

Title	Prevention at Scale pilot update
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Purpose of this report:

The purpose of this report is to update Health and Wellbeing Board members on the progress of the Prevention at Scale pilot in Buckinghamshire, and request continued support from member organisations to identify opportunities and engage with and deliver the actions identified to enable this work to be taken forwards.

Summary of main issues:

Prevention at Scale in Buckinghamshire

The LGA Prevention at Scale (PAS) pilot is identifying and developing opportunities across the whole system, including County and District Councils, the NHS, communities, the fire service, Department of Work and Pensions and the voluntary, faith and community sector, to address the prevention challenge to reach, engage and motivate residents to change their lifestyle behaviour.

Getting prevention at scale right means we can develop a greater reach for prevention which will make a significant improvement in the health and wellbeing of our communities and deliver our Joint Health and Wellbeing Strategy.

The support offered by the LGA is enabling a number of focused projects to be developed and tested and for the learning to then be applied on a larger scale to develop Prevention at Scale locally. In order to get maximum value from the LGA resource, it was decided that the project will be linked to the implementation of the new integrated lifestyle service, Live Well Stay Well.

Progress update on the focused projects being taken forwards

1. Digital innovation

The new integrated lifestyle service includes a website, which enables professional referrals and self-referrals. It also allows residents to complete a lifestyle assessment and access support online. Prevention at Scale has supported expert user testing (January 2018) and client user testing (March 2018) on the new website to ensure the best user experience is available. The user testing provided invaluable insight

and recommendations. Many changes have already been made, including refining the registration process and lifestyle assessment questions, with many more changes being incorporated into a development plan for the service. The learning from this will be shared with stakeholders and has already been shared with the digital workstream for Adult Social Care transformation so everyone can benefit from what has been learnt.

2. Behavioural insight

This project focuses on developing insight about how we can engage and motivate key groups (men, people from black and Asian ethnic groups, routine & manual workers, more deprived communities) to make lifestyle behaviour changes, specifically stopping smoking and losing weight (healthy eating & physical activity). Working with partners to engage the priority groups, the insight work (using interviews, observing individuals behaviours and a survey) is being completed between June – September 2018. A comprehensive report will be produced including a set of ‘personas’ for key priority groups to inform communications campaigns, service development and understanding of how to support communities to make changes themselves.

The insight work will be followed by a co-design stakeholder workshop at the end of September to begin the next stage of applying the insight developed. With support from the LGA, the personas will also be used to develop a micro targeting communications approach to enable the most effective communications possible with priority groups.

The learning from the insight, co-design and resulting developments will also be able to be applied more widely to other services and will be shared with stakeholders.

3. Community and stakeholder engagement in improving lifestyles

This involves engaging the whole system, including health and social care professionals, the fire service, Department of Work and Pensions and the voluntary, faith and community sector, in the identification of opportunities and the co-creation of routes and processes to support residents to make lifestyle behaviour changes. There are many strands to support the whole systems approach, which started with a successful stakeholder event in January 2018. This was attended by over 30 different organisations including the voluntary & community sector, faith groups, fire service, Department of Work and Pensions, NHS, District Councils, and BCC directorates.

As a result of this event a number of key actions were identified and are being developed with partners, including

Key Action	Progress update
Developing the approach to Making Every Contact Count (MECC) in Bucks – to provide the confidence to those working with residents to have an effective conversation about lifestyle behaviour change	<ul style="list-style-type: none"> • Bucks MECC steering group established • Adult social care have committed to embed MECC into new social worker strength based training and every day

