

Live Well

Programme Review

August 2024



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Executive Summary

Live Well is Greater Manchester's movement for community-led health and wellbeing. The Live Well programme, generously funded and supported by the National Lottery Community Fund, is testing new and innovative ways to grow community-led health and wellbeing across the city-region, to tackle entrenched health and wellbeing inequalities.

Residents and communities are experiencing persistent and widening health and wellbeing inequalities across Greater Manchester. The COVID-19 pandemic exposed and amplified inequalities, as outlined in the [Marmot Review](#). The scale of the challenge cannot be addressed by one place, person or sector alone, and must unlock the power and agency of communities to create health in their neighbourhoods. However, we know that high-impact, community-led approaches that already support people to live well in Greater Manchester, too often operate on the margins and outside of the spaces where power and resources exist.

Live Well is designed to respond to these challenges. Live Well will tackle health and wellbeing inequalities by changing how we work with communities and in our systems, to grow community power, action and wealth.

Five brave Accelerator Sites are testing and learning what it takes to grow community-led health and wellbeing over the two-year programme. They are shifting barriers relating to purpose, leadership, power and accountability to nurture different and better systems.

How might we...

Bolton:

Enable community voice to influence decision-making in Bolton?

Rochdale:

Use the anti-poverty work to shift power and decision-making so communities are working alongside those with positional power?

Oldham:

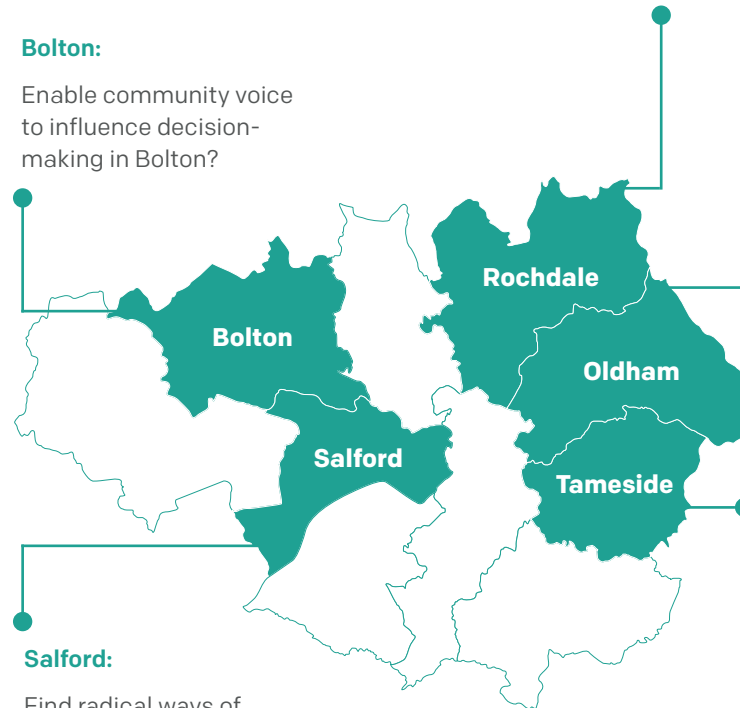
Develop district (neighbourhood) based budgets for commissioning and delivery of community-led prevention activity?

Tameside:

Use new and shared outcomes to demonstrate the role of Live Well activity in prevention?

Salford:

Find radical ways of collaborating so that communities can play a leading role in creating happier healthier lives?



The Accelerator Sites are teams formed of community, voluntary and statutory leaders. So far, they have successfully begun their plans in collaboration with partners and communities. The teams are supported by the programme's partner, Innovation Unit, who facilitate team monthly coaching sessions, bespoke local workshops, and bi-monthly Community of Practices.

The teams are also supported to surface powerful, practical learning about turning system barriers into system enablers, and to share this across the Greater Manchester region to propel the long-term system shifts required. A Live Well framework has been developed in the programme to understand, learn about, and drive these shifts, and ensure the Live Well ambition remains clear across places and sectors.

There are three important insights surfacing from and informing the work so far:

- Making the case for long-term change in a system that wants to see short-term progress is a common and persistent challenge, stimulating creative approaches by the sites to overcome this.
- Finding a starting place, by either building on existing work or locating a tangible space for testing, has helped the sites to carve out a clear pathway for the work, particularly when challenges are large in scale, interrelated and hard to unpick.
- Siloes, red tape, and competing priorities constrain leaders' and teams' work to shift barriers. Growing collaboration is essential to move this work forward, and the sites are doing this by nurturing relationships and agency in new ways.

Challenges like these will be recognisable to many and are more likely to be shifted by bringing together diverse perspectives and ideas. The Site teams are part of a growing Live Well movement, led by Greater Manchester's vibrant and brilliant communities. The movement champions and takes action on the vision for a better system where communities are in the lead of health and wellbeing. Coming together at Live Well GM-wide events, the stories from work across this movement have been instrumental in creating the hope, energy and momentum influential to Live Well being established as a city-region priority in the Metro Mayor's Manifesto.

Live Well is approaching another exciting stage in its journey. The Accelerator Sites are building on these promising foundations, with many shifting into experimenting with new practice, tools and collaborative spaces to test their ambition. A robust learning plan is being embedded to surface stories and insights from this work, ensuring it powerfully connects to emerging strategic priorities across GMCA and NHS GM. And the movement continues to build, with events planned across the next six months to grow our collective action towards creating a Greater Manchester where everyone can Live Well.



Live Well Dementia co-design workshop

“The answers to improving the health of our population in Greater Manchester isn’t going to be found in the hospital walls, it’s what our communities do by actually connecting people and feeling that connection, to what they love doing, to each other, to their friends, to their families and to everything that they live close by to. We need to do things differently to ensure community health and wellbeing is at the heart of all we do.”

Live Well isn’t another plan. It’s a movement for change that honours the agency that is already in communities to find solutions that work for them.”

Alison Mckenzie-Folan

Chief Executive of Wigan Council
and GM CEO portfolio lead for Live Well



Chapter 1

What is Live Well?

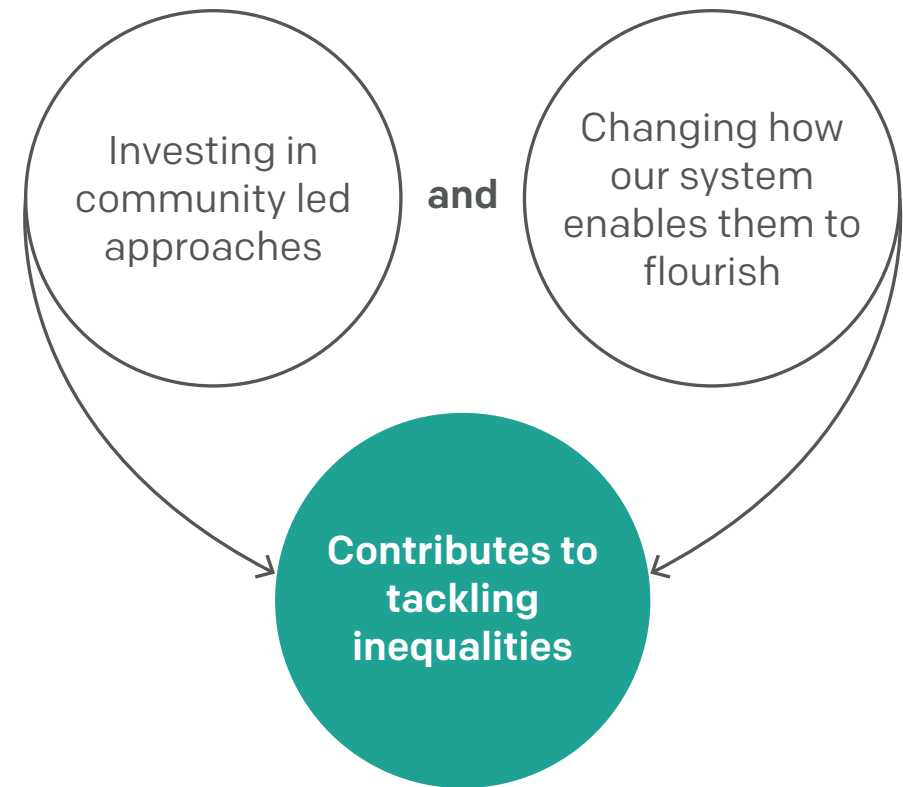
What is Live Well?

Live Well is a partnership between Greater Manchester Combined Authority (GMCA), Greater Manchester Integrated Care (NHS GM), the Greater Manchester VCSFE sector, the 10 GM local authorities and communities across GM to support healthier, happier and fairer communities by growing opportunities for everyone to Live Well.

Over the past year, this funded programme and the generous support from National Lottery Community Fund has enabled Live Well to become Greater Manchester's movement for community-led health and wellbeing, the name of the region's work and shared commitment to ensure:

- People have opportunities to be healthy, happy and connected through a variety of activities, support and information
- People can help make their communities healthier and happier, they are being heard and making a difference
- Communities have the resources to make lasting change happen

By investing in community-led approaches, and changing how systems enable them to flourish, Live Well will make a huge contribution to tackling health and wellbeing inequalities, creating the conditions where everyone in Greater Manchester can Live Well.



Live Well began in 2021, when the [Independent Equalities Commission](#) proposed a whole system approach to putting health and wellbeing equality for the residents of Greater Manchester at the heart of [strategic plans for the City Region](#).

It has been Andy Burnham’s, Mayor of Greater Manchester, [consistent manifesto commitment](#), setting out Live Well as a key part of Greater Manchester’s response to tackling health and wellbeing inequalities. It also features prominently in the region’s Integrated Care Strategy and is a key driver for Fairer Health For All, the health system’s response to tackling inequalities.

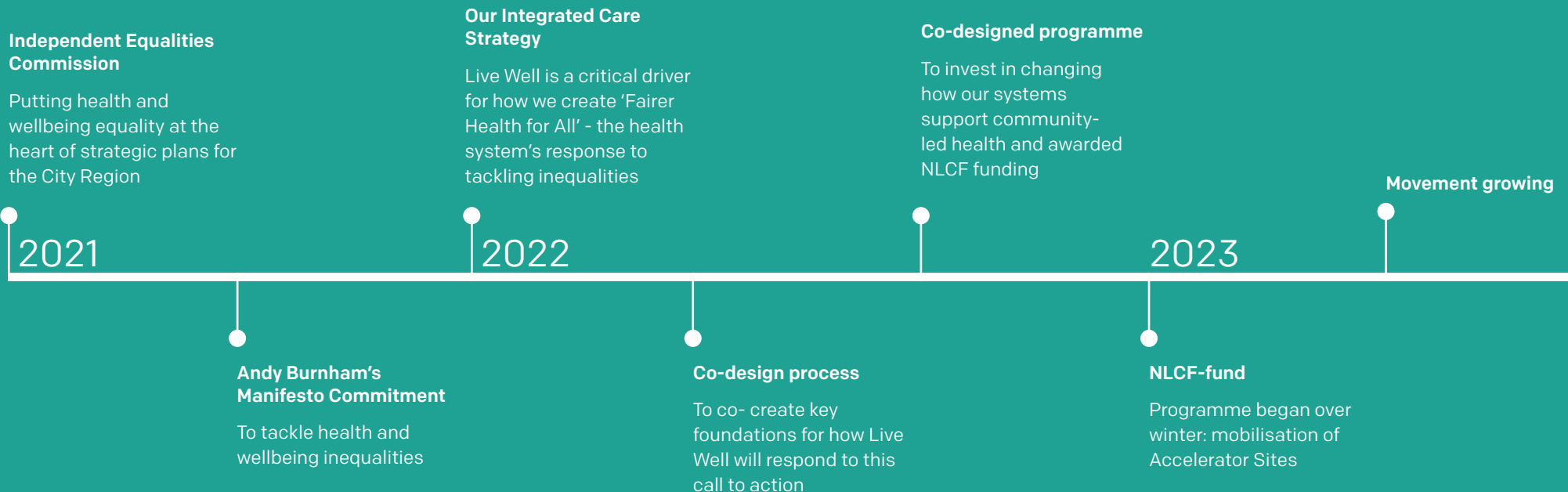
In 2021-2022, important foundations for how Live Well will respond to this call to action were co-designed across the GM system, creating the early building blocks for the Live Well programme, the focus of this report, funded by the National Lottery Community Fund.

This co-design process highlighted the plenitude and brilliance of local communities and organisations already helping people to Live Well across Greater Manchester. Their work is contributing in powerful ways to GM’s commitment to tackle health and wellbeing inequalities.

Live Well describes these community-led approaches as:

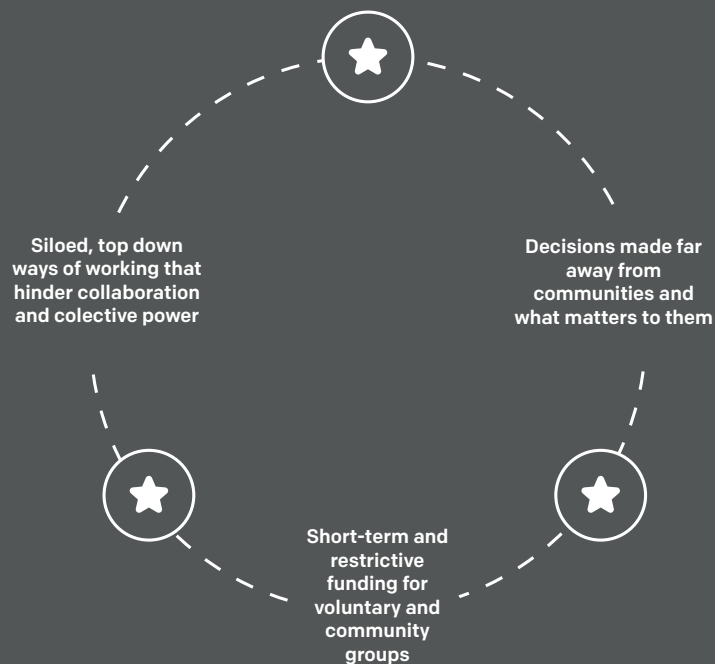
- Community-led action and support
- Community power and decision-making
- Community wealth, opportunity and ownership

The Story of Live Well



Live Well, rather than delivering or introducing a new service, seeks **to build on the existing impact delivered by and with communities.**

At its heart, Live Well must be **community-led**, which means that power and resources will need to be firmly placed with those already at the forefront of supporting communities' health and wellbeing.



The co-design process also revealed that there are common, shared systemic challenges that get in the way of growing and spreading impactful community-led work.

Community and voluntary organisations described the impact of short-term, restricted funding, decisions made far away from them and those most affected, and top-down leadership getting in the way of transformational, sustainable change.

Live Well therefore must also be **system-enabled**, which includes transforming how systems are set up and work for community-led health and wellbeing to flourish and grow.

The Live Well programme, funded by National Lottery Community Fund, has been designed to respond to this challenge, with five Accelerator Sites testing and learning about the system conditions needed to help community-led health and wellbeing to flourish across Greater Manchester.



Photo: Camerata, Gorton

We are delighted to submit a first programme review, co-created by a broad range of Live Well stakeholders, including the five Accelerator teams, core partners at GMCA and NHS GM, GM communities and VCFSE organisations as well as the support partner, Innovation Unit.

The review will highlight key learnings from the programme's movement building and mobilisation phase, including:

- Live Well Learning Approach
- Stories from the 5 Live Well Accelerator Sites
- Building the Live Well movement - engagement and events
- Core Learnings to date
- Plans for the next 6 months

In our Appendix you will also be able to find:

- Detailed Theory of Change for each Accelerator Site
- Look-Fors for community-led and system-enabled framework features
- Key Outputs from Live Well Dementia

The emerging Live Well Learning Framework

The Live Well framework describes the Live Well ambition, and points towards the new systems we need to grow community action, power and wealth to tackle health and wellbeing inequalities.

The Live Well framework describes the aforementioned **theory of change** that underpins Live Well.

Community-led prevention that successfully improves health and wellbeing outcomes for residents across GM requires:

1. Approaches that are community-led and that encourage community action, power and wealth to flourish within
2. An enabling system where barriers relating to purpose, leadership, power and accountability are identified and shifted.

