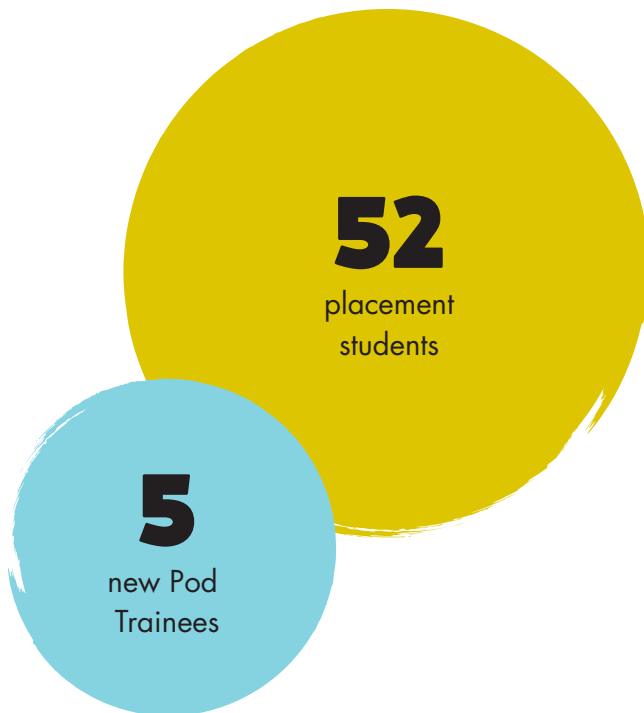
- Good outcomes for students and volunteers, with significant increases in confidence (93% of respondents), understanding of mental health (100%), and self-awareness (92%).
- Students also reported appreciation of Likewise approach with increased clarity on professional future, with many wanting to go into mental health – we hope that this will lead to sector-wide influence.
- There were several cases of students struggling with particularly challenging client work. Through this, we have built processes and approaches to better support students moving forwards.
- To increase leadership skills (which only 38% of students felt had improved), the Learning Programme is being re-structured to provide more opportunities for responsibility, student-led community activity, and involvement with decision-making.



Community

- 84 people engaged in community activities
- The re-start from the pandemic closure has provided an opportunity for the community approach to be more co-productive, with all activities requiring either leadership or sponsorship from a community member. This approach has influenced the organisation more generally, with more opportunities for collaboration and collective input.
- This has also opened the door for new community members, who have diversified our community compared to pre-pandemic.
- Activities include Canine Cafe, Gardening Guardians, Colouring, and a Walking Group, with more in the pipeline.
- Creative Therapies has expanded, delivering 423 hours of support.
- Art, Drama, and Movement Therapy sessions have provided a therapeutic space in a community setting, starting to normalise therapeutic practices in the community.





Systemic working

- We have been a key partner in the Core Teams transformation programme, working alongside clinical staff to transform local mental health in the community.
- Through this, we have delivered cultural workshops and cultural competency sessions, and have been relationship building throughout the local mental network. This has given us the opportunity to collaboratively work on issues that might previously have been impossible (for example, funding longer-term services, funding management resource).
- This has led to more people reaching out for our input, including secondary care teams, other local VCS services, and councils in other parts of the country.
- Challenges have included the emotional labour of working in and trying to change a culture that isn't as aligned with our values; Pod Leaders being stretched trying to manage the different priorities; and communicating information to Likewise staff less embedded in the system.

Growing organisation

- Part of the above challenges are linked to the organisation doubling in size in three years, and – alongside the significant increase in clients – we have been learning to navigate this growth.
- Specific challenges include increasing distance between different parts of the organisation, staff members being stretched, and trying to build more distributed decision-making processes.

Structural solutions

- We have developed several solutions to resolve these challenges:
 - Recruiting 5 new Pod Trainees.
 - Adapting Pods to include a Pod Trainee alongside a Pod Leader: this allows for shared logistical planning and client support.
 - Restructuring the learning programme to give placement students more responsibility and share more of the work.
 - Temporarily recruiting support workers to manage high client numbers.

Cultural solutions

- Given the emotional challenge of several aspects of the work this year, we have been considering the value that 'we all have needs, we all have something to offer.'
- This value recognises that genuine empowerment emerges from genuine mutuality. This means that the needs of each person in the care relationship have to be seen. We noted occasions where we could have better emphasised staff and placement student needs to increase mutuality and provide healthier boundaries.

Conclusion

- This has been a year of change for Likewise in terms of growth and more systemic influence. We are pleased with the outcomes so far, whilst very aware of the risks and challenges. Reviewing these provides us fresh impetus to improve and build on what we have.

Outputs and outcomes

In this section, we look at the outputs and outcomes of our services across the various strands of our work. We then move onto to examine the challenges of the year, the solutions we have developed, and the questions raised which we will continue to explore.

ONE-TO-ONE SUPPORT

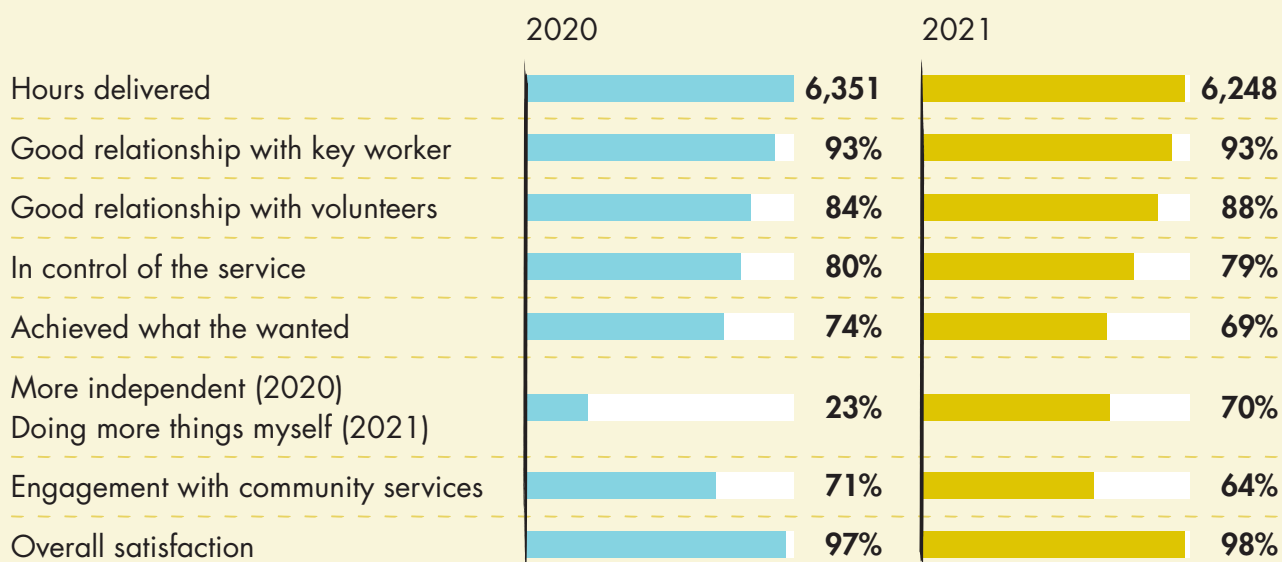
We have seen an increase of over 30% in our one-to-one services, with over 2,500 more hours than last year. With almost 10,000 one-to-one hours delivered in total, it has been rapid growth. Feedback from clients has been consistent throughout – given how busy we have been, quality remains high.

A few areas stood out. One of these was Floating Support clients feeling they can do more things themselves through the service. Previously we asked clients about whether the support helped ‘independence’, and this often scored low in ways that didn’t quite match up to qualitative feedback.

