# Neighbourhood Collaboratives in Wiltshire



## How were Neighbourhood Collaboratives conceived?

Structure, systems, process and governance

- 1. Nailing the Structure learn from other 'saplings' and spend time on 2. Local decision making is key – close the gap between those affected and 3. Governi Partnership Working and movement for change, including wider and des automobile of the state of th

  - and des Alliance working (housing, education, environment, leisure etc...) 4. Use inte 1. Identify what / who already exists in terms of data, needs, plans, organisation or a translation of the second of Use data and co-develop with the community – be honest, build trust and seek that 'partners' are there to meet need, not represent organisations Taka and co-develop with the community - be nonest, "together we will...", "you will...", "together we will..."
  - or the land including behaviours, values and accountability for the tear about the story they tell, build resilience
  - Staff and Resources, integration and behaviour enificant, and resources must be 1. Community-led vision and response to what the community needs
  - 2. Identify and establish expectations of anchor
  - support sustainable tea Community voice, comms and engagement
- 4. Leaders will enable and s
- Value what matters to staff ¿
- 1. Listen to communities and correct insights with the data and 1. Listen to communities and people livin 2. Understand the strengths and assets of the voluntary community analysis and people livin 2.
  - sector partners and communities and champion them 3. Enable and invest in local change that makes a difference
  - 4. Support teams, organisations and services in 'trying'. It is OK to fail.
  - 5. Make engagement and talking with colleagues and people working
  - in the neighbourhood the first thing we do, not the last.

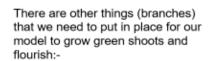
Wiltshire Alliance wanted to think through the opportunities of working in an ICS – how can we make a difference together? – Alliance in action in our neighbourhoods

#### Our Growing Neighbourhood Model

There are some things that are core to the support of our neighbourhood model:-

- Data and information BSW population health tool and local intelligence and systems
- Working in a population health focussed way
- Integrated working between teams and organisations
- Neighbourhood (PCN) level
- Community involvement
- Longer term view months and years
- Inclusive partnership
- Structured, with a process and allocated time and resource
- Connected to other 'Burgers' to learn and share.

These are the strong foundation on which we will grow our model and expand it.



- Staff and Resources, integration and behaviour
- Community voice, comms and engagement
- Partnership working and movement for change, including wider Alliance working (housing, education, environment, leisure etc...)
- Structure, systems, process, governance

These are the things we spent some time talking about in our session.

The Neighbourhood Collaboratives model was formally launched in December 2022

### What are Neighbourhood Collaboratives?





## **Collaboration** across Wiltshire

At fully maturity, will connect health, social care, VCSE, public services and community groups across Wiltshire in broad and inclusive partnership.

Single group to learn, share, support and drive progress – learning from national examples.

## Collaboration in 'Neighbourhoods'

Based on PCN footprints, these Collaboratives will share intelligence, expertise and resources to enable local solutions to local need, tackle health inequalities.

## Led by local approach

Community views and needs will drive the work done in each Collaborative – requires new ways of engagement



## **Prevention and Inequality Focused**

Clear aim to 'left shift' and take a prevention approach across whole pathways, promoting health and wellbeing across wider determinants of health as well as addressing unwarranted variation.

## Value existing strengths

Avoid duplication, promote existing strengths and connect work together. Each one is / will be structured differently according to what works for them.



#### **Sustainable**

Grown from the ground up, there is no 'new' funding – it's about working differently within the same budgets and resources.

#### **Enabled by partners**

Supported by a launch programme, tools and training, partners offer advice, support and guidance

## Fuller & Integrated Neighbourhood Teams (Collaboratives)

The stocktake includes a compelling new vision for integration that centres on three essential offers:

- Streamlining access to care and advice for people who get ill but only use health services infrequently, providing them with
  much more choice about how they access care and ensuring care is always available in their community when they need it.
- Providing more proactive, personalised care with support from a multidisciplinary team of professionals to people with more complex needs.
- Helping people to stay well for longer as part of a more ambitious and joined up approach to prevention.

