
**Health as a
Social
Movement**

**Vanguard Overview:
Find out more
about the 6 sites
across the country**

**National
Seminar
Series**

RSA

21st century enlightenment

What are 'Vanguards'?

RSA



- Vanguard sites are another name for the NHS' New Care Model sites.
- These were created following the Five Year Forward View (2015) supported by a £200M 'transformation fund' from Government to build the 'future NHS'
- There are 50 Vanguard sites that are testing new structures and approaches that will be form what the NHS looks like in 5 years time (2020)
- There 6 'Health as a Social Movement' vanguard sites across the country that are piloted social models of health that they hope will produce healthier populations

The 6 sites

Greater Manchester Cancer Vanguard

Context: Cancer deaths in GM has 10% higher than av.

Aims: To have 20,000 Cancer Champions in the Greater Manchester area by end of 2018

Royal Free

Context: unhealthy workforce (non-medical)

Aims: To increase health of workforce often overlooked in hospital settings

Stockport Together:

Context: Very interconnected local gov. and third sector

Aims: Small grant 'catalyst funding' to third sector/community groups focused on reducing social isolation, improving arts-based interventions

Wellbeing Erewash

Context: Huge transformation funding to vanguard as whole

Aims: Training community connectors across services – focuses on 'community' and 'personal' resilience

Better Care Together

Context: Large rural area/population

Aims: Working across 3 sites with GP practices to train people in 'community building'

Airedale Care Homes Vanguard

Context: Disconnected care homes

Aims: To make care homes in Airedale and 'community asset' – bridging institutions i.e. schools





**STOCKPORT
TOGETHER**

Health as a Social Movement

Stockport Together, with Oldham and Tameside

Nick Dixon, Lead Practitioner Healthy Communities, Stockport Together
Project Managers, Steve Goslyn and Carey Bamber
February 22nd 2017

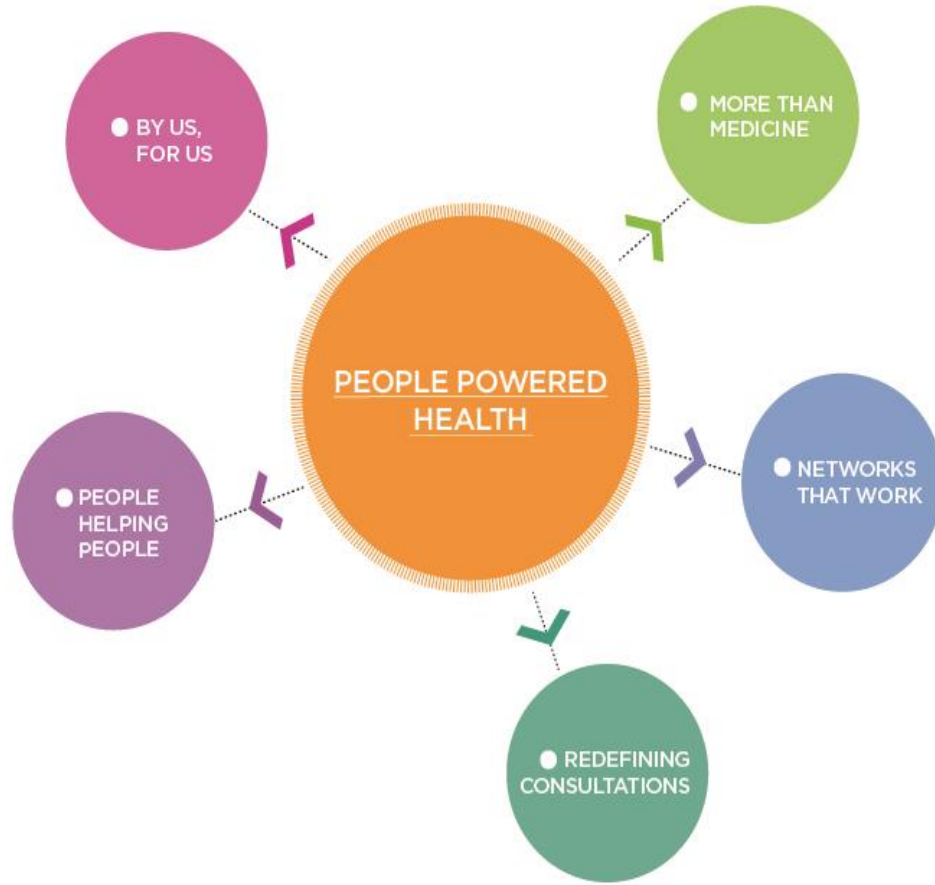


People Powered Commissioning for Social Action in Stockport

October 2016



http://www.stockport-together.co.uk/download_file/109/160



System Level Change in Stockport

What we have learnt in our communities

- Need to shift from service silos to system outcomes, from vertical silos of health and care to horizontal place-based systems
- Culture and behavioural change is needed for transformation- both within services and communities/ citizens
- Neither people nor places are seen as assets, we tend not to leverage in people's capacity and local resources
- Health and care systems determine service delivery in isolation of people and in response to national policy and drivers

Welcomed the NHS E 'Health as a Social Movement' opportunity

Application of Learning

A Stockport 'Call to Action'
Four areas to consider

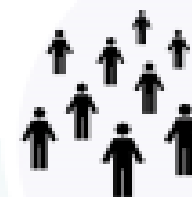


GIVE YOUR WORKFORCE THE
TRAINING AND TOOLS

Shift from 'doing to'
to 'working with'



PROMOTE HEALTH AS A SOCIAL MOVEMENT



DEVELOP PLACE-BASED HEALTH AND
COMMUNITY NETWORKS OF SUPPORT



COMMISSION DIFFERENTLY



Workforce Training and Tools



- Who are your workforce?
- Relationships matter so much
- “Transformational change can only go at the speed of trust”
- “We hired workers but human beings came instead”
- Resistance- understand why
- Single OD Strategy with agreed vision
- Leaders set the culture
- System Translators

Commission differently

- How is the VCSE commissioned?
- Commission for outcomes including social capital
- Alliance Contracting
- Asset based commissioning across age and label
- Creative use of the resources available
- Commitment Devices
- Investment Funds



Place based health and community networks



- Rich resource in the Community and the Voluntary sector
- Work in neighbourhoods - people identify
- Go where the fires are burning
- Use the community hubs which exist- map the assets
- Provide information and advice, signposting, digital hubs, link to the prevention services
- Bridge Place and Health: connect to the New Care Model team

The Liminal Space

Between the 'Life World' and the 'System World', the land and the sea

The world of people and the world of the NHS and care

The great divide- language, behaviours, priorities, custom and practice, relevance