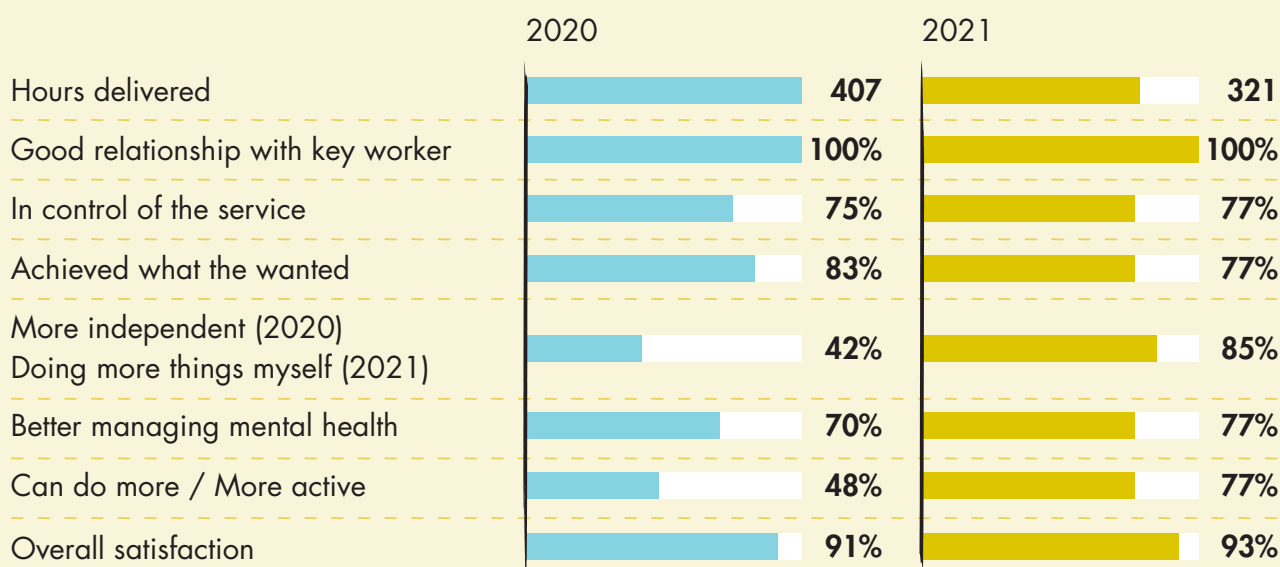
Changing the question language from independence to ‘do things myself’ seems to remove the loaded assumptions of ‘independence’ (ie. not needing any support at all) and better aligns with other feedback:

“It’s very good support, talking through problems and making important contributions to conversation without speaking for me. They’ve helped me find out things for myself whilst supporting me to get there”

Floating support



6-8 sessions service



"It supported me to do things on my own, weaning me off the culture of reliance – it wasn't a nanny relationship, but a working relationship."

"I think one of the best things has been your feedback, asking me 'why?' questions, or questions that prompt further thought on something, such as sorting out my sleeping patterns... it's helped me focus on the things that are important to me."

Internally, we are often reflecting and prodding each other to focus on doing things with and not for people – we seem to be largely getting this right in a way that nurtures agency.

With the increased systemic engagement this year there has also been an emphasis on linking and improving relationships with care networks and introducing people to new community support. This came through in the qualitative feedback, with consistent references to those networks:

"Sonia (Pod Leader) was really caring when I came out of hospital – she called my GP to make sure I was safe and she put together a plan to make sure I was being cared for. They really look out for me."

"I think the most valuable thing has been helping me deal with all the different agencies: SSE, DWP, referring to the crisis house. She helped me write letters to people, supported me on appeals – these are all things that usually go over my head."

"You do everything – you deal with my mental health, my activities, with rehab – you supported me through lockdown and rehab. If it wasn't for you I wouldn't have stuck out rehab, it was brilliant being able to speak to you and offload."

Staff feedback also showed increased engagement with other professionals, and this was supported in outcome data: clients have been linked in with substance abuse services, diabetes support,

neuropsychiatrists, and many more. Whilst this has been a key feature of the Support and Connect service in particular – with 60% of referrals involving these connections – it also seems to have impacted other services:

"It does feel more interconnected at the moment from the Support and Connect work, and that's trickled into Floating Support too, that sharing more information. Recently I asked a care coordinator to check in on a client, where previously I wouldn't have made that call. I would have probably sent an email, but wouldn't have felt able to just pick up the phone. And that's vice versa, the Care Co-ordinator can give me a ring whenever, rather than having to formalise those meetings. It helps tie everything up." – **Pod Leader**

"I am definitely keeping a listening ear for opportunities to link someone in a way that I wasn't doing two years ago. I'd never have done that with Floating Support before." – **Pod Leader**

However, this was not reflective in all data, with client feedback reviews showing minor dips in achievements and engagement with community services compared to last year. Whilst initially

concerning, getting behind these numbers led us to the pandemic – this data was predominantly taken from the earlier half of the year, and qualitative feedback recognised that limitation:

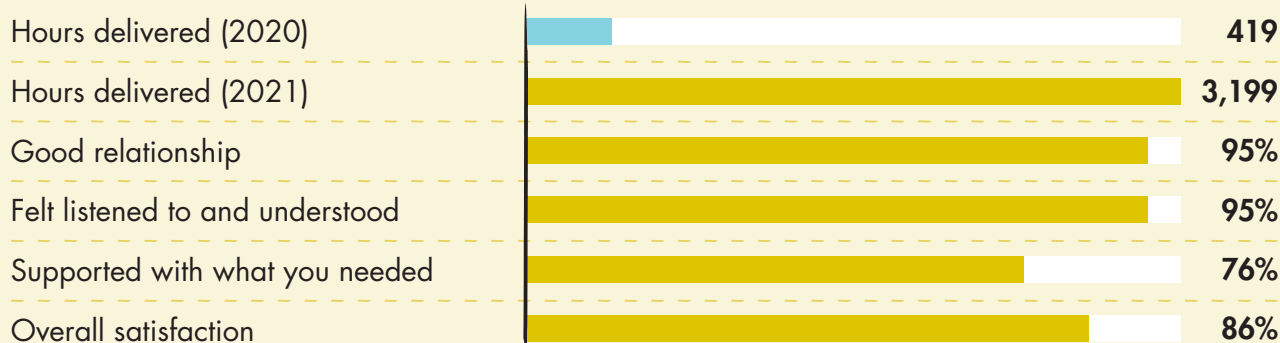
"I know we would have done much more together if the lockdown wasn't around, and I would have been a lot happier in my life and hopefully would have made friends in different groups like I used to."
– **Deanna, Support and Connect Client**

"We started to work on sorting paperwork and hoarding before lockdown, but haven't been able to do this since then."
– **Brian, Floating Support Client**

Alongside this, clients spoke of a minor frustration with other services – it is one thing to start making the links to community spaces and mental health teams, but it requires those teams to be receptive and open. This was not always the case for both staff and clients:

"I was a bit frustrated we didn't get the therapy we referred to but it's not Laura's fault. Laura does everything that she can, she's great, but the problem was with the psychiatrist."
– **Zoya, Support and Connect Client**

