

## Foreword

Living Well West Midlands is funded with more than £6.7million from the Big Lottery Fund's Well-being programme and is making good progress in working toward improving well-being and encouraging healthier communities throughout the region.

The first year of Living Well West Midlands has seen 29 ground-breaking initiatives begin their work. These initiatives highlight the relationship between physical activity, a healthy diet and mental well-being and are benefiting people across the most rural and urban areas of the West Midlands.

The success of this portfolio's partnership approach is evident from the significant levels of support it has received. Over 15% of the total funding for the portfolio came from in-kind support - a massive £248,000 so far. In addition, over £240,000 of funding came from other sources. Together, the two totals signify a substantial leverage of other resources and represent around 45p for every pound from the Big Lottery Fund spent so far.

This shows a huge amount of commitment from the organisations and the people involved in the delivery of this portfolio. It is these partnerships that will be crucial to ensure the long-term impact and sustainability of this investment from the Big Lottery Fund for years to come.

Living Well West Midlands is an excellent example of how Lottery funding is making a real difference to the well-being of communities.

Foreword by Peter Wanless,  
Chief Executive of the Big Lottery Fund (BIG)

## Living Well Celebrates Year One Achievements

Living Well West Midlands reflects over its first year and examines some of the key findings of its First Annual Report

Living Well West Midlands is now entering its second year and as the projects continue working across the three themes of the portfolio this newsletter aims to highlight some of the key findings that have emerged from the first year.

With a diverse group of projects under its umbrella, the portfolio is already seeing a number of positive outcomes from its activities. Over 900 classes around physical activity were delivered throughout the year as well as 440 mental well-being sessions and 155 healthy eating sessions. In addition, Living Well West Midlands engaged 140 partner organisations including both primary and secondary schools.

A number of sessions relating to consultation, research and scoping activities were carried out and more than 100 professionals have taken part in training activities. Across the twenty-nine projects the equivalent of approximately 30 full-time jobs have been created to support the delivery of services commissioned and over 50 volunteers are now engaged with the projects.

"The evaluation of our first year has seen some interesting findings emerge across a range of areas from the lessons that can be learned around implementation



of a project right through to themes relating to promoting outcomes" said Zena Lynch, Director of the Living Well West Midlands. "We are looking forward to building on what we have learned so far and going on to achieve more as our projects continue their delivery into the second year".

# Lessons Learned in Implementation

The first year of the Living Well West Midlands portfolio has seen the development and implementation of twenty-nine projects across fourteen regions. The first annual evaluation report has highlighted a number of key themes relating to the Portfolio. Here are just a few of those findings in brief:

## Securing appropriate referrals

Various strategies have been employed in addressing this issue:

- Warwickshire's Action for Wellbeing project and Staffordshire's Wellbeing Workshops have begun to use the term 'mental well-being', rather than 'mental health', which is seen as having negative connotations.
- The Solihull SHINE project is ensuring links to accepted local care pathways for obesity services and using the national schools-based child measurement programme.
- The counselling element of Walsall's Feeling Good! project is using schools to identify pupils most likely to benefit from their intervention. The Living Well Herefordshire project has also worked closely with schools to generate appropriate referrals, as well as linking in with the local Children and Adolescent Mental Health Services.
- Offering taster sessions has been effective for Wellness Works in Worcestershire, where employers were offered sessions to address legislative requirements, but which also covered workplace well-being.
- Staffordshire's Dove mentoring project has taken a very community-based approach to marketing and has left information with local shop keepers, faith-based organisations, small employers and community groups in order to try and generate referrals from people not in contact with existing mental health services;
- A social marketing approach has been used in Telford, where the Women in Motion project has used Sport England's 'Mosaic' profiles to target specific groups and to tailor marketing messages and media to this audience.
- Persistence and using a range of strategies (face-to-face, writing, presenting at practice meetings) to engage with practices;
- Using alternative routes – either into the practice, or to get referrals out. Nurses and counsellors were cited as useful in this respect;
- Use other elements of the health service instead – such as Health Trainers, community pharmacists.
- Work closely with one GP practice on a locality basis. This strategy has been employed by the Priority Care project in Dudley and seems to have been successful in generating referrals to their project.

## Engaging with schools

Those projects engaging with schools have tested and generated a set of principles and approaches that have proved successful in their cases:

- Ensure that project activities have close links to the school curriculum.
- **'Speak their language'** and understand the ways schools and teachers operate. Sharing Spaces in Staffordshire found that their project advisory group was invaluable in making sure that the project was pitched in terms that schools understood.
- **Provide resources.** Schools are frequently offered guidance and advice on a range of topics. Farm to Fork in Wolverhampton for example – have found that having resources to provide more practical support / improvements has been welcomed by the schools.
- **Don't over-define the benefits.** Schools are better placed than projects to know what the issues facing their pupils are. Sharing Spaces in Staffordshire found that letting schools decide the reasons for wanting to undertake grounds improvements was more effective than dictating it to them.