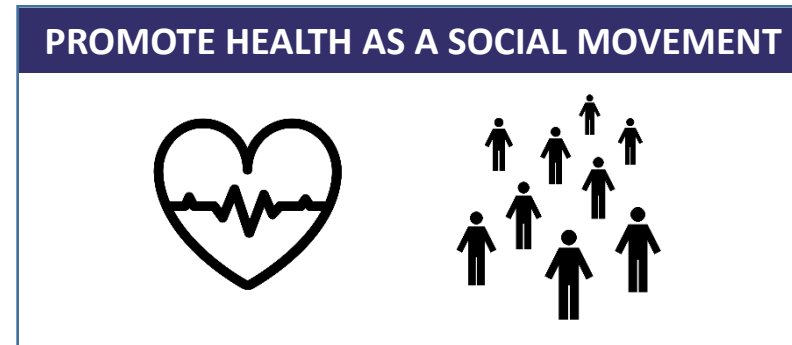
We must bridge the divide, come together on the beach and design together the solutions to the loneliness and distress which is overwhelming the system



Thanks to Altogether Better

Health as a social movement

- Activated patients taking more responsibility
- More aware citizens wanting change
- Community champions and conversations
- Compassion inherent in communities; loneliness-an unnatural disaster
- The VCSE can broker the conversations: “the Council kills it”
- Faith Groups, Businesses, Arts, Housing, Leisure, Fire
- Top down, bottom up AND **outside in change**



Must see beyond established practice, away from the service prism through which we conceive the problem, and admit disruption into the system

Stockport Together – social movement building

- Working out of Stockport and linking across the GM boroughs of Tameside and Stockport (with strategic leadership support)
- Focusing on loneliness and isolation
- Exploring and stimulating Arts and Food movement activity
- Supported by Small Sparks grants facilitated through Action Together

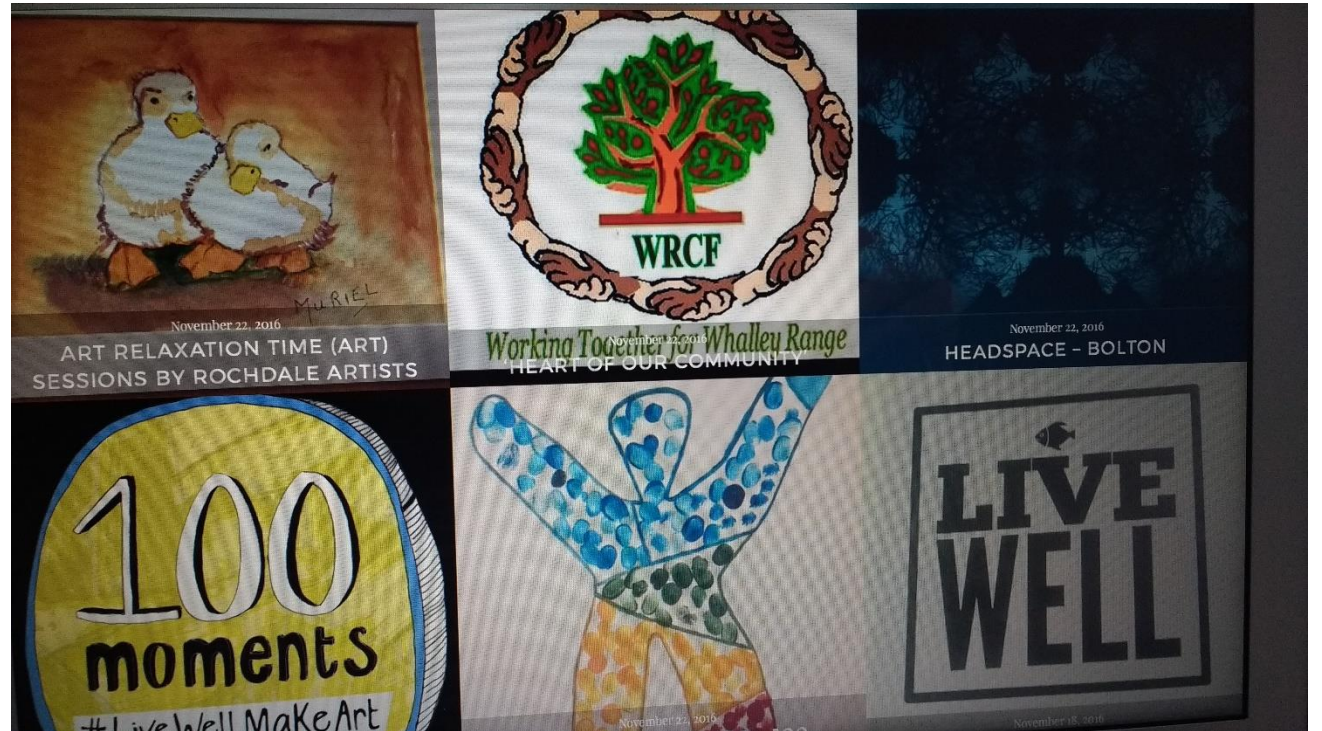
Highlights

Arts

#100Moments

#LiveWellMakeArt

Arts and Wellbeing
movement building
in Greater
Manchester



Food

Local movement building linking local Stockport's interest in food sharing/growing with Altogether Better's health champions work, GP surgeries, community cafe/hub, and the Kindling Trust growing initiatives

**Altogether Better
Working Together
to Create Healthier
People and Communities**

*Bringing citizens and services
together in new conversations*

Small Sparks funds

£60K funding 47 groups to encourage groups and communities to tackle social isolation



Future priorities

- Support and grow local leadership
- Movement/network building
- Capturing learning
- Dissemination and spread

Very great change starts from
very small conversations held
among people who care

Margaret J. Wheatley

Contacts

www.facebook.com/social-movements-in-health-GM

www.socialmovementsinhealthgm.com

[@socmovinhealthgm](#)