Support and Connect



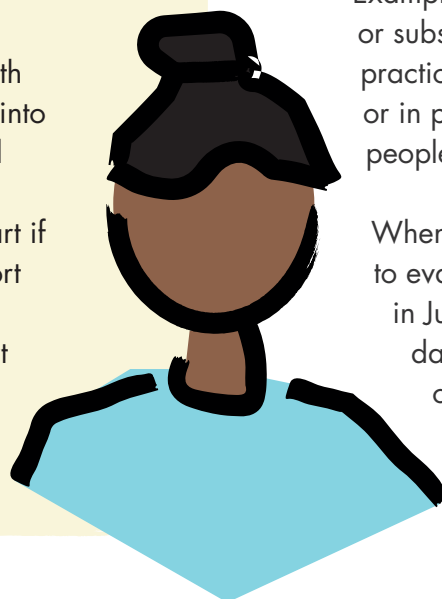
Case study

CARE HOMES, CLINICAL FRIENDS, COMMUNITY

Priah was referred to Likewise through the Support and Connect service by her GP, Sue, when her health had dipped due to the challenges of caring for her mum. Her Pod Leader, Sara, was tasked with supporting her practically, emotionally and to decrease isolation as Priah's mum was moved into a care home. They were able to get a travel pass so she could get out and about, resolve benefits issues to increase her income, as well as support her to process the significant change in her life. As things started to stabilise and Priah built up more structure, they put the service on pause.

A few months later Priah's tenancy issues were making her housing situation very precarious. Through Dr. Sue, Sara re-engaged and did a few visits with Priah alongside a secondary care welfare advisor. Sara, the welfare advisor, Dr. Sue and Priah were in continual communication, with Sara stepping back when the welfare advisor took the reins, and stepping-in to support the work around each of these meetings. Eventually, the issue was resolved, and again the service was paused.

Our most recent involvement with Priah came after Sara bumped into her in the community. Priah had been diagnosed with a serious illness, and was invited to re-start if she felt she needed more support – she took Sara up on the offer, and together they found support services for her diagnosis, and set up her internet so she could attend online support groups.



"It's a bit hit and miss – it depends on the individual and how willing they are to get involved. In terms of Care Co-ordinators I work with, I don't know whether it makes a huge difference as to whether we're collaborative or not – some are really on it regardless, and others it's just really hard – no matter how many times I introduce myself they don't know who I am." – Eva, Pod Leader

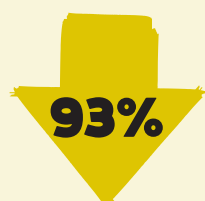
As much as we might want to build stronger links with other spaces, they might not be able or willing to build the same with us. We have often found ourselves reflecting on a particular value that 'everyone's a client' – meaning that, regardless of status or position, we all have needs, contexts, and struggles that are best encountered with authenticity, openness, and a desire to learn. This encourages recognition of the pressures on staff members in different spaces, and helps us step back to work out the best ways of bringing people in. Whilst the overall sense was that stronger relationships have been built, there remain plenty more to build.

The result of this engagement has been tangible: consistent safety checks, medication changes, psychological interventions, and – more subtly – less duplication, more collaboration, and more joined-up and coherent support for people.

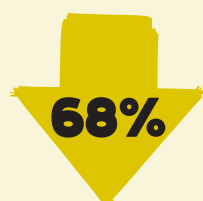
Examples include supporting therapeutic or substance abuse goals, supporting practical crises (eg. housing, benefits), or in preventing deterioration to keep people from needing secondary care.

When working closely with the NHS to evaluate Support and Connect in July, we were able to use their data to demonstrate that this work correlated with a 93% reduction in hospitalisation, and an average reduction of 37% in contact with secondary care teams (up to

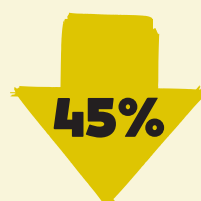
Compared to 6 months prior to entering Support and Connect service:



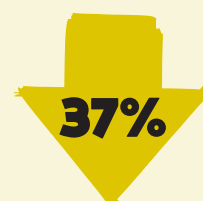
reduction in
hospitalisation



reduction in
contact with A&E
Liaison teams



reduction in
contact with the
Crisis Team



reduction in contact
with secondary
care teams

45% for crisis teams). Through working with us, people are staying healthier and needing less clinical support, as well as making better use of clinical support when it is needed.

All of this was not just preventative – it led, as ever, to variety of outcomes. A list includes:

- Moving house
- Finding and starting counselling/ therapy
- Joining community groups (eg. gardening, walking, peer support, LGBTQ+ groups, table tennis)
- Entering and sustaining rehab
- Managing budgets
- Running/ supporting community activities (eg. jewellery making, colouring)
- Referrals to clinical and statutory services (eg. psychiatrists, psychotherapists, psychologists, substance abuse services, GP's, secondary care, police, homelessness support, adult social care, physical health clinics)
- Working alongside these services to support care (ie. medication, service goals (eg. alcohol use, exercise), escalation and safeguarding, building community links, supporting community reintegration, maintaining relationships with carers)
- Regular exercise
- Getting out in public for the first time since the pandemic

- Educational courses (from soap making to self-esteem)
- Employment support
- A space and 'sounding board' to support the maintenance of family and friend relationships

There were a small number of clients who felt there was too much talking and not enough doing in one-to-one services – a useful reminder for us to continually check-in on the structure of support as we go. Indeed, in one of these cases this reflection led directly to a shift in how visits were managed to be more practical.

For the Support and Connect service, there were a couple of cases of it not being what people expected or wanted, and 76% of people supported with what they needed is lower than we would want. Given the newness of the service for referrers and its links to the NHS, this is an error that we hope will get less and less frequent as we continually build relationships within the system.

Given how much more work we have been doing, the experiences of the people we support have remained person-centred, human, caring, boundaried, and led to some remarkable outcomes. There are elements to examine moving forwards, but we are confident that our approach has held up and continues to be important and appreciated by the people we support.

Client feedback

"I have umpteen praises to sing for Likewise. At the beginning I thought 'oh I have a friend, this is great', but then I realised there was a date and time I had to stick to and I got used to this – the support was there at the time I expected, and I had a dedicated time for my ideas to flourish in a happy environment. It instilled me with confidence."

"Everyone is really nice, understanding, supportive, and sympathetic. It helps my loneliness – I leave the house, I get structure and routine and get a lot of constructive things done."

"You've really helped me when I've been having very vulnerable moments physically and mentally – you haven't been intimidated by my state of mind or health. Some people don't know what to say or get scared of interacting, but you've managed to adapt your support to my varying mental and physical health."

"If I didn't have Likewise I think it would be a lot harder for me to control my mental health."

"I think it was a relief for my mental health team to see I was doing well in the community. Thank you so much for your support – I think I'm a transformed person, 2 years later."

"Managing money has been very important – realising the importance of an organised approach to managing money, as well as to managing friendships, people and the space I live in."

"As Likewise adapts to the changes that have been enforced upon us by Covid, clear communication of any new ways of working has been most welcome. We had a really good conversation the other day about where Likewise is going and evolving to"

"It's helped me to feel supported and valued as a human being – obviously with my mental health this is a huge deal"

"Being able to express my needs without judgement and stigma – being genuinely heard and supported."

THE LEARNING PROGRAMME

A fundamental aspect of people's experiences this year were our Placement Students, without whom we would not be able to have delivered almost half of our one-to-one work: 52 Placement Students have delivered 4,480 hours of support across all of our services.

