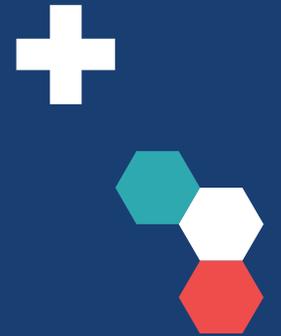# Equitable Place-based Health & Care (EPHC) Theme management meeting

27th February 2020

EPHC Theme Description

The Equitable Place-based Health and Care (EPHC) theme builds on the work of the NWC CLAHRC's Neighbourhood Resilience Programme.

The theme continues to help build collaborations between the public, local stakeholders and researchers, with the aim of rebalancing power dynamics so that individuals and communities can exert greater influence over decision making processes that affect their lives within the places they live and work.

Our focus is to support and work with local systems aiming to integrate health and social care so that they are able to operate more responsively to the needs of people, communities and places.

Overarching Principles

1. Place-based (systems) approach

2. Collaborations between the public, other local stakeholders and researchers

3. Integrated health and care

4. Upstream (social determinants) and health equity focus

What do we mean by 'place'

Definitions of place vary depending on who is defining it – could be

- geographical boundaries (e.g. an estate) or setting (e.g. care home)
- residents who live in a place
- shared characteristics (e.g. locality with high disadvantage)
- health and care system boundaries

A place-based approach 'focuses on how the system can work together utilising civic, service and community centred approaches to reduce health inequalities' (Public Health England, 2019)

- Focus on upstream determinants of health
- 'Whole systems' approaches rather than individual level interventions

Our journey so far…

- Three topics identified: Air pollution, Social isolation, Social prescribing

- EPHC theme management group continues to inform and support activity:
  - Management meetings
  - ARC Fest 20th Nov. workshop discussion (39 participants)
  - Public Advisers recruited

- Connecting with wider ARC members and potential collaborations:
  - ARC prioritisation process
  - Work with Improving Population Health theme on air pollution inc. Old Swan event
  - Linking to ARC social prescribing work
  - Meetings with ARC members (e.g. Innovation Agency, Healthier Lancashire and South Cumbria, East Lancashire CCG)

- Contributors to research bid on dementia

- Community Research and Engagement Network (COREN)

COREN MEMBERS

Group Conversations

- To understand public awareness, local action, priorities, potential for engagement
- Ethical approval
  - Lancaster University Research Ethics Committee
- Recruitment through local organisations across NWC
  - Cumbria, Blackburn, Liverpool, Ellesmere Port
- New contacts
  - No previous CLAHRC NWC involvement
- Ten group conversations
  - Air pollution (3), Social isolation (3), Social Prescribing (4)
  - 77 people: Air Pollution (21), Social Isolation (19), Social Prescribing (37)

Group Conversations - participants

		No. participants	%
Gender	Female	41	53%
	Male	36	47%
Age group	18-44	23	30%
	45-64	31	40%
	65+	20	26%
	Not stated	3	4%
Ethnicity	Identified as minority ethnic group	20	26%
Disability	Identified as having a disability	24	31%
Employment status	Economically active	21	27%
	Economically inactive	42	55%
	Not stated	13	17%

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Air Pollution 1

- Awareness and concern about air pollution and associated health issues

  "it's one of the worst polluting counties in England"

- Information often drawn from localised personal experiences – concern about whether this was reflected in what was monitored

  e.g. windborne smells, blackened buildings, rain leaving stains on windows, feelings in the throat, respiratory problems

- Traffic generated pollution often featured in the discussions, but the solutions weren't straight forward

  e.g. "cycling is scary", "it's cheaper to get a taxi than travel by bus"

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Air Pollution 2

- Indoor air pollution and its effects e.g. not opening windows

    "… the soup of pollutants inside the house"

- Beyond physical health impacts – implications for a neighbourhood's image and identity

    "… they call people round here 'chemic-heads'"

- Opportunities for community participation in decision-making about air pollution strategy and actions appeared variable and/or limited

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Social Isolation 1

- Awareness of social isolation and groups that can be affected

- Needs experiences of young people and often overlooked – focus on older people

    "Social media doesn't help…it takes you away from the social world."

- Barriers to connectivity identified - personal and wider societal changes

    "If you are already depressed you don't go out and don't interact then you get even more isolated."

    "Don't even know each other even though they live on same block."

Social Isolation 2

- Discussion of existing activities/services that increase connectivity, including volunteering

- Opportunities to better connect services, activities and spaces and align with needs of local communities

  "Someone should be there to make it [communal room] *available for use by people not just when its booked."*

  "... need to encourage people to use these places and awareness of them."

- Concerns about funding and continuity of provision

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Social Prescribing 1

- Variations in levels of awareness

- Limited knowledge of the phrase by members of the public, but some experiences of similar roles to link workers

    "Health trainers are already there doing the same job"

    "They need to speak people's language"

- Recognition of the potential to benefit health and well-being, offering an alternative to the medical model of care

    "I would love to do something as an alternative - I'm rattling with medication"

Social Prescribing 2

- Importance of the link worker role and their local knowledge

- Gaps around community involvement – could support planning and delivery

    "Communities know what they need - people are parachuting in and telling people what they are getting"

- Impact on the voluntary and community sector – potential demand and ability to meet local needs

    "Where are the organisations that can help with people's wellbeing?"

    "People will think social prescribing is no good because it's hit the buffer"

Community Participation

- Have local knowledge and experience of provision

- Perspectives and insights on need

- Ability to engage other residents

- Could support development of plans and activities

- Be involved in ARC NWC research design and data collection

Activity 1: Research Ideas

Round table discussions about emerging research ideas

- Air Pollution

- Social isolation

- Social prescribing

Activity 2: Health inequalities

What should we consider to ensure that our work focusing on community participation in relation to these three topics contributes to addressing health inequalities?

Please write down your ideas on post-its and place them on the flip charts around the room

Next Steps and Further Information

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Research summaries: https://arc-nwc.nihr.ac.uk/resources/publications/