

<b>Report to:</b>	<b>HEALTH AND WELLBEING BOARD</b>
<b>Date:</b>	9 March 2017
<b>Executive Member / Reporting Officer:</b>	Ben Gilchrist, Deputy Chief Executive, Action Together Chris Easton, Head of Strategy Development, Tameside and Glossop Integrated Care NHS Foundation Trust
<b>Subject:</b>	<b>INTRODUCTION TO THE REALISING THE VALUE PROGRAMME AND EVIDENCE</b>
<b>Report Summary:</b>	<p>This report outlines the Realising the Value (<a href="http://www.realisingthevalue.org">www.realisingthevalue.org</a>) programme's 18-months of work to build the evidence base about person-and community-centred approaches to health and wellbeing. This work was commissioned by NHS England to support delivery of the NHS Five Year Forward View and the recognition that new ways of working with people and communities are needed to address current challenges. The work shows how to make a reality of the vision for a 'new relationship with people and communities' which is a central focus of Greater Manchester and Tameside and Glossop strategic approaches.</p> <p>Realising the Value's final report concludes that person- and community- centred approaches are pivotal to improving health and wellbeing outcomes during financially restrained times. Practical tools, recommendations and economic modelling have now been published to show how such approaches can be successfully implemented. This provides timely and important evidence for health and care system leaders, commissioners and front-line professionals.</p>
<b>Recommendations:</b>	<p>It is recommended that the Health and Wellbeing Board take note of the tools and modelling produced by this programme of work and:</p> <ul style="list-style-type: none"> <li>• Share these materials with other leaders and professionals especially those with commissioning responsibilities.</li> <li>• Support, especially through Care Together, the role for the voluntary and community sector, volunteering and social action in enabling person centred, community focussed care and health as central improving outcomes for people with care and health needs.</li> <li>• Champion that 'value' in health and care continue to be redefined according to what matters to people, rather than the system.</li> <li>• Help to develop a health and care workforce skilled and knowledgeable in these approaches</li> <li>• Provide sustained and coordinated leadership to ensure these approaches are embedded into mainstream change.</li> <li>• Maintain the clear priority and focus on this area of work for the Health and Wellbeing Board especially through the implementation and further development of Care Together.</li> </ul>

**Links to Health and Wellbeing Strategy:**

This work has cross cutting relevance to the Health and Wellbeing strategy but in particular the focus on asset based community development, voluntary sector involvement and support for person-and community-centred approaches.

**Policy Implications:**

This work and evidence should contribute to the development of:

- The Health and Wellbeing Strategy;
- Health and Wellbeing Board priorities;
- Commissioning strategies and plans;
- Care Together implementation.

**Financial Implications:**  
(Authorised by the Section 151 Officer)

There are no financial implications arising from this report – report for information only.

**Legal Implications:**  
(Authorised by the Borough Solicitor)

Good governance is achieved in part through effective evidence based decision making. This report helps to achieve this and implement the parties strategies.

**Risk Management :**

There are no risks associated with this report.

**Access to Information :**

The background papers relating to this report can be inspected by contacting Ben Gilchrist, Deputy Chief Executive, Action Together, by:



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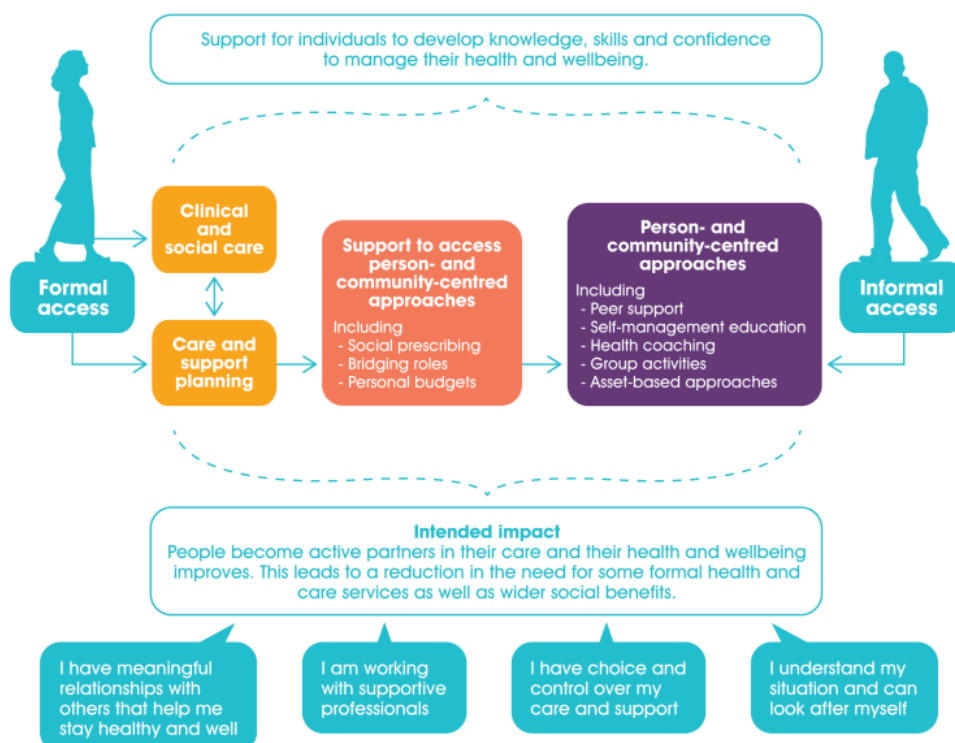


