

Report to: Newcastle City Council/Newcastle Primary Care Trust Joint Board

Report by: Helen Wilding, Wellbeing and Health Partnership Coordinator

Topic: Wellbeing and Health Summit 2011

Date: April 2011

Background

- The inaugural Wellbeing and Health Summit for Newcastle was held in January 2011. The event was a successful way of raising awareness of health and wellbeing amongst people with a leadership role in Newcastle. It also helped us to celebrate our new status as a Phase V World Health Organisation European Designated Healthy City.
- The second summit is being planned for the summer to tie in with the establishment of the Health and Wellbeing Board and the wider partnership development work. Date setting has proven problematic because of annual leave commitments and availability of the Banqueting Hall at the Civic Centre.
- This report aims to bring you up to date with the style and initial design of Summit 2011 for your comments.

Main aims of Summit 2011

- To reflect on changes and developments since Summit 2010 (including pledges follow-up)
- To reflect on the contribution that partnership working makes to improving wellbeing and health, drawing from the experiences of those present; and, to consider the changes partners and individuals need to make in order to make it successful
- To look forward to the new Health and Wellbeing Strategy and generate material and ideas

Participants

- Aiming for 180 – 200 participants
- We will need to pre-allocate a proportion of places to different sectors and I recommend that this is as follows: VCS (25%); NHS (25%); NCC (25%); other – such as universities, private sector, guests from other authorities (25%). Each sector/organisation will be asked to fill their places to involve a range of different perspectives and levels of seniority.

'Branding' and titling of the day

- Newcastle Partnership logo along with the Wellbeing for life brand
- Use of "Re-thinking wellbeing and health" as main title
- Subtitle "How can we work together to improve quantity, quality and equality of life for people in Newcastle?"

Rationale underpinning design

- Improving population level wellbeing and health and addressing public health problems requires us to adopt a systems-wide approach. To date, this approach has not been made possible by the way in which we "organize, lead, manage and regulate our policies and public services" (Hunter, 2009¹)
- A systems-wide approach requires all stakeholders to learn to work together in new ways to address health and wellbeing challenges.
- The Summit intends to create an opportunity for people from different organisations and different levels to interact together to:

¹ Hunter, D. (2009) Leading for health and wellbeing: the need for a new paradigm, Journal of Public Health, Vol. 31, No. 2, pp 202-204

- Build awareness of mutual expectations and create relational capital
- Promote convergence of ambitions, criteria and knowledge to support concerted joint action; and
- Develop shared insight into and the means to improve health and wellbeing in the city.
- Therefore, the intended design of the summit is highly interactive and enables participants to learn from and with each other, valuing and building on what is good about what we have in place at the moment.

Event preparation and displays

The following will be prepared in advance and displayed on the day, for use during the programme:

- “I kept my pledge..” posters. All people who made pledges at the 2010 Summit will be invited to prepare a poster (to a standard template) outlining what they have done as a result of their pledge. (Displayed size A3)
- Celebration of achievements. A series of A1 posters each illustrating a piece of partnership level work that has taken place in the last 18 months. These will draw from the work of the Wellbeing and Health Partnership and from the Children’s Trust.
- Wellbeing and health in Newcastle: What we know.
 - Posters giving the ‘data’ in terms of Quantity; Quality and Equality of life in the city. Graphs, along with brief paragraph to aid interpretation. Using JSNA overview as basis for the structure.
 - Factors at play: Using Dahlgren and Whitehead determinants model (or similar) annotated with 20 Priority outcomes and key indicators information

Subsidiary displays: main foyer

Displays of recent technological and research work e.g. work of Social Inclusion and the Digital Economy (SIDE). Invite universities to fill the space.

Layout and seating

- Exhibition stands for above displays will be flat long displays rather than ‘booths’.
- All discussions will take place on round tables seating 10 people each. Need to allow circulation space for people to review and discuss the exhibition materials.
- All participants will be pre-allocated to tables to ensure a mix of different perspectives on each table.

Event team and facilitation

- Both Barbara Douglas, Quality of Life Partnership and I have designed and facilitated large scale whole system events of this kind in the past. We intend to draw on these ‘in-house’ knowledge and skills for the event.
- A number of others will be involved in event planning and preparation of display materials.
- Newcastle City Council Corporate Communications team have made Event Management time available.

Programme

Exact details and timings are to be confirmed in the development period but initial suggestions are as follows:

1. Reviewing changes and achievements in the last year
 - Looking at “I kept my pledge..” and celebration of achievements posters.
 - Listening to progress and changes from key leaders (a selection of the people who were involved in the ‘top-room’ discussions at Summit 2010 – NCC; NHS; VCS; Ncle Pship). Just 2 or 3 mins each on the ‘change I am most proud of...’.

- Considering individual contributions: paired discussions on “Describe an occasion in the last 18 months when you worked well in partnership to improve wellbeing and health in Newcastle. This could have been with an individual; a particular community of interest, identity or geography; or the whole population²”. There will be some supplementary questions and pointers to this main question and participants will be invited to record what made that particular occasion special – behaviours; attitudes etc.
2. Designing the partnership we want to be
 - Table discussions “Imagine that tonight, a miracle takes place, when we wake up in the morning everything is in place for us to work well in partnership to improve the wellbeing and health of people in Newcastle. What would be happening? How would we know? What would be different?”
 - Each table to produce a list of the ‘features’ of their ideal world. List down the left hand side column and on the right the ‘polar’ opposite of that feature. (E.g. People readily share information People keep info to themselves.). These posters to be added to the wall space so all can view them.
 3. Our personal responsibilities in creating the partnership we want.
 - Review all posters produced by the tables.
 - Consider own existing role and behaviours....Looking at the ideal world ... what can I do more of? What might I do differently?
 4. Wellbeing and health in Newcastle: what we need to do
 - Review displayed information “Wellbeing and health: what we know”. Consider how own work and interests connect into this.
 - Making a difference. Workbooks will include details of three key areas of action:
 - Making sure people get the high quality services they need – health care; social care; health improvement; health-related
 - Building the capacity of individuals, families and communities
 - Addressing the social determinants of health
 - A set number of tables will be allocated to each one of these headings. Participants will select a table depending on their primary interest/role.
 - Tables to consider info in workbook and discuss questions aimed at carrying forward the best of the past into the future:
 - What works well now that we can build on?
 - What recent learning and development mustn’t we miss?
 5. Thinking about spreading the learning and involving others
 - Considering who you can involve in discussions like the ones you have had today. What are your commitments? (We will give people electronic access from materials for the day so that they can work with other stakeholders in a similar way. We will also ask people to report in once they have delivered on these commitments)
 6. Health and Wellbeing Board
 - Explanation of Board. Intro to those we know will be members.
 - Proposed Chair of Board (LoC) to do summary – what will be taken forward from today to the Board

² This question and the sequence that follows draws on a methodology known as Appreciative Inquiry developed by Cooperidge.