stevegoslyn@outlook.com

careybamber@live.com

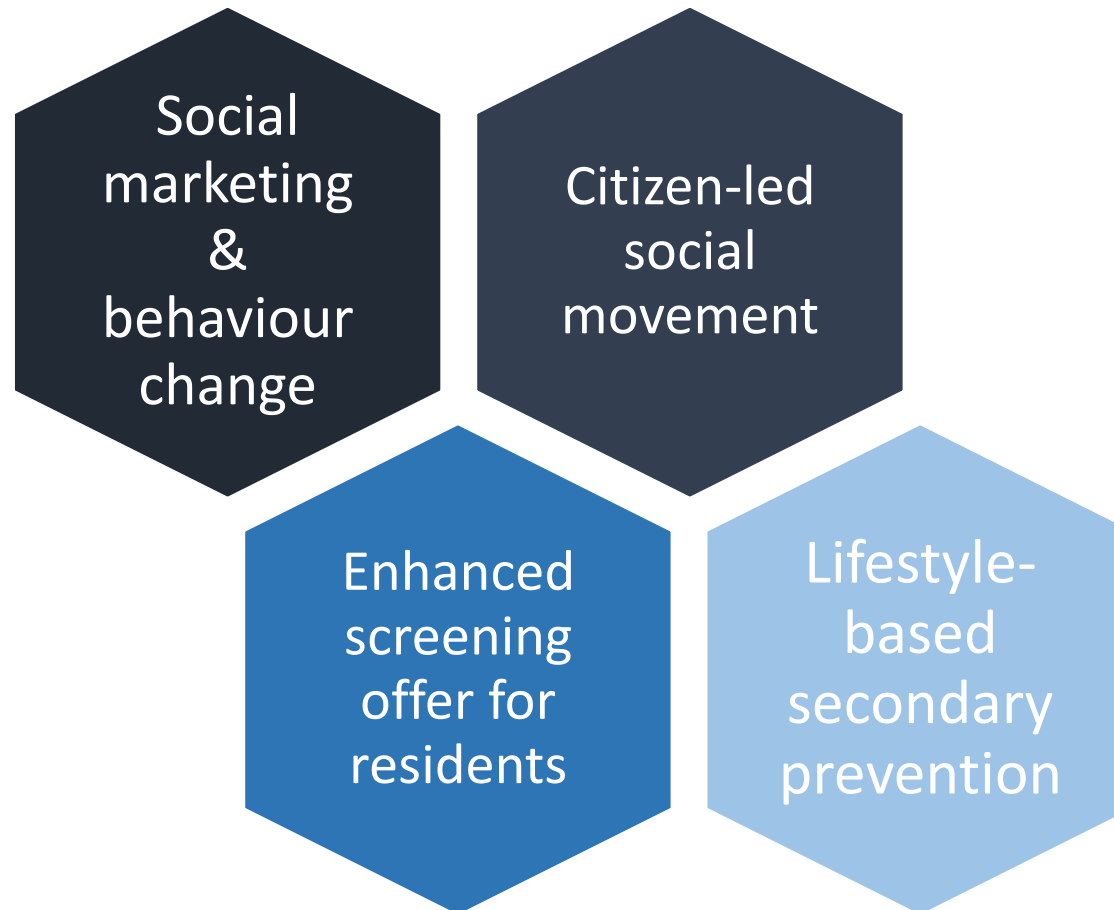
Greater
Manchester
Cancer

Vanguard
Innovation



Prevention workstream of the GM Cancer Vanguard

Prevention workstream



Our Aim

To catalyse and connect a grassroots, citizen-led social movement for cancer prevention by working through the voluntary sector. The two main objectives for this project are:

- To develop a network of 20,000 cancer champions over the course of the three years.
- To explore the use of digital technologies including social media to support the development of a social movement and mass involvement across the entire cancer prevention spectrum that is ultimately self-sustaining.

Our Focus

- Supporting, harnessing and connecting the energy of the voluntary sector and GM citizens which is currently centred on cancer research, treatment and survivorship
- Understanding what motivates people to make lifestyle choices
- Drawing on the intelligence of communities that face health inequality
- Identifying ways to help change happen and scaling up collective action and campaigning
- A fully engaged population – taking ownership and responsibility for their health and wellbeing
- A new relationship between citizen, state and society – at the heart of devolution

Progress and Impact

- 20 social movement champions identified to lead work on growing a social movement.
- Aiming to recruit 5000 cancer champions by August 2017.
- 20 workshops held with GM voluntary sector cancer groups to co-design the social movement
- Over 150 individuals engaged from over 75 organisations including grassroots groups, charities, voluntary sector leaders and system leaders.
- Three expert reference group meetings held with 10 cancer charities and cancer champion leaders to draw on expertise, assess progress, build connections and shape and steer the development of the work
- Using the insight work from other Vanguard projects as a stimulus for discussion and action.
- Mapping of training and learning resources and opportunities for champions including discussion of maximising digital technology options and opportunities.
- Case studies for publicity material developed to support recruitment and programme development.
- Specialist provider working to enable the social movement programme to embed digital approaches as part of the citizen-led campaigning activity for cancer prevention.