## Engaging with GPs

GPs appear to be an especially challenging group to engage with and projects attempting to do this typically report difficulties in doing so. Several reasons were given as possible explanations, from GPs being too busy to engage with directly, to examples of 'competing' programmes where referrals attract a payment (e.g. Exercise on Prescription). In general terms, projects have met with little success in seeking to work with GPs. However, there have been elements of effective practice in this area and key lessons include:

The wider agenda, such as the Healthy Schools programme, is helping projects to gain access to schools.

The lessons learned from the implementation of the Living Well portfolio will help shape and inform other projects in the future working in the areas of mental well-being, physical activity and healthy eating.

# Outcome Themes

Outlined over the next two pages are some of the key lessons learnt and issues arising when promoting positive change in peoples lives:



## Promoting behavioural change

At heart, most of the interventions within Living Well aim to promote a change in people's behaviour: to eat more healthily and take more exercise, for example. In attempting to support these changes, many projects have learnt lessons about doing so; these include:

- **Have fun!** Several projects have noticed the importance of fun – particularly in relation to engaging people in physical activity.

## Cultural lessons for projects/services

Several of the projects are working with specific target groups where learning has arisen because of the needs of these groups. In all cases, the best approach seems to be based upon understanding specific needs and seeking to tailor services accordingly.

- The Women in Motion project ran focus groups specifically with South Asian women; the lesson from this work was about the likely effectiveness of word-of-mouth marketing, within extended families in some cases, and the welcoming of women-only classes.
- The Healthy You! project has learnt more about the needs of Muslim carers in terms of provision of female only classes for them at the local leisure centres and that Fridays were not popular for activities, given the need to worship on that day.
- Staffordshire's Dove Mentoring project is researching and testing the hypothesis that local mental health services are not suitable for BME service users. It is also examining mentoring as a potential way to address this problem.
- The physical activity element of the Feeling Good! project in Walsall is working to adopt an existing model to the needs of South Asian girls and women, through work with the local Wellbeing Development Worker.

- **Seeing progress is important.** Through various feedback mechanisms to beneficiaries.
- **Family and peer relationships bring 'positive pressure'.** Seeking to embed change within the wider social situation is a strategy used by several Living Well projects. The hypothesis here is that change will be more supported through an element of family and peer 'pressure', and also that some people – especially the young – lack the necessary control to affect change in their lives (over their diet for example), and so wider change is needed.
- **Beneficiaries must commit to change.** People need to believe in the need to change for themselves; indeed, several projects reported that their role was one of facilitating change, rather than 'forcing' it. Coventry Body and Mind reported that they have focussed attention on screening referrals to ensure that their beneficiaries are committed to changing their lifestyles.
- **Change may take time.** Several projects reported that it can take a number of weeks for a relationship between beneficiary and professionals to become established such that the beneficiary feels ready to take up all services offered. It may be that, for these beneficiaries, 'short-sharp' interventions will not be effective.



- Coventry Body and Mind has tailored the delivery of its healthy eating sessions to include coverage of South Asian foods and cultures. Whilst in its physical activity sessions it now includes female-only classes.

# Outcome Themes continued



## Supporting sustainable change

One of the main issues facing any time-limited programme is sustainability. This can be both for the service itself but also for the beneficiary - will this intervention lead to a lasting improvement in this person's life? Projects have employed a range of strategies to promote this type of sustained change, including:

- **Training professionals.** Several projects - including Stoke-on-Trent, Nutrition Training in Wolverhampton and Shropshire Outdoors – have run training sessions for professionals, with the aim of increasing their knowledge and changing their behaviour and, perhaps by extension, the culture of their organisation.
- **Training volunteers.** Projects are using volunteers to support the delivery of their project. In some cases, this is being done explicitly as part of a strategy to sustain

services and thereby outcomes for beneficiaries.

