

65
High Street

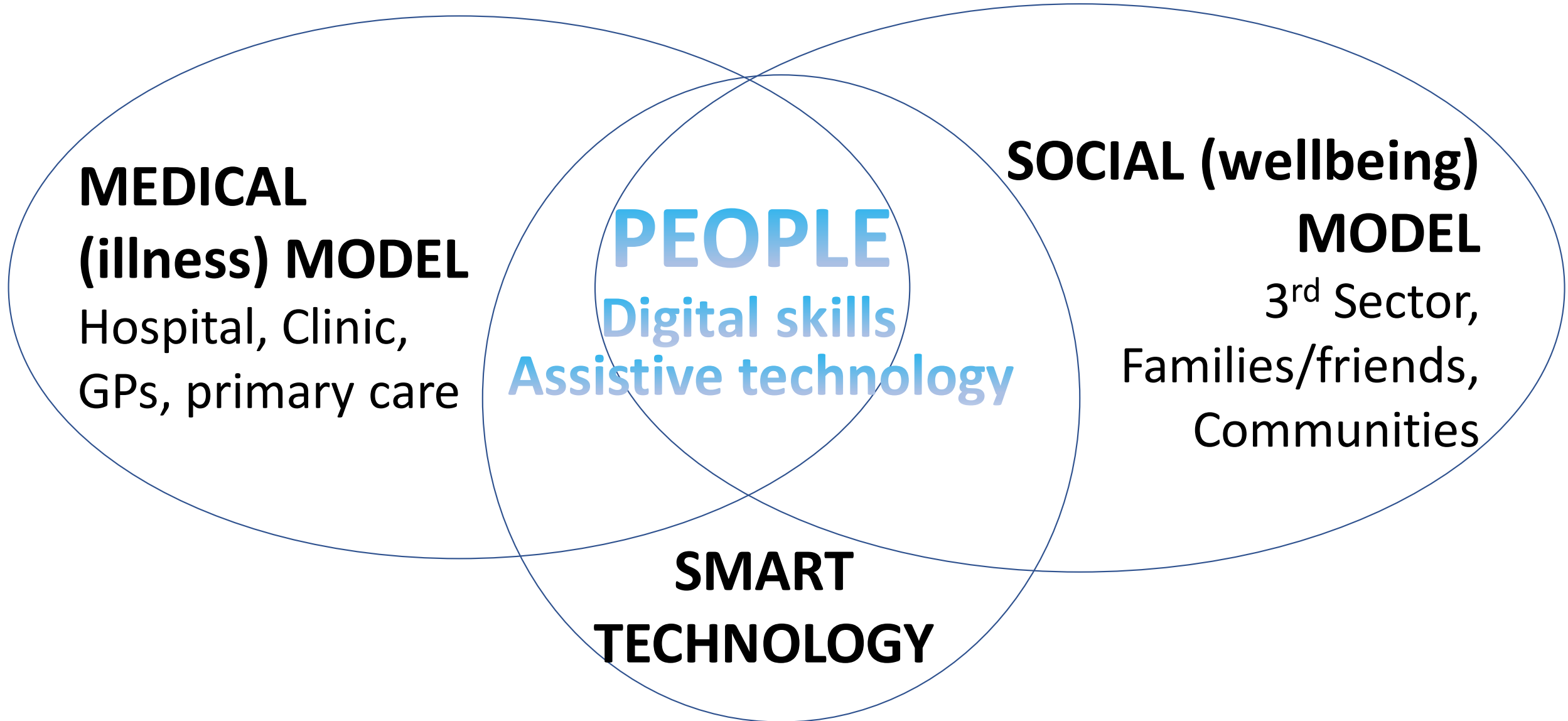


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People-Centred Health and Wellbeing

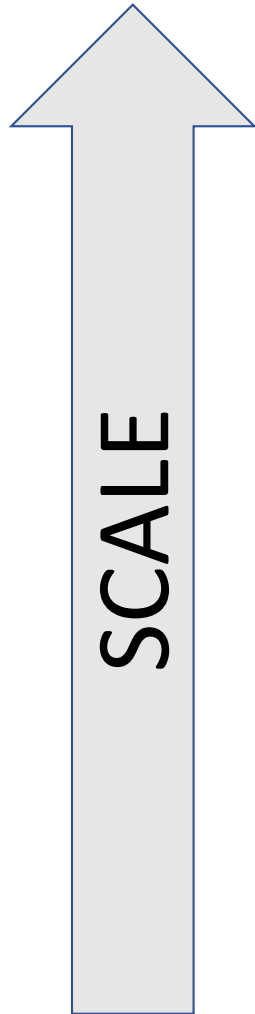


Treat the Person not the Condition

‘no decision about me without me’

- Wellbeing is made at homes and in communities, not in hospitals and clinics
- Community organisations are resourceful, adaptable and cost effective
- ‘Community’ is not an homogenous entity
- Community groups need places (not one-stop shops) to meet, share, support
- Develop knowledge, confidence, coping skills and resilience

Linking the Medical and Social Models



Statutory Bodies e.g NHS, District/County Councils, large charities

BARRIERS TO COLLABORATION

not done/invented here, silos, budgets, policies, professional boundaries, reorganisations, trust, power

3rd Sector e.g. volunteers, local charities, Community Interest Companies (CICs), housing associations

Challenges

(It's amazing what gets done
when no-one wants to take the credit)

- **Money is not the biggest challenge**
- **Abundance of:** silos, short-term funding/commissioning, paralysis by analysis and pilotitis
- **Lack of:** imagination, joined-up thinking and will (political, organisational and personal)



Serendipity Project Plan

(It's better to apologise than ask permission)

- Rule 1: have a clear ethos (there are no more rules)
- Labels = silos
- Get less organised/do less project planning
(inhibits creativity, reinforces silos, misses opportunities, creates opportunities to excuse inaction)
- Trust people: listen and learn
- Synergy happens one conversation at a time

JUST DO IT.



Places Connect People

- **Universal Personalised Care**
we are part of an essential multi-channel approach
- **Social prescribing**
medical or social model of care?
- **‘Supporting people to make good decisions’:**
‘places’ connect people with lived experience
- **King’s Fund: A Vision for Population Health**