Historically there have been mild concerns about age of placement students. This came up a little, but was alongside very positive responses about both students themselves and the thought that has gone into navigating people's shifting relationships in a Pod:

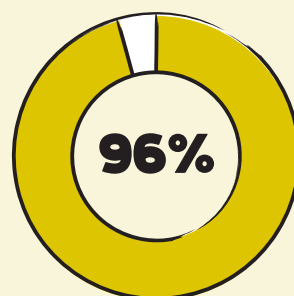
"You can relax knowing you are in good hands and things won't go wrong; it's knowing that people are trained. And I can make jokes around workers – on Wednesday I told such a good one from Google!"

"I like working with students. I get different experiences from each student, different ways of doing things that I like. Like on our walks – Mary-Louise is very chatty, Sean is quieter, not boring, but very calm – they all have different strengths.... I was worried about it first – I got a bit annoyed as I thought having all these people coming and going would be stressful, you know? But now I like it. They really helped with my phone and all my technology, and they've gone above and beyond really."

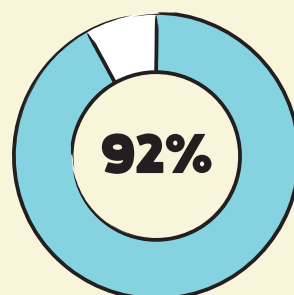
"I was particularly mindful about the change in key worker and pod workers and I thought a great deal of time and thoughtfulness was placed my way, understanding the difficulty in transferring to new members of staff."

Some of this may be down to the increased training delivered to students this year. On top of their inductions, supervisions, Care Certificate, Mental Health First Aid and First Aid training,

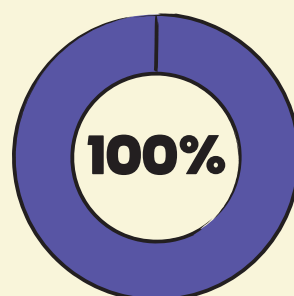
Percentage of students reporting an increase in skill by development area



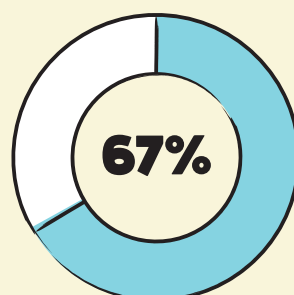
Confidence



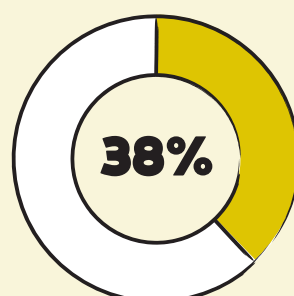
Self awareness



Supporting/
understanding
mental health
needs



Managing
challenging
behaviours



Leadership

we have also added regular LikeLearning (a space to examine values and themes of our approach to the work) and Action Learning (where students can present challenges to staff and their peers for different insights and perspectives). This has been enjoyed by students and staff alike, with a particular appreciation of the connection with other students and the opportunities for shared experiences.

"Sessions like Likelearning/ActionLearning enabled me to learn how check in with my emotions and thoughts and how to remember my feelings are also important – not just those of the clients I help." – Placement Student

The outcomes for students themselves have been in-line with what we hoped would emerge. The approach to the programme – hands-on

Student feedback

"It has had a positive effect as I was going through a tough time with my sister. I bought things up in supervision and it was nice to explore it and have another person's perspective on it. I followed the advise of my supervisor to talk to the Samaritans as I didn't realise you could talk about anything and it really helped."

"I know how to deal with conflict with people and also learned that it can help form a better relationship with your client. It has changed my mind about the sector as I didn't see a future in it, but I really enjoyed it."

"I did come into the placement thinking it might be like other orgs where there is a difference between how they portray themselves and how it actually is, but I haven't experienced that here. The positive mistake culture is genuine – I don't feel guilty about making mistakes, I want to talk about them!"

"Something I've really picked up on is the idea that it's okay to not know or even seem like you know exactly where you went wrong or how to fix it – that just opening up that conversation in itself is extremely useful and encourages progress in all aspects of your work life (and even your personal life). This also has made me more understanding of other people and the different ways we approach aspects of mental health and perhaps internalize it too. It's been such a human process which is something I genuinely think all workspaces can benefit from in some way or the other."

experience alongside emotional, reflective, and values-based learning spaces – has been highly valued, and repeated themes emerged around improved emotional intelligence, a new awareness of positive mistake-making and the value of not-knowing, and significant shifts in their perspective of mental health and what kind of support works. This includes increases for almost every student in core client skills (self awareness, understanding of mental health), in confidence, and in personal growth.

Many students also came away with a reinvigorated desire to pursue work in mental health, from social work to neuropsychiatry to forensics. This makes the outcomes of these placements all the more important – these are people who will be influencing the sector moving forwards, and they are now equipped with a relational, emotionally intelligent, and human approach to this work.

There have also been examples of students in particularly difficult situations that we have had to learn from this year. In one case, an unexpected client death was understandably difficult for a student to process. Whilst we provided a lot of reflective space and an open ear, we have also learnt to build a more structured process for this scenario in the future, alongside greater encouragement to take time off. In another case, a student was struggling with a particularly antagonistic client – this is considered on page 30. Whilst both students highly valued their placements even with these difficulties, we have taken the opportunity to improve our practice around these areas.

More general improvement suggestions focussed on more collegiate spaces for students to get to know each other and learn together, and more

timely information about decisions being made vis a vis clients and timetables. This relates to a broader need to give students opportunities to come further into decision-making processes, particularly with leadership skills increasing in fewer students than we would want (38%).

"I was under the impression it would be a lot less solo working. Maybe this was because of Covid, but I felt it was sold that we would do a lot of group working and I barely did any – just LikeLearning and Care Certificate."

As such, the structure of the learning programme will be changing next year. Our Learning Programme Lead has designed several additional opportunities for students to interact with each other as part of both community projects and formal training spaces, alongside a greater emphasis on social activities to build relationships.

There will also be a three-tiered process of student development towards more responsibility, based on capability, experience, and individual interests. This will support them to take on their own referrals, run some of the learning spaces for newer cohorts of students, and further engage in organisational discussions and decision-making (the most recent example being invites into our new diversity working group).

Even with this space for improvement, we are really pleased with the learning programme this year in terms of outcomes for clients and for students. The richness of the student learning deserves more analysis, and we hope to be able to dig deeper into it in the year ahead.

COMMUNITY AND CREATIVE THERAPIES

Community, co-production, power

Last year, our Community Lead, Anna, embarked on significant thinking around how we want to work with our community.

For some time pre-pandemic, we had been wrestling with the community space and it's historical roots in traditional mental health day care. A group of regulars had expectations that it was for 'people like us' – people with long-term mental illness, which was indeed who the funding dictated the space was for. After the funding for that space ceased, Likewise wanted open up to the wider community to increase sustainability and to make best use of the building, but doing this through co-productive means was messy and unclear.

There were two reasons for this: firstly, there simply wasn't the funding to maintain the community that regulars wanted. Secondly, quite fundamental differences in what Likewise thought was healthy for a space (inclusivity, diversity, experimentation), and what regulars wanted (exclusivity, tightly-defined community, consistency). In trying to work with these tensions, the space became a little stuck – it didn't particularly work for the people who had been attending, it didn't work for wider members of our community, and as such it didn't particularly work for the organisation.

With the disruption of the pandemic, Anna took time to work alongside community members in the broadest sense – regular attendees, staff, neighbours, volunteers, one-to-one clients, and local organisations – to understand people's relationships to Likewise and our Hub, to get a sense of what might be possible in the future, and to look for inspiration in other community organisations. This helped build a stronger understanding and corresponding vision for what could be possible.