	<p>delivery as part of transformation programme</p> <ul style="list-style-type: none"> • Developing an easily accessible 10 minute online training video for MECC to support stakeholders to have discussions with residents (Available from October) • Ensuring Bucks is fully engaged with the MECC offer being developed across the Sustainability and Transformation Partnership (STP)
Working to develop community capacity to promote healthy lifestyles through engaging and upskilling existing volunteers	<ul style="list-style-type: none"> • Scoped existing volunteer networks and opportunities with BCC communities team • Developing community engagement plan with Live Well Stay Well which builds community capacity • Offering MECC training to community groups and volunteers (from October)
Creating a multiagency communications plan for the new integrated lifestyle service based on PAS insight work	This will be developed as part of the insight co-design and campaign planning between October 2018 and January 2019
Exploring opportunities to engage with Bucks businesses by working with Bucks Business First staff and using links to promote healthy lifestyles messages to businesses	Agreement to take a phased approach to get businesses on board – starting with developing a range of fact sheets which raise awareness of the impact and benefits of having a ‘healthy, happy and productive’ workforce. This will be informed by the PaS insight work
Exploring opportunities with DWP staff to deliver MECC as part of their interaction with clients	Ensuring DWP are involved and engaged in the STP MECC offer when developed
Exploring opportunities to work with the Fire Service to integrate their service offer with prevention	Using fire stations for the children's weight management programme and NHS Health Checks
Engaging faith groups in supporting residents to make lifestyle behaviour changes	<ul style="list-style-type: none"> • Invited to present at the Aylesbury interfaith network • Offering NHS health checks at Chesham Mosque (September)

A second stakeholder event will be held on 31st October 2018. This will continue to engage stakeholders in the Prevention at Scale programme. This will include key note speakers from The Design Council and the LGA digital team. The event will also include key approaches to developing successful projects, a Bucks progress update with the key learning so far, and to share outcomes from the behavioural insight work. It will also be an opportunity to support stakeholders to develop their roles in engaging and motivating residents to make lifestyle behaviour changes. The

event will conclude by agreeing the next steps to continue to take the Prevention at Scale work forwards.

The Design Council

As part of Prevention at Scale the LGA is supporting a programme of workshops with The Design Council during September and October 2018. The Design Council use techniques to explore and reframe challenges using a people centred approach to develop solutions. This will be used to inform the further development of the whole system approach and the application of the insight produced.

How will Prevention at Scale be evaluated?

The LGA have commissioned an external organisation to evaluate Prevention at Scale to specifically understand if the Prevention at Scale intervention has helped the pilot sites scale up their prevention programmes.

Locally using the KPIs and monitoring reports from the integrated lifestyle service, we will be able to measure the number of referrals into the lifestyle services, the sources of these referrals and the healthy lifestyle outcomes achieved. Google analytics can provide data on the user journeys on the LWSW website, showing areas for improvement or areas to expand and enhance. This will be used along with user satisfaction surveys undertaken by the LWSW provider. The impact and reach within priority groups of communications campaigns developed as a result of the behavioural insight can also be measured. Understanding the improvement in the engagement of organisations across the whole system with supporting residents to make lifestyle behaviour changes, can be assessed by including the numbers engaging and accessing MECC training, and qualitative feedback of local changes being made within community organisations.

Next Steps.

The LGA Pilot officially finishes in November 2018. However for Buckinghamshire this is the start of the Prevention at Scale work. Prevention at Scale work will continue to develop, with many elements continuing to be developed and delivered past the end of the pilot. We will continue to use the learning gained from the pilot, including the behavioural insight work which will inform a co-designed communications campaign in January 2019, targeting priority groups. The second stakeholder event in October will enable the lessons to be shared and to identify further opportunities and actions moving forward to engage the whole system approach and co-design services to support our residents make lifestyle behavior changes.

Recommendation for the Health and Wellbeing Board:

1. To note the update for the Prevention at Scale pilot
2. Member organisations to commit to continuing to support and participate in the Prevention at Scale pilot and resulting work within their organisations. Particularly:
 - a. Engagement to develop and deliver the multiagency communications plan
 - b. Involvement in co-design work based on the insight developed

- c. Leadership to ensure plans are in place for integrating MECC into frontline staff roles and monitoring the delivery and impact within the organization.
- d. Encouraging partner community organisations to engage and access MECC training.