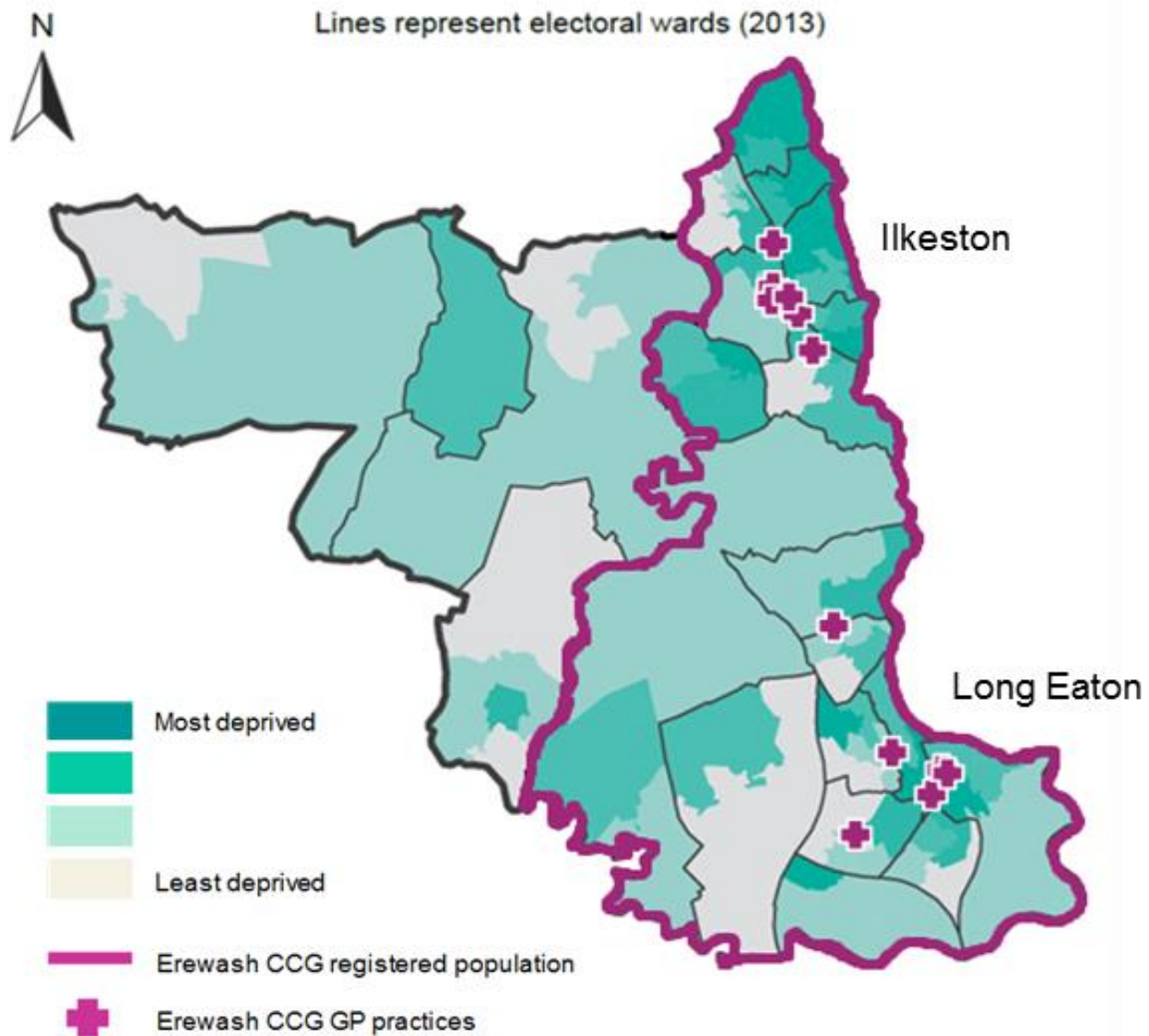


Wellbeing Erewash

Your Life Your Way

Health as a Social Movement

Erewash- Derbyshire





Wellbeing Erewash

Your Life Your Way

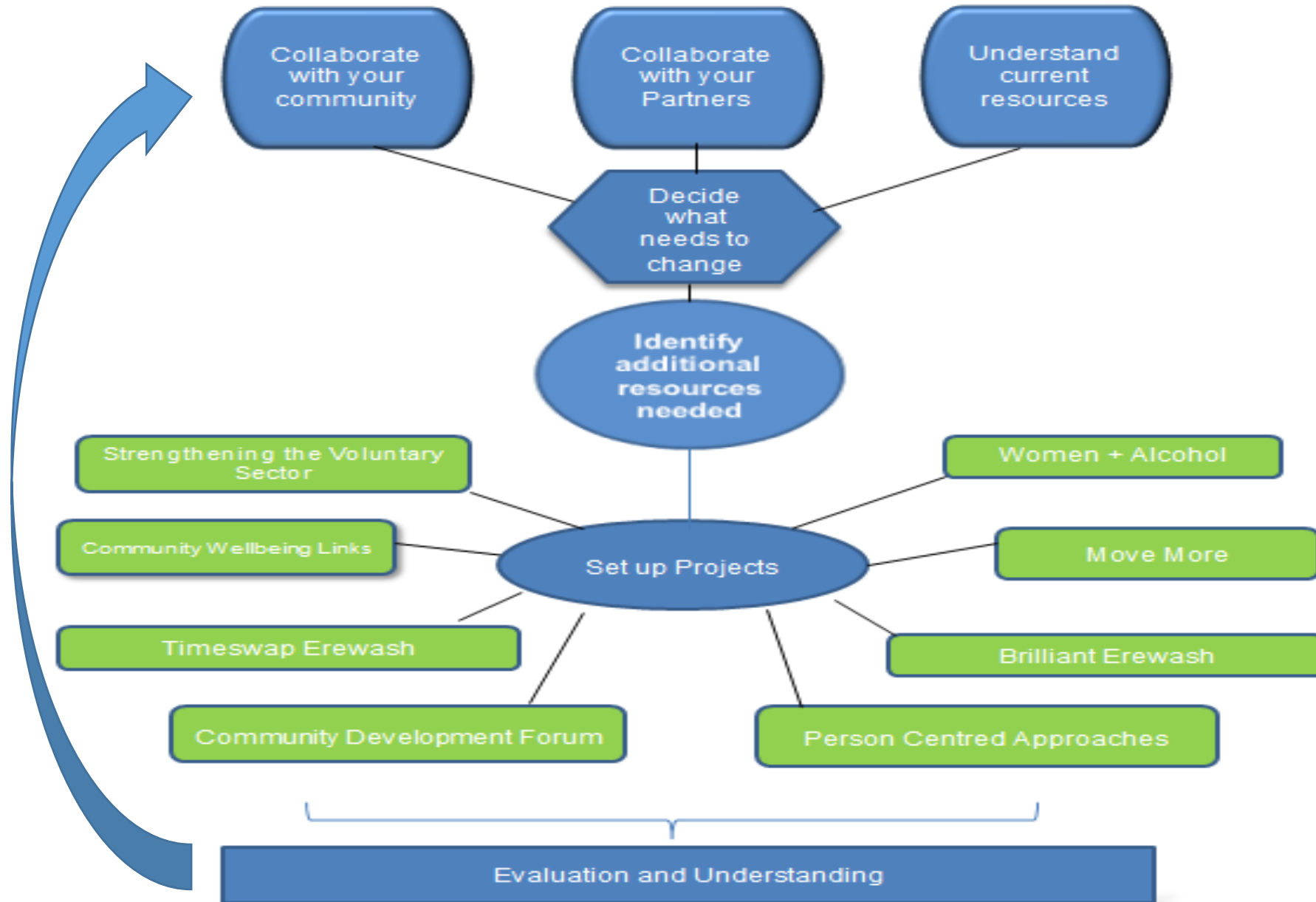
- **Our vision** is for thriving communities within Erewash, where you feel confident and supported to choose a healthier lifestyle, stay well, and know how to get help and support when you need it
- **Our mission** is to develop Thriving, Capable, and Healthier Communities