86

86 people accessing community activities, including:

- Canine Cafe
- Garden Guardians
- Community Cafe
- Davi's Creative Colouring
- Walking Group
- Befriending Calls during lockdowns

This work helped Anna notice that, in one area, we weren't living our values in the way we might want to: there remained a difference between staff and community, an implicit and subtle sense that the community was a space where Likewise were simply providing for people's needs without recognising our own position as members of that community. We were not living out mutuality.

In the community space, the results of this realisation have started to come to fruition. Community sessions have re-started with more experimental co-production baked in from the start – even in the short period in which we have re-opened, activities, structures, staffing, catering and timings have been deliberated and adapted based on the real needs of both clients and the organisation.

Since re-opening, ideas for change have been coming from community members themselves – which includes placement students, creative therapists and volunteers – but with the caveat that they need sponsorship across the community.

This means community members can bring their ideas to a placement student or a staff member to support with making it a reality, and the community member can choose the role they play in that development – lead, facilitator, co-facilitator, evaluator, designer, or all of the preceding. This has already happened in the case of our colouring, song-sharing and canine cafe group. At the same time, staff and placement student ideas need to find client sponsorship – recently, a placement student working one-to-one with a client found a shared interest in jewellery making and, whilst the client didn't want to run any jewellery making sessions, she will be sponsoring that community activity and helping the volunteer in the design.

In terms of practice and outcomes, things are starting to shift. Gardening sessions have been led by clients and staff alike; our colouring group is designed and led by a client, supported by volunteers; requests for new groups are coming in from both clients and volunteers, and our programme is filling out. This has already diversified our community, supporting us to reach 84 people this year, with regulars extending their experience to volunteering or leading, and many more new people in various spaces.

This shift in dynamic also links together all three strands of the work. One-to-one work is supported by an increasing range of activities occurring at the Hub, and able to nurture interests and ideas of one-to-one clients in spaces of real agency and community; placement students go through a learning programme with co-production a key expectation, bridging community and one-to-one work, as well as learning how to bring their own interests and needs into a space of support; and throughout, shared needs and offers are present for staff, volunteers, and other community members.

Of course, progress has been slowed by Covid. Over the next year we will be able to experiment more and dig deeper into the impact of these new approaches and activities.

CREATIVE THERAPIES



hours



people

We have continued to build on our Art, Drama And Movement therapies programme this year, doubling the number of people we have worked with across group and individual sessions. Only 33% of referrals have come from Likewise staff, making it a key community connector. This has also benefited other community activities, as people cross paths in the building and join-in with a wider range of activities.

The offer has provided something of a bridge between therapeutic and community spaces, offering an alternative to the clinical setting of much therapeutic activity and normalising mental health support. Particular effort has been put into make it as person-centred as possible, with initial work to try and understand each person's preferences and make it work for them. Extra supervision is offered to students (on top of their clinical supervision) to allow for the Likewise perspective to influence approach and thinking. Moving forwards, we think this has real potential for more influence locally.

"Likewise were open to ideas that are actually effective and wanted by community. You weren't obsessed with protocols and process. And there was nice decor – it sounds superficial but it is incredibly important for clients, especially contrasted with NHS settings which can feel medicalised and depressing." – Art Therapy Student

"My biggest take-away was vulnerability in a work-setting, and how powerful sharing mistakes can be (within a safe space which Anna facilitated so brilliantly!)"

Systems working

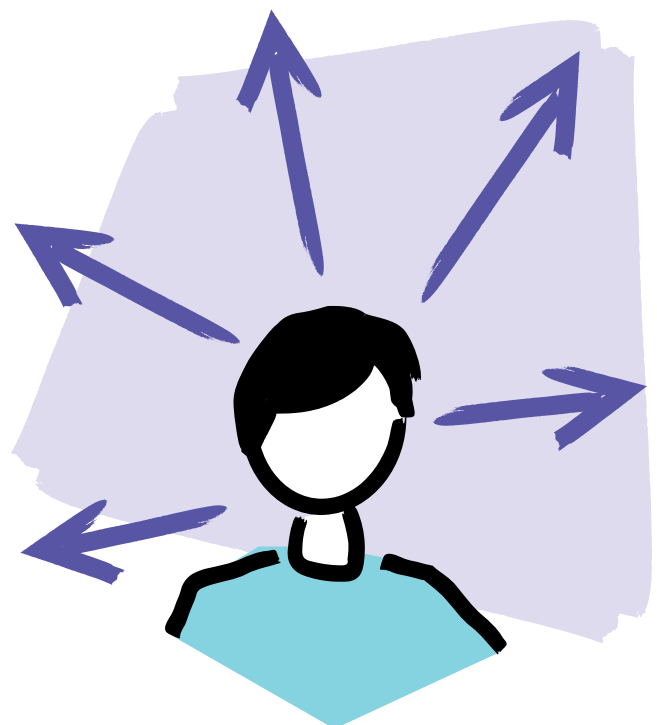
We have made a significant shift towards trying to influence local systems change this year. To re-cap, last year five key developments emerged:

- Floating Support had become less sustainable due to changes in client complexity and personal budgets, leaving us with a need to diversify income in order to continue growth.
- We noticed client outcomes being tied strongly to their wider care networks, and developed a greater sense of our own inter-dependence in those systems.
- Local plans for the mental health system involved strong VCS involvement, and would have a significant impact on our service delivery.
- Pandemic partnership work – specifically, the Support and Connect service – brought learning, strong systemic relationships, and good outcomes for clients.
- Key systemic actors recognised the value we could bring to the local mental health system and asked us to further engage.

As we detailed in the last report, we have adapted to these changes and now recognise interdependence as an inevitability that, when worked with, can bring significant benefit to the people we support. As such, this year we have started work on the Core Teams project. Working around 5 GP constituencies, the pilot Kentish Town Core Team has brought together psychiatrists, peer coaches, population health nurses, social workers, community development workers, psychologists, and VCS services (Likewise and Mind in Camden) to try and deliver more timely, holistic and person-centred care. This will then be rolled out across Camden and Islington, with Core Teams in each area of the boroughs.

For Likewise, this means having two members of active staff with positions in the Kentish Town Core Team: one Pod Leader doing one-to-one work (through the Support and Connect service), and transitioning one Pod Leader into a community development worker to support community engagement and outreach. We have also used substantial management resource to support integration and influence.

The aim of this is to shape mental health delivery for the future of Camden. Through our years of local operation, we have seen the difficulties and frustrations of the local system from clients' and our own perspective – hard to access services, focus on diagnosis first and person second, problematic power dynamics, and inflexible remits. Alongside our clients, we think we have much to share with local partners around culture and person-centred working to create an experience that is more human, more consistent, and – through that – creates better outcomes for people.



We have started making several promising inroads. First and foremost, we have built strong relationships with people across the landscape in Camden, from commissioners to nurses to peer coaches to psychiatrists and more. Through this, we have been invited into leadership spaces, to speak to NHS England representatives, and even to work with and advise Islington-based VCS Services who are building up to their own Core Teams.

"Likewise have been an instrumental partner in our local mental health system and as a commissioner at Camden Council I have collaborated closely with them to deliver for our residents during the challenges and stresses of the ongoing pandemic. They have been a flexible, proactive and engaged partner throughout, and their expertise has been invaluable to the work we have done." – **Jon Horn, Strategic Commissioner, London Borough of Camden**

Secondly, we are starting to see the fruits of our efforts. We played a leading role in developing a workshop for the Core Team to consider culture and values. It brought to the surface both opportunities and challenges, with participants noting the value that emerged from a different way of interacting, appreciating the kind of questions asked, and requests for another workshop to take the conversation further (for which we will again be a lead partner). Our Community Development lead has made a start in bringing the team closer to people traditionally marginalised by services, working with the local Somali community to support the development of the Core Team's cultural competency, and with much more involvement lined up. Finally, through the one-to-one work, we are both learning from other professionals and better sharing our approach with them, supporting reflection on learning, language, access, and the way

the team is thinking about people (for example, naming when we notice diagnoses and problems are being spoken about in detail before strengths and contexts, or pointing out the reality of complexity and the need for continual learning).

