

Building Back Together

Valuing community and embedding Health Creation across the health and care system to address health inequalities

These key messages are relevant to everyone who has a role in health, care and wellbeing

1 HELP PEOPLE GAIN CONTROL

Efforts to address health inequalities must focus on enabling local people to gain a sense of purpose, hope, mastery and control over their own lives and immediate environment.

2 PRIORITISE HEALTH CREATION

ICs must prioritise Health Creation alongside treating illness and preventing ill-health in partnership with local authorities, communities and other local partners. It is core to an effective, sustainable health and care service that makes real progress in addressing health inequalities.

3 BUILD TRUST WITH COMMUNITY NETWORKS

All parts of the NHS and local authorities must seize the opportunity during and following COVID-19 to develop relationships of trust with enhanced community networks that understand their communities and are reaching more vulnerable people than before the pandemic.

4 SUPPORT COMMUNITY-LED ACTIVITY

All parts of the NHS and local authorities need to get behind and support communities to lead activity in their localities and to work with communities to integrate formal and informal forms of care.

5 FUND COMMUNITIES TO CREATE HEALTH

ICs should make resources available to fund health creating community-led work alongside local authorities, housing providers, VCSE and other local partners without trying to control how the outcomes are achieved.

6 VALUE AND BUILD RELATIONSHIPS

Relationship-building with communities and local partners needs to be valued as an essential role by the NHS. Paid 'connector' roles operating at a strategic level are required to drive genuine connections between the NHS, community groups and organisations

7 INCLUDE COMMUNITIES WITHIN GOVERNANCE

ICs, NHS Trusts and PCNs must include communities and local partners within their governance arrangements.

8 SUPPORT COMMUNITY DEVELOPMENT

ICs, including local authorities and other local partners, must assess the existing provision of community development and support further capacity where necessary.

9 DEVELOP NEW RECOVERY PATHWAYS

ICs must support the development of 'place-based multi-disciplinary teams' that can address the wider determinants of people's health needs as well as their clinical needs and that embed the five features of health creating practices within their working practices.

10 SHARE ANONYMISED DATA

All relevant parts of the NHS must embrace Health Creation alongside the current trend to Population Health Management. This means sharing anonymised data with communities, local authorities and other local partners, inviting them to help interpret it and participate in design and delivery of new services that respond to it.

ICs that consistently drive forward action on these 10 key messages will make real and sustained progress in addressing health inequalities across their footprints. Read the full reports at: thehealthcreationalliance.org