Building fully integrated teams in each neighbourhood is critical to making these essential offers a reality. No single organisation or ICB can make this happen without radical cultural change in working arrangements in neighbourhoods.

The 'team of teams' approach, evolving from primary care networks, needs to be rooted in a shared ownership of local wellbeing across all local public servants, including primary care in its widest sense, community care, adult and children's social care, mental health, acute, housing, the police, public and environmental health and, importantly, local grassroots community and voluntary organisations.

A different kind of leadership that provides an environment of psychological safety where it is ok to try new things and for teams to innovate to find new ways to support individuals, their families and communities. Top-down hierarchical leadership of neighbourhood co-ordination risks alienating the frontline workforce.

A shift to a preventative wellbeing model with a clear focus on sharing data, having a joined-up action plan and focusing on inequalities.

https://www.nhsconfed.org/articles/making-fuller-stocktake-real-communities

### Neighbourhood Collaboratives

Most work will be

BSW Programmes, Regional and National Forums



#### Wiltshire Neighbourhood Collaborative

Learning and Sharing across and beyond Wiltshire and between Collaboratives, Focussing on Population Health and Wellbeing Gaps through prevention and strengths-based approach. Links with Health and Wellbeing Board



Including but not limited to;
Community voices / Social
Care / ICB / Community
Services / Education / DWP
/ VCSE / Mental Health /
Children's Services / Fire /
Police and many more

community driven

– some change

Wiltshire -wide

led Change

Links with other groups / programmes

Health

Project(s)

Integrated

"Neighbourhood
Collaboratives are where
our collective energy,
capability and capacity is
breaking new ground in
improving population
health and wellbeing."

#### **ENABLERS**

#### Readiness Review

Helps grow a baseline understanding of what's working well and what areas would benefit from more support.

#### Launch Programme

Brings everyone together – puts the foundations in place for sustainable, successful relationships and outcomes.

#### Toolkit

Already available. Plans to develop further and integrate with other programmes. Will include different ways to access knowledge and training including videos and bite size learning. Supports launch programme.

#### Co-Production Training

Offered via Academy and Wessex Community Action

#### SIX CORE PRINCIPLES SUPPORT THE COLLABORATIVES

- 1. Partnership working building relationships, agreeing vision and structure.
- 2. Co-production community engagement and participation in telling us what to improve and how to improve it.
- 3. Whole community approach to addressing equality gaps in health and wellbeing taking a population health and continuous improvement approach with a focus on prevention
- 4. Integration to create the community led vision using data, insight and intelligence in new ways to identify focus areas, working through prevention lens.
- 5. Enabling volunteers and staff to thrive what are they telling us, what's their experience and how can we work together in more integrated ways?
- 6. Creating a movement for change establishing your collaboration for a sustainable future.

#### What have we done so far?



Developed the Readiness Review, Launch Programme and toolkit



Established the Steering Group – meeting quarterly and taking a conference approach



Learned from a Focus Site and Pathfinder group – added to learning throughout the work



Successfully built a broad partnership who continue to participate



Bid for and won £100k to develop and test engagement model



Added a 'connecting with our communities' element to the work, bringing together insights



Integrated the Collaboratives into the Joint Local Health and Wellbeing Strategy and ICS Strategy Implementation plan



Established the Steering Group – meeting quarterly and taking a conference approach



Established a collaboration platform and comms approach to share information



Leading the development of a BSW-wide Blueprint, supporting new ICBC provider to build on success

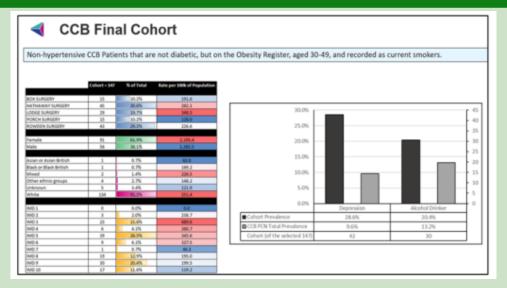


Sharing learning across the BSW system, connected with local and national programmes

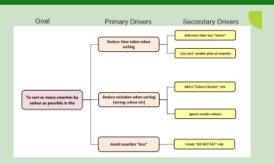


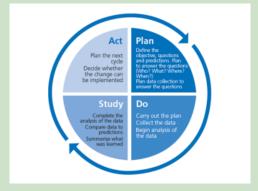
Plans for all but PCN areas – challenges with distributive leadership and support.

