



North East Hampshire and Farnham
Clinical Commissioning Group



OCTOBER 2020

Working together to create healthier communities

Addressing inequalities in
North East Hampshire and Farnham



Partnership Workshop outputs and actions



Executive Summary

On 6th October 2020 a virtual workshop was held with a wide range of local stakeholders to discuss how we can work together to address inequalities in North East Hampshire and Farnham.

- A wide range of stakeholders, including CCG, Clinical, local authority and voluntary sector partners have worked together to build a shared approach to addressing inequalities in North East Hampshire and Farnham.
- A wide range of 'insight' work has taken place that triangulates patient and public feedback, system data and organisational insights. This will enable ongoing identification of key priorities.
- Barriers to partnership working have been explored and a shared set of principles for partnership working have been developed.
- A 'Healthier Communities Partnership Committee' will be established to take forward this work (with cross-organisational representation).
- An 'Innovation Fund' will be utilised to encourage community innovation and provide support and funding for a number of local projects that are able to demonstrate how they would address shared priorities.

Introduction

For some time we have been exploring how we can work in partnership with others, particularly our local government and voluntary sector partners, to address health inequalities.

We know that we need to work in a different way in the future, with less silo working and more flexibility to tackle issues affecting our local communities, whether they are focussed on health or wider factors that can affect our health.

The impact of COVID-19 has been felt by everyone and it's important that we understand the difficulties people are facing whether they be related to health, housing, finances or family. We know that we are still not hearing from some of the most vulnerable and most in need groups in our communities. To understand them will require a different approach based on relationships and trust... we can't do this in isolation.

The impact of COVID-19 has also seen many positive changes, both in lifestyle and community spirit - we need to take this opportunity to understand how we can support and maintain some of these new and rediscovered benefits for people and communities.

We must make best use of the rich resources we have to hand. A new data insights tool developed by the Integrated Care System analytics team, alongside stakeholder insights and community feedback helps us build a detailed picture of where and how we need to focus our energy ... but it will never tell us the whole story.

By supporting projects and approaches that are community focussed we can begin to build an approach that tackles broader inequalities that affect our health.

Our ambition is to work together: communities, voluntary sector, health, care and local government to deliver change together

Context

The CCG has longstanding relationships with a wide range of community, voluntary sector and local authority organisations. These partnerships have been more important than ever during the pandemic as we collectively rethink our ways of working in response to the impact of COVID-19. Throughout 2019 and 2020 a wide range of work has taken place across local organisations to understand their views alongside feedback from local people and communities offering a range of perspectives. This has included, but is not limited to, the following examples that provide some context to the conversations held at the workshop:

Frimley Health and Care five year strategy and ambitions

Our intention is that the Frimley Health and Care system Five Year Strategy is ambitious for our population and those who work within it. The strategy was developed through high levels of engagement, reflects local needs, issues and priorities, is rooted in evidence and aims to tackle wider determinants of health and wellbeing. - Its development has been based on what people have told us, alongside good data and intelligence. [The strategy is available here.](#)

Rushmoor Health and Wellbeing Community Conversation

On 21 January 2020 Rushmoor Borough Council and North East Hampshire and Farnham CCG held a joint event inviting local people to join a new conversation about health and wellbeing. The aim of the event was to improve our understanding of what was most important for the people living in Aldershot and Farnborough (Rushmoor), in order to help plan and prioritise work for the future.



Phase One survey and insights work

The COVID-19 pandemic has affected us all and caused many organisations to change the way they are working. One challenge for us has been how we continue to carry out the high standards of local engagement activity we would normally be working towards, whilst prioritising the health, safety and welfare of everyone. We have adopted a phased approach, recognising the constant need to adapt and evolve to an ever changing situation. Phase One (April – September 2020) involved three distinct pieces of work alongside a range of on-going engagement and communication activity.

More information about each element of work is available below:

- [Frimley Health & Care Integrated Care System \(ICS\) Community Panel Survey](#)
- [Insights sessions \(bringing different stakeholder perspectives together\)](#)
- [North East Hampshire and Farnham Clinical Commissioning Group \(CCG\) Survey](#)

A renewed focus on inequalities

Both nationally and locally there is currently a drive to address inequalities, as outlined in the introduction. The pandemic has exacerbated existing inequalities as well as highlighted new ones. NHS England has directly asked that we work collaboratively with local communities and partners to take action in eight areas to protect the most vulnerable from COVID-19, with enhanced analysis and community engagement, to mitigate the risks associated with relevant protected characteristics and social and economic conditions; and better engage those communities who need most support. North East Hampshire and Farnham CCG has also appointed Dr Peter Bibawy as Clinical Chief for Inequalities. This role will have a specific focus on how we best address health inequalities, working closely with our partners in the local government, other public services, the voluntary sector and local communities.