The Live Well framework has been developed over a series of five in-depth online and offline development sessions between December 23 and February 24, including core partners at GMCA, NHS GM and Innovation Unit. It currently works as a diagnostic and learning tool. The work of the Live Well Accelerator Sites will generate learning that begins to demonstrate tangible examples and promising practice against the core features described. The framework will underpin strategic alignment in other policy areas through supporting diagnostics of different systems in relation to community-led prevention.

Early in the programme, there was a need to establish clarity around the Live Well ambition and theory of change, including the core features of the work that contributes to this. The framework was developed to support:

- Communities, services and leaders to easily identify and describe where their work contributes and aligns to the Live Well vision
- Accelerator sites to develop and iterate their plans aligned with the theory of change
- Senior leaders to understand and draw connections between their work and Live Well, including using the framework to make plans for growing community-led health and wellbeing in their sector/policy area



Community-led Features

Live Well is grounded in the idea that community-led approaches have the ability to improve residents' health and wellbeing and tackle persistent inequalities.

Community-led Action and Support

which includes:

- Communities have opportunities to be healthy, happy and connected through a variety of accessible and equitable activities, support and information in their neighbourhoods
- Communities readily taking action on the things they care about through peer to peer conversations and connections

Community Power and Decision-Making

which includes:

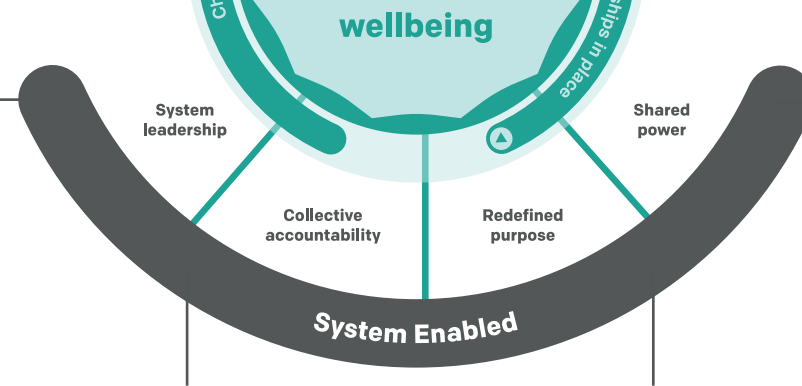
- Power within communities, e.g. through community organising, neighbourhood councils and unions
- Community-led decision-making and co-production, e.g. poverty truth commissions, legislative theatres and citizens assemblies

Community Wealth, Opportunity and Ownership

which includes:

- Community-led initiatives that create and retain wealth locally, e.g. co-ops or social enterprises, or ownership of physical spaces
- Participatory approaches to investment and funding
- Places where communities have the resources, including assets, tools, information and money to affect change





System Leadership

Collaboration across (e.g. organisational, sector) boundaries

Leadership that enables Live Well to thrive might show up as:

- Leaders who are ready to embrace uncertainty and complexity
- Leaders who emphasise soft power over hierarchy, command and control
- Distributed leadership via collaborative models involving multiple organisations and sectors
- Values and mission led teams

Collective Accountability

Communities taking an active role in formal processes such as governance and regulation

Accountability that enables Live Well to thrive might show up as:

- New and participative governance models
- New models for sharing risks with organisations, sectors and communities
- New outcome measures that matter to communities
- Sustained community engagement and feedback and access to evaluation findings

Redefined Purpose

Reorienting effort, relationships, and resources to achieve different and better outcomes

Purpose that enables Live Well to thrive might show up as:

- A widely publicised case for change and mission
- Disrupted narrative
- Emergence as strategy
- Being explicit and intention about shifting systems

Shared Power

New approaches to decision making and resourcing that enable communities to thrive on their own terms.

Power that enables Live Well to thrive might show up as:

- New models of finance and commissioning
- Creative use of digital technology with an emphasis on equity and access
- Actively building community ownership and wealth

System-enabled Features

Live Well is also grounded in the idea that in order for community-led approaches (action, power, wealth) to flourish and become sustainable long-term, the system needs to create an enabling environment, shifting persistent barriers.

The Live Well framework builds on these learnings and describes four interconnected system enabling conditions related to:

- Leadership
- Accountability
- Purpose
- Power

These enablers are connected to the [Good Lives GM Compass](#), which points the way towards enabling systems that can effectively nurture community-led innovation. The Compass has grown out of years of learning about social innovation and system change in Greater Manchester, and is supported by theory and evidence from leading systems thinkers in the UK and around the world.



It is important to add that the framework has evolved from the original diagram, the foundation of the 2021 Live Well Co-Design and this programme's early conception.

Whilst providing some of the core Live Well building blocks, there was a need to highlight in greater depth the interconnectedness between community-led approaches and enabling system features.

Community-led and system-enabled provide the spinal cord and overarching vision for Live Well.

This focus ensures that by using this framework, systems such as the Live Well Accelerator sites are able to:

- Build up a coherent picture of existing community-led prevention or Live Well activity, understanding assets and gaps
- Identify core barriers that get in the way of Live Well activity to flourish, taking important steps towards building more enabling system conditions.

How the Live Well Framework is used

Live Well Site Coaching

The Live Well framework has been at the heart of our support and coaching to the Live Well Accelerator Sites. The framework has been a vital tool to:

- Identify the primary system barrier at the centre of Accelerator Sites' local plans, enabling teams to set a clear focus for their work throughout the funding period and beyond
- Draw connections between the work of Accelerator sites, fostering shared learning peer to peer support via the Live Well Community of Practice (more on this below)
- Set clear goals and develop measurable outcomes and indicators across both community-led and system-enabled features



Photo: Innovation Unit

How the Live Well Framework is used

Live Well Learning Plan

The Live Well framework provides the basis for this programme's learning approach. We will create evidence, stories and learning that can demonstrate impact and help us test the core idea (theory of change) at the heart of Live Well. Specifically, the programme will co-create and share learning across two enquiry domains:

- Exemplify and tell stories about what promising practice looks like across community action, power and wealth;
- Identify and tell stories of promising examples of Live Well teams turning system barriers into system enablers that will encourage community action, power and wealth to flourish.

Learning will be captured, synthesised and shared in different forms with a wide range of audiences, including in reflective coaching with Accelerator Sites, at Live Well movement building events, and in strategic conversations with different policy areas and senior leaders.

Live Well's powerful learning about tackling system barriers will be connected and shared across systems in Greater Manchester through [GoodLives GM](#), a partnership between Innovation Unit and Greater Manchester Combined Authority. This will contribute to continued active support and senior sponsorship for the Live Well ambition as part of the city-region's work to tackling inequalities.

This work will be further supported by GM NIHR Applied Research Collaboration (ARC-GM), University of Manchester. ARC-GM will be collecting data focused on communities' health and wellbeing outcomes, highlighting the impact of Live Well on tackling health inequalities across Greater Manchester.

How the Live Well Framework is being applied

Promising practice across community action, power and wealth

Our core team has drafted a set of indicators or 'Look Fors', that enable us to describe good practice across community-led action, power, wealth.

Ensuring this is grounded in evidence, we will conduct a horizon scan and highlight learning from relevant sources such as Joseph Rowntree Foundation, New Economics Foundation, Kings Fund, Social finance, Systems UK, Lankelly Chase, and Coops UK.

In addition to this, we will conduct primary research, engaging organisations and leaders from across the Live Well movement and GM localities, codifying (i.e. describing in greater detail) promising practice across the various 'Look Fors'.

[Appendix II describes our current draft list of community-led 'Look Fors' to be developed between August 24 and November 24.](#)

Promising examples of Live Well teams turning system barriers into enablers to encourage community action, power and wealth to flourish

Look Fors across the system-enabled features of the Live Well framework are based on extensive research developed by Good Lives GM. This means we have an evidenced base to describe what we mean by a redefined purpose, system leadership, shared power and collective accountability.

[Appendix II also includes a full list of system-enabled 'Look Fors'](#)

Our learning strand will exemplify this in a Live Well context, and we will work closely with the five Live Well locality teams to surface stories, evidence and learning that enable us to describe:

- Promising practice across these Look Fors
- The process that underpins this and how teams are turning system barriers into system enablers

To capture this learning and co-develop stories with the sites, we will be using our already existing Live Well infrastructure, for example:

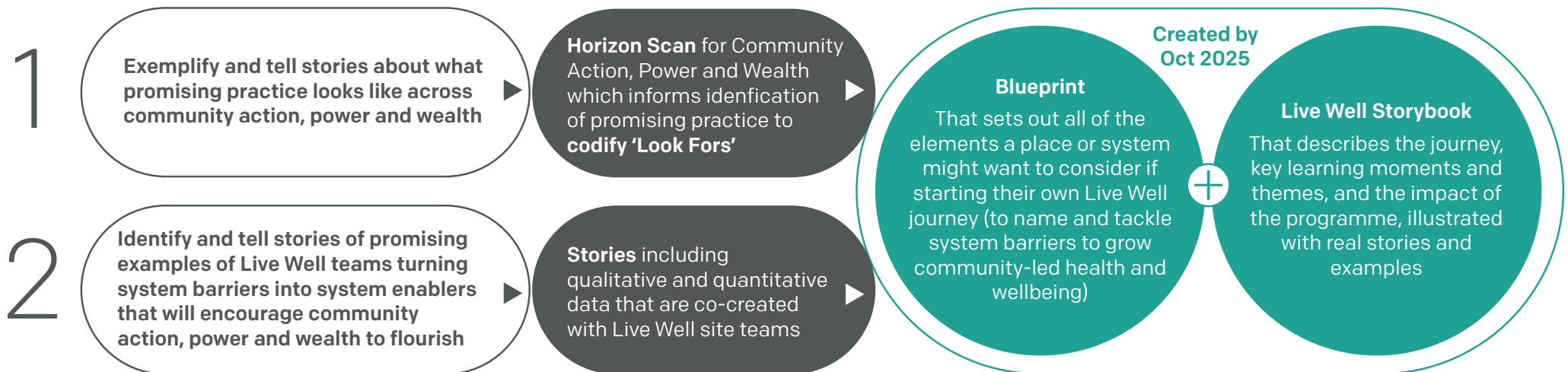
- Coaching spaces via an explicit learning and reflection focus, agreed upon in advance by coach and site and built into coaching plans.
- Community of Practice via continual learning built into workshop design as well as set sessions to reflect on process and key learnings.

As well as, delivering supplementary learning activity through:

- Learning capture templates
- 1:1 learning conversations to surface greater detail and depth, for example the overcoming of a significant challenge or a particular process of change

The evidence, stories and learning created through this process will offer deep reflection and insights on building an enabling environment for community action, power and wealth to grow across Greater Manchester. We will use this evidence to develop learning outputs across the two central enquiry lines.

Our learning plan at a glance:



A note on public services and reform

We will generate powerful learning about the theory of change that underpins Live Well.

That is, community-led approaches to tackling health and wellbeing inequalities require an enabling system where barriers relating to purpose, leadership, accountability and power are successfully removed. This focus on growing and sustaining community-led activity, rather than designing new programmes and services, will surface new questions about the role of public services and public service reform in prevention. The learning plan will pay attention to the interplay between public services/public service reform and the Live Well activity, actively connecting this into strategic spaces locally and regionally.

System-wide diagnostics and learning tool

The Live Well framework is being used as an important diagnostics, design and learning tool, already demonstrating impact beyond this programme as a foundation for strategic decision-making.

Examples include Live Well with Dementia and Live Well Housing, two short term, separately funded projects to co-design a vision and offer for Live Well in a specific policy context. The Live Well framework has provided a useful structure for methodology, enabling key stakeholders to articulate what a community-led offer to live well might look like and the key system enablers required to bring this to life.

We provide a bit more information on these projects in Chapter 3, but it is important to note here that learning between the work of the sites and wider policy areas interact, contributing powerfully to building the wider Live Well Movement.

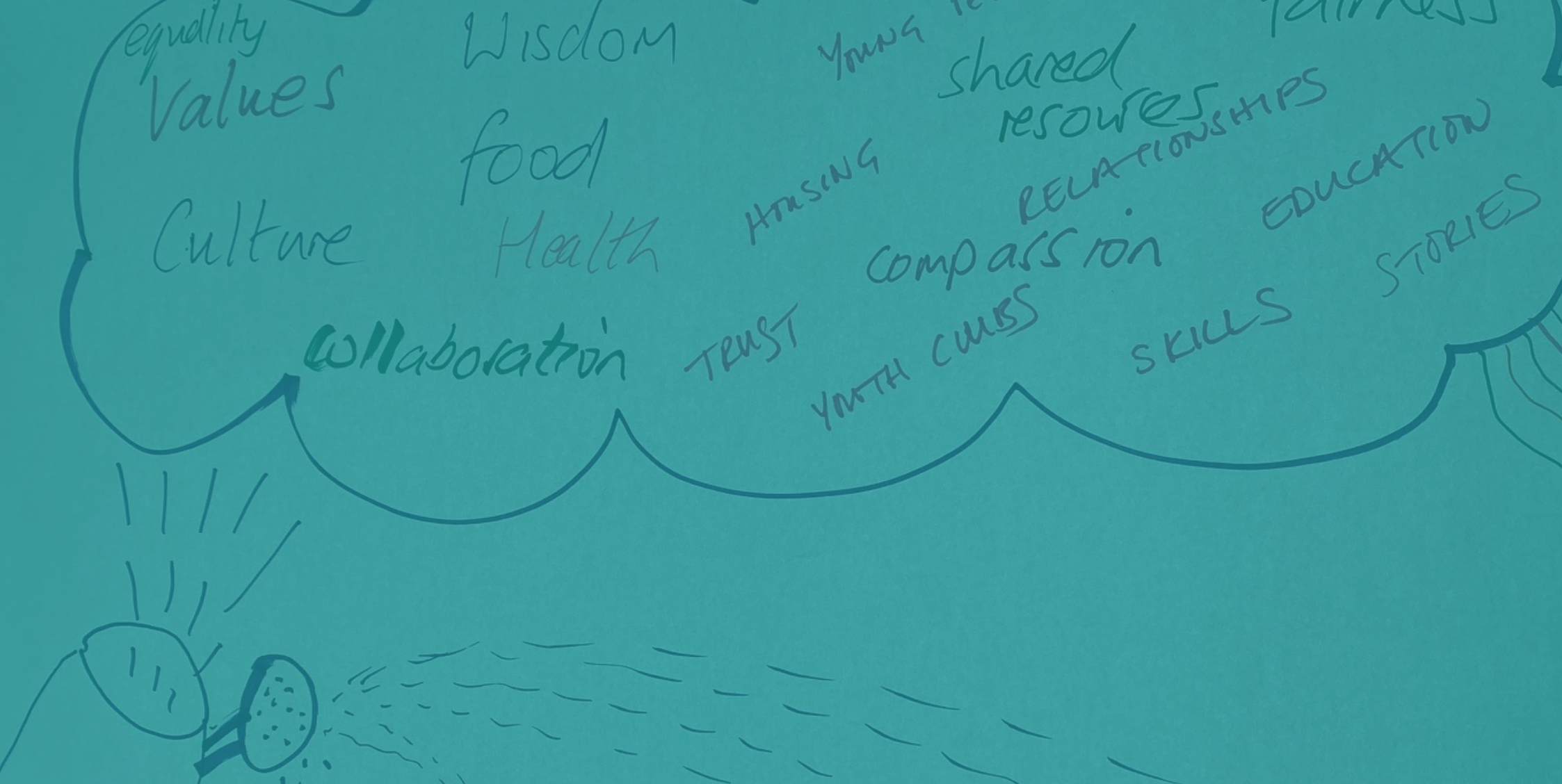
Evaluation and Research

We will also work with ARC-GM to link our data back to and understand the impact on wider health and wellbeing outcomes. This work is in its early stages, and we will facilitate an open learning conversation in October to connect these vital learning and evaluation strands.

How we continue to develop the Live Well Learning Framework

Over the course of the next six months, the Live Well core team including system leaders from both GMCA and NHS GM will come together during two in-person learning sessions in September and December to:

- Test and refine the narrative around the Live Well framework grounded in learning from the programme work
- Codify the community-led 'Look Fors' based on an extensive horizon scan and interviews
- Co-develop a robust approach for applying the framework to different GM policy areas



Chapter 3

Live Well Accelerator Sites

Live Well Accelerator Sites

Central to the Live Well programme are five Accelerator Sites from across Greater Manchester, including:

Oldham

Tameside

Rochdale

Bolton

Salford

They are leading ambitious work to name and tackle system barriers to community-led health and wellbeing by testing the features of an enabling system, as identified in the Live Well framework.