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# 1. AN INTRODUCTION TO THE REALISING THE VALUE PROGRAMME AND EVIDENCE

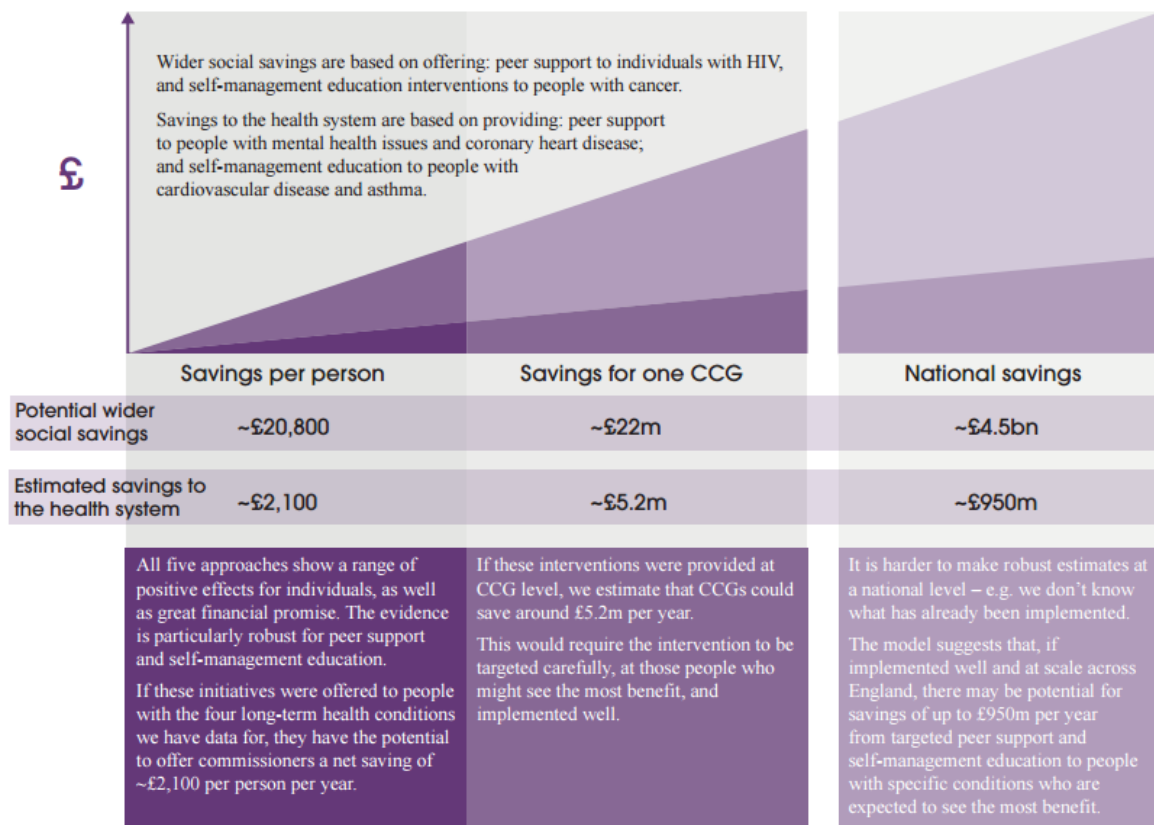
- 1.1 This paper outlines the Realising the Value ([www.realisingthevalue.org](http://www.realisingthevalue.org)) programme's 18-months of work to build the evidence base about person- and community-centred approaches to health and wellbeing. This work was carried out with local partner sites who are delivering these approaches on the ground, many of whom have sister organisations carrying out such work in Tameside and Glossop. The *Realising the Value* programme was funded by NHS England and led by Nesta and the Health Foundation, working in partnership with NAVCA (Action Together's parent body), National Voices, Regional Voices, Volunteering Matters, the Behavioural Insights Team, the Institute of Health and Society at Newcastle University, and PPL.
- 1.2 This work was commissioned by NHS England to support delivery of the NHS Five Year Forward View, which recognises that new ways of working with people and communities are needed to address current challenges – such as more people living with long-term conditions, and an ageing population. The work shows how to make a reality of the vision for a 'new relationship with people and communities' set out in the Five Year Forward View and which is a central focus of Greater Manchester and Tameside and Glossop strategic approaches.
- 1.3 Realising the Value's final report concludes that person- and community-centred approaches are pivotal to improving health and wellbeing outcomes during financially restrained times. A thorough analysis was conducted of the evidence for person-centred and community-centred approaches for health and wellbeing, working with five frontline sites across England. Practical tools, recommendations and economic modelling have now been published to show how such approaches can be successfully implemented. This provides timely and important evidence for health and care system leaders, commissioners and front-line professionals.