Partnership workshop

On 6th October 2020 a virtual workshop was held with a wide range of local stakeholders including County, Borough and District Council representatives, CCG staff, voluntary sector, charity and community leaders, Local Healthwatch and Primary Care Network (PCN) Clinical Directors representing local GP Practices to discuss how we can work together to address inequalities in North East Hampshire and Farnham.

The session was chaired by Kathy Atkinson, CCG Lay Member who introduced Dr Peter Bibawy, Clinical Chief for Inequalities and Patricia Hughes, Joint Chief Executive of Hart District Council. They set the scene and presented their shared ambition around partnership working to address inequalities. A range of presentations followed from Frimley Health and Care Integrated Care System (ICS), Public Health Hampshire, North East Hampshire and Farnham CCG and Rushmoor Borough Council. Each sharing current data, good practice cases studies and emerging work and priorities. All of the presentations are available on request.

The second part of the workshop was dedicated to conversations on two key areas: principles and ways of working and barriers and practical solutions. These conversations were supported by the results of previous work as outlined above and a pre-workshop survey. The full results of the survey are available on request and the key outcomes and actions from each conversation is outlined below. Participants of the workshop also received a post workshop evaluation poll, the results of which are also available on request.

Barriers to partnership working

Resources – Money/Capacity/Time

Almost every group reported managing resources as a barrier to partnership working, particularly throughout the pandemic it has been difficult for organisations (both large and small) to juggle money, capacity and time. Protected time to ensure good partnership working and space to innovate are seen as key to success but difficult to prioritise.

Data

All organisations recognise the benefits of sharing data to support partnership working. Data protection, governance and incompatible software systems were all cited as potential barriers but work is underway to improve this. The pandemic has made this easier and there are emerging examples of where this is working locally.

Trust and expectations

Many participants felt that sustainability of this work would be reliant on trust and clear understanding of the expectations of each organisation. This will vary depending on the work or project but shared principles and 'ways of working' could be developed to help overcome this barrier. Community trust was also cited as an issue, particularly in some of the poorest communities where outcomes are generally worse.

Evaluation and impact

Assessing the impact of partnership working was seen as essential but difficult. All work should aim to be sustainable and recognise the need for longer term evaluation to recognise the impact. An agreed framework to measure outcomes across the system is one potential solution.

Geographical and organisational boundaries

We must recognise the limitations of existing boundaries but identify when and where we need to work across them for the 'greater good'. If this doesn't happen then there is a risk of silo working or duplication. We must have a shared vision and commission in ways that allow local services to flex so that they have the permission to work differently within communities that want to try something different.



Principles for partnership working

A wide ranging conversation established the following four principles for partnership working. It is suggested that organisational sign up to these principles will be obtained to demonstrate a commitment to a new way of working.

We will all commit to reaching out to our local communities, particularly those that we are not currently reaching. We will empower local people to be involved in creating healthier communities.

- Building the approach from within the community
- Sharing information and insight about communities from different perspectives
- Having conversations with local people to understand their culture, behaviours, and accessibility issues
- Starting small, thinking big
- Recognising the value of community action and effective participatory decision-making at a local level – empowering individuals and communities.

We will ensure we are clear about our organisational roles in addressing inequalities and will commit to working in partnership to achieve this.

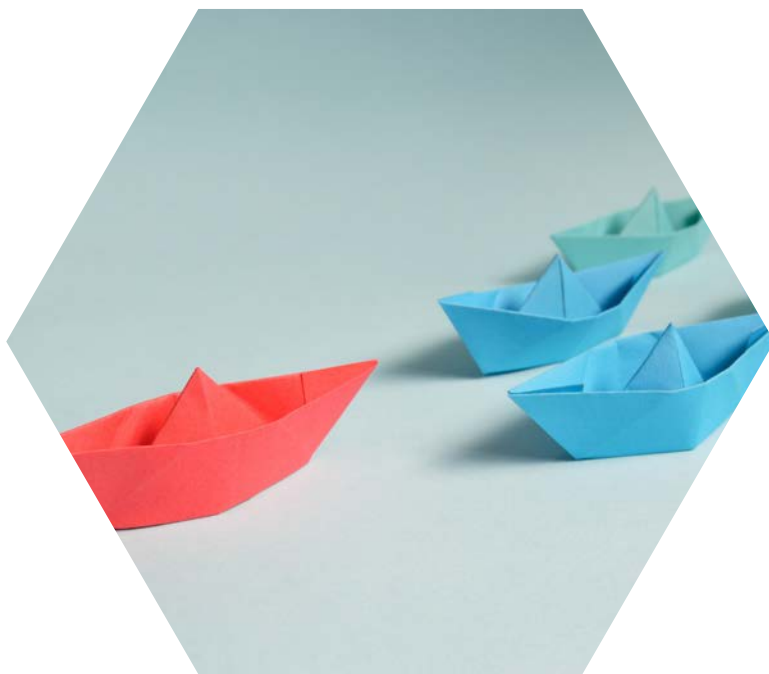
- Clarity on our roles and responsibility
- Transparency of approach – understanding what we can and can't do
- Listening to other perspectives – openness to hearing back from communities as well as each other
- Creation of safe spaces for honest conversations to happen
- Agreement on common goals and priorities and recognition of the diversity of backgrounds and skills needed to reach them