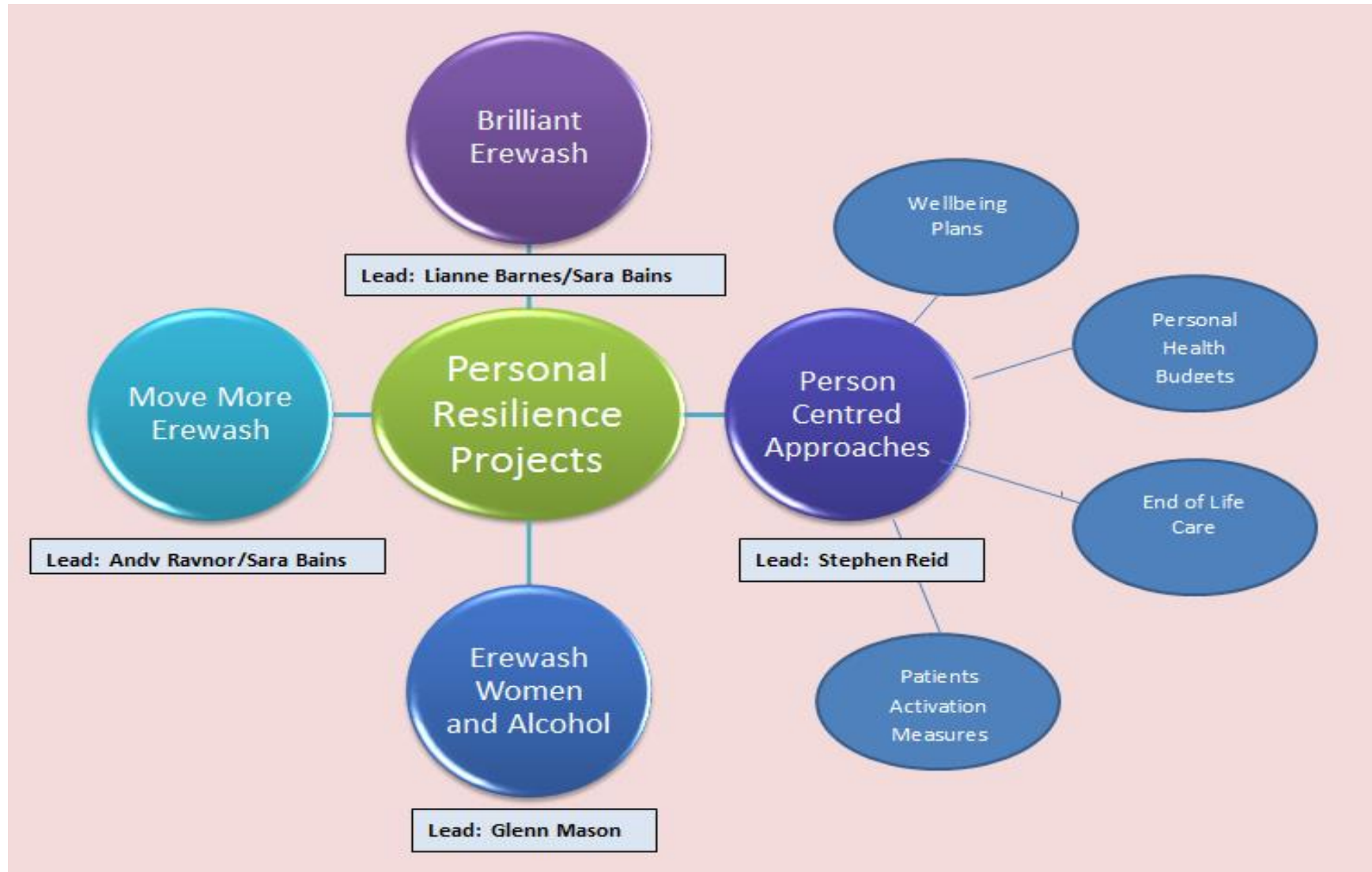
Wellbeing Erewash
Your Life Your Way

- **Personal Resilience**
- **Community Resilience**
- **Integrated Primary and Community Services**

Community & Personal Resilience



Staying Well



Staying Well Together



Health as a Social Movement

- **Brilliant Erewash- Asset based** Resilience programme for young people, teachers and parents
- **Pride in Petersham** -Increasing physical activity and connectivity in communities of Erewash
- **Erewash Community Connectors**—Use of peer support in groups and communities
- **Person Centred Approaches**-Changing conversations in services

Key Challenges:

Duplication

Knowing what you don't know!

A deficit focused system



Wellbeing Erewash
Your Life Your Way

Going Forwards:

- Continue to encourage partnership working between health and education
- Help communities to trust in each other and see the assets in themselves
- Help people to have confidence in getting the right help when needed
- Help organisations to be person centred and asset focused



Wellbeing Erewash
Your Life Your Way



Wellbeing Erewash
Your Life Your Way

Contact us on:

Our Website: www.wellbeingerewash.org.uk

By phone: 01159316244

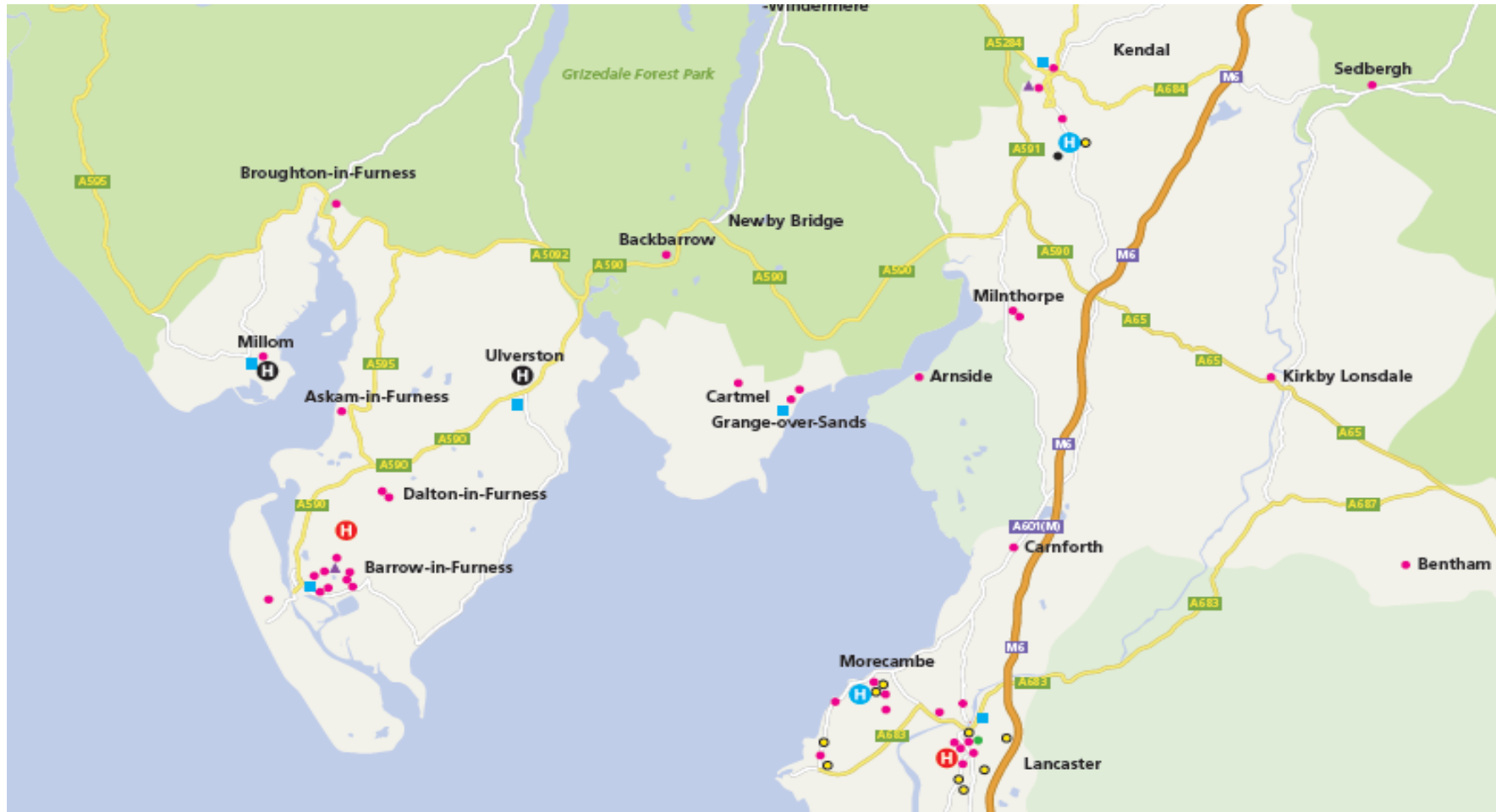
By email: wellbeing.erewash@erewashccg.nhs.uk

On Twitter: #WellErewash



Better Care Together

Health as a Social Movement



Barrow and Morecambe – miles apart, with striking similarities

Three Projects – learning from each other

Barrow in Furness	Whalney Island, Barrow	Morecambe
<p>The Animator Project</p> <ul style="list-style-type: none"> • Animators – not the usual suspects • Acting as a bridge between the NHS and communities at animation cafes` • GP Surgery staff reflecting on their current practice and how they can change their behaviour to work with patients • Working in partnership with the Third Sector 	<p>Furness Wellness Days</p> <ul style="list-style-type: none"> • A programme of wellbeing activities built, led and delivered by community members: exercise, mindfulness, footcare, bowling etc. to reduce social isolation, improve health and move from a sickness culture to a wellness culture • Numbers growing by the day – 112 new participants, 9 volunteer trainers! Neighbouring areas looking to adopt the model 	<p>Mobilising third sector providers</p> <ul style="list-style-type: none"> • Working in partnership with the Third Sector and wider: community building training – 35 trained with more sessions planned • Stewardship circle • GP Surgery staff working differently and looking to the Altogether model

What are the opportunities you see as part of the programme?