Externally, we have also been recognised for this systemic work. We have recently been approached by a secondary care team to work with them on collaborative delivery as a result of the relationships and reputation Pod Leaders have built with them. We have also been asked to give presentations to council and NHS staff in Liverpool and Bristol to talk about the work we have been doing and our specific approach – these were successful enough that we have been asked back to speak to more people. We were also invited to speak at a Human Learning Systems webinar, attended by over 500 people in the summer. In all of this, we have maintained our honesty, our values, and a focus on the importance of services and systems that better recognise complexity and humanity.

"We have been incredibly fortunate in Camden to have Likewise as partners in our work to transform community mental health services. They have challenged us to think differently, speak differently and work differently and we now have a mental health offer that is much better placed to meet the holistic needs of our local communities. Their impact has ranged from designing and resourcing the model, to ensuring we have a robust and meaningful evaluation framework, to transforming the culture. We look forward to developing our partnership further in the months and years to come."
Alice Langley, Managing Director (Camden Division), Camden and Islington NHS Trust

THE CHALLENGES OF SYSTEMIC CONNECTION

Of course, we knew last year that this engagement would come with many challenges, and that has been the case. We have been working hard to understand and innovate to untangle these.

The external systemic spaces have created a tension for staff who do more work within them. They are being asked to communicate and work in systems and structures that don't incentivise transparency, healthy conflict, reflection, and active negotiation of power dynamics in the same way as at Likewise. Whilst there is palpable excitement about the opportunities to create change, there is also a recognition that achieving such change is far from straightforward – we are having to learn the language of this new culture, understand what makes sense in that world and what doesn't, and recognise the spaces where we can have the most influence, sometimes through experiences of being misunderstood or dismissed. There is no road map, and it can be emotionally costly.

"I think we've definitely been a bit of a disrupter or challenger of the very clinical ways of speaking about clients and speaking about the work, but it's hard being in a space where a lot is being asked of you but you don't how to succeed or how to be." – Pod Leader

"I've been really energised by it, but sometimes there's also... I guess it's a despondency. Coming up against a system that doesn't see the world your way or care about the same things you do can wear you down." – Staff member

We have been developing two solutions to this. One is to ask for more management resource to hold some of the responsibility for change, taking it off the shoulders of Pod Leaders. Thanks to the relationships we have developed, this is in the

process of being resolved and is being budgeted into future plans. In the meantime, we have been investing our own resource into the space as a short-term solution. We are also in the process of considering how to best resource this kind of management position in order to maximise impact.

Secondly, we have built an extra reflection and strategy space for those engaging with the Core Teams. Strategic direction provides more clarity in what might otherwise be an overly ambiguous space. Reflection, sharing, and being heard – alongside action that results from these processes – is fundamental to supporting the resilience of our staff and ensuring work remains meaningful.

"At Likewise I can talk about the cons, which is so important – there is an active nature to working here, things aren't just sort of happening to us, we're involved in that process, we're voicing concerns." – Pod Leader

Another aspect of our growing inter-dependence for staff is the nature of partnership services. Support and Connect – designed with Mind in Camden and the Camden and Islington NHS Trust – is a mid-term service designed with a flexible ending: after 10 sessions, people can either be closed, paused, or continue based on their needs.

These blurrier lines need to be managed relationally and contextually. Staff named several challenges with this: confusing boundaries for both staff and clients; the risk of increasing dependency; and of the extra effort needed to consider what amount of support is 'enough.' Many people referred have long-standing needs (examples include: cyclical crises; decline or change in physical health; homelessness; being ill but without any other support; safeguarding concerns) so working out what is right for each person is not straightforward. However, the 25% of clients who require more than 10 sessions are the recipients of 50% of delivered hours, so it is a significant issue for capacity.

"The flexibility for some people has made sense, but others find it harder... people might want visits to continue because they enjoy them, and that'd be great with unlimited funding, but the reality is not the case given the time constraints... Its quite a weight to make that decision." – **Pod Leader**

However, being embedded in the system means that we can have richer, less pressured conversations with commissioners to think about these long-term needs. This does not provide an easy answer, but we become more aware of the limitations that make solutions to such problems so difficult, and more likely to find a working solution (we are currently in conversation about a potential longer-term service). What might have felt like a battle now feels like a collaborative process. This mirrors the client work – more transparency and healthy relational work means more understanding of the whole reality of an issue, increasing the possibility of sound action moving forwards.

"If we want to have that influence, and we really think our values and approach are important for people in this area and beyond, I feel like you cant do that as a silo, you have to engage with whatever it is you find. Its hard to connect with people with different values, but ultimately it also feels really useful to brush up against it and try to work with it." – **Pod Leader**

This puts particular emphasis on the importance of communication – with only certain people taking part in those systemic conversations, bringing others in to share that understanding is vital. We are getting better at this as we go (several people actively praised the efforts of our co-Director after receiving feedback about this kind of communication). However, this goes beyond just systemic work: it points to our significant organisational growth and how to manage that stretching.



GROWING ORGANISATION

We're delighted that our team has doubled in size over the last three years. This year, we have recruited 5 new Pod Leaders, a new Volunteer and Learning Lead, and a new member of our Administration team. The Learning Programme has expanded as we have increased the number of our Placement Students to 52, whilst our new Community Lead has been settling into the role with 600 hours of delivery. Alongside the 36% increase in one-to-one work and increasing systemic engagement, each piece of our three strands – one-to-one support, the learning programme, and the community – has expanded, which is why we have reached more people with our work than ever before.

The challenge with this growth has been threefold. Firstly, a key term Pod Leaders have used to describe their experience is 'stretched' – the increase in work and competing demands on attention have been, at times, difficult to manage. The autonomy of their roles, whilst a key reason for their satisfaction, also makes key functions difficult when work loads are so high –

for example, the difficulties of finding cover for sick or annual leave, supervising placement students, and making space to think through challenging clients. Managing their Pods has stretched Pod Leaders further than it had previously.

"[Core Teams work has] felt in competition with other client work – that's where I went into burnout and panic mode. I couldn't maintain Floating Support relationships, and supervise students, and show up in the Core Team spaces. I also had too high an expectation, I couldn't do everything I wanted to do and that creates space for a depressive reaction." – **Pod Leader**

Secondly, the growth of the organisation means an inevitably increasing distance between each part. Where three years ago simply being in the office would have been enough to pick up on and contribute to conversations across the organisation, both our size and the pandemic have made this rarer: there is an inevitable slowing down of information sharing. This has been felt by staff, with intermittent feelings of isolation and of work not being seen; similarly, there have been times when staff have felt distant from decisions happening elsewhere in the organisation.

