Embedding VCFSE in Neighbourhood Health.

Cheshire & Merseyside webinar



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Microphones

Please keep your microphone muted until the end of the webinar, to minimise background noise.

Questions

We will hold a dedicated Q&A at the end of the two presentations.

Chat Function

Feel free to use the chat throughout the session. We will monitor it and respond where possible.

Cameras

You are welcome to keep your camera on if you feel comfortable, but it is not required.

Recording

This session will be recorded.

Technical Issues

If you experience technical difficulties, please try rejoining the session. If problems persist, contact us via the chat.

House keeping.

Respectful Participation

Please be respectful in the chat and during discussions. We aim to create a safe, inclusive space for all.

Slides & Materials

Any slides or resources used today will be shared following the webinar.

Timing

We will begin and end promptly. Please stay for the full session if you can.

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Close

11.30am



10am	Chair's introduction: Warren Escadale, chief executive, VSNW.
10.05am	Focus on – Sefton: Angela White, chief executive, Sefton CVS, Rachel Jones, assistant chief executive, Sefton CVS & Tracy Jeffes, interim place director (Sefton), NHS Cheshire and Merseyside (NHS C&M).
11.35am	Focus on – St Helens: S ally Yeoman, chief executive officer, Halton and St Helens Voluntary and Community Action & Rachel Frankland, senior transformation/programme manager and NNHIP St Helens place coach, NHS C&M.
11.05am	Q&A
11.25am	Summary and final thoughts



National Ambition

Create healthier communities, helping people of all ages live healthy, active and independent lives for as long as possible while improving their experience of health and social care, and increasing their agency to manage their own care.





Six Core Components of an effective neighbourhood service

- 1. Population Health Management
- 2. Modern General Practice

- 3. Standardising Community Health Services
- 4. Neighbourhood Multi-Disciplinary Teams
- 5. Integrated intermediate care with a 'Home First' approach

6. Urgent neighbourhood services

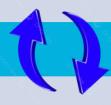
Priority for 2025/26 for these components is:

- Standardising the six core components
- Bringing together different components into an integrated offer
- Scaling up
- Rigorously evaluating the impact of these actions

What we mean by neighbourhood working



Neighbourhoods -A specific geographical area or community that resonates with residents, that local services, organisations and communities can coalesce around to address needs and improve outcomes. This is broader than integrated neighbourhood teams and includes ongoing partnerships with community groups, residents, and local stakeholders to address a wide range of community issues, including community development and systemic improvements.





Integrated Neighbourhood Teams - Developing Integrated Neighbourhood Teams will be part of how we deliver care at a neighbourhood level more broadly to both children and young people and adults. INTs go beyond multi-disciplinary working by fully integrating representatives from health (primary, community, acute and specialist) social care, and the voluntary sector into a single, place-based team to deliver seamless, coordinated care within a defined area. Working within geographical footprints of 30-50k population, services will include physical and mental health.





Multi-disciplinary working - Representatives from different disciplines coming together to share expertise, coordinate care, and contribute their specific skills to address the needs of an individual/family or group. Collaboration tends to occur at key points, such as MDT meetings, reviews, or case discussions and individuals typically maintain separate roles, responsibilities and different back-office functions.



Approaches to neighbourhood health



Health and care approach

The way health and care services are delivered to patients

The way communities play central roles in the design and delivery of services





Wider sector and voluntary sector approach

The way wider services come together at local levels to improve health and wellbeing

Sefton Partnership

VSNW Webinar: Embedding VCFSE in Neighbourhood Health

NHS Cheshire and Merseyside A Local Insight - Sefton Place