- Building a valued and effective sustainable network between the NHS and the community so the needs of the community can be more responsively met and the challenges in the NHS can be offset through mobilising community resources
- Learning:
- Being able to compare different projects in different areas with similar demographics – does it mean that what works in one area will work for all?
- What happens when you look to a different relationship with the Third Sector?
- What happens when staff look to a different relationship with the local community?
- What happens when you “let go”?
- Can we prove effect on primary and secondary care usage?
- ...and when there is no more money; did we make it sustainable?

What are the barriers to success?

1. Time – bring people together who already have busy schedules, making space in busy clinical schedules, busy periods such as school holidays when workloads increase and people are not always available
2. Gaining trust: “is this something else that you`ll start and then close when we run out of funding?”
3. Engagement exhaustion and a history of “nothing changed when we did this last time”?
4. Feeling under pressure to prove results in a short period of time
5. Culture and expectation from professionals, politicians and public who are not used to an equitable relationship between partners. All have anxieties that they must deliver results that depend on complex, multifactorial factors and therefore can prefer “quick wins” over wise long term investment building resilient infrastructure which is this projects strength.

How have you approached the barriers?

- ✓ Time: telecoms, virtual working
- ✓ Gaining trust: more transparency about what we are and are not working with
- ✓ Engagement exhaustion: different venues, different approaches, different questions, access to NEF expertise
- ✓ Proving results: celebrating success, however small, however large...and ensuring the big cheeses on board!
- ✓ We need to work with wider partners, e.g. academic institutions, to ensure that the evidence supporting the benefit of the approach we are taking is clear and applied well
- ✓ And we need to start promoting the value of more qualitative evidence to support the work, decisions and direction we are going in.



What help do you need to overcome them?

- Everyone to be honest about what does and doesn't work... "if I had my time again..."
- A recognition that this work is organic and doesn't always align with traditional project management
- Trust – you need people to trust in you, and to trust a project that "lets go" of control
- Minimum paperwork and reporting – this can turn people off, especially "creatives", "implementers" and "paperwork-phobics"
- A title or a project name! This title gives social movements the legitimacy they need
-



...and....

And time...



"Of course we're not there yet! —
it's 127 light years, for pete's sake!"

Thank you

AND THAT IS HOW CHANGE HAPPENS.
ONE GESTURE.
ONE PERSON.
ONE MOMENT AT A TIME.

LIBBY GRAY







Airedale & Partners
Enhanced Health in Care
Homes Vanguard

Airedale Social Movement

Joanne Volpe – Programme Manager

In partnership

**Airedale
and Partners**



Airedale Social Movement



Background

- Living in a care home should not mean you are excluded from your local community. But some care home residents find it hard to get out.
- Airedale Social Movement is bringing people from the local community into care homes and putting care homes at the heart of their community.
- Care homes are community assets, with gardens, kitchens and residents with skills and heritage

Airedale Social Movement

Our Aims:

- Improve the wellbeing and quality of life of people in care homes
- Achieve a cultural shift and think of care homes as an asset in their community

WHAT WE'RE DOING



- We're working with five care homes
- Community conversations
- Where is the community
- Invited people to workshops
- Pushed against ideas
- Exploring informal volunteering models

Putting people at the centre

- One resident would like to learn to use an iPad. **A local school are going to research Apps and bring in their tablets.**
- Another resident used to be a gardener. **We've contacted the community allotment project**
- One resident asked for visitors. **The local photography club are visiting with their old slides and will start to develop their relationship**