Their Live Well 'experiment' will accelerate progress and learning around how to shift to community-led prevention as part of their ongoing work to tackle health and wellbeing inequalities. This Accelerator work will generate learning that supports long term shifts across the city-region.

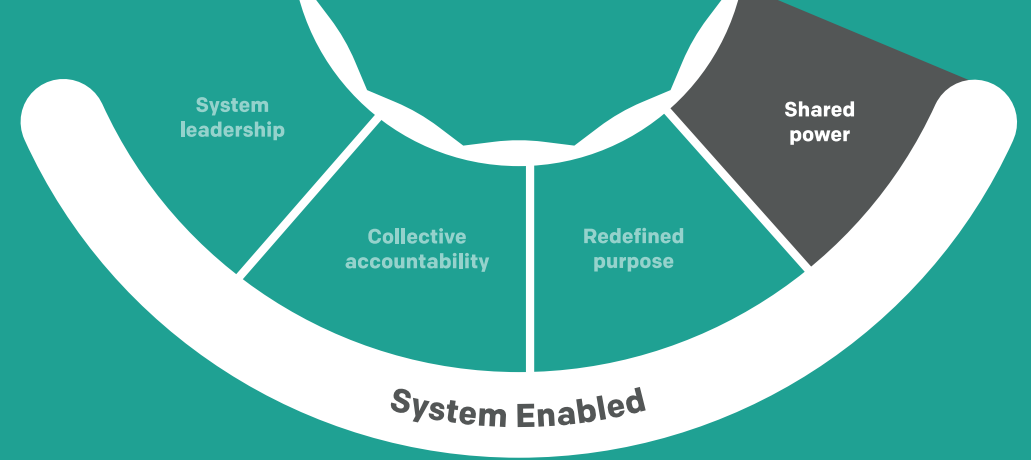
In the original programme proposal, sites had selected a 'strategic challenge' to work on, including Collaborative Leadership, Workforce Development, Data and Intelligence, and New Models of Funding. The development of their work - including the language used to describe it - has built on from this, with the coaching around the framework enabling a deeper, more accurate diagnostic of their local systems and a better prioritisation of their focus.

It is worth noting that the five sites are at different stages on their journey. Political, operational and financial shifts at both local and regional levels have presented challenges to the development of their work (see Section 'Key Programme Learning'). However, they have all successfully identified and maintained the focus of their Accelerator work despite the changing contexts. Many of the Site teams are delivering exciting mobilisation and development activity with a wide range of local stakeholders, in the shape of engagement, co-design, research and much more.

This section provides an overview of each of the five Accelerator Site's focus, work and learning so far.

Oldham

East District, Oldham



How might we:

Develop district (neighbourhood) based budgets for commissioning and delivery of community led prevention activity?

What is the barrier we are addressing?

Prevention budgets are increasingly fragile and short-term in nature. There is currently no integrated investment or shared outcomes owned and contributed to by all partners. The current financial situation and budgeting approach are deepening cultural barriers to joint-decision making, at both Local Authority and neighbourhood level. Consequently, decision-making is happening further from communities.

What is the system enabler we are testing?

We are testing Shared Power. Our ambition is to develop district (neighbourhood) based budgets for commissioning and delivery of community-led prevention activity. Specifically, we are working to co-design and embed a sustainable mechanism for the commissioning and delivery of prevention in East District, with strong place-based governance that involves communities and VCFSE groups in decision-making.

Who is involved in the work?

Leading: Action Together; Local Authority (Public Health, Districts and Policy); Integrated Care Partnership Oldham leads

Engaged: Health & Social Care portfolio lead, Health & Wellbeing Board, Public Service Reform Board and Oldham System Leadership Group

We are in the process of engaging stakeholders in East district around this work. Specifically, East Community Explorers Forum (grassroots VCFSE groups), East Operational Leads (public sector professionals working in the district), East Community Council (elected members and public sector strategic leads.)

What do we hope to achieve by October 2025?

- There is a sustainable mechanism for the commissioning and delivery of prevention in East District, with strong place-based governance that involves communities and VCFSE groups in decision-making.
- Residents and voluntary organisations are given the support and training to grow their confidence to be involved, and there is a proposal for, and a pipeline of, community leaders and volunteers to keep this going.
- This is guided and underpinned by a shared prevention outcomes framework, embedded and owned by all partners across the system. These outcomes define improvements in ways that are important to residents.
- There is a compelling Case for Change that articulates the scale of investment and activity needed. Through this work, the vision for prevention in Oldham has become everyone's vision and there is a growing sense and feeling that 'we operate as community-led'.

Monthly Steering Group established to lead the work. Weekly operational sub-group to progress with delivery and mobilisation of the work.

★ **Success:** Building on existing successes and relationships to strengthen our approach.

Developed our strategy for system engagement. Built a narrative to position it as an opportunity to enhance existing areas of transformation work in the borough, and to invite people to participate. Engagement underway and/or planned at all levels in the system (grass roots community groups to strategic leaders and elected members)

★ **Success:** Developing and refining a clear narrative and vision around Live Well for Oldham and ensuring engagement is broad and deep across the system.

⚠ **Challenge:** Engaging people around a concept or theoretical piece of work with long-term outcomes in a context of unprecedented operational demand and financial pressures within the system. Addressing this by demonstrating the benefits for existing strategic priorities and service areas, rather than as something additional to already overstretched workloads.

Developed our Theory of Change

★ **Success:** Securing funding from the ICB to support the Live Well work.

⚠ **Challenge:** Where to begin the conversations: seeking budgets to pool, or developing new decision making processes to support the case for pooling budgets. Securing the ICB funding has addressed this, by providing an opportunity to begin testing new approaches to decision making. We will then have the mechanisms and evidence to support the case for continuing this approach longer-term.

Funding (c. £90k) secured from the Integrated Care Board (ICB): enable us to explore and implement new local decision-making approaches around that budget, shifting power and decision making to local communities.

What we've done so far

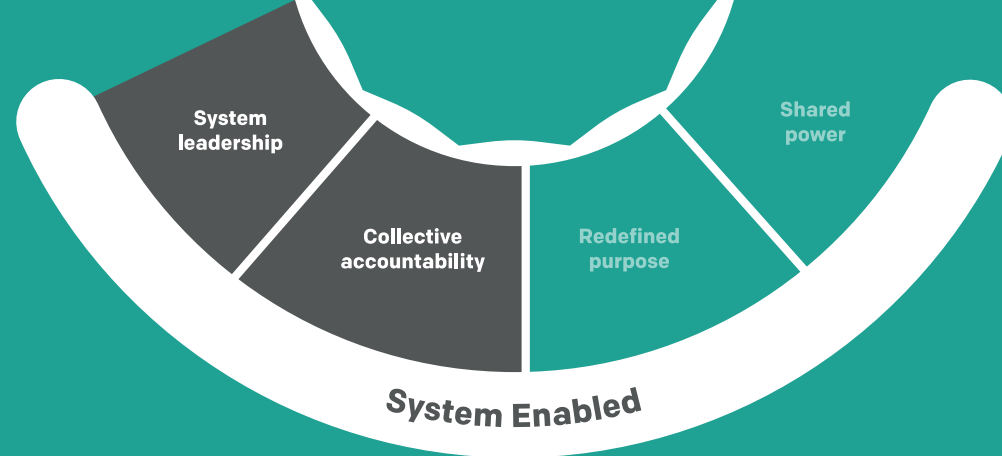
Co-design decision making processes for ICB funding distribution with communities and partners in East. Series of workshops through the late summer ready for launch of the funding programme in the Autumn. Funding's focus is on supporting community-led prevention.

Continue engaging key stakeholders to champion this work at a senior level, making key links into their areas of work. Specifically, the Adult Social Care Target Operating Model and Economic Development Place plans

What we are doing next

Tameside

Borough-wide, Tameside



How might we:

Use new and shared outcomes to demonstrate the role of Live Well activity in prevention?

What is the barrier we are addressing?

There is a reduced, narrowed focus on prevention across the local statutory system and the role of the local VCFSE within this. Consequently, there is reduced investment in preventative activity delivered by the VCFSE, as resources are prioritised away from prevention, with decisions being made in silos and focused on the short term.

What is the system enabler we are testing?

We are testing Collective Accountability & System Leadership. Our ambition is to co-produce a shared outcomes framework for community and voluntary sector-led prevention activity, connected to local priorities, that uses creative data and story gathering methodologies to describe the impact of existing activity and garner greater understanding and support for community-led prevention in Tameside.

Who is involved in the work?

Action Together

Public and community sector organisations (Population Health, Social Care, Housing, Community Safety, ICS and VCFSE)

What do we hope to achieve by October 2025?

- A shared outcomes framework for community and voluntary sector-led prevention activity, connected to local priorities
- Clear and shared methodology for VCFSE organisations to use data and insight to better describe live well activity / community led prevention
- Powerful stories of live well activities and the lives' of Tameside residents, shared and used across the system to influence decision making / policy development
- Greater leadership buy-in and support for Live Well activity within prevention, demonstrated through commitment to a co-developed prevention strategy that builds on the outcomes framework

⚠ Challenge: The local Live Well activity our original submission was built on, namely, the Tameside Social Prescribing service, ABCD programme and Community Wellbeing grants for VCFSE, were decommissioned in March 2024.

In addition, we have experienced significant financial and leadership changes locally in the Council and Health areas of our system, meaning that the original sponsor of this work has left. Focus has shifted to meeting budget pressures and statutory functions within constituent organisations resulting in resources being prioritised away from prevention, decisions being made in silos and focus on short term.

This has meant that galvanising commitment to and resourcing community driven wellbeing activity from the system has been lacking, and so we have struggled to land this work in the system, in the spirit of its original focus.

Carried out a number of iterations of the plan for this work to arrive at a practicable programme

★ **Success:** Sharing our journey with other localities. Key element of revising and developing our thinking.

★ **Success:** Identifying a focus on a key issue we want to solve and have the potential to influence (the locality approach to prevention)

★ **Success:** Utilising 'soft power' to galvanise a ground swell of support, rather than working to the expectation that there is a shared understanding of Live Well activity being 'the right thing to do'

Worked with 'the willing' to continue to redefine a programme. Still meets original outcomes and reflects current local picture. Held a Theory of Change workshop that helped partners to coalesce around this programme and appetite for change there was good.

What we've done so far

Review data from membership and health checks: overlay with local health and wellbeing data in neighbourhoods to develop deep understanding of local challenges and strengths

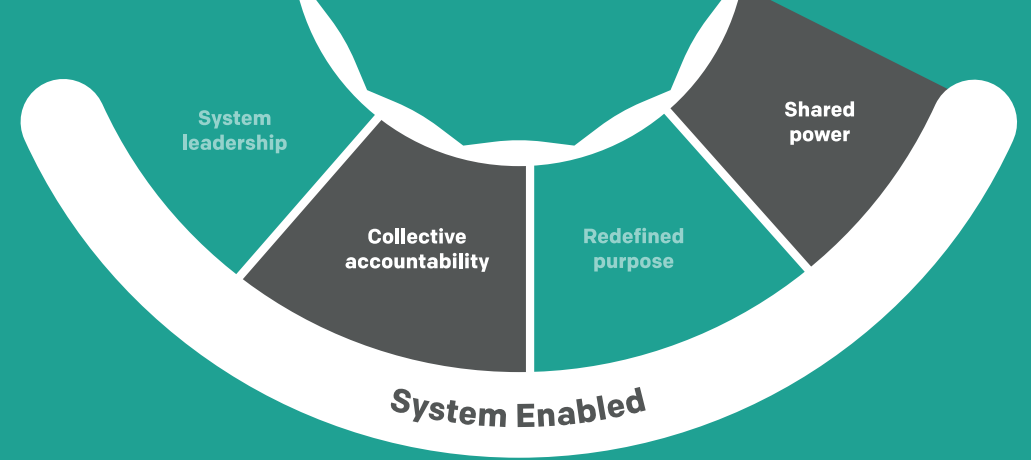
Develop a toolkit and/or shared and simple methodology for measuring Live Well activity for VCFSE organisations, aligned with shared outcomes framework

Convene a Collaborative from across crucial public and community sector organisations (Population Health, Social Care, Housing, Community Safety, ICS and VCFSE): co-produce shared outcomes and develop and test methodologies for gathering powerful impact stories and data against outcomes

What we are doing next

Rochdale

Borough-wide, Rochdale



How might we:

Use the anti-poverty work to shift power and decision-making so communities are working alongside those with positional power?

What is the barrier we are addressing?

Resource constraints and 'pressure to deliver' means that funding landscapes, outcomes and project delivery are driven by short-termism. Decisions are made far away from communities and a lack of transparency about where power exists. This means that decisions that are made sometimes do not have meaningful impact. Staff, without permissive and psychologically safe workplaces, can be uncertain about new approaches and collaboration with communities.

What is the system enabler we are testing?

We are testing Collective Accountability and Shared Power. Our ambition is to put community leaders and those with lived experience at the heart of decision making around Rochdale's anti-poverty strategy. This looks like an anti-poverty foundation group 'steering' an anti-poverty network to influence long-term change around the root causes of poverty. This will be done partly through acting as a 'critical friend' to the council's anti-poverty strategy via formal governance arrangements and partly through looking at creative ways of community organising and community wealth building to improve the lives of the people in Rochdale.

Who is involved in the work?

12-person anti-poverty foundation group (FG), including representatives from across the VCFSE sector, many with lived experience. They represent a breadth of Rochdale's communities and a depth of knowledge and experience.

Action Together & wider VCFSE sector

Public Health and Transformation team, council

What do we hope to achieve by October 2025?

- The network and group are well embedded, and a culture of honesty is emerging across leaders. Group members are confident stewards of the work (rather than responsible officers), receiving support and scrutiny from networks. There is a pipeline of community leaders and new networks forming.
- More leaders in positional power are engaged with and actively power sharing in various forms. There is evidence that equity is at the fore of decisions and action. There is evidence of a growing culture of psychological safety and permission to fail, learn, ask and make mistakes.
- There is annual reporting about poverty between the network and the council, with full transparency around money and impact. There is evidence of democratising who has access and who can interpret data.
- Stories are valued as important as data and are situated alongside that, seeding emotional and cultural responses. Stories influence decision-makers to take genuine action so that people's lives are not 'on safari'.

Developing ideas for the anti poverty work (2023)

Anti-poverty assembly (November 2023): Brought together diverse groups across the borough to explore poverty through a lens of intersectionality.

Designed and ran open and transparent recruitment process for Foundation Group: Represent the breadth of Rochdale's communities and a depth of knowledge and experience. Also chosen based on a series of interview questions which looked at: their interest and willingness to look at 'root causes', their willingness to collaborate with partners across different sectors and different experiences, and their resilience in working in something difficult and uncertain.

Second foundation group meeting: set priorities for Wider Essentials Fund (funds £18,000 in grants) - digital access and inclusion, well-being, travel, ID support, white goods, and toiletries and examined how other organisations are using cash-first approaches. They concluded that the Wider Essentials Fund could accept cash-first applications, trying it out with a few organisations with Action Together's support. Also ran horizon exercise to imagine headlines about Rochdale in 10 years: 'a brighter, better and prosperous Rochdale' and 'we rise by lifting others.'

★ **Success:** Recruiting a strong foundation group with a wide range of expertise that truly represent Rochdale.

★ **Success:** FG setting the priorities for Wider Essentials Funding pot - allowed VCFSE groups to apply for funding for essentials that people experiencing poverty might need, other than food. Trial of cash-first with a member.

⚠ **Challenge:** Balancing energy of FG and their drive to 'do' with the need to take time, build trust and keep long term goals in mind. Addressing this by balancing the time between quick practical wins (e.g. priority setting), with group trust building and understanding root causes of entrenched poverty.

Systems Change Facilitator, Heather, joined the team through Action Together (January 2023). Focus on building relationships and raising awareness of the work by promoting the new anti-poverty network.