### What progress are we making?









#### Structural Dynamics

Structural Dynamics enables individuals, teams and systems to shed light on patterns of interactions Identifies unhelpful patterns as a starting point for change

Helps us to avoid causing harm; so long as dysfunctional patterns remain unnoticed, they can destabilise our best intentions when we communicate together

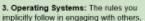
The model helps people to talk, think and problem-solve together more effectively



 Action Propensities; the vocal act you take most commonly interacting with others.













Communication Domains: the focus of our attention and kinds of topics, issues and content to which you naturally gravitate.



4. Childhood Story







Demonstrating partnership, equality and activity impact

### What progress are we making?



Chippenham, Corsham, Box – launched. Prevention of Hypertension.



**Devizes** – led by VCSE. Readiness Reviewed. Prevention of self harm in young people



Melksham and BoA – launched and engaged. Prevention of first fall



**Trowbridge** – restarting. New staff in post. Focus -Prevention of Housebound



**Warminster** – pre-readiness (July). **Westbury**- initial stages of dialogue to explore readiness



Salisbury Trinity -. Connected to Livestock market. Possible 'Super Collab' approach.



**Calne** - no dialogue since first discussions. Aiming to re-start.



**East Kennet** – no current dialogue



**Sarum West** – pre-readiness review (Sept). PCN well engaged.



**Sarum North** - initial stages of dialogue to explore readiness



Salisbury Cathedral – Connected to Livestock market. Possible 'Super Collab' approach.



Salisbury Plain –
participating in the Livestock
Pilot. Prevention of Farmer
(manual worker) inequality

Demonstrating partnership, equality and activity impact

### Case Study; Well Farmers for Wiltshire – Salisbury Pilot



#### Why are we working with Farmers?



Farmers and rural communities can't / don't access traditional services.



Significant increase in mental health needs and suicide. Isolation and financial issues.



Farmers can't leave livestock to attend appointments, culture of mistrust



Culture of resilience, meaning people 'leave it far too late' to seek help.

What have we done as a Collaborative?



Led by local voices from within the community – Chaplaincy Service at the market was key.



**Well Farmers** for Wiltshire



Visited the market to understand things for ourselves – build the case for collaboration.



Built broad-based partnership Collaborative; stronger as a group



Reached out to other VCSE organisations and national schemes to learn from them



Sepsis, cancer, dental care, diabetes, hypertension, high cholesterol, skin issues, bereavement, carer support, eye sight, joint pain, injuries etc... substance misuse and safeguarding concerns are common.





Listened, listened, listened to people at the market. They're telling us what they want and need and making space available – Auctioneers are key partners. Health Inequalities Funding is essential to this work!



Core20Plus5 group (manual workers and some in Core20 group) – we know outcomes are poorer



Developed an offer to test and pilot over the next 3 months using Vaccine Accelerator funding.

### Well Farmers for Wiltshire – Salisbury Pilot









**IHS Foundation Trust** 



















for Wiltshire

Wiltshire Collaborative

Cancer – early signs and screening

#### Financial and other advice and support

- Health screen and checks (high blood pressure etc..)
- Optometry
- Skin care advice and support
- Managing infections and signs of Sepsis

Any more!!