Women in Motion and Wellbeing for Life, for example, are training volunteers to provide them with accredited qualifications before supporting them to deliver community exercise classes. The intention is that support provided by the projects will eventually be tapered away, leaving volunteers able to deliver sessions on an ongoing basis independently;

- **'Training' beneficiaries.** Several projects set out to equip their beneficiaries with coping strategies and practical ways to deal with the issues they face. Examples of this type of approach include the work of Wellbeing Workshops in Staffordshire, where a user-led, group-based approach is used to uncover and support the application of specific and practical tools to improve mental well-being and cope with mental distress. Also, in the SHINE project, the model will be to provide general guidelines and messages on healthy eating, but then work with individual families to explore what this means on a practical and day-to-day basis for that family.
- **Timing interventions, supporting referrals and progression.** A small number of projects have also considered the timing of their interventions in order to promote both more lasting behavioural change and also to increase the support available to beneficiaries by supporting referrals into other services. Coventry Body and Mind, for example, begins to work with beneficiaries at 8-9 weeks of the 12 week programme to explore possibilities for progression after the end of the initial 12 week period (e.g. training, exercise opportunities in their area).

## Building provider capacity

Several projects within the Portfolio, notably Living Well in Stoke-on-Trent, Herefordshire and bWell Birmingham, are using Living Well funding to improve the capacity of the local voluntary and community sector. Primarily this work is concentrating on supporting the sector to respond to wider changes to the ways in which public services are delivered with local authorities and PCTs commissioning services from a more diverse range of providers. Examples of approaches taken include:

- The 'building by doing' approach taken in Stoke-on-Trent sees the PCT working collaboratively with voluntary sector providers. This has been done partly out of a recognition of a lack of capacity on the supply-side of the market for the provision of well-being services and that supplier-base will not emerge 'overnight'. Work might need to be done

to stimulate their development and Living Well represents an ideal opportunity to do this.

- Herefordshire use an approach that focuses on voluntary sector providers being able to demonstrate outcomes. This has been done as part of the local Compact arrangements between the PCT, LA and the voluntary sector. To become part of this agreement, voluntary organisations must undertake a self-assessment to demonstrate that they can record and improve outcomes if they want to access public funding.

Through this combination of effects, and where funding is being used in this way, it is likely that Living Well will lead to an increased capacity amongst voluntary organisations to respond to the emerging commissioning arrangements in PCTs and LAs.

# Developing themes and strategic links

Following the first annual report from the evaluation, six areas for development in the Living Well portfolio have emerged:



Olwen Dutton Chief Executive of WMRA discusses well-being in the workplace

## Mental Well-being

Links can be made with a variety of other work at regional level including the Health and Well-being Strategy, Investing for Health programme and the West Midlands Charter for Mental Health and Well-being. At a national level links can be made through the National Institute for Mental Health in England, other BIG Lottery Well-being programmes and the recent Foresight 'Mental Capital and Wellbeing' project.

## The Third Sector and Well-being Services

There is significant voluntary sector involvement in the Portfolio and in several areas there is a focus on improving the capacity of the sector to respond to the development of a mixed economy in the provision of public health services. Links can be made at regional level to the work of CSIP, as well as the work of Advantage West Midlands, Business Link and RAWM to support the development of this sector.

## Workplace Well-being

There are a number of projects working to address well-being in the workplace including Wellness Works in Worcestershire and bWell Birmingham and in turn addressing a policy agenda articulated by Dame Black's recent review 'Working for a Healthier Tomorrow' and the 2005 strategy 'Health, work and well-being – Caring for our future'. They are also tackling regional priorities as set out in the Health and Wellbeing Strategy ('Economy, Skills and Health').

There are clear links with the Regional Economic Strategy, in particular, its priorities in addressing 'Sustainable communities' and 'Achieving full potential and opportunities for all'.

However, in the current economic climate workplace well-being is likely to be less of a priority as firms concentrate more on survival. There are both opportunities and threats to the development of this work and agenda.

## Volunteers and Well-being

Various projects such as Women In Motion in Telford & Wrekin are using volunteers to deliver services and it may be that there is scope for a more practical sharing of experience on this issue: e.g. covering the recruitment, supporting and development of volunteers.

## Well-being in Schools

Early profiling shows that many of Living Well's beneficiaries are young and several projects including Staffordshire's Sharing Spaces and 'Farm to Fork' in Wolverhampton are working with schools in some capacity. There is strong evidence supporting early intervention by academics, think tanks and NICE as well as a number of national strategies including the Every Child Matters agenda, 2008 Curriculum and the Healthy Schools programme. Living Well's contribution could be based around sharing and developing practical approaches.