First Foundation Group meeting held (April 2024) to define values that will shape their work: respect, integrity, authenticity, trust, love, compassion, empowerment, collaboration.

'I want to be part of the change for Rochdale.'

'I want to use the community's energy to make a difference.'

'I want to work to uplift people and their voices.'

First anti-poverty network (June 2024).

35 attendees from across the public and VCFSE sector. Mapped a social and political timeline of poverty in Rochdale, mapped root causes of poverty, and shared how poverty feels in communities they work in. Feedback: 'full of ideas and energy' and did 'great work in addressing poverty and barriers people face.'

★ **Success:** High attendance and engagement and a feeling of momentum.

Third Foundation Group meeting: provocation from network event "when people talk about alleviating poverty, they often only talk about people having just enough. I want people to have much more than this. I want people to thrive and flourish"

Full day FG meeting in September to reflect on their own narratives- what brought them to this work and what drives them. Spend time looking at their own understanding of root causes and set their own priorities for the insight they hope to gain from the network.

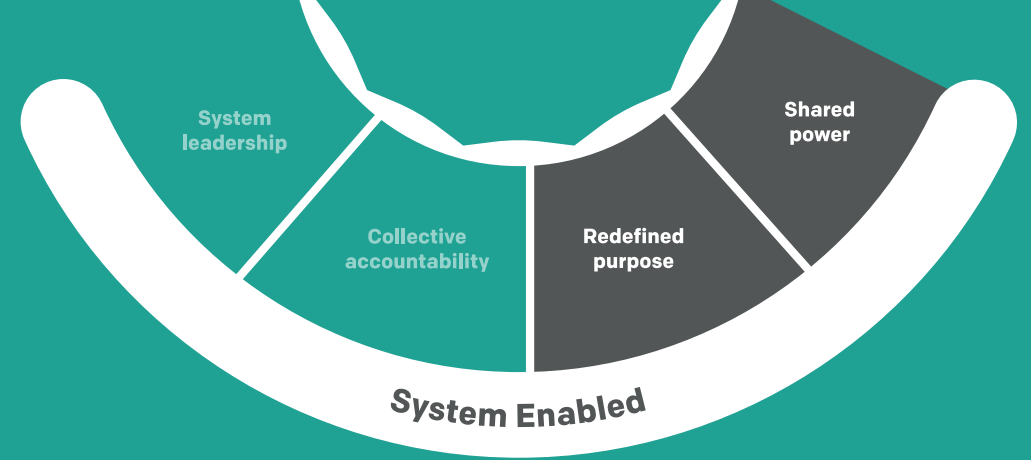
Start a 'power-shifting' project with public sector colleagues, and FG will continue to work alongside the poverty strategic group to give input on the council's anti-poverty strategy.

Foundation Group meetings are planned monthly for the next six months, with the next network meeting taking place in October.

What we are doing next

Bolton

Borough-wide, Bolton



How might we:

Enable community voice to influence decision making in Bolton?

What is the barrier we are addressing?

We recognise that there is an abundance of good work with communities across Bolton, but this is often disjointed and in siloes. There is no common purpose driving how the system works together, and what for, in Bolton. There are multiple barriers within the community, workforce and system to true collaboration and community involvement.

What is the system enabler we are testing?

We are testing a **Redefined Purpose and Shared Power**. Our ambition is to work with a wide range of partners and stakeholders from across the system to achieve the “one Bolton approach” to working closely with communities to help shape and deliver future Bolton plans. This will look like a whole system approach to identifying and mobilising assets that exist in communities across Bolton, rooted in ABCD principles. To ensure community voice is influencing decision making in Bolton, we will develop a ‘Voice and Influence’ model (led by Bolton CVS) that amplifies the voice and intelligence from Bolton’s communities into spaces where decisions are made.

Who is involved in the work?

Bolton Community & Voluntary Sector (Bolton CVS)

Bolton Council Population Health Team

People and organisations who play an ongoing role in identifying and developing the assets which exist in communities in Bolton: Bolton Council employees, NHS Bolton Foundation Trust, Bolton Neighbourhood leads, Bolton at Home, Bolton College, GMMH (Greater Manchester Mental Health), Bolton CVS & Bolton’s VCSE sector

What do we hope to achieve by October 2025?

- Defined what a “one Bolton approach” looks like with a clear narrative and shared priorities.
- A vibrant learning offer being accessed by communities and the workforce.
- A preventative community – led approach to tackling inequalities, as a corporate priority.
- Improved trust between the workforce and communities.
- Improved understanding of how to conduct asset-based conversations.
- Improved understanding of co-production and how best to work alongside communities in shared spaces.
- Improved understanding of how, when, and where to implement shared decision-making spaces.
- Funding opportunities which directly respond to the aspirations and interests of communities and allow them to do their best work.
- Restored/built trust between the local authority, public services and the communities who have not previously been reached or included in decision-making.
- Communities mobilised and acting on the things that matter to them. They do not sit and wait for permission from public services.

Active Lives programme: increasing the number of inactive people to be more active. Building on positive community-led work here, the Live Well Accelerator work has enabled a wider view on this to include a broad health and wellbeing approach.

Using a test and learn approach to develop a guiding set of principles for community working. Example principles include:

- Finding what is strong within communities and building upon that
- Identifying assets which are often hidden to connect them together with a shared purpose of supporting health and wellbeing
- Working at the place and neighbourhood level where the link to communities is strongest
- Directly engaging people from the most marginalised groups and those most likely to be affected by health inequalities and giving them a voice to influence health care.

★ **Success:** We have made a considerable investment to move towards this ABCD approach both with internal and external partners.

Further development of Bolton CVS Voice & Influence work (primarily funded via GMCA's UKSPF E11 programme).

Co-designed terms of reference and ways of working collaboratively with colleagues from across Bolton's VCSE sector.

Introduced new network and collaborative spaces, building capacity and resilience of the VCSE sector.

Reviewed VCSE sector representation across system decision making/ strategic spaces, with a view to increase as appropriate.

★ **Success:** We have made significant improvements in, and extended engagement in, our VCSE-led Voice & Influence spaces.

Increased engagement in our Voice & Influence spaces

Started to test new ways of capturing insight and intelligence from communities, to be injected into decision making spaces.

We will create spaces for this work to flourish and define the specific actions for the Bolton workforce to create the conditions for this vision to be achieved.

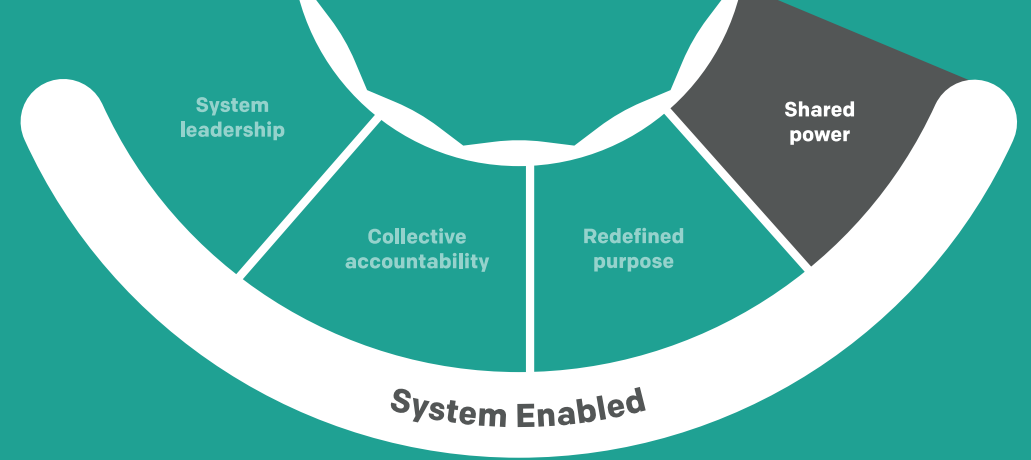
Before

What we've done so far

What we are doing next

Salford

Little Hulton, Salford



How might we:

find radical ways of collaborating so that communities can play a leading role in creating happier healthier lives?

What is the barrier we are addressing?

Residents are unclear or do not know about what is available in Little Hulton or what they are entitled to. Barriers to accessing support are exacerbated across different communities, and entrenched by deprivation, the Cost of Living, and poor physical infrastructure. Service and support delivery is not shaped by community voice - meaning these barriers cannot be addressed.

What is the system enabler we are testing?

We are testing Shared Power. Our ambition is to empower communities to play a leading role in creating happier, healthier lives for people in Little Hulton, Salford. Specifically, we want traditional system players to consider how they can transfer power to the community so that they can take more control over their ability to live well. This means reflecting on the structure of health and wellbeing provision, how it is currently accessed, and co-producing a trusted voices network that are empowered to facilitate better access.

Who is involved in the work?

CommUNITY Little Hulton

Salford Community & Voluntary Sector (CVS)

Salford City Council, Public Health

What do we hope to achieve by October 2025?

- There is greater knowledge within the community and its Trusted voices to facilitate better access to health and wellbeing related provision
- System organisations/partners actively reflect on how they can remove further barriers to access through both the redesign of their services, and more effective empowerment of the community. There are indicators that this journey has indeed started, and will continue long-term.
- Evidence of sustainability of the work, where the system can continue their journey in better enabling community ownership of wellbeing, and the Trusted Voices structure is self-sufficient

Theory of Change workshop at Little Hulton CommUNITY centre. Diverse range of residents and community, voluntary and public sector colleagues and organisations coming together to shape scope and ambition.

Community Mapping - Range of methods to connect with community groups in Little Hulton and map their provisions, including attending sessions.



★ **Success:** The people and organisations leading this work have excellent local knowledge that will be crucial to the success of the project

Recruited local resident, Stewart, to lead community mapping and research work as the Live Well Little Hulton Development Worker, alongside CommUNITY Little Hulton.

Neighbourhood Appreciation Event at Bethany Family Worship Centre – 21st June Brought together to celebrate the most active community groups in Little Hulton. Each organisation/group asked about their activities of their group, how they help people Live Well, and what they believe the barriers to people in Little Hulton living well might be.



Spirit of Little Hulton at Peel Park – 6th July In collaboration with Spirit of Little Hulton, CommUNITY Little Hulton put on a summer fair with live music, stalls for community groups, fairground rides, arts and crafts activities and facilitated use of the community bike track. Ran community mapping exercise: drawings/paintings of the places they enjoyed spending time in Little Hulton and sticking this to a large map of the area.

Produced a timetable of activities that community researchers will fill in the final gaps and create a publicly accessible tool.



★ **Success:** Significant buy-in from community groups has meant this project has been able to be co-produced with its key beneficiaries

Community research – Developed strategy for research via conversations with volunteers at CommUNITY Little Hulton, past community researchers, community providers, and residents who use services.

Identify Touchpoints and Trusted Voices - Stewart completing a range of training which may then be delivered to the trusted voices network. Prior to start of programme, three volunteers and residents from CommUNITY Little Hulton's Food Club attended a Big Local event in Bristol called "Beyond the Food Bank" and returned inspired to provide more than just food to the 80+ people who use the weekly food club, including enabling them to offer a sign posting services. Building on their enthusiasm, they have attended Signposting and Referral training with Healthy Me Healthy Communities (Gorton, Manchester).

⚠ **Challenge:** Ensuring the right representatives are part of the Collaborative and mobilising them, this early on in the work. Utilising connections across Salford CVS and CommUNITY Little Hulton to address this. Use some of the community research to encourage stakeholders to join, by demonstrating connections to their work.

Creating the Collaborative - Actively approaching key stakeholders and decision-makers across Salford and Little Hulton for Collaborative, including: local Councillors, Directors and Exec Directors within the City Council, and community organisations. A learning space to reflect on project insights and consider their role in unblocking system barriers and enabling greater community ownership.

Community Mapping -

Continue mapping, ensuring capture of full breadth of community provision that exists. Take map-painting exercise to various community groups. Create a strategy for awareness building in the community. – October 24

Community research -

Undertake quantitative and qualitative research with local residents, understanding their health and wellbeing challenges, what they access currently, what they do not, and touchpoints and voices they trust. Using community research, identify the touchpoints. – May 25

Create Trusted Voices

Network - Identify and create network of 10 trusted community voices: trained network of individuals across the community who are well equipped to signpost and help residents access community wellbeing provision across the health and wellbeing network that they may otherwise have not encountered (or considered). Includes roll out of Signposting & Referral training. – September 25

Ensure legacy and sustainability model in place – February 26

Collaborative - Set up, design and host first meeting of the Collaborative Group. Focus on clarity of purpose and good facilitation, with support from Innovation Unit – October 24

Create Health & Wellbeing Network - Establish a network of health and wellbeing providers including community organisations and providers of services that improve residents' wellbeing. – June 25

Trusted voiced network actively supporting residents to access health and wellbeing provision – November 25

Mobilisation and Development Journey

The Live Well programme has supported the Accelerator Sites to mobilise and begin their plans. Testing, learning and reflection has been supported through team monthly coaching sessions, bespoke local workshops, and bi-monthly Community of Practices. Sites have utilised service design, graphic design and consultancy support from Innovation Unit to develop their local work.

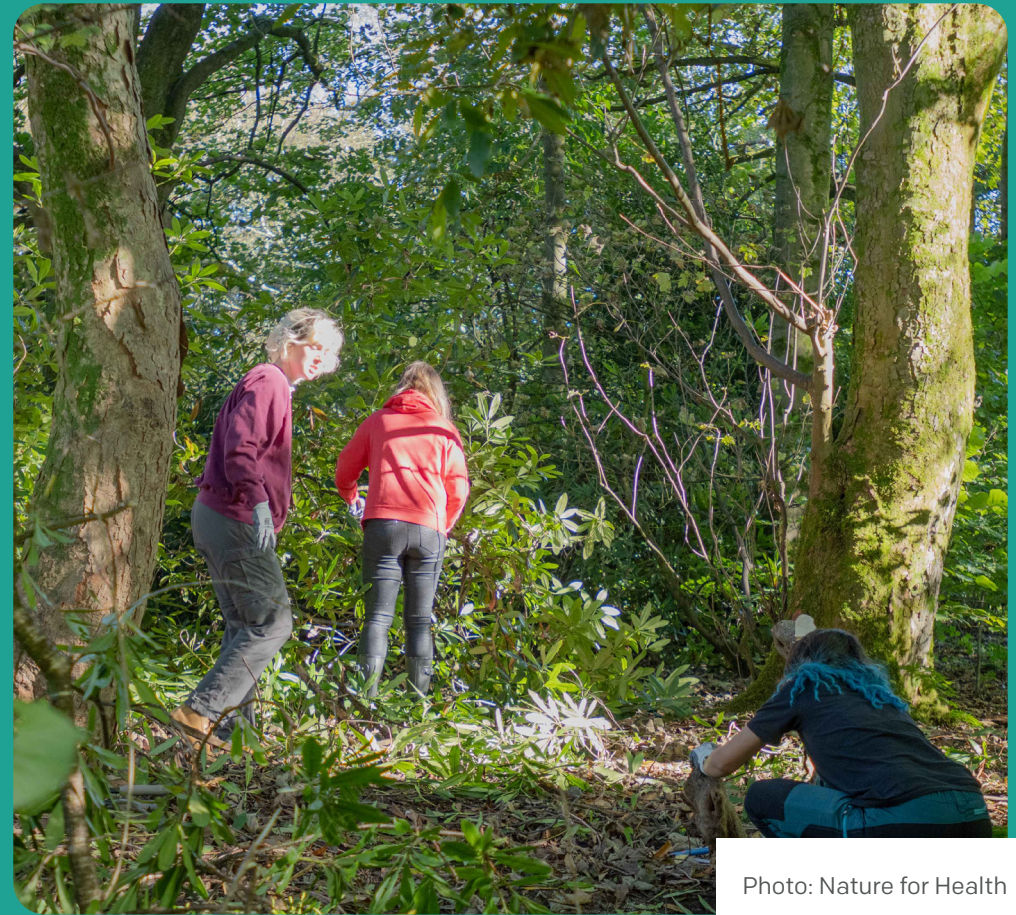


Photo: Nature for Health

Coaching

Site teams are coached monthly by a dedicated Innovation Unit (IU) coach, through the GoodLives GM partnership. Teams include those leading the work from the VCFSE sector, the local council, and other partners. The coach supports the team to collectively reflect and take action on their work, whilst encouraging them to hold their ambition in the face of challenges.