Wherever possible we will share resources, insights and data. We will commit to removing obstacles and be open to working in new ways that ensure the right people are involved at the right time and in the right place.

- Ensure clarity on what data/insight we are looking for and who holds it
- Ensure involvement of the right people and organisations to consider the wider determinants of health and broader inequalities
- Using creativity to achieve results
- Removal of unnecessary technical, policy and governance issues wherever possible.

We will set clear expectations of each other, hold each other accountable for our actions and commit to robust evaluation of our shared work. We will constantly evolve and develop our partnerships.

- Learn from the earlier community successes and celebrate that to show partners and communities what might be possible
- Agreement that there needs to be a longevity to get outcomes
- Recognise how agile we have been able to be during the pandemic so far and keep the momentum going
- Agreement to share training/up skilling opportunities across organisations
- Ensure strong leadership that pulls together all of the different strands of the work.
- Collection of both quantitative and qualitative data
- Constantly developing and reviewing shared approaches



Going forward - A commitment from the CCG

Innovation Funding

The Innovation Fund was established by North East Hampshire and Farnham CCG in 2017, the funding (and supporting conference) aims to give the local community the opportunity to suggest small innovative projects that could have a big impact on local health and wellbeing, capturing community energy and enthusiasm for real health benefits.

Over 30 projects have now been supported and the impact on local communities has been clear to see. By providing opportunities for our community to find the solutions to local health and care solutions we are able to develop models from the ground up, with connections to local people and supporting gaps in health inequalities in a different and more impactful way. [More information, case studies and videos can be found here.](#)

The approach taken this year will need to be different (previous iterations have involved a large face to face conference, a smaller funding pot and a smaller geography). The process will take place online but we envisage a range of opportunities to support local people, network, share ideas and innovation and provide opportunities for the wider public to hear about and support the work.

This year we plan to build on partnership work to address health inequalities across both NEHF and Surrey Heath CCG geographies to ensure that the available funding is used to support our communities to find solutions to target priority areas identified with a wide range of stakeholders and partners. Local communities groups, individuals and charities will be asked to come forward with their projects and ideas to improve health and wellbeing in these priority areas (these are likely to be a mixture of specific geographies/areas of deprivation and themes such as prevention/self-care).

The fundamental purpose of this work will be to support local innovation, encourage community networking & development and to provide opportunities to local people for support and training. The funding itself will provide some of the necessary financial resource to push this work forward.

Healthier Communities Partnership Committee

As outlined above, North East Hampshire and Farnham CCG has appointed Dr Peter Bibawy as Clinical Chief for Inequalities. This role will have a specific focus on how we best address health inequalities, working closely with our partners in the local government, other public services, the voluntary sector and local communities.

Alongside this role we will also establish a Healthier Communities Partnership Committee. The purpose of this group is to set the strategic direction for developing healthier communities to the residents of North East Hampshire and Farnham. The group will include a range of stakeholders from within our communities, voluntary sector, health and local government.

The objectives of this committee will be to:

- Connect previous work to latest thinking and build
- Facilitate spread where appropriate
- Connect clinical partners
- Provide oversight and governance to fulfil organisational needs
- Maximise efficient opportunities and reduce duplication
- Identify right resource and workforce to support best results
- Provide the justification and evidence for creative approaches which disrupt traditional ways of working

Thanks

The CCG would like to thank the wide range of partners that came together to take part in the workshop in early October. Particular thanks go to Hart District Council, Rushmoor Borough Council and Waverley Borough council for their involvement in the planning and facilitation of the event.



This is a critical time for health and care services, we are committed to understanding the views and experiences of local people and those of the organisations we work closely with.

Moving forward we will be building on the learning from Phase one and taking forward actions that have been agreed. We will continue to work closely with our Local Authority, voluntary sector and Healthwatch partners.

We would like to thank everybody who has taken the time to take part in our work and share their views and experiences throughout the year. For more information and opportunities for future involvement please visit our website: www.northeasthamphshireandfarnhamccg.nhs.uk