- Fully funded bank farming support
- Fully funded counselling
- Mental health advice in market
- Physiotherapy advice and guidance
- Vaccines advice and vaccines
- Nursing
- Community pharmacy
- Dental health

### Well Farmers for Wiltshire – Salisbury Pilot





"What do you know about feet? because I can't feel mine, or a couple of my fingers"

- Plan to test and try things July to end Sept
- Agile adapt and change
- Listen and evaluate
- Understand future needs
- Share insights
- Build sustainable Collaborative network for Salisbury

#### Do you have any questions?

Who is part of the pilot? – We're working together as a Collaborative group of NHS, Council and Charity sector organisations.

How often will people be here? – Every Tuesday! You'll see some of the same faces, but there might be new ones along the way. We know this is your space and we'll try hard not to get in the way. Please say hello.

How long are you here for? – Each week from about 9am to 12.30pm, but we want to find out if that's the right time, so we might change it if you tell us we need to.

We only have a small amount of money to support this pilot (test), but we'll be here throughout the summer into September. At the end of that time, hopefully you will have told us whether what we've tried was useful and what you want so we can plan out what might work after that.

Can I give you feedback? – Absolutely! We welcome your views and thoughts; we NEED you to tell us how to make this work for you. There have been lots of people visiting the market and speaking to some of you so we can plan the pilot, now we need you to tell us how to make it better and more useful as we do it. There will be more people working alongside us talking to you about all this, but please do speak to any of the team, they will take your feedback and make sure we use it.

Why are you here? – We know that people working on and around farms are super resilient, but we also know it's a struggle to juggle everything and look after your health and wellbeing. So, following an invite, we're coming along to see if we can make that easier.

What are you doing? – Over the summer, we are trialing some differing things to find out from you what you want, need and like. We're hoping to make things available to you like:

- · help for joint and back pain
- dentistry
- foot care
- Vaccinations for things like flu, shingles and others
- checks for high blood pressure which can lead to heart attacks and strokes
- help and advice on looking after your skin
- how to spot early signs on cancer
- people you can talk to if you or someone you know might be struggling a bit emotionally
- Advice from groups who can give you practical support at the farm, because we know wellbeing is much more than just being healthy

How will I know what's where? – We're aiming each week to give you a schedule of what's coming and where it will be, it might change if your feedback tells us we need to do something differently.



### Chippenham, Corsham and Box



**Inspiring Our** Community Towards a Brighter Healthier **Future Together** 

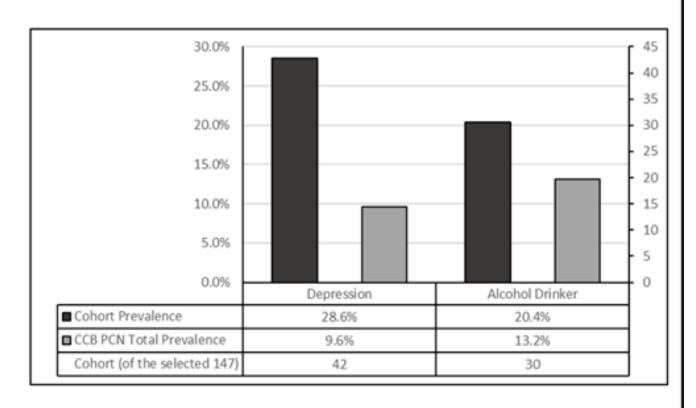




#### **CCB Final Cohort**

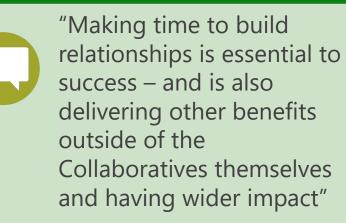
Non-hypertensive CCB Patients that are not diabetic, but on the Obesity Register, aged 30-49, and recorded as current smokers.