**Figure 2: An illustrative person- and community-centred model**



- 1.4 Person and community-centred approaches entail focusing care around the priorities and motivations of individuals and the programme's evidence shows that this can improve health and wellbeing, reduce demand on services, and create wider social value, such as supporting people to get back to work or education. A whole system view was taken to increase understanding of how person- and community centred approaches add value, and of what works to embed and spread them in practice.

**Figure 4: Estimated annual net savings from implementing targeted peer support and self-management education**



- 1.5 Five different methods were explored in depth to assess their effectiveness, impact on patients, and wider benefits:
- peer support;
  - self-management education;
  - health coaching;
  - group activities to support health and wellbeing;
  - asset-based approaches.
- 1.6 Five voluntary, community and social enterprise sector organisations from around the country contributed their experience and insight. A key finding from the programme is that to move from intent to action, there needs to be a step change in ambition, leadership and commitment from across the system.
- 1.7 Realising the Value provides ten major actions (see below) to shift the system and put people and communities at the heart of health and wellbeing, along with a range of wider recommendations for system leaders and a set of practical resources. The actions include making best use of available tools, evidence, legislation and regulation to implement person and community centred ways of working across the system. The programme also calls for action to support people to work differently by developing strong networks and enabling

health and care professionals and the wider workforce to understand and work in person- and community-centred ways.

- 1.8 These actions hold potential to enable health and care system leaders, commissioners, practitioners and voluntary and community sector organisations to make changes that put people, families and communities at the centre of decision-making about their health and wellbeing.

### 1.9 **Key calls to action**

What needs to happen:

- Implement person and community-centred ways of working across the system, using the best available tools and evidence;
- Develop a single, simplified outcomes framework across health and care and community provision, focused on what matters to people;
- Continue to learn by doing, alongside further research;
- Make better use of existing levers such as legislation, regulation and accountability;
- Trial new outcomes-based payment mechanisms to support person and community-centred approaches, and implement these as part of wider national payment reform.

How people need to work differently:

- Enable health and care professionals and the wider workforce to understand and work in person and community-centred ways;
- Develop strong and sustained networks as an integral part of implementing and scaling up person and community-centred approaches;
- Value the role of people and communities in their health and wellbeing, including through co-production, volunteering and social movements for health.
- Make greater use of behavioural insights in implementing person and community-centred approaches and spreading change;
- Support a thriving and sustainable voluntary, community and social enterprise sector, working alongside people, families, communities and the health and care system.

- 1.10 The resources from the programme include:

- A guide with practical tips on designing, embedding and spreading the five person- and community-centred approaches to maximise their impact;
- An economic modelling tool for commissioners, which builds understanding of how person- and community-centred approaches can support health and wellbeing in local populations, estimates potential savings and wider social benefits, and helps to build the business case and to support investment decisions;
- A new articulation of value that focuses on what matters to people and communities. This includes a series of calls to action including the need to build a consensus on developing a single simplified outcomes framework, focused on what matters to people.
- A report on system levers setting out the role of national bodies in supporting the implementation and spread of person- and community-centred approaches;



## 2. CONCLUSIONS

- 2.1 It is well recognised that there is an urgent need to design a sustainable health and care system and that one of the major ways of achieving this will be through enabling people to live better with health conditions. This work has clearly set out that the best way to do this is by putting people and communities at the heart of health and wellbeing – so that they feel in control, valued, motivated and supported.
- 2.2 Person- and community-centred approaches should be seen as integral to creating better health and care. Realising the Value has found that these approaches, which draw deeply on the power of personal experience, peer relationships, and connection to community, are most likely to be achieved through local action. It affirms a role for the voluntary and community sector that is no longer fringe, but core to decision making and supported through proper funding models. The Programme has demonstrated the value of volunteering and social action in enabling person centred, community focussed care and health and in improving outcomes for people with care and health needs. Also it is clear that ‘value’ in health and care needs to be redefined according to what matters to people, rather than the system.
- 2.3 To develop this work further needs a health and care workforce skilled and knowledgeable in these approaches working with a flourishing voluntary and community sector, alongside better ways of measuring the outcomes that matter to people. This has the potential to transform the relationships between the health service, people and communities. Sustained and coordinated leadership at a local as well as national level can ensure these innovations are embedded into mainstream change and realise the power of people and communities at the heart of health and wellbeing. This is already a clear priority and focus for the Health and Wellbeing Board especially through the implementation and further

development of Care Together. The work and evidence that is part of Realising the Value can be part of strengthening the strategic approach and activity to deliver on this potential.

### **3. RECOMMENDATIONS**

3.1 As detailed on the front of the report.