Working with health agencies

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Agenda

- 13:20 Presentation of findings from IVAR research
- 13:30 Articulating the Big Local Offer to health agencies
- 14:00 Tools and resources
- 14:10 Close

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Findings 1:

What health agencies can gain from working with Big Local Partnerships



Setting up a structure to work to





Gathering health data

Beechwood, Ballantyne and Bidston Village - In a 'nutshell'

Ť Ťr	There are 3,950 people living in BBBV		39% of people have no qualifications (22% nationally)
Population	66% of people have access to the internet	Education & skills	By Year 1, there is a 5% shortfall in achievement by pupils against national average
Housing	2% of households lack central heating (3% nationally) 58% of people live in social housing (18% nationally)	Economy	The largest employment sector in the area is health & social work The % of people on JSA is double the national average There are 17 claimants per job (3 claimants per job nationally)
Vulnerable groups	44% of children live in 'out of work' households People claiming mental health-related benefits is more than double the national average	Deprivation	3,687 (93%) people live in the most deprived 20% of neighbourhoods in England 52% of children live in poverty (22% nationally) The number of pension credit claimants is 2.5 times the national average
Crime	Reported crime is lower than the national average The reported violent crime rate is below national average 26% increase in alcohol- related crime since 2008	Access & transport	46% of households have no car (26% nationally) 71% of pensioners have no access to a car (59% nationally)
Health & wellbeing	29% of people have a limiting long-term illness (20% nationally) Life expectancy is 5 years less than the national average 41% of people smoke (22% for England)	Communities & environment	The % of people 'satisfied with their neighbourhood' is higher than the national average

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Providing a fuller picture of health issues

Patient Experiences - Examples



Stories:

Summarise whose stories are being told here, i.e. which local residents, and why. For example, in the case of PEACH Big Local Partnership, they wanted to give people who felt too ill to come to many meetings a chance to say how the issues were affecting them and wanted to show the human impact of healthcare.

Issues:

Summarise what the common issues appear to be from across all the stories. For example, the common issues identified by PEACH through residents' stories were:

- a) Direct effect of worse health and more pain
- b) Additional stress and impact on employment, education etc.
- c) Using emergency services/walk in clinics more regularly
- d) Feeling frustrated, angry or upset and losing trust in the service.

Positives:

Summarise what the main positives coming from the stories are.

Name

It is usually best practice to anonymise responses and discuss this with the person giving you their story but you might want to keep a reference for your own records of which person said what.

An experience or problem that you have had at [name of surgery/health care facility]

How did you feel?

Bringing people together



Test beds for new ideas and activities





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Findings 2:

Door-openers (and challenges)



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Finding allies within health structures and seeking common ground

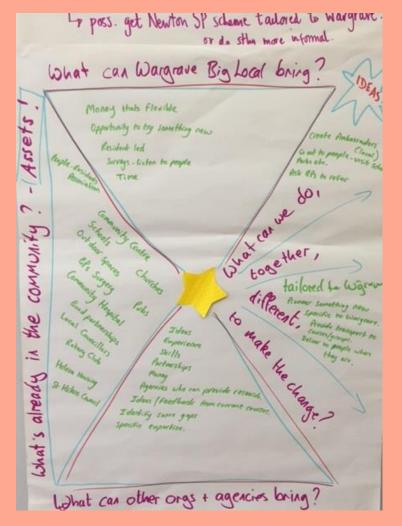
- It really helped to find an ally in one of the local health agencies who was part of the community and wanted to get involved with Big Local.
- We found that residents and health agencies are often striving for the same health outcomes but that sometimes it is simply couched in a different language or approach.





Articulating the Big Local offer

- Health agencies and residents often have the same health priorities.
- They are simply being experienced and articulated differently.
- There need to be opportunities for both sides to come together to have open discussions.
- Health agencies were often surprised to learn about the money and length of time available to Big Local partnerships.



Stepping outside the boundaries

In order to form successful collaborations there was often a need for both parties to be willing to work with people, groups and organisations that lie are larger, or perhaps smaller, than their designated area.



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Challenges

- Being recognised as a 'legitimate' player
- Cuts, mergers and outsourcing
- Managing expectations
- The balance between protecting services and plugging gaps

Questions? Reflections?

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