The original coaching support offer assumed a 'team lead' in each site, therefore proposing a 1-2-1 support model. However, a team coaching model has instead been largely adopted as requested by the sites. This is best suited to the stage and nature of the work because:

- The challenges and foci identified require a whole-system approach and collaboration across traditional siloes to have the greatest intended impact. Leaders and teams need to draw on their diverse range of experience, skills and networks to make progress, and have a dedicated, supported space to figure this out.
- In some places, relationships and people in the team are new. Some people are new in post, including early in their leadership careers. Whilst they need onboarding and nurturing, so too do the relationships between sectors and teams who are new to working together or new to this way of working together, or both. The coach helps teams to pay attention to where 'business as usual' dynamics, such as 'commissioner' and 'commissioned', become unhelpful, and where new and positive ways of working can be fostered.
- The work is emergent. Teams need space and time to make sense of the shifting context and pressures together, sometimes reorienting their focus to be able to move forwards. Attention is paid to ensure all team members are driving the direction of travel and feel confident to do so.

Innovation Unit will continue to support teams via this team coaching model for as long as it is effective.

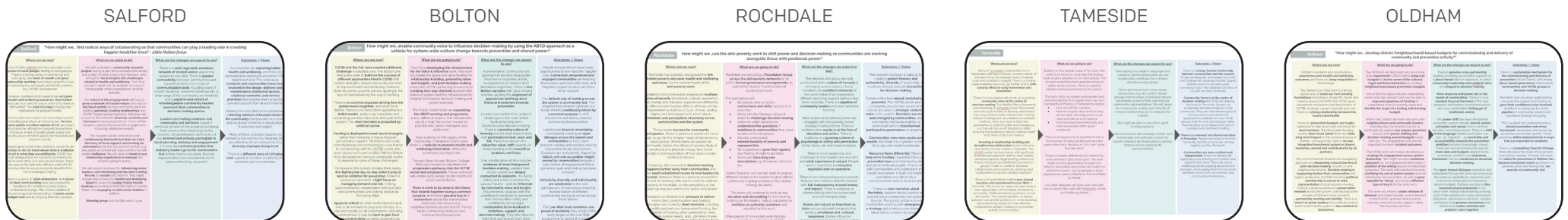
Local workshops: Theory of Change

All five Accelerator Sites successfully hosted and completed a Theory of Change at an in-person workshop in each locality at the beginning of their journey. They were supported by their IU coach through this process.

Each site invited a brilliant range of local and system leaders and partner organisations to reflect the breadth of their place, with some sites having over 20 representatives attend. They used the Theory of Change framework to strengthen the ambition and narrative for their work, clarify what needs to change (system barriers) to realise their ambition, and develop a shared plan for action. This was an important step at the start of their work to build consensus across different teams, leaders and sectors, and ensure their work is led by a powerful, collective local voice.

The Theory of Change output has formed the basis for following coaching sessions and project development/mobilisation, supporting teams to stay true to the vision and connect their action back to the identified challenges, ensuring the logic sticks.

As the sites continue to implement their Live Well plans, coaches will support them to identify, design and deliver bespoke workshops to suit the needs of the work. For example, in Oldham, the team will convene and facilitate East District partners and communities through a co-design process that will develop the mechanism for community-led decision-making around commissioning. Salford will draw on their coach to support the design and facilitation of their Collaborative, as a critical space for connecting the Trusted Voices' network insights with system leaders to test new forms of community-informed decision-making.



Live Well Community of Practice

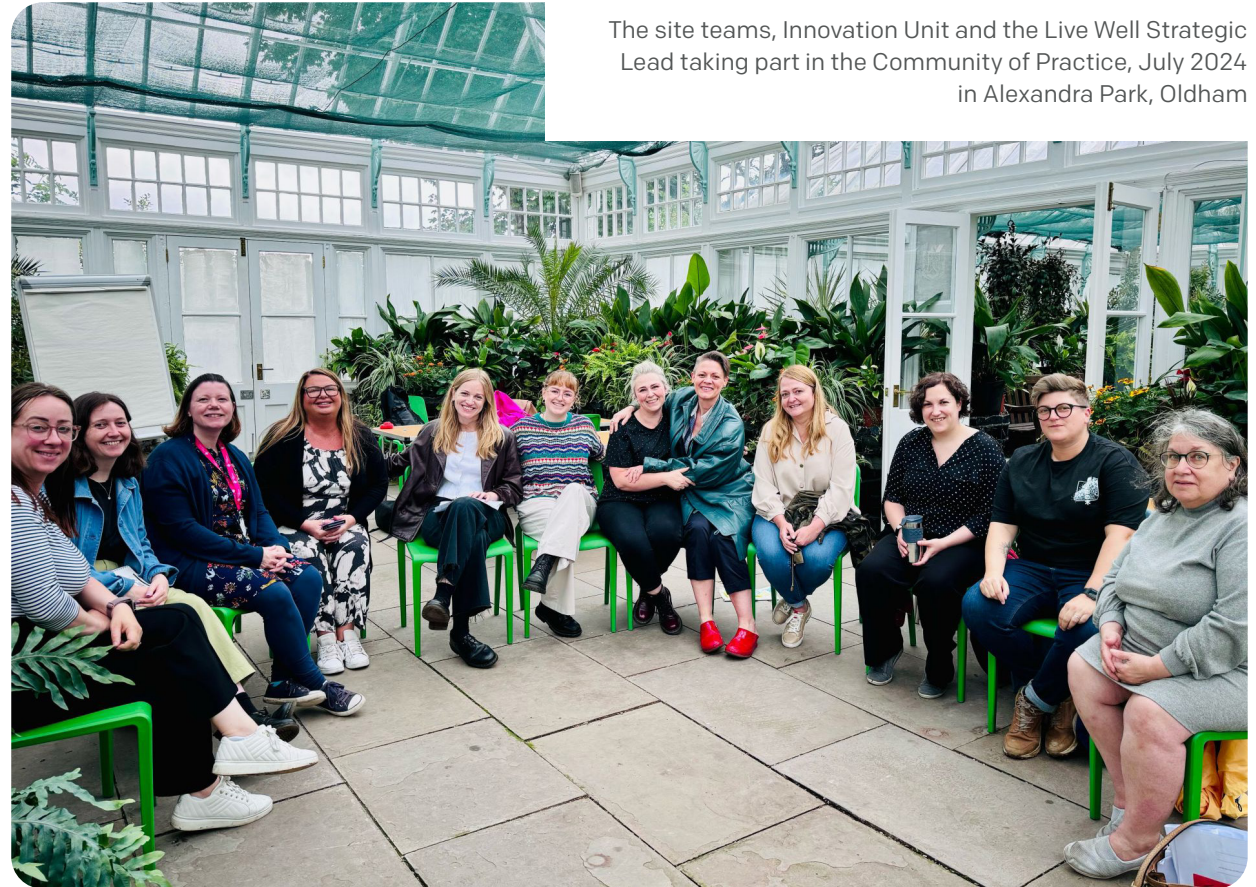
The Live Well Community of Practice is a core element of the support programme. It is a bi-monthly space for shared learning across the five site teams to explore what it takes to bring this work to life, as well as being a source of trusted support and inspiration from each other.

Since February, there have been three Community of Practices in the programme. They are responsive to the pace and needs in the work and teams, as identified with their coaches. Team members who regularly attend group coaching attend the Community of Practice, creating a friendly group of around 12 - 15 participants.

Soon, the Community of Practice will stretch into its dual role to be both a space of peer support for the leaders and teams, and an active, structured learning space that generates and collates insights on their work to tackle system barriers aligned with the Live Well framework. This learning will be actively shared with other GM partners and places through the wider Live Well movement and the partnership between Innovation Unit and Greater Manchester Combined Authority, GoodLives GM.

The most recent sessions have seen a drop off of NHS and health colleagues, which has also been felt in coaching. This could be a symptom of the increased financial strain and external pressure NHS GM is facing. Coaches will continue to support site teams to encourage engagement through local work, with that taking priority over the Community of Practice.

The site teams, Innovation Unit and the Live Well Strategic Lead taking part in the Community of Practice, July 2024 in Alexandra Park, Oldham



Key programme learning

The five Accelerator Sites are courageously leading work to tackle entrenched and persistent system barriers to community-led health and wellbeing in their local places.

Their journey so far demonstrates considerable progress and diversity of approaches to testing this ambition, as well as common challenges they are grappling with along the way and how they are addressing these.

There is rich learning from this mobilisation and development phase that speaks to similar work in Greater Manchester and beyond. This section covers the key learning emerging from the sites so far, including what the sites are finding helpful in their work to tackle barriers to community-led prevention.





The significance of the current financial context in the public sector cannot be underestimated.

Site teams describe this context as dictating all parts of their systems, including contributing to the fragility of prevention work and investment, commanding a narrow focus on targets and demand, and deepening barriers to collaboration (see Theory of Change in Appendix).

This context has been disorienting and exhausting for people leading this Live Well work. Maintaining an ambition for community-led health and wellbeing within a context of budgets cuts and shifting priorities has been challenging.

"The public sector is often working on short term cycles, both due to funding and to politics. Due to this, projects which produce visible results within a short time frame are often favoured, rather than the slower more trust-based ideas where the impact might be more long lasting but might not be noticed as quickly, or easily attributed to one leader or one department"

- Rochdale

"Focus has shifted to meeting budget pressures and statutory functions within constituent organisations resulting in resources being prioritised away from prevention, decisions being made in silos and focus on short term. This has meant that galvanising commitment to and resourcing community driven wellbeing activity from the system has been lacking, and so we have struggled to land this work in the system, in the spirit of its original focus"

- Tameside

This immense pressure on local systems has manifested in visible disinvestment and commitment to prevention, which has directly and indirectly affected the progress the sites can make. From defunding of VCFSE programmes, to senior leaders stretched in multiple directions, making the case for long-term change in a system that wants to see short-term progress is a common challenge across the sites.

"Engaging people around a concept or theoretical piece of work with long-term outcomes in a context of unprecedented operational demand and financial pressures within the system [is a challenge]" - Oldham

One thing the sites have found helpful in this context is taking time to create a shared understanding and vision from the outset, with a diversity of perspectives considered and included. For example, the Rochdale team worked throughout 2023 and 2024 with system partners in their anti-poverty assembly and build a broad agreement of the connection between poverty and health. This has enabled them to strategically influence the development of the anti-poverty strategy and support the Foundation Group to maintain a focus on the root causes of poverty.

Similarly, the Oldham team ran an in-depth and collaborative process to develop a narrative around their work, before activity began, positioning it as an opportunity to build on and enhance existing areas of transformation work underway in the borough, and to invite people to participate.

"It is worth taking the time to confirm and clarify shared vision and understanding at the outset. We are addressing the challenge around long-term outcomes (vs short-term fixes) by positioning our approach around the benefits it can bring to existing strategic priorities and service areas, rather than as something additional to already overstretched workloads." - Oldham

Positive system engagement so far shows the importance of this step in securing the permissions, relationships and energy required for the work. Both Oldham and Rochdale, alongside early work in other sites, are showing signs of progress in navigating and holding the tension between short term solutions and credible, sustainable pathways to a better system and better outcomes.

Finding a starting place when challenges are large in scale, interrelated and hard to unpick



Political, financial and leadership context changes have contributed to a greater sense of perma-crisis in systems. And, it is not just system challenges that feel large and stuck. Sites are identifying that social conditions, like poverty and deprivation, appear to be in an acute phase of crisis and are contributing to worsening health and wellbeing outcomes.

“We learnt from the Community Celebration Event that many frontline community organisations see poverty and deprivation are the root cause of poor health outcomes in Little Hulton. Little Hulton is considered one of the most deprived wards in Salford with child poverty ranked 47 over 125 wards on the Greater Manchester Poverty Action records. Cost of living is increasing, yet wages or benefits are not increasing at the same rate, which therefore causes concerns of how households will make ends meet.” - Salford

“One challenge has been foregrounding looking at the root causes. There are so many issues to be dealt with now that things can slip back into discussing reactive solutions.” - Rochdale

The site teams have drawn together their own experience and knowledge with that of others to paint a deep picture of the local challenges faced, both through the Theory of Change and mobilisation of their plans. Whilst a greater understanding of the challenges within a place has equipped teams with a comprehensive analysis of what’s going on in their communities and systems, it has also been confusing, and sometimes paralysing.

Challenges at all levels feel large, interrelated and hard to unpick. Choosing a starting place that is within their gift to control has often become a focus in the coaching sessions. The Accelerator teams have shown immense bravery and resilience to persevere with their original ambition and locate their focus in a tangible starting place. We have learnt that this work is not about trying to change everything that is wrong, but drawing a focus to a specific system barrier they have the power to shift to support community-led activity to flourish.

*“The harder things to achieve are usually the right things to do. A success has been to focus on a key issue we want to solve and have the potential to influence”
- Tameside*

Finding a starting place when challenges are large in scale, interrelated and hard to unpick



In the mobilisation of this work, sites found it helpful to find the 'energy' and 'open doors' in the system, which could become tangible test beds to try things out. For example, the Bolton and Salford teams are building on the energy and success of previous and ongoing work in their areas, from COVID and other funded programmes. In Bolton, lessons and momentum from COVID, and learning from their Active Places programme, have provided the foundations for continued community working. In Salford, a strong sense of community, word of mouth and good partnership working have played powerful roles in delivering key messages and health priorities, like COVID vaccinations, in the past.

Oldham and Rochdale have both focused on finding real, tangible 'test beds' for their work. For Rochdale, the tangible 'test bed' for the Foundation Group's system change ambitions are found in their critical friendship to the council's anti-poverty strategy. Identifying and locating the work to give genuine power and voice to communities in the system could easily take many forms, in many different spaces, however this targeted and deliberate connection has strengthened their focus by landing it in a real piece of delivery work borough-wide.

Oldham has secured real funding to test their experiment in. This provides an exciting and tangible opportunity to demonstrate the impact of their experiment against a significant budget pot, and create solid foundations for 'making the case' for this work across different neighbourhoods and sectors in the local system.

"Funding (c. £90k) has been secured from the ICB which will enable us to take forward our 'experiment' to explore and implement new local decision-making approaches around that budget, shifting power and decision making to local communities. This will form the basis of the next phase of the work."

- Oldham

Finding a starting place, by either building on existing work or locating a tangible space for development, has helped the sites to be more specific and strategic in mobilising the right people, gaining the right permissions, and planning the right actions to move their work forwards. They have increased their likelihood of success by starting from a place they can build out from, rather than trying to tackle multiple, complex challenges at once.



When tackling system barriers, it is beyond the capacity of one individual to bring about the whole-system change required. Balancing the time for this work with the time required for 'business as usual' is a significant challenge in this work, with leaders in the sites describing working across a broad canvas, with multiple and competing priorities.

This is why, from the conception of the Live Well programme, a focus on collaboration across sector boundaries and with communities has been deliberately designed in. Key features of the programme including the makeup of the site teams, the Community of Practice, and the coaching, reflect this focus and pay attention to nurturing relationships and people as a vital source of energy and ideas for the work. In their local Live Well work, the teams are asking themselves 'Who do we need for this work?' and 'How should we work with them on this?' and 'How do we work with each other?'. They are learning about how new and different roles and spaces can grow the agency and collaboration necessary for tackling system barriers.

For example, sites are convening co-design groups, Collaboratives, and network. Across the sites, these spaces have in common both an explicit focus on shifting system barriers and an emphasis on creating the conditions for unlocking the energy and insights of all participants. This means paying attention to how the space looks and feels, surfacing the purpose and values connecting the group, and building a shared ambition for system change from the outset. For example, Salford has considered the purpose and function of the Collaborative in relation to shifting system barriers.

"The need for a collaborative group, not a steering group, is a crucial component of the work, as it allows the on the ground activity to be used as a learning opportunity for all members to consider how they can help break down system barriers and enable greater community ownership. At first, we considered creating a steering group for the project. But after considering the end goal of the project in more depth, we concluded that this could be an arbitrary creation. We've instead therefore sharpened our focus on learning and reflection as the main aim of this group, which far better aligns with the systems change objectives, rather than a traditional steering group."