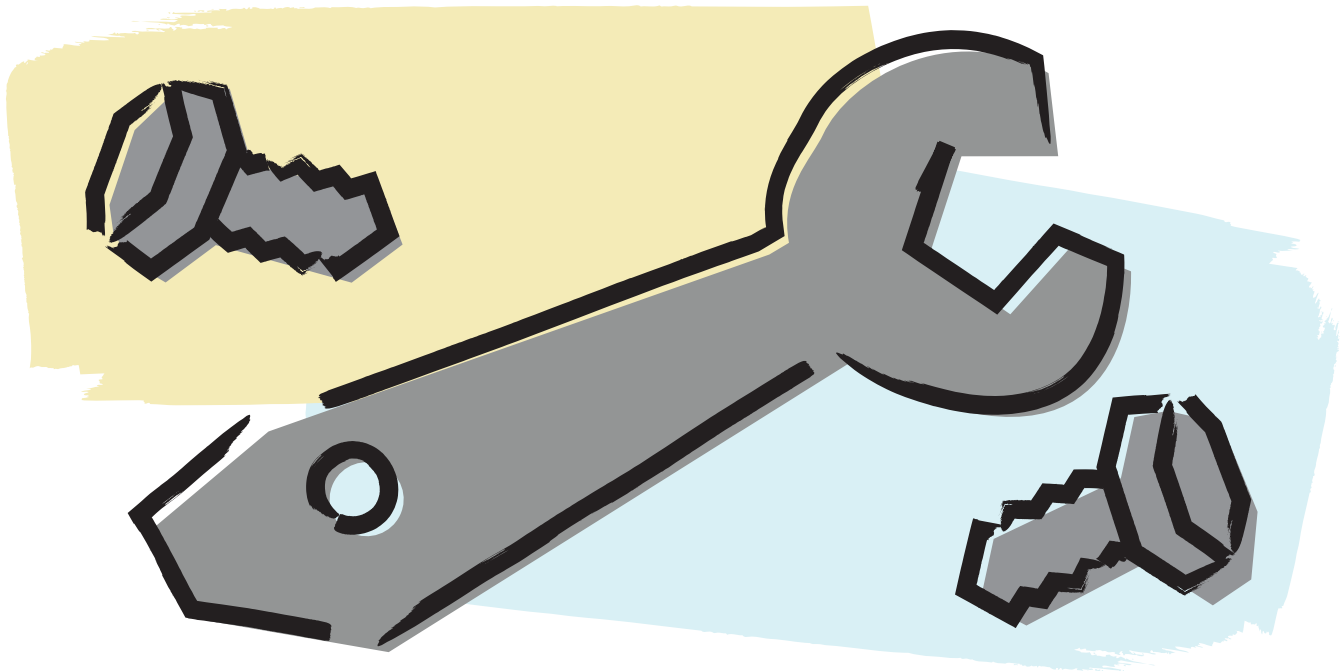
Finally, the direction and decision-making processes of the organisation have also shifted with this growth. Where we previously held to a single goal (scaling Floating Support) led by a single person (our previous CEO), we have now much more emphasis on a more complex goal (systemic influence) across three strands of work, and a more complex, distributed form

of decision-making in both having two co-Directors and, more fundamentally, trying to make more collective decisions. Again, there were tensions within some of these processes.

"It's conflicting actually: sometimes decisions are top-down and we are in a hierarchical work environment, yet there's also a lot of encouragement of involvement in decisions, and I definitely see that tension playing out.... there isn't power in a traditional way and some people find that difficult because they want more structure, or they don't know if their voice makes a difference...I think we have learnt and increased transparency around governance and what intentions and processes have been made to make decisions." – **Pod Leader**

However, the core tenets of the culture nurtured have not changed. For all of the challenges, the sense across staff was an appreciation of the capacity to have these conversations openly (even in the context of public reports), alongside a sense of – slowly – moving to a different place. Any struggles or tension points were open and took place in a context of transparency, care, and genuine affection for both the organisational approach and the individuals within it. As such, we have developed – and continue to develop – various kinds of solutions to these challenges.

"When [a friend] asked if I was looking for another job – I was horrified! The main reason is the way we work... I've learnt a lot, and I really like my colleagues – I have a lot of fun with great people. And I love doing the client work."



STRUCTURAL SOLUTIONS

Pod restructuring

The simplest solution to Pod Leaders being stretched was recruiting five new Pod Leaders. Simultaneously, we have changed how our Pods are set-up, expanding Pods to include one Pod Leader and one Pod Trainee. This has several key benefits:

- Working together to make annual leave and sick cover easier
- Sharing thinking around client work to support freshness and experimentation
- Increasing sense of client connection to a team, rather than to an individual
- Sharing supervision of students and volunteers
- Creating more variety of influence for Pod Trainees

We are in the early phase of experimentation with this, but initial insight is promising – Pod Leaders are feeling some relief from that extra person to hold the work and the freshness they have brought to client visits; Pod Trainees are

taking learning from both Pod Leaders and their learning spaces, and starting to build a better understanding of how the Pod operates; and logistics have become more manageable.

The Learning Programme

By looking into what was causing Pod Leader stress, our new Volunteer and Learning Lead found several opportunities for volunteers and placement students to step-in. In particular, involving students in aspects of admin and evaluation means they can make several calls in a day that might take Pod Leaders weeks to do. We have also been trusting students to work with short-term clients on specific, targeted pieces of work. Not only has feedback from clients been strong, but students' own experience has also positively effected: they feel trusted, feel listened to and respected, and feel like the learning is rich and continuous.

"She's gorgeous, so warm and charming. It's like having a friend who helps." – **Marsha, Floating Support Client (talking about a student)**

"I feel part of the Likewise community and really part of the collective which I haven't had before. I've never been in any situation where I've felt like an equal, but I feel that here... being able to say I don't think this works well, stuff like that – having that mutual respect is something I really appreciate at Likewise." – **Bryony, Placement Student**

To support this moving forwards, the learning placement has been further restructured for next year, with students coming in cohorts to align group learning and take some of the burden off Pod Leaders. With our community centre re-opening, it also means that – as in pre-pandemic times – initial learning can occur in the community space, equipping students with some of the key skills to hit the ground running in one-to-one work. Finally the aforementioned re-design to support more student responsibility and involvement next year not only gives more opportunities to placement students, but also frees up more space for Pod Leaders.

Support workers

A short-term response to our one-to-one demand was to recruit temporary support workers for short-term work. We were able to employ several previous placement students, and made connections with a psychotherapy school to recruit others who would be aligned with our values.

We received strong feedback from clients on each of our support workers. We were also able to make use of particular skills and insights of a diverse cohort, such as language skills (eg. having a Farsi speaker) and therapeutic perspectives, whilst providing opportunities for our volunteer alumni to get paid experience in the field (several of whom have used the opportunity to move onto more support work roles both internally and elsewhere).

The challenges of this were largely in it's short-term nature – some clients were frustrated to be moved on to another worker when someone's contract finished. There was also a challenge with staff who were not as embedded in the Likewise way of working – a few issues emerged around power dynamics and service clarity. However, we took these on board and adapted the induction process as we went. Ideally, we'd like to ensure that we can plan well enough to not need as many support workers moving forwards – but given the unpredictability of the sector and the world, we are now better prepared to do this if we need to.

"Francine's very capable; she knows what to say and to do with me. She's been better than most therapists – she's lovely, she's polite, and she really listens to me... my condition has improved since we started working together." – **Jason, Support and Connect client , talking about a Support Worker**

CULTURAL SOLUTIONS – WE ALL HAVE NEEDS

Another solution to this organisational and personal stretch revolved around a value we have developed this year: the notion that we *all have needs, and we all have something to offer*. In this section, we explore how this has played out across all three strands of our work and supported us to provide more mutuality with clients and better support to staff and volunteers.

How mutual?