	Cohort = 147	% of Total	Rate per 100k of Population
	_		
BOX SURGERY	15	10.2%	191.6
HATHAWAY SURGERY	45	30.6%	282.1
LODGE SURGERY	29	19.7%	348.5
PORCH SURGERY	15	10.2%	128.0
ROWDEN SURGERY	43	29.3%	226.6
Female	91	61.9%	2,195.4
Male	56	38.1%	1,365.5
Asian or Asian British	1	0.7%	82.0
Black or Black British	1	0.7%	169.2
Mixed	2	1.4%	226.5
Other ethnic groups	4	2.7%	148.2
Unknown	5	3.4%	121.9
White	134	91.2%	251.4
IMD 1	0	0.0%	0.0
IMD 2	3	2.0%	238.7
IMD 3	23	15.6%	489.6
IMD 4	6	4.1%	380.7
IMD 5	39	26.5%	345.6
IMD 6	9	6.1%	327.5
IMD 7	1	0.7%	46.3
IMD 8	19	12,9%	195.0
IMD 9	30	20.4%	199.5
IMD 10	17	11.6%	119.2

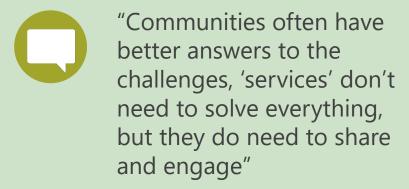


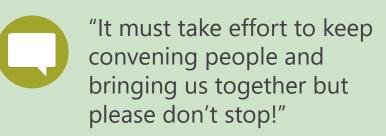
### What do partners think?

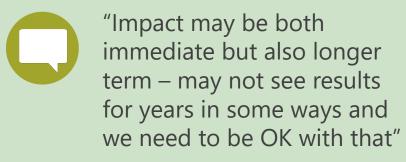
















"Energising and positive – participants feel connected, supported and thankful to be working in a future, prevention focussed and 'holistic' way but...



...it's hard to spend time in this space during exceptional demand pressures (though this way of working will be part of the future solution)"

### What are the challenges?



#### **Shifting the Culture**

- A need for immediate delivery today's targets
- Tolerance for things not addressing 'system priorities'
- Having faith in local solutions to local problems
- Resisting the urge to 'system' everything
- Individual strategies unaligned
- Permission to try and to fail
- Investing today for years time

#### Money, Money, Money'

- Perception that this is 'new' and therefore needs new money
- Partners unwilling to share!
- Anchors not letting go

#### **Engagement**

Difficult to keep everyone informed and feeling they add / receive value

Patient engagement takes 'too long' – need to deliver



## **Capacity and Ability to Participate**

- Operational pressures win
- Skills gap variable
- Huge range of partners and experiences
- Servicing groups across all of Wiltshire
- Funding limitations



## **Commissioning Decisions**

New provider making all the decisions and developments? – paralysis and changing roles.

Partnership is the superpower!

### What are the next steps?



Continue to develop Collaboratives in all PCN areas



Deliver the Livestock Market Pilot and evaluation



Deliver the HIF-funded work, aligned to CORE20Plus5 – testing models of engagement



Support development of a BSW-wide INT Blueprint



Establish evaluation approach and demonstrate impact



Consider approached to broadening partner leadership to expand capacity



Transfer to NHS Futures platform – publicly available without MFA requirements



Further develop Comms strategy to ensure continued awareness and participation



Identify strategies for 'left shifting' funding



Consider role of anchor organisations and their commitment to this model



Refine mechanisms to enable 'fluid partnership' during times of operational pressure or changing priorities



Continue to identify learning and push the boundaries of possibility via the conferences

## **Thank you - Questions?**

WELCOME TO YOUR
NEIGHBOURHOOD COLLABORATIVE



Communities Together Working with those living and working in our local communities to identify needs and deliver change

Improving Health

and Wellbeing

Focusing on

reducing health

and wellbeing

inequalities and

preventing future

health problems



Working As One Our tree represents people, services, charities and community groups growing in partnership and understanding



Inclusive Ensuring everyone has a voice in our community to help find answers to health challenges



Tools to help in all parts of our work Using new tools and techniques to identify problems



and resolve them having built shared competencies



combined resources,

information,

improvement skills

and capabilities in

new ways to

To find out more about a Neighbourhood Collaborative in your area, please contact:

bswicb.neighbourhoodcollabs@nhs.net



### **Well Farmers** for Wiltshire

A Wiltshire Collaborative