- Salford




A combination of community representatives in the Trusted Voices Network, organisations and services working in Little Hulton, and senior leaders across the council, means a greater breadth of local knowledge can be connected within the Collaborative. The Salford team are carefully designing this space to foster shared power and collaboration, modelling the core principles of Live Well to be community-led and system-enabled. This space will convene the ideas and power necessary to make greater potential progress on shifting system barriers to their local work.

In Rochdale, the team has brought together a diverse range of residents and community leaders in their Foundation Group. This group models a new way of decision-making in the borough, that is community-led and system enabled. To bring this to life, the Rochdale team have thoughtfully considered how to ensure that participants feel confident and capable to lead this work. They have found it helpful to invest time into building trust and reflecting on their own role (and power) in convening this group.

“Balancing the energy of the FG and their drive to ‘do’ with the need to take time, build trust and keep the long term goals in mind. To address this we’re balancing the time between quick practical wins like the priority setting, with lots of time building trust as a group and looking into the reasons for entrenched poverty in the area. When you’re overseeing any group of people it’s easy to fall into a trap of feeling protective over them. It’s been important to remember that the FG is made up of incredibly resilient people who have been through a lot and have the resilience to deal with the ups and downs of this work. Any attempt to ‘protect’ has the potential to be disempowering.”

- Rochdale

Through the support from Innovation Unit, all five Accelerator Sites will be supported to design and facilitate new ways to collaborate to make progress on their work. Sharing best practice, personal reflections, and tools or approaches with each other will strengthen our understanding of what new spaces and roles are required to successfully bring Live Well to life in different places, in a way that is community-led and system-enabled.



Billy, from Funding Futures, recording an interview for the Live Well Community Wealth event.

Chapter 4

Building the Live Well movement

Building the Live Well movement

The Live Well programme is testing and learning about how to shift system barriers and grow enabling conditions for community action, power and wealth to flourish, so everyone can live well in their communities.

However, in order to make faster progress on our shared ambition to tackle health and wellbeing inequalities in Greater Manchester, Live Well must bring together other brilliant people and places supporting community-led health and wellbeing, to mobilise collective action and learning together.

This is why Live Well also adopts a movement building approach across Greater Manchester. Building out from the programme, Live Well convenes residents, grassroots community groups, VCFSE organisations, statutory partners, and leaders across different sectors to be part of the movement for community-led health and wellbeing.

This looks like:

1. **Movement building events** for communities, sites and partners working on the Live Well ambition (quarterly)
2. **Live Well 'Lives'** that are open access, interactive webinars for the GM Live Well movement (monthly)

So far, we have worked and engaged with over 750 people in the design and delivery of these sessions, through two movement building events, with two more planned in October and February, and one Live Well Live, with four more planned this year.

This activity is co-designed with the **GM Shapers Co-design Group** (further information later in section) and open invite sessions with participants in the movement.

Movement building events

The movement building events convene a breadth of Greater Manchester's communities, public and voluntary organisations, and senior leaders and politicians to connect, share and listen to each other about what it takes to build Live Well in communities.

Often, community innovators and people trying to 'shift' barriers feel isolated. They are working between siloes, boundaries and red tape, hindering collective action on tackling inequalities. The purpose of these events is to connect these people and places with each other and the Live Well vision, by celebrating and connecting what's happening across Greater Manchester.

These events are built on the Live Well framework, and follow this structure:

- **First half/morning - Community-led:** Stories, practice and examples of inspiring community action/power/wealth, creatively showcased through stalls, videos, games and workshops.
- **Second half/afternoon - System-enabled:** Interactive workshops centred on learning from the Accelerator Sites. Stories, practice and insights explored together.
- **Throughout:** panel conversations, community marketplaces, and interactive stalls to deep dive into topics.



"There is a real sense of a movement, meeting people who are all pushing in the same direction"

- Event attendee

Launching Live Well

February 2024

▶ Watch event video

The Live Well launch brought together over 250 residents, VCFSE representatives, and leaders from a range of sectors to launch the movement. The core purpose was to mobilise energy around a clear vision for Live Well in Greater Manchester, by highlighting some of the fantastic work already happening in communities and the programme sites. The Live Well launch put a spotlight on the impactful and creative work that is happening across our city region, grounding the work so all attendees left understanding what Live Well is and how they contribute to our aims.

"A brilliant way to see us all as people first. Not them and us, not patients and professionals, not paid and unpaid, but all of us, as people first."

- Event attendee - on STUCK

The highlights from the day were:



A community marketplace

of over 30 community groups, fostering new connections between offers of support

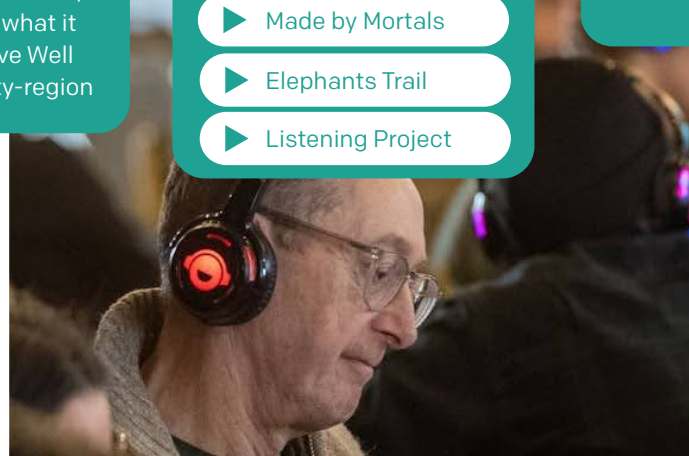


Elevate Young Minds, Live Well Launch



A 'fireside' conversation

with John Mothersole, Andy Burnham (Mayor of Greater Manchester), Dawn Yates-Obé (Chief Executive of Bolton CVS) and a resident of Bolton, diving deep into what it takes to grow Live Well across a whole city-region



Made by Mortals - STUCK, Live Well Launch



A video showreel

from community groups on what it means to 'live well in our communities', which ignited a sense of community and hope in the room

▶ Made by Mortals

▶ Elephants Trail

▶ Listening Project



Facilitated workshops

around the 'system enablers' for Live Well, grounded in the Accelerator sites' work and led by the site teams themselves



Andy, Dawn, Pam and John at the Live Well Launch



An interactive performance, STUCK, by Made for Mortals

born from discussions with community members, primary care clinicians and social prescribers in Tameside

Growing Community Wealth

May 2024

▶ Watch event video

The first of the thematic events focused on Community Wealth, Ownership and Opportunity. Over 200 residents, community groups and public services attended, and over 20 organisations contributed or led sessions throughout the day.

“Live Well is about putting communities back in control so that they can create and keep wealth and recirculate it in communities”

“Community wealth doesn’t mean self, it means ours”

- Andy Burnham

- Shannon, Elephants Trail

The highlights from the day were:



A bespoke, recorded video interview with **Cormac Russell** that set the vision high for the day around community ownership and control

▶ Watch interview



Community-led workshops on what wealth, ownership and opportunity look like in GM, including a (scaled) ‘walking/wheeling tour’ of community owned spaces



A rich panel including Lankelly Chase, One Oldham, Action Together, GM Moving and community groups across GM (including Rekindle, Reclaim and SAWN) about doing funding differently to create wealth in communities



An interview with Andy Burnham by Live Well Co-Design Lead Folashade Alonge, sharing the impact the Live Well Launch has had on his manifesto and reinstating his commitment to the Live Well vision



A Design Lab with A Brilliant Thing CIC, where they tested and applied learning and ideas from the day into the Live Well Fund development



Funding Futures received substantial funding after showcasing their work via a workshop at the event - demonstrating the power movement building for connecting innovators together



Interactive workshop game with New Pioneers, Funding Futures and Wigan & Leigh Community



System-enabled workshop, Community Wealth event

GM Shapers Co-Design Group

To ensure Live Well is both representative of, and helpful to, the wide range of community, voluntary, and statutory partners involved in Live Well, we are adopting co-design principles into all event planning via the establishment of a facilitated, paid co-design group.

The GM Live Well Shapers Co-design Group is led by Folashade Alonge. Folashade is a qualified Psychotherapist/Counsellor; a community influencer; CEO and founder of De Butterfly CIC; a core member of the Elephant Trail Project; and member of various BAME boards within Greater Manchester and Cheshire East, Northwest, England.



**Folashade
Alonge, MCing
the Live Well
launch**

“GM Live Well is a new wave across Greater Manchester. It’s a fresh movement of community oriented and system enabled initiative to collaborate with the community to decide what is important to them to live well and to create opportunities for community wealth and power.

Leading the co design group and working alongside with the Live Well team is not just another consultation to inform but it is an action oriented collaborative way of working to influence system change in the of community health, wealth, and power to live well.

The co design group meet regularly bringing with them voices of the community they support from the marginalized community, disabled community, people living with multiple disadvantage community, women groups, LGBT community, youth community and the GM system changers network and others.

Representing the community across GM and working collectively to shape and design through community engagement and co production, harvesting what is important to the community around health, wealth, and power and how to change the current narrative to make everyone in GM live well.”

The strategic context in Greater Manchester

In Spring 2024, the Greater Manchester Mayor, Andy Burnham, published his Manifesto ahead of the new election cycle. Live Well emerges as one of three top priorities, and is elevated significantly beyond the original 2021 ambition. We understand that this is a result of his positive assessment of the work done so far, not least the movement building events he has played such a full role in.

The new Live Well agenda builds the core focus of the work so far, centring on community-led health and wellbeing, and shifting systems to enable community action, power and wealth to flourish.

Andy Burnham talks about Greater Manchester

“pioneering a new way of providing everyday support to our residents to help them manage the pressures of life, live as well as they can and find good work. To work properly, Live Well support needs to be properly funded and structured and available within walking distance in every locality in GM. To achieve that full vision, we want to explore ways in which we might create a new partnership between primary care and services provided by the Department of Work and Pensions.”

Work is currently underway to rally partners and resource around this increased ambition, building on the change already happening through the Live Well Accelerator Sites, and the movement built over the last 6 months. The programme will retain the elements already underway, and the Live Well team will identify opportunities for ongoing strategic alignment and engagement around the Manifesto commitment, to design welcoming places, spaces and offers across Greater Manchester that provide trauma responsive, person centred support in close collaboration with our VCFSE sector.



Developing Live Well in other policy areas

Due to the growing strategic significance, there is increasing demand to describe what a Live Well vision and approach for different policy areas might need to look like, to support community-led health and wellbeing.

Live Well supports policy areas to convene system leaders, communities, and VCFSE organisations to use the framework to:

- Co-design a vision for community-led support, grounded in the voice and stories of lived experience of those experiencing inequalities
- Map existing community-led work relating to action, power and wealth, in their policy area
- Run a diagnostic to understand the system barriers to community-led support in their policy area, and create tangible steps towards unblocking these

Image: Vision poster from a group at the co-design workshop for Dementia

So far, two distinct and separately funded pieces of work in dementia and housing have been completed/kicked off:

Live Well with Dementia:

In collaboration with Dementia United, the Live Well core team brought together a wide range of GM organisations, community and system leaders and people with lived experience to co-create a Live Well vision for people living with dementia. The Live Well framework provided a basis for our methodology, enabling key stakeholders to articulate what an offer to support people and families to live well with dementia could look like. (Please see the Appendix for outputs from the Live Well Dementia work).

Live Well in Housing:

Building on these learnings and in collaboration with Ageing in Place, we will use the Live Well framework to explore and map existing, promising Live Well activity in housing. In October, we will bring together strategic decision-makers and CEOs across GM's housing provision to identify and tackle core system barriers and to build a vision for people to live well in social housing.

This bespoke work in different policy areas is connected to the core programme via the Live Well framework, through which learning across the Accelerator Sites and this work can inform each other. Importantly, these pieces of work are powerful contributions to informing how Live Well can support systems to shift to community-led health and wellbeing, which will be great foundations to build on in light of the strategic context described.



The Live Well Fund

Over the past year, the NHS Live Well team have been scoping the development of a 'Live Well Fund' using separate funding from NHS GM and GMCA, and now have a proposal and draft model to prototype.

Our ambition for the Live Well fund is that it will attract more resources for the communities of Greater Manchester who are growing community action, power and wealth, to ensure that funding has the greatest positive impact on tackling health and wellbeing inequalities. The co-design process for the Fund included many individual conversations with councils and VCSFE partners in localities to begin to explore the potential and parameters of establishing this Fund. We have also invited contributions more broadly, including to participants at the February 2024 Live Well launch event, and a May 'Community Wealth' event.

This year will be a Prototype year where, with some seed funding (£1m), we begin to explore together how the Fund could operate in the future. A model for the prototype has been agreed and is being mobilised. The focus for the prototype, to launch in October 2024, will be learning how to get the funding to people and groups best placed to help address and overcome inequalities. Alongside this work we are in active conversations with a number of partners about how the fund will grow and develop in the long term.



Live Well Fund Design Lab at the Live Well Wealth event, May 2024



Chapter 5

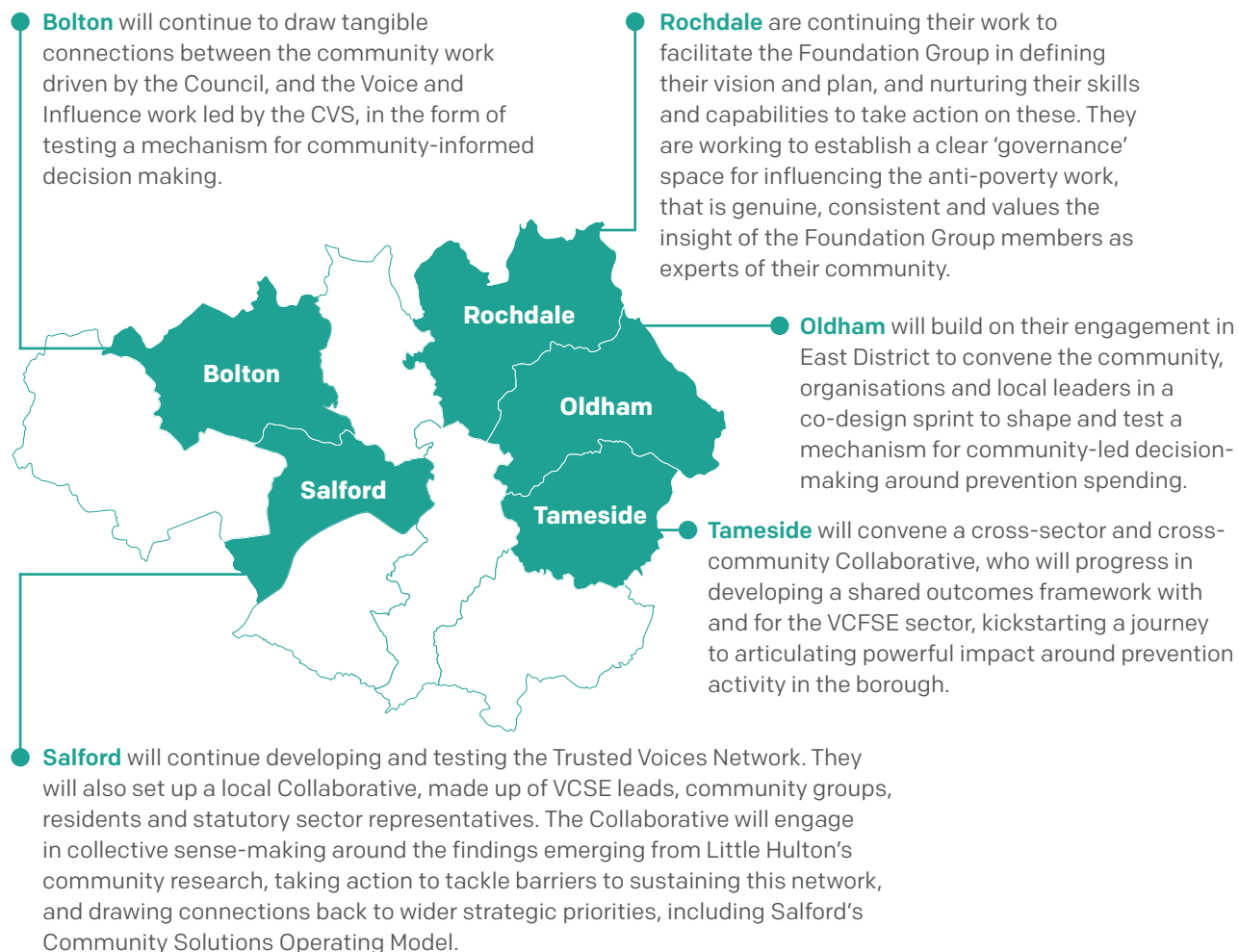
Plans for the next 6 months

Next Steps for Accelerator Sites

The mobilisation and development phase has enabled sites to define a clear focus for their work. Tangible test beds and effective relationships have so far been vital for establishing strong foundations for the work.