BUILDING ON ENERGY

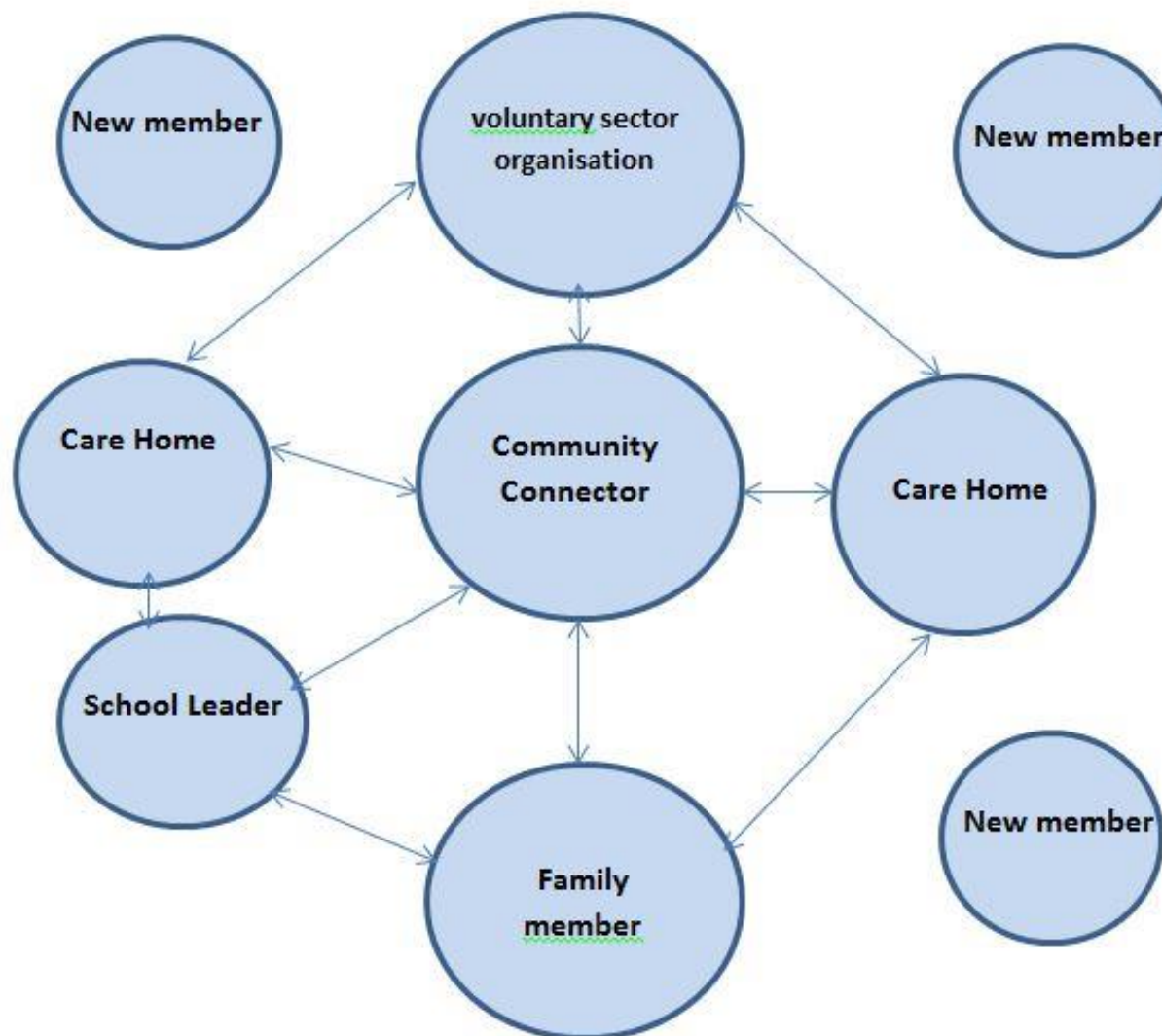


- Creating Dementia Friends and Dementia Champions
- When we advertised for support with an allotment, another care home came forward!

Sustainability



Community Connectors



Next Steps



- Broadening and deepening our involvement in the care homes
- Care Home Open Day (16th June 2017)
- Ongoing community group involvement
- Recruit informal volunteers
- “Match making”
- Look for ‘social moments’



E: joanne.volpe@alzheimers.org.uk

T: 0113 2311727

M: 0748 4504996

@AireSocMove



Health as a Social Movement – Facilities Health & Wellbeing Project

Nicola Bullen, Vanguard Project Lead/
Co-Founder/ Director For All Our Wellbeing C.I.C

Organisational context

The scale of the trust



10,000
Staff members

3



Hospitals

30



Community sites



Training places for

350

Nurses &
midwives

600

Doctors

Commitment to staff

We could not deliver quality and effective care to our patients without a healthy, fit and committed workforce: therefore, staff health and wellbeing are a priority to our trust.



Royal Free London NHS Foundation Trust

Staff Health & Wellbeing Strategy

2016-2018

Our Vision To maintain a **healthy** and **happy** workforce by creating a work environment which **actively supports** staff health and wellbeing, in order to provide **world class care** to all our patients.

THEMES



Physical Health

Physical activities and exercise are actively encouraged. Workplace injuries monitored and prevented.



Mental Health

Awareness of mental health issues continuously improved. Initiatives to improve staff mental health promoted.



Healthy Environment

Trust infrastructure and catering provision allow for healthier choices.



Staff assistance & support

Assistance and support are available and accessible for health and wellbeing issues affecting staff.



Partnership with staff

Staff feel valued and appreciated. Staff are empowered through joint-working with the organisation.

Vanguard project objectives

Overriding objectives

- **Inspire:** Bringing staff together through activities and at events, building motivation and encouraging peer support for becoming healthier and happier, through wide ranging communications and health messaging
- **Insight:** Better understanding staff ideas and priorities around their personal health and wellbeing needs, utilising evaluation and establishing metrics to learn what works
- **Building staff resources and capabilities:** To ensure sustainability of staff health and wellbeing initiatives within the workplace
- **Embed/Activate:** Developing and delivering bespoke initiatives alongside staff, that empower them to make long standing sustainable improvements to their wellbeing
- **Reach:** Develop staff ambassadors/ champions, identifying opportunities for supporting health and wellbeing for trust staff and developing new ways of linking with wider communities across NHS.

Specific focus

- **To target a specific staff group within the trust:**
- Engage the unengaged within lower paid staff groups - Facilities team at the RF site. A lower paid group who had not typically participated in any of the organised health and wellbeing initiatives at trust, yet have low levels of engagement and higher than average rates of sickness, MSK problems and have expressed feelings of being ignored and overlooked as a staff group and treated badly by other members of staff.
- **The group is made up of c300 staff across 4 teams (Domestics, Porters, Security, Facilities admin & clerical team)**

Facilities Health & Wellbeing Project

- To encourage and develop sustained lifestyle change within the Facilities' teams
- To empower staff to take responsibility for their own health and wellbeing
- To support staff to take community/ widespread action to become healthier and more active
- To put the staff at the centre of change through wide-scale ongoing face to face engagement
- A series of programmes to be designed with staff/ not for staff
- To engage Facilities in large scale change to benefit entire team, their families, and the wider organisation

Project delivery stages/ action

Project delivery stage 1 (Sept-Oct)

- Kick-off meeting with senior management team
- 2 x large group presentations, domestics/ porters
- 2 meetings with security teams
- 1-1 face2face meetings across all staff groups - 122 staff
- Survey collection across all staff groups - 91 staff
- Initial Health and Wellbeing event 220 attendees
- Interdepartmental charity Football tournament - 220 staff
- Team building event 255 staff attended England 'v' Australia rugby game
- Baseline questionnaires completed - 213 staff

Questionnaire results - infographics



**FACILITIES SUPPORT
STAFF HEALTH &
WELLBEING
SURVEY RESULTS 2016**

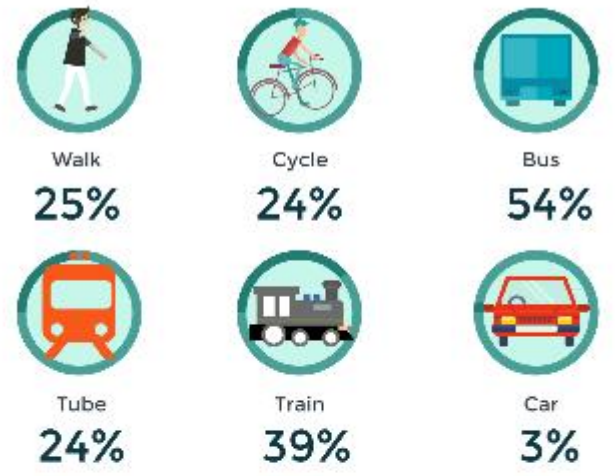
1. What is your age?



2. How long does it take you to commute to and from work?



3. Which mode(s) of transport do you use to get to work?



4. What type of work contract do you hold?



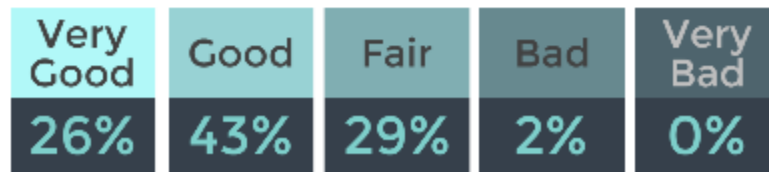
5. Do you work full-time or part-time hours?