Thinking about emotional capacity in the organisation brought us to the challenge of working with particular clients. Every Pod Leader had one or two clients in their Pod who they cared deeply about, and who also caused them a lot of stress and concern. Sometimes

the sheer complexity of a person's situation can create exhaustion; at other times, trying to apply acceptance and care to antagonism, blame, personal attacks, and racist or intolerant beliefs required significant emotional labour.

"One of the tiring things has been holding persistent difficult spaces with a few clients. Having to consistently set boundaries with a client over a year wears you down a bit." – **Gordon, Pod Leader**

The consistency of this feeling raised an interesting question: could we be doing more to better recognise the needs and vulnerabilities of our staff in the work? Might this enable less emotional exhaustion?

This became particularly acute as our organisational diversity has slowly increased. When white staff encounter racism, they challenge those beliefs whilst accepting the person behind them, recognising that they emerge from history, from fear, and from illness. What Likewise has not done until recently is explicitly recognise how much harder this is for people of colour – there is an unequal distribution of emotional burden for people whose identity characteristics are socially discriminated against. The urgency of this question is another marker for a reconsideration of boundaries in the work.

Of course, the other side of this is that many people we work with have had a lot of power taken away from them, and any difficult behaviours are often means of enacting power in what might otherwise be powerless situations (Tew 2006)¹. We need to hold both of these truths together to find a means of protecting our staff and volunteers and empowering our clients.

As an organisation inspired by Paulo Freire's theories of power², returning to him offers a useful reflection. He sees action and empowerment as having their heart in dialogue, and dialogue only possible with 'mutual respect and care' between participants. He warns of the risk of those trying to help slipping into the role of 'oppressor' when this mutuality is not established – even through seeming kindness, a lack of genuine mutuality can undermine the agency and status of an individual by effectively seeing them as 'less-than.'

"To simply think about the people, as the dominators do, without any self-giving in that thought, to fail to think with the people, is a sure way to cease being revolutionary leaders." – **Paulo Freire**

When we draw this back to our work, we ask ourselves – are we being as mutual as we thought we were? If we neglect the 'self-giving' needed to protect staff and volunteers as we would clients, are we withholding the empowering trust in the people we support?

Our thinking around this question has been helped by the community development this year, and in particular the awareness that we all have needs, and we all have something to offer. This suggests that in our desire to prioritise client agency and choice we are potentially undermining mutuality by not naming or recognising our own needs. Greater recognition of staff and volunteer needs in those relationships may serve as a means to create more genuine mutuality and, in turn, reduce some of the emotional labour of more difficult work.

Case study

ANITA, PLACEMENT STUDENT

Early in her placement, Anita began work with a difficult client who held a lot of intolerant beliefs and could get quite angry at staff.

"Being in the visit when he's swearing at me, insulting me, being aggressive, having to keep my own temper and not lose control, having to think of it in a Likewise way, the values – that was hard for me in those visits. The main thing I wanted to do was leave... not having a staff member in there felt a bit uncomfortable, and we didn't feel comfortable to set a boundary or step out."

After this escalated, efforts to support Anita stepped up. Initially having the space to talk and reflect on this was helpful, but limited:

"Every time I would talk about it with someone they would say 'I am so sorry, that sounds tough' – hearing that would get on my nerves because I still had to go on the visit! It felt like the client was being prioritised over me even though it was affecting me quite a lot."

An initial plan was to remove Anita from the visits. However, on reflection it was felt important to offer Anita choice in that decision. Anita chose to stay.

"When I'm not choosing to be in a visit and being, to a certain degree, abused, it felt shit. I felt stuck. I was kind of told how to handle it based on ideas from other staff members, but I'm the one who had to be on the receiving end of it. But if what happens in a visit is a result of ideas you had then that makes more sense, especially because I am the one implementing them. It felt better."

Anita conceptualised the visits and this experience with remarkable empathy, and was ultimately highly valued her time with Likewise:

"I'm really glad I chose Likewise. I can see the change from the beginning to the end, being more confident, gaining listening skills, I have achieved what I wanted to achieve – it's been really rewarding."

There was important learning for Likewise in this:

- We have reinforced the importance and expectation of students drawing boundaries and stepping out of visits if clients are being abusive, making it an expectation that needs to be followed
- We have built more student involvement in decision-making processes in the learning programme next year and within client work more generally.
- It has helped us reflect on more mutual ways of working in certain cases. This includes recognising staff and student vulnerabilities and bringing more people into decision making to enhance agency. We hope this will benefit students, staff, community members and clients.



"I've been finding more recently that expressing my feelings is really useful – I used to feel it would be manipulative to say 'I'm annoyed at this' or 'this is confusing.' In this case, Tony had an idea of exactly how I should organise this massive ream of papers and would get quite emotional and frustrated if I did it wrong. Before I might have persevered, apologised for upsetting him, tried to do it his way. But this time I named the difficulty I was having, that I couldn't see his vision, and that I couldn't do it how he wanted. We landed on him looking away as I did it in the way that he couldn't cope with seeing. It was actually funny, we had a laugh about it, and he ended up doing more himself." – Pod Leader

This example points to a slight shift in which we take more seriously our own feelings and needs in a way that creates more mutuality and – in this case – more agency on behalf of the person we are supporting.

In the Learning Programme too, we have re-emphasised student needs and the importance of self-care and boundaries, encouraging students to

recognise, articulate, and reach out when they feel they are in precarious or difficult situations. It is not that this support was not in place before, but that there is a shift to doing more to recognise that vital element of mutuality.

"There has been a lot of emphasis on self-care, reflection and naming things such as not carrying heavy aspects of client work home. Not in the sense that it shouldn't happen but in the sense that you should face it, as of course being affected by client work is natural and it's more about what you do to take care of yourself and acknowledge these feelings – that is what makes a difference. Having a 1-2-1 space to do this with your supervisor as well as a more structured group space in Action Learning gives you loads of room to sort of feel around and figure out where things are coming from without trying to rush it out of your system." – Placement Student

This shift is beginning to seep into each strand of the work, and we are curious to see how it plays out in the year ahead.

References

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- 2 Freire, P. (2000). *Pedagogy of the oppressed*. New York :Continuum

Conclusion

Where last year we made the decision to take up the challenge of more direct systemic influence, this year we have been finding our way in that world. We have been going through something of an adolescence: getting used to a new way of being as we grow slightly awkwardly, coming to terms with how we have changed, bumping into a few walls, experimenting with a few values, and feeling the pains of the stretching.

However, despite these changes the core is remarkably similar – the culture is holding, and the data all points to the same experience we have been delivering for years: flexible, kind, thoughtful, human. The outcomes we have supported our community and our clients to achieve remain meaningful and often vital. Staff learning continues, and placement student learning builds. Our community slowly grows, demonstrating ways of working that can inspire the whole organisation. Staff and volunteers remain invested in Likewise because they see that it cares, that it provides a rich learning experience, and that – most of the time – it works.

Alongside these are new outcomes, too: shifts in conversations with clinical services, new partnerships, markers of influence. These are not always as tangible, but point to a degree of success in creating change not only in a bubble, but for a wider system.

These do not let us off the hook – in this new territory, there is plenty of room for improvement and plenty of challenge to be wary of. The emotional labour of systems working, the capacity of our staff, the experience of clients in new services, the development of more student responsibility and how that plays out with the people we support will all need to be monitored and developed. Working culture will also need ongoing tending: we need to make sure the practices that bring our values to life (our honesty, our willingness to challenge, our ability to be ourselves at work, our positive mistake culture, and our reflections on power) remain meaningful and impact the work we do. We remain ambitious whilst recognising the risks of the changes we are navigating.



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