Broadly, the sites are now shifting into designing, testing and learning around their focus area, building on these foundations and the early programme learning. This phase of work will likely require new tools, approaches and capabilities. Innovation Unit's coaching and support to sites will primarily support this, enabling teams to develop innovative approaches to delivering their work and feel confident in doing so.

Across the sites, this work looks like:



Continuing this work at the same time as delivering their day-to-day work and managing organisational pressures, can be incredibly difficult. Accelerator teams are skillfully juggling a range of competing priorities whilst maintaining the vision for their work. Their support needs, skillsets and areas of expertise are different and capacity ebbs and flows throughout the programme. Innovation Unit's coaching is tailored to adapt to this by offering a mix of coaching and hands-on support where appropriate, drawing on Innovation Unit's expertise, for example via the design and facilitation of workshops and meetings.

Embedding our learning plan

The next six months will also see us make an exciting start on embedding our learning plan.

This will look like horizon scanning promising practice in community-led prevention, as described in Chapter 2 of this report. It will also see us working with the site teams to start to surface learning against the learning framework and underpinning theory of change. We will work with site teams via the coaching sessions to define the outcomes they are seeking to achieve in relation to the framework features in their work, naming the indicators and data collection methods they might use to understand and describe their impact. Story gathering and learning capture methods (described in Chapter 1) will enable us to capture progress and insights against these outcomes, which we will begin this Autumn.

We will also be convening the Live Well core team via two face to face learning days to refine the narrative for the Live Well framework, ensuring it powerfully connects to emerging strategic priorities across GMCA and NHS GM. These sessions will enable us to take stock of our system-wide learning to date and understand how the programme is being affected by the wider political context, informing the direction for the second half of this programme.

Movement Building

Growing agency and collaboration will also mean that we will continue our emphasis on GM-wide movement building.

Building on the success of the Live Well Launch and Community Wealth event, we will convene two more events in October and March to explore what it takes to grow community power and action, platforming the voices and experiences of the organisations at the forefront of this work. Innovation Unit will support the site teams to plan exciting learning workshops around their Live Well work for these events, surfacing insights and stories around tackling system barriers to community action and power. We have learnt that these events can play a powerful role in engaging leaders and creating energy. We will also work closely with sites to invite individuals important to the progress and success of their local work, nurturing new connections into the movement and galvanising local energy.

“Thanks to you all for breaking down that wall.
You all work as one,
without each other there’s none.
We as a team,
were so keen.
To work with you, we’re pleasantly surprised,
at all your tries.
Your success,
the community is truly blessed.
We are the elephants in the room,
and we’re in bloom.
System change is our focus.
Addiction, poverty, health, wealth and homelessness.
We’ll fight till the end
and we’ll never pretend.
We believe in Live Well.
They’re shouting and ringing that bell.”

Appendix

Appendix I: Live Well Theory of Change for Bolton, Oldham, Rochdale, Salford, Tameside

Appendix II: 'Look Fors' for community-led and system-enabled Live Well framework features

Appendix III: Key Outputs from Live Well Dementia

Salford

“How might we... find radical ways of collaborating so that communities can play a leading role in creating happier healthier lives? - Little Hulton focus

Where are we now?

One of Little Hulton's (LH) key strengths is the **power of local people**, talking to local people. There is a strong sense of community and belonging, and **word of mouth and good partnership working** have played powerful roles in delivering key messages and health priorities (e.g. COVID vaccinations).

However, residents in LH experience **very poor health and wellbeing outcomes**. Deprivation levels are high and the area is often described as 'left behind'. The **Cost of Living** is having real implications for people's health.

Communities face barriers to accessing support, including poor physical infrastructure. **Service access points are often outside of LH**, and a lack of accessible, affordable transport exacerbates this issue. A lack of quality green space and security issues diminish spaces for relaxation and physical activity.

Despite great community networks, residents are **unclear or do not know about what is available in LH or what they are entitled to**. COVID has had lasting effects on residents' confidence to talk to each other, and 'get out and about'. There are gaps in the links into different parts of LH's communities to ensure everyone benefits from this knowledge-sharing.

There is a sense of '**pilot-exhaustion**' and **cycles of short-term funding** have not created the conditions for establishing long-lasting, embedded change. This creates additional turbulence against the backdrop of **public sector budget cuts** and an ongoing financial squeeze.

What are we going to do?

We will undertake a **community research project**, led by a part-time development worker and a team of paid community members, who will gather **local insights into challenges related to health and wellbeing**. Their final research report will be available to support funding bids, other organisations, and the network:

The **nature of this engagement** will help to **grow a network of trusted voices** who will be **key touch points** into the community, built on existing **personal, trusting relationships** (e.g. COVID Trusted Voices Network). Attention will be paid to the network's **diversity, creativity and relevance** to local people in LH. There will be set piece community events for engagement, including celebration events.

This network will be embedded and **continuously improved overtime via a live directory of local support and training for connectors** to be the key point of contact. 2-3 key points of contact per area/community will create **resilience**. We will work to **invest in one community organisation to manage** this network going forwards.

We will explore avenues for **influencing senior leaders, commissioning and decision-making forums**, to **sustain** this network. This might include influencing the **Health and Wellbeing board** to lever and **realign Public Health funding**, presenting to NHS GM Salford Locality Board, and **engaging 1:1 with senior leaders** in Salford.

Steering group oversee this work > 2 yrs

What are the changes we expect to see?

There is a **well-regarded, sustained network of trusted voices** supporting people to Live Well. There is **greater connectivity** between communities and support services via a range of **communication tools** including word of mouth, facebook, residents meetings etc. A wide range of the community are involved, and a **pipeline and cohort of knowledgeable community leaders represent their communities in decision-making spaces**.

Leaders are making evidence-led, community-led decisions based in continual reviews of the evidence surfacing from communities (including via the network). All stakeholders working in LH are **involved and actively participate in local planning, delivery and engagement**. It is best and **common practice that statutory leaders go to the communities first** before making decisions. Elected representatives are accountable to the communities they represent.

Outcomes / Vision

Communities are **reporting better health and wellbeing**, and there are demonstrable improved outcomes in the neighbourhood. This is because **residents and communities have been involved in the design, delivery and maintenance of physical spaces, relational networks, and service provision** that enables them to access care and support (formal and informal).

Notably, the Live Well work established a **thriving network of trusted voices in the community** that provides accessible and equitable information about advice & activities (incl digital).

Many of these activities/spaces are owned by the community, meaning they are reflective of, and relevant to, the **diversity of people living in LH**.

There is a **different story of LH being told**: a positive narrative created by the residents and communities.

Oldham

"How might we... develop district (neighbourhood) based budgets for commissioning and delivery of community-led prevention activity?"

Where are we now?

Oldham's residents and communities **experience poor health and wellbeing outcomes** and there are **deep inequalities** in the borough.

The Oldham Live Well work is a timely opportunity to **build out from existing foundations** including: a strong PBI model and impetus around the PHM, the VCFSE grant investment mechanism (and long history of VCFSE working), a good corporate plan, etc. There is a **strong relationship between the Council and Health**.

However, **prevention budgets are fragile**: redirected to high level need and driven by **short-termism**. 'Transformation' funding creates **short-lived 'pilots'** that have **little long-term impact** on the structural issues in Oldham. Consequently, there is **no real integrated investment system or shared outcomes, owned and contributed to by all partners**.

The current financial situation and budgeting approach are **deepening cultural barriers to joint-decision making**, at both LA and neighbourhood level. **Decision-making is happening further from communities** and 'higher up the tree'. It is felt that some **political membership is averse to wide representation** in local decision-making.

There is a growing sense of a **preservation mindset** across the system, contributing to the erosion of Oldham's long-standing **partnership working and identity**. There is a **'churn' of senior leaders** (incl political context) and it is felt that the system is **less resilient to turbulence**.

What are we going to do?

The Oldham Live Well team will run a small scale **experiment** in East District **using real budgets to tackle some of the cultural, legal and financial barriers** to creating **neighbourhood based prevention budgets**.

One of the first steps includes undertaking some desk-top research and use the data to **map exist pipelines of funding** to understand what is currently spent and **identify the scope of a testing and learning budget**.

Within East District, the team will work with **neighbourhood and community leaders**, including the Community Council, to participatively explore **key enquiry questions** around what **power shifting and decision-making around budgets** could look like. This engagement will also be important to inform **resident outcomes**.

Part of this work will involve developing a **strategy for engagement across system leadership**. This might include a **relational approach** (i.e. 1:1 engagement) that builds a **coalition of the willing** around the identified outcomes. The work will contribute towards **clarifying the ask of system leaders** around community-led prevention, as well as **grow appetite for 'doing'**, garnering a **different type of buy in** for the long-term.

This work will inform a **wider reframe of demand**, articulated visually, where demand is held further upstream and closer to voluntary and community support, rather than in public services.

What are the changes we expect to see?

There is **genuine cross-partnership** working providing preventative support via a **place-based** (district) approach, in which **community leadership and resident voice** are **integral to decision-making**.

More resource and power sits in the hands of communities. There is a true **resident focus at the heart** of this new approach and leaders in positional power are more comfortable **'letting go' of traditional control**.

This **power shift** has been embedded across the system through **shared system principles and values**, and a common narrative around prevention. There is a **shift in the language** leaders and teams use - 'our', 'us', 'together' - as **ownership and accountability towards this prevention ambition** become increasingly shared. There are new and interesting ways to **share data and budgets** aligned to the prevention ambition and **outcomes framework** that are **conductive to devolved decision-making**.

The **open, honest dialogue** modelled and embedded through this work has increased the system's capability to respond to and overcome challenges and pressures around budgets. Partners are able to **flex resource around pressures** in the short-term, without backtracking or losing sight of the ambition to create and sustain long-term, preventative solutions. Leaders and teams feel **genuine momentum** and desire to be **action-oriented and problem-solve together**.

Outcomes / Vision

There is a **sustainable mechanism for the commissioning and delivery of prevention** in East District, with strong **place-based governance** that involves **communities and VCFSE groups in decision-making**.

Residents and voluntary organisations are given the support and training to **grow their confidence to be involved**, and there is a proposal for, and a **pipeline** of, community leaders and volunteers to keep this going.

This is guided and underpinned by a **shared prevention outcomes framework**, embedded and owned by all partners across the system. These outcomes **define improvements in ways that are important to residents**.

There is a **compelling Case for Change** that articulates the scale of investment and activity needed. Through this work, the **vision for prevention in Oldham has become everyone's vision** and there is a growing sense and feeling that **'we operate as community-led'**.

Rochdale

How might we...use the anti-poverty work to shift power and decision-making so communities are working alongside those with positional power?

Where are we now?

Rochdale has explicitly recognised the **link between poverty and poor health and wellbeing outcomes** via the establishment of the **anti-poverty work**.

Residents and communities experience **multiple cycles of poverty** (emotional, cultural, economic) that overlap and intersect, experienced differently by different communities. Effects of these can be compounded by feelings of guilt, shame, apathy, stigma and disengagement which shape **mindsets and perceptions of poverty across communities and the system**.

These create **barriers for community participation**. Those in positional power are more likely to opt for the 'simpler' route of not involving local people. Where there are spaces for community action, the effects of poverty (lack of emotional and physical energy, fear, social isolation) and expectation of free labour create additional barriers.

Currently, this means that **decision-making happens further away from communities** and there **aren't established routes to hold leaders to account**. However, there is a growing recognition and will for working with communities to address poverty in Rochdale, as the complexity of the challenge requires community action and power.

Resource constraints and '**pressure to deliver**' means that commissioners and funding landscapes are driven by **short-termism**, resulting in: a politicised and non-transparent funding, the availability of funding often contorted to meet immediate system needs, and, ultimately, these funding conditions are **unfavourable to long-term culture change**.

What are we going to do?

Rochdale are recruiting a **Foundation Group across the anti-poverty networks** to sit within **formal governance arrangements**, as part of the Radical Transformational Governance work.

This paid group will:

- Be people who bring the **connections and skills** needed (incl diversity)
- Work with the Strategic Group & Board to **challenge decision-making**
- Convene wider networks to **understand the questions / ambitions in communities** they need to raise in formal spaces
- Actively understand **intersectionality of poverty and represent this**
- Be supported to **grow their agency** and feeling of 'right to be there'
- Work with **liberating role descriptions** e.g. Dreamers, Anchors etc

Action Together will use this work to engage different people in the system to grow others' confidence in going to communities *before* making decisions.

The team will continue to work on the **narrative and storytelling** for this work by building on Rochdale's 'radical' reputation to **mobilise an authentic audience** and appetite for this work.

Other pieces of connected work include:

- Generous Leadership in VCFSE
- Participatory Grantmaking

What are the changes we expect to see?

The network and group are well embedded and a **culture of honesty** is emerging across leaders. Group members are **confident stewards** of the work (rather than responsible officers), receiving support and scrutiny from networks. There is a **pipeline of community leaders** and new networks forming.

More leaders in positional power are engaged with and actively power sharing in various forms. There is evidence that **equity is at the fore of decisions and action**. There is evidence of a **growing culture of psychological safety and permission** to fail, learn, ask and make mistakes.

There is more awareness and challenge to how leaders are recruited and **what experience is valued**. People work in ways that are **inclusive, equitable and co-operative**.

There is annual reporting about poverty between the network and the council, with **full transparency around money and impact**. There is evidence of democratising who has access and who can interpret data.

Stories are valued as important as data and are situated alongside that, seeding **emotional and cultural responses**. Stories influence decision-makers to take genuine action so that people's lives are not 'on safari'.

Outcomes / Vision

The network has been a catalyst for creating **system bravery and authenticity, diversity** of leadership, and a culture change towards **storytelling for decision-making**.

Communities feel **valued, included and powerful**. The VCFSE sector and community groups have space to be radical and enact a **stronger collective voice** in the system. **Decisions are made and changed by communities**, and community-led accountability is embraced within a **transformed participative governance** arrangement.

Communities own more assets and wealth. Rochdale has a greater number of co-ops and social businesses.

Resource flows differently. There is **long-term funding** channelled through a **prevention lens** and informed by data and stories of local people. Time to work with communities and understand their needs/aspirations is built into funding operations and driven by a socioeconomic duty to local people.

There is a **new narrative about Rochdale**. Leaders across sectors are explicit about community-led systems change. The public sector is more comfortable working with **emergence as a strategy** and embrace new, innovative ideas led by community projects.

Bolton

How might we...enable community voice to influence decision-making by using the ABCD approach as a vehicle for system-wide culture change towards prevention and shared power?

Where are we now?

COVID and the CoL have created additional challenge in people's lives. The Bolton Live Well plans seek to **build on the success of different approaches tried in COVID** that enable strengths-based community-led work to improve health and wellbeing. However, there are some systemic barriers getting in the way of mainstreaming this way of working.

There is **no common purpose driving how the system works together**, and what for, in Bolton. Partners are most often operating in a **deficit model**, addressing immediate and competing priorities internal to their part of the system. This **short-termism is propelled by political cycles**.

Funding is deployed to meet reactive targets, rather than investing in future-focused, preventative support. Restrictive and static commissioning and contracting is a key barrier to collaborating with the **VCFSE** sector who work closest with communities (NB the Bolton Fund development seeks to continually evolve to respond to some of these challenges).

For leaders, this context dictates their reality: **fire-fighting the day-to-day whilst trying to hold an ambition for prevention**. Financial pressures command a **tight focus on managing demand and risk**, limiting opportunities for collaboration (with partners and communities) and sharing resources (including data).

Space to reflect on what works/doesn't work, and to be involved in long-term change, is a rare commodity for all stakeholders, including communities. It may be **hard to gain trust from communities** currently experiencing apathy towards change, particularly from those who are **not the 'usual suspects'**.