## Older people's well-being

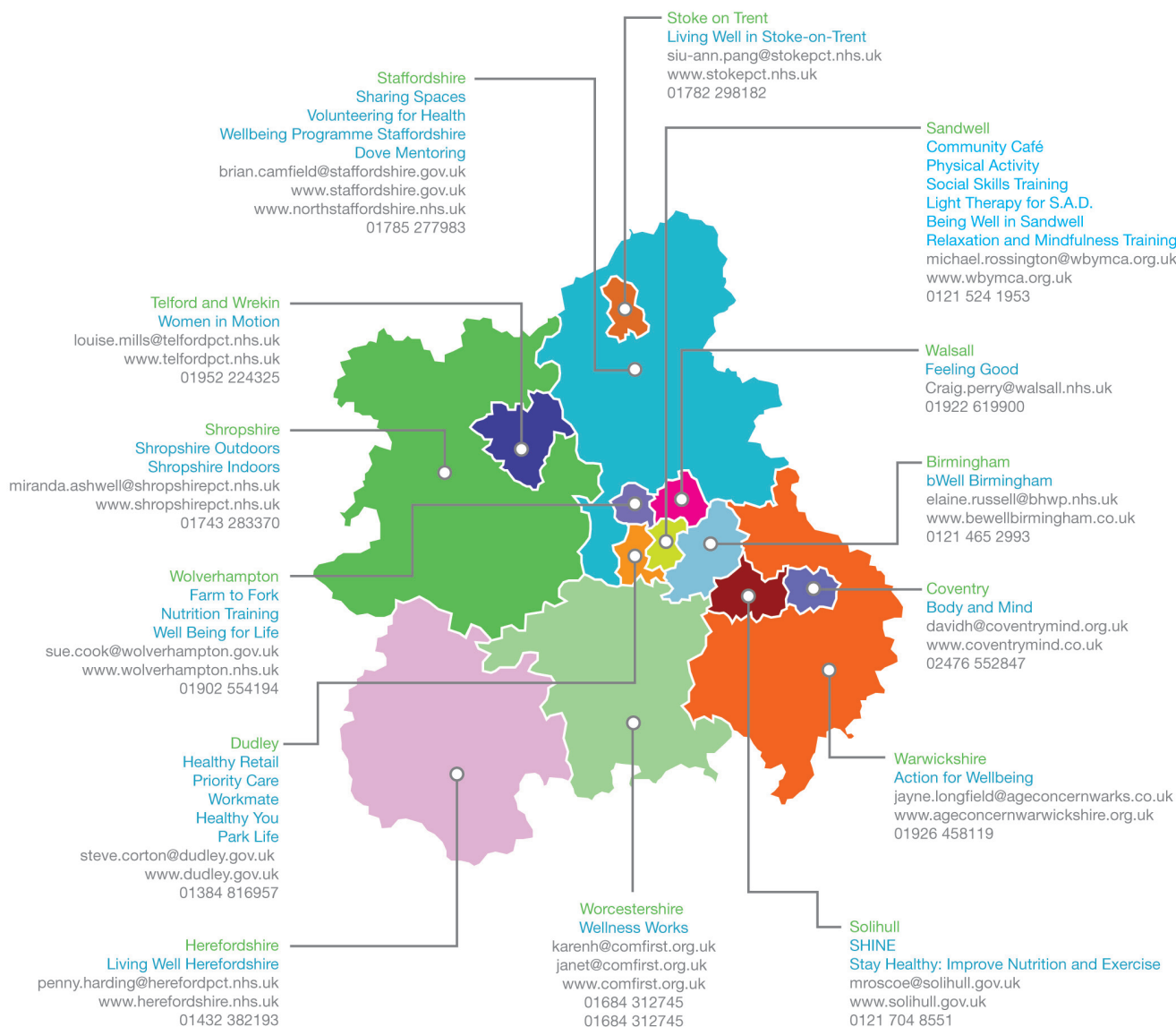
The promotion of older people's well-being – particularly in terms of their levels of physical activity, and providing services in their homes – is a priority within the Regional Health and Wellbeing strategy. It is also an area where several projects are developing services and experience.



Annual Conference workshop makes links to National Foresight project in mental well-being

# Getting in touch

Living Well West Midlands has 29 projects across the region. Listed below are the names of the projects and the contact details for the 14 Regional Communication Leads.



## Dates for your Diary

World Health Day 7th April 2009

Visit [www.who.int/mediacentre/events](http://www.who.int/mediacentre/events) for more information

The Work, Wealth & Health Conference will take place on 19th May 2009.

Venue and further details will be available soon on [www.wmpho.org.uk](http://www.wmpho.org.uk)

The Living Well West Midlands Annual Conference

Will take place in October 2009 and further details including the date and venue will be announced shortly. Watch out for more details on [www.livingwellwestmidlands.org](http://www.livingwellwestmidlands.org)

# Living Well West Midlands

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The content for this newsletter is based upon the information contained in the First Annual Report produced by GHK. GHK provide the monitoring and evaluation services for Living Well West Midlands portfolio.