6. Do you regularly put yourself forward for overtime?



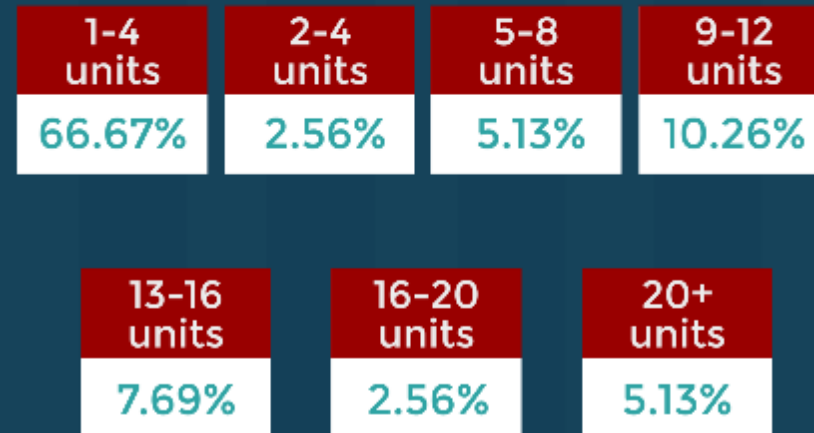
7. In general, how would you rate your health?



8. Do you drink alcohol?



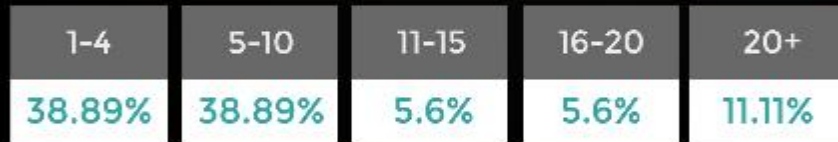
Approximately how many alcoholic drinks do you have each week?



9. Do you smoke?



Approximately how many cigarettes do you smoke per day?

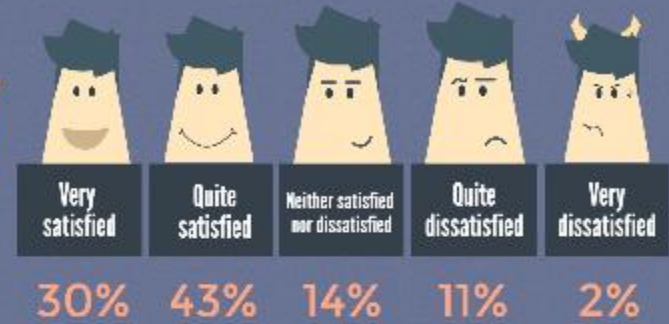


10. In the past week, on how many days have you done a total of 30mins or more physical activity?

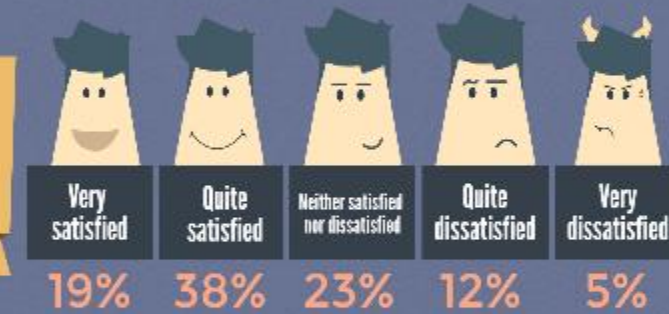


13. In general, how satisfied are you with:

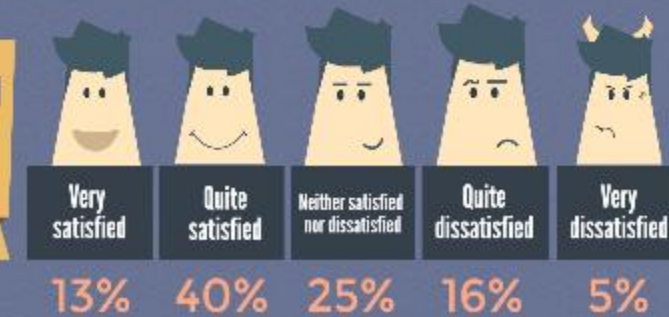
A. Your Job



B. The social environment at work

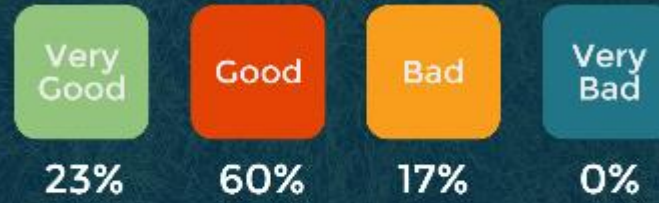


C. The physical environment at work

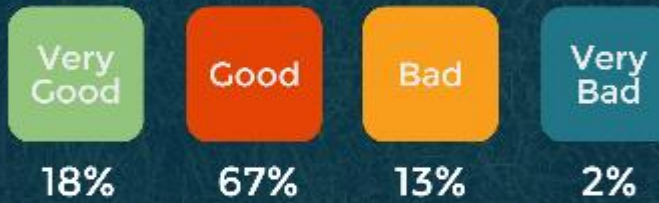


11. Taking everything into account, do you think paid work is generally good or bad for you:

Physical health



Mental health



12. In relation to stress, overall how do you find your job?



Project delivery stage 2 (Nov-Feb)

- Monthly newsletter produced for over 200 staff
- Weekly informal 'face to face' meetings with all teams
- Formal monthly meetings with all 4 teams
- Interdepartmental Step@TheFree team challenge
- Snowdon preparation (e.g. risk assessments/ route planning/ training walks, FAQ's, training guides) 120 staff
- Preparation for training/ roll out of RunTogether 155 staff
- Preparation and execution of 'New Year New You' trust wide event, 2200 staff in attendance across 4 sites

Royal free hospital

[Royal Free Hospital - Video](#)

Football Tournament

Next 6month project plan

Next 6 month project plan 1

- 'See me differently' video series (Mar)
- Financial wellbeing seminars/ training program (Mar)
- 12 week Snowdon training (mid Mar)
- 'Train the trainer' healthy cooking classes (Apr)
- Run coach program (Apr)
- Hot Pod Yoga + energy exchange (Apr)
- Walk/ Run program rollout 4 hospital sites (Apr/ May)
- Superhero charity run (May)
- Wellbeing Web Portal development and roll out (May)
- Training walks for Snowdon (Apr-Jul inc)
- Snowdon events (May – Jul inc) + video

Next 6 month project plan 2

- London to Brighton bike ride (Jul)
- Family fun day (Jul/ Aug)
- Annual charity football tournament (Aug)
- Champion/ Ambassador accredited training (Sept)
- Launch Wellbeing Champion committee (Sept)
- Staff 'small grants' project set up scheme (Sept)
- Targeted trust roll out – linked to 'hot spots' (Oct)

Thank you