

**West Kent Health & Wellbeing Board 15 August 2017
Asset Mapping & Self-Care, Self-Management Workshop Notes**

<u>Self – Care and Social Prescribing</u>	<u>Statements</u>
<p>Every Contact Counts (Motivational Interviewing H&SCC).</p> <p>Engage & Empower – identify motivation.</p> <p>Raise Profile of Services (111, Pharmacies, Voluntary Sector).</p> <p>Trigger Points – retirement, bereavement, diagnosis.</p> <p>Healthy Business Awards (Relatively cheap intervention).</p> <p>Rural vs Town (Where you live affects how you ‘self-care’).</p> <p>Support – offer follow up to ensure engagement is maintained.</p> <p>How can you ‘Quality Assure’ the range of services and resources that might be included in any local directories.</p> <p>Lots of examples of new ways of using social media where its possible to establish positive, supportive online networks/groups so that other people’s “experience moments” become “teachable moments”.</p> <p>How can we deliver self-care at scale.</p>	<p>How ‘the system’ behaves/responds to the individual, really matters Local Councils find it difficult to address this, it’s influenced by attitudes, priorities.</p> <p>There’s a complex provider landscape that feels like navigation without maps!</p> <p>Identifying people’s wants is important.</p> <p>What’s available and will it help? (How much might it cost?) and What might you be able to do to help yourself?.</p> <p>Planning needs to support active travel (this is at the heart of the leadership in local councils, the passion of the ‘workers’ and the willingness of organisations to do things that they don’t directly benefit from.</p> <p>Need to create a culture that fosters both halves of the enabling relationships coin.</p> <p>Can our Clinician colleagues tell us what proportion of our local population might have long-term conditions and may need help with practising self-care, self-management.</p> <p>We would like to encourage our Clinician colleagues to appreciate the importance/significance of cohesive communities.</p> <p>Is it OK that we should have a 1000 flowers blooming? Should we also look at better co-ordination across West Kent, across District and Boroughs and at neighbourhood level.</p>

Promoting Self-Care in our own Organisations	Practical Projects & Initiatives to support Asset Mapping, Community Development
<p>Acknowledge – all staff have a potential to influence.</p> <p>Recognise importance of doing things with and not necessarily for people.</p> <p>Educate people about their conditions so they can be more efficient at self-caring.</p> <p>Develop self-belief and confidence of individuals. How do we achieve this? Would take time, could be costly and there is often a requirement to evidence costs and benefits and make a clear case for investment – pilots help with this.</p> <p>Be prepared to open non-threatening communication.</p> <p>Build knowledge so that conversations do not have a detrimental impact.</p> <p>Need people prepared to guide/support/accompany.</p> <p>Phased transitions – start with self-care approach →re-open community hospitals/rehab services→intermediate steps towards residential care.</p> <p>Time is also an important consideration.</p> <p>Collect/share data that may help prove initiatives work (think about outcomes vs outputs – possibility of using ‘control groups’).</p> <p>Every organisation needs to foster ‘enabling’ relationships with residents/patients and local voluntary sector.</p>	<p>ESA and Job Seekers Allowance (JSA) does not support self – care as you have to be medicalised to avoid losing £30pw</p> <p>Student Rooms in Care Homes – free in exchange for 30 hours of social activity input to residents (Holland)</p> <p>Co-location of Older Person’s Residential Care facilities with Nursery Schools evidence shows therapeutic benefit for older people (Scandinavia) How we can interlink the asset mapping with NHS digital, ONS data set and the KID to ensure the known assets stay up to date.</p> <p>Kent Connects, brings together GIS teams from all the Kent LAs, propose a meeting with KCC/ LAs and CCG to understand how we can better share data about communities and assets</p> <p>There are small scale data sharing agreements going on locally, i.e. Nourish sharing foodbank data with Town & Country Housing Group (TCHG) or JobCentre Plus (JCP) sharing benefit claimants’ data to produce heat maps for targeted work at street level so we need to better understand how we do this in accordance with IG guidance.</p> <p>Invest in volunteering – support, training, consider tailored volunteering.</p> <p>Create/Share large/single pool of volunteers.</p> <p>Community Asset Mapping approach is a means of addressing health inequality that’s embedded in working closely with local communities.</p>

<u>Addressing the issue of Different Geographies</u>	<u>Promoting Culture Shift</u>
<p>North Kent Devolution Group conversations provides a timely opportunity to ensure work is joined (to also include the health inequalities work in specific geographical locations) up to help promote self-care and health improvement.</p> <p>Consider developing a central interactive map showing what's available locally – in terms of the standard range of services.</p> <p>Reservations expressed about creating a single resource.</p> <p>Public agencies might collectively consider helping stimulate a local focus in 'areas of need'.</p>	<p>Not about format, it's a process issue</p> <p>Concept of 'social capital' is important, however who helps with community development?; what might be the most impactful activities (<i>Sherwood work acknowledged as there is experience of a targeted approach</i>)</p> <p>Get together and share perspectives (like this forum).</p> <p>Educate at youngest age groups so we see changes over time.</p> <p>Cross professional boundaries/silos – share our expertise in what works well</p> <p>Ensure consistency across the county – so that we can begin to express a way of working with Kent & Medway communities.</p>

KEY MESSAGES FROM DISCUSSION & FEEDBACK:

- 1) All to promote One You / Use the One You resources, tailor promotions; offer solutions too including self care
- 2) Consider development of shared support directories to facilitate sign-posting and also helping with direct support to individuals who need more encouragement
- 3) Consider sharing data to assist targeting of interventions in areas of greatest need
- 4) Target communities and areas which would benefit most
- 5) Work with/alongside local people and in communities
- 6) Commission for outcomes that have a direct effect
- 7) Need to ensure links across both agendas
- 8) Action Plan required for Making Every Contact Count (MECC) – Priority for NHS WK CCG and all other providers
- 9) How can we support innovation and consider working at scale by targeting the 'captive audiences' (Whole populations; people in their workplaces; specific groups.