What are we going to do?

The CVS is **developing the infrastructure for the Voice & Influence** work. This work will create the space and opportunities for **relationship-building, generating ideas and insights, and joint decision-making** across the VCFSE sector. Key to success is **creating two-way channels** between the statutory system and this infrastructure for insights to influence decision-making and power balances.

The Public Health team are **expanding the ABCD learning and programme** across different sectors. This includes the use of a "train the trainer" model for practitioners, senior managers, and politicians.

Also, building on the legacy of the Community Champions COVID work, there is a **website to promote health and wellbeing information**, which the community can input into.

Through Open Access (Bolton College), there are courses to volunteer and **progression pathways into the VCFSE sector and employment**. These pathways will enable local people to join health and social care in Bolton.

There is work to be done to link these four strands together along a common purpose, and create **genuine buy-in / momentum** across the stakeholders necessary for success (e.g. neighbourhood leads and boards, Family Hubs, Community Alliances and communities themselves).

What are the changes we expect to see?

A preventative, community-led approach to tackling inequalities becomes a corporate priority, recognised as an enabler of all directorate objectives. There is **one Bolton narrative** with clear shared priorities guiding the **alignment of approaches and long-term financial investment towards prevention**.

Leaders are confident to 'unblock' challenges in the 'now', whilst holding the long term, future-focused decision-making. There is a **growing culture of honesty** around what doesn't work, with **permission to test, learn and fail**. There is evidence of a **collective value shift** towards an understanding of the **council as enablers, not fixers**.

One manifestation of this includes **evidence of more transparent decision-making**. Leaders from across sectors are **deeply connected to residents** - by being visible and active in community spaces/forums - and are **informed by community voice and insight**. This presence, coupled with the upskilling of residents to represent their communities safely and confidently, encourages **communities to be involved in initiatives, support, and decision-making**. They see value for their time and energy from clear communication about how decisions are made and their impact.

Outcomes / Vision

People living in Bolton have many opportunities to live healthier, happier lives. **Connected, empowered and engaged communities** are keeping themselves and each other well, and targeted support services are there when needed.

The **default way of working across the system is community-led**. This shared ethos between partners is a result of being **continually driven by a common purpose** to shift investment and activity towards community-led prevention.

Leaders are **brave in uncertainty**, consistently creating an **open dialogue across the system and communities** to truly share problem-solving and decision-making beyond formal job descriptions. Decisions are consistently shaped by **robust, rich and accessible insight owned by communities** because a new culture of engagement that is genuinely open and inviting has been nurtured.

Inclusivity, diversity and individuality are celebrated in this new participatory infrastructure, ensuring representation of different communities are equal voices across these spaces.

The **Live Well team members are proud of decisions** they made in the early stages of the Live Well programme to realise this ambition.

Tameside

Where are we now?

Many of Tameside's communities live in deprivation and have multiple, complex needs. At the same time, the borough faces a financial crisis and shortfalls in budget. There is a need to make available resources 'go further' and to **shift towards effective early intervention and prevention.**

There is a clear opportunity to do so by putting **community voice at the centre of decision-making.** The *Healthy Places framework* and redrafting of *Tameside's Local Plan* present concrete opportunities to develop and embed new ways of community-led decision-making. Instead of falling back on outdated consultation methods, there is a need to build new approaches to collecting data and intelligence, e.g. through the use of storytelling whilst ensuring that evidence is able to 'change hearts and minds' of decision-makers.

Investing in relationship-building and strengthening collaboration across networks and sectors is a key priority in Tameside. The *VCSFE* sector has been faced with significant financial disinvestment, limiting their already stretched capacity. Rigid funding criteria and impact measures put additional pressures on groups. There is a need for renewed collaboration and investment, allowing local organisations to access funding long-term.

There is the potential to build a **new, shared narrative and commitment to Live Well** in Tameside. This has to be values-led and centre a clear appreciation of the impact delivered by community, VCSE and statutory partners across the system. This shared narrative, or shared purpose, can provide guidance on understanding and evidencing impact for more effective, collaborative decision-making on prevention activity in communities.

What are we going to do?

Building on the original scope of this work, this work could focus on using data that already exists to get a baseline of Live Well activity. This includes everything from granular activity to public sector services. There is a need to identify how best to land this in the system.

The work will bring system-wide leaders and partners together on a regular basis, e.g. via a Community of Practice in Tameside to explore:

- How we shift the narrative
- How we amplify value and the story of Live Well, informing what it is we need to evidence and measure
- How we invest more effectively and more sustainably within given constraints

There is an opportunity to experiment with a discretionary funding pot that gets decided upon collectively, focusing on the 'how' rather than the 'what'.

There is a clearly defined role for community voice and how it gets acted upon. The work might harness opportunities to learn from different storytelling approaches and build that skill in the council - e.g. by bringing in local organisations such as Elephants Trail and Made by Mortal.

Live Well Tameside will draw clear links with and/or anchor this work with *Tameside's Health and Wellbeing Board*.

What are the changes we expect to see?

We'd expect a change in language and narrative, demonstrating that we are building the conditions for a shared narrative and purpose.

There are much more cross-sector interactions, e.g. any system leader groups/communities of practice that are developed as part of this work include community representatives. We will begin to measure the quality and maturity of network relationships as an indicator for impact.

We might be able to see micro grant funding systems,

Communications are carefully crafted, both horizontally and vertically across the system. Honesty and transparency are key features of our approach to communication.

Outcomes / Vision

There is a **strong, trusted relationship between communities and the council.** Finger pointing and 'shameside' are in the past. Instead we celebrate that the Council actively listens to and acts upon community voice. We celebrate that 80% of LA staff are from Tameside.

Community Voice is at the centre of decision-making and VCSE are shaping decisions in Tameside. Groups are sustainable and have longevity in the community. They are solid and recognised and everyone knows about the opportunities available to them. VCSE groups exist for their own purpose rather than bending out of shape to fit council priorities and short term funding.

There is a renewed and shared narrative in Tameside. People are proud to be from Tameside, and the 9 towns are coming together as One Tameside.

Communities are more resilient and independent, There is a healthy life expectancy and thriving communities who support each other. There are social wellbeing spaces popping up across the borough, encouraging informal interaction between council and communities, and communities themselves.

Look Fors' for community-led Live Well framework features

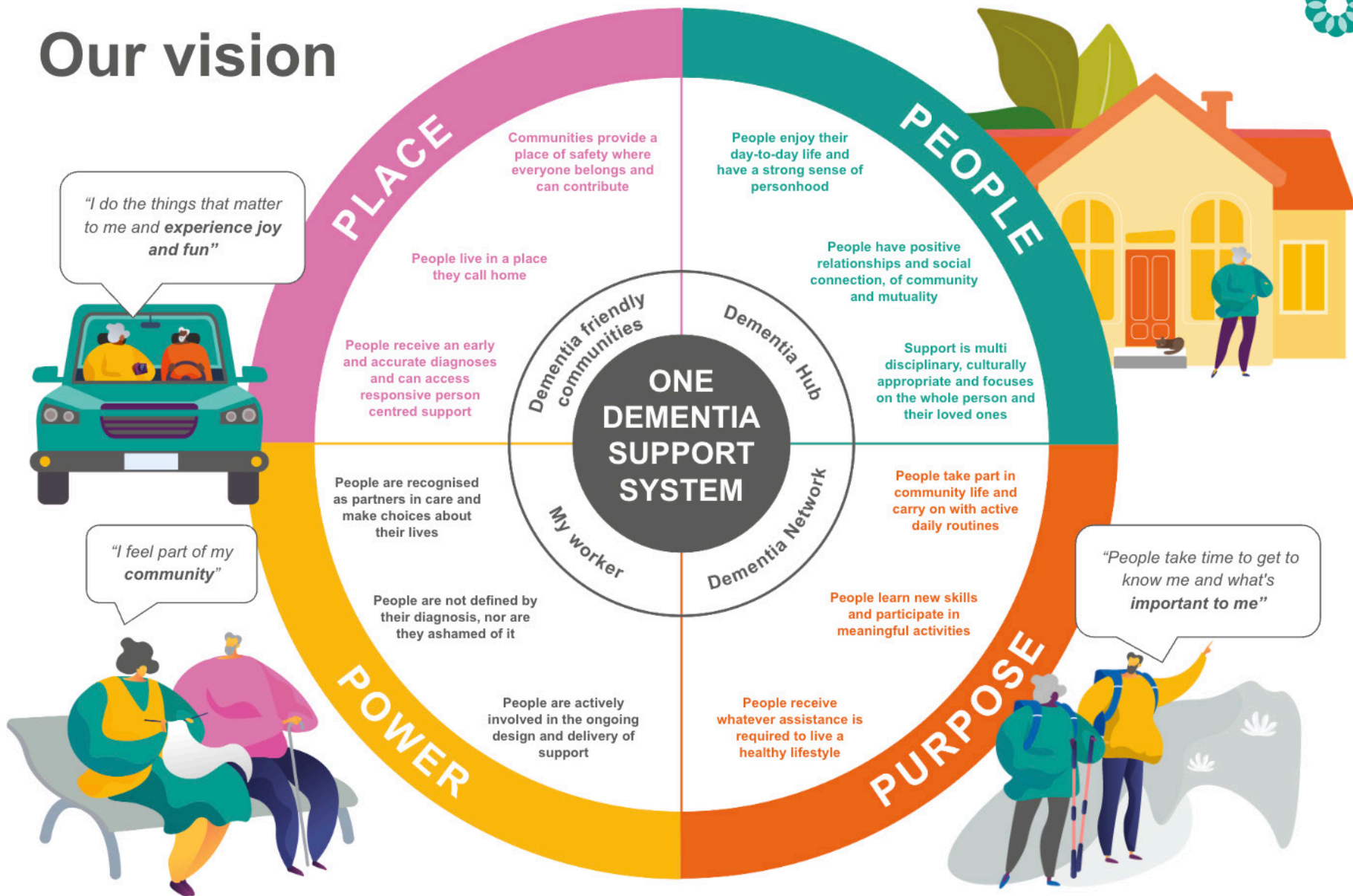
Community Support & Action	Community power, leadership & decision making	Community wealth, opportunity and ownership
Accessible and equitable information, advice & activities (incl digital)	New alliances, networks & partnerships	Sustainable and fair funding to resource community support & action
Community connectors, navigators & social prescriber roles and champions	Participation, voice & co-production	Community ownership & assets
Peer support & advocacy groups	Transparency, trust & collective action	Strong and inclusive infrastructure orgs
Creativity, cultural diversity & collective stories		Opportunities to grow community capabilities & capacity
Inclusive & welcoming spaces (cafes, conversations & connections)		Mutuals, co-ops & social businesses
Asset based Community Development		

Look Fors' for system-enabled Live Well framework features

Redefined Purpose	System Leadership	Shared Power	Collective Accountability
Reframed challenge	Embraces uncertainty and complexity	Self identification for individuals and communities	Participative/ representative/ democratic governance
Widely publicised case for change and mission	Future and learning focused	Community ownership; community wealth building	Models for risk sharing across organisations and sectors and with communities
Disruptive narrative	Emphasises soft power over hierarchy/ command and control	Creative use of digital technology with an emphasis on equity of access	New outcome measures and metrics; measuring what matters
Explicit and intentional about shifting systems	Values/mission-led individuals and teams	Data and information sharing; making data usable	Radically reduced bureaucracy
Emergence as a strategy	Distributed and collaborative models; multiple organisations/sectors	New models of finance and investment vehicles	Transparency in decision making
Alignment of mission and approaches; 'being the change'	Adaptive leadership	New models of commissioning	Multiple opportunities for community engagement and feedback and access to evaluation findings

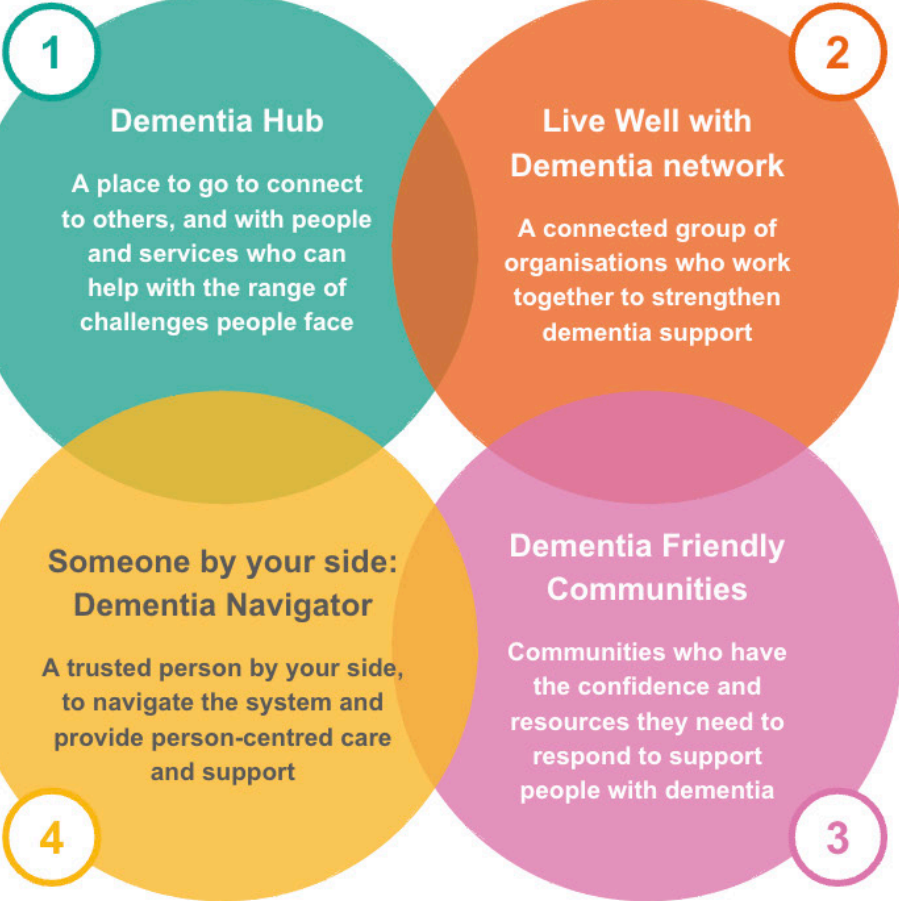


Our vision





That is why our approach brings together four important elements:



Key elements of the Live Well Dementia offer

Every person with dementia in Greater Manchester should be supported to Live Well.

System enablers for Supporting People with Dementia

This dementia offer can be supported to thrive across GM by creating the enabling conditions in the system, as identified in the Live Well framework.



Redefined Purpose

- Commit system leadership to a community-oriented vision, expanding beyond clinical perspectives to incorporate holistic and preventative care approaches, where power and knowledge are distributed
- Build on current initiatives like the dementia dashboard and 'Mind Matter' to refine our common vision based on data, community feedback and continuous co-production with the voice of lived experience
- Integrate prevention and brain health into the core purpose, drawing from successful models like the Dementia Manifesto
- Create shared investment in collaborative spaces (such as the network) to continue the ongoing refreshment of our vision and creating shared understanding between partners



System Leadership

- Secure high-level executive buy-in to prioritise dementia support amidst competing demands, ensuring sustained focus and action.
- Establish a leadership structure that spans health, social care, and VCSE, promoting integrated and cohesive support systems
- Align with broader strategic agendas, such as those from Health Innovation Manchester and GMCA, to reinforce the importance of dementia care within the wider health and social care landscape.
- Leverage devolution of health power to enhance localised decision-making and resource allocation



Shared Power

- Secure funding and resources to support participation and co-production, including reimbursing expenses and covering costs for people with lived experience and supporting flexible and meaningful engagement methods
- Empower Dementia Champions within statutory services, granting them time and authority to advocate and implement changes
- Design care and support pathways that mandate co-production and community involvement as standard practice



Collective Accountability

- Use data effectively to monitor key performance indicators, like waiting times, ensuring transparency and accountability across the system
- Establish a strong ethos of adherence to shared values, with pledges from all involved organisations to maintain these standards
- Ensure all organisations share best practices, tools, and skills actively and widely
- Regularly gather and disseminate examples of successful involvement and care models, such as those from Bradford, to demonstrate accountability in action