

Community Investment: aligning our work with the NHS

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Wellbeing

Wellbeing closely linked to experiences of poverty and deprivation

Key framework for Community

Investment within housing

Health and Wellbeing – Population Health



Anchor Institutions

Both social landlords and NHS are anchor institutions

- Long-term view
- Resources used make an impact locally
- Focus on social value
- Partnerships
- Empowerment

What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:







Reducing its environmental impact The NHS is responsible for 40% of the public sector's carbon footprint.

As an anchor institution, the NHS influences the health and wellbeing of communities simply by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider factors that make us healthy.









Areas of high impact

Community Investment

Procurement and Social Value

Workforce strategies (including education,

training and employment services)

Specialist Housing

NHS

Asset management and community assets

Collaboration with other anchors such as the









Anchor Institutions

Long-term view

Resources used make an impact locally

Focus on social value

Partnerships

Empowerment





Health & Housing Conference place based population health : The role of housing

munity Investment: Can we align investment across neighbourhoods to deliver even greater benefits for local residents

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FIFMENTA

OUR STORY



"We're first and foremost a group of former community workers devoted to improving lives, connecting people and building communities. It's where we came from and it's embedded in the very bones of Elemental. Our roots are firmly in the neighbourhoods we empower."

> at story starts with 3 things. An ordinary world, a question and an urs has each of those things, and we believe that what makes it y great, is that we're still committed to asking the question and g the answer. How can we reduce health inequalities?

s the answer? Well we think what we've developed is a big part of the , a way to connect all stakeholders and give anyone, anywhere the ability ske, manage and monitor referrals into community activities and grammes.

NE'RE MORE THAN JUST A 'TECH COMPANY'



What is Social Prescribing?



Social prescribing enables healthcare professionals, community development workers, housing officers and others to refer anyone to a specialist link worker to talk about the issues they're facing and what matters to them, in order to find the right services to support them.



Social prescribing is not a new concept. It's been around for years, with many people describing it as the community development approach to health and wellbeing.





It is often referred to as a 'more than medicine' approach to health and wellbeing, based on the fact that the majority of long term conditions can be prevented by lifestyle change alone.





A growing movement



Health inequalities are estimated to cost the NHS around £20 billion a year.

Housing associations have an opportunity to play a major role in addressing this, with people living in areas of high concentrations of social housing likely to live 11 years less than people in other areas.

People living in deprived areas are also likely to spend between 20-25 fewer years in 'good health'.







Digital social prescribing partner of choice for:









BENEFITS FOR RESIDENTS





Supports people with a wide range of social, emotional or practical needs.



Improves physical and mental wellbeing by focussing on what matters to the individual.



Creates connections with community services and community members.

Allows tenants to co-create their own enriched, personalised care pathway.



Focuses on those most likely to benefit from social prescribing e.g. people with mild or long-term mental health problems, vulnerable groups, people who are socially isolated, and those who frequently attend either primary or secondary health care.



BENEFITS FOR HOUSING ASSOCIATIONS





Contributes to a range of broader government objectives, for example in relation to employment, volunteering and learning.



Strengthens relationships and promotes cross sectoral cohesion.



Engages residents in accessing and engaging in community programmes and services that enhance their physical and mental wellbeing.



Can demonstrate return on investment and social value.



Build the capacity of support staff as coaches in neighbourhoods, reducing the time sent on admin and freeing up time to support more residents.





The most forward-thinking housing associations see themselves as playing a pivotal role in community health, with a growing movement of associations working to step up and pilot innovative new approaches that use digital technology to support, connect and measure the impact of community engagement in health and wellness. Here are a few benefits that come with embedding digital into your social prescribing programme:









WHAT ARE THE CHALLENGES?



Based on our experience as community development workers and the research we have carried out over the years, we've encountered many of the challenges stakeholders face in regards to implementing, adopting and scaling social prescribing including:



Not everyone has access to digital



Community uptake resistance



Data protection - GDPR -online protection



Budget - unaware of funding that's available



Already have systems in place



Getting buy-in changing mindsets and culture change



We've found that some communities need additional support at the beginning of their social prescribing journey when it comes to finding out how and where to get started. Here are 6 top tips that our Housing customers have used to start and scale their social prescribing projects



Get everyone together in the community



Establish where you're at and identify the benefits of social prescribing for your communities



Review what's working well and what isn't



Find out what shared resources are available and establish who you need to connect with



Establish where you want to be using SMART goals



Connect with people who are already leading the way

REGIONAL AND NATIONAL STRATEGY





SOCIAL PRESCRIBING IN ACTION



















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Staying the course towards integration, better use of technology with a small course correction to focus on primary and community care

A new service model including:

- Primary Care Networks
- Community Multi-Disciplinary Teams
- Digitally enabled primary care and outpatients
- Urgent Treatment Centres and Same Day Emergency Care
- 2.5 million social prescribing
- Self-management
- Integrated Care systems





Prevention and Health Inequalities

- Explore stronger role for NHS commissioning PH services – sexual health, health visitors, school nurses
- Resources targeted at areas with greatest inequalities
- £30m extra for rough sleepers focused on mental health

Mental Health Spending to increase

Focus on collaboration rather than competition





Developing and Describing our offers:

- The need(s) it addresses
- The problem(s) it solves
- What is it and to whom is it made
- The skills and expertise that are needed
- The resources that are required
- Evidence of impact/effectiveness
- Sustainability







The Centre online:

Our website: <u>www.ceci.org.uk</u>

Our twitter: www.twitter.co.uk/Centre4Cl

Our LinkedIn group: search 'The Centre for Excellence in Community Investment -Networking group' or go to https://www.linkedin.com/groups/13685245/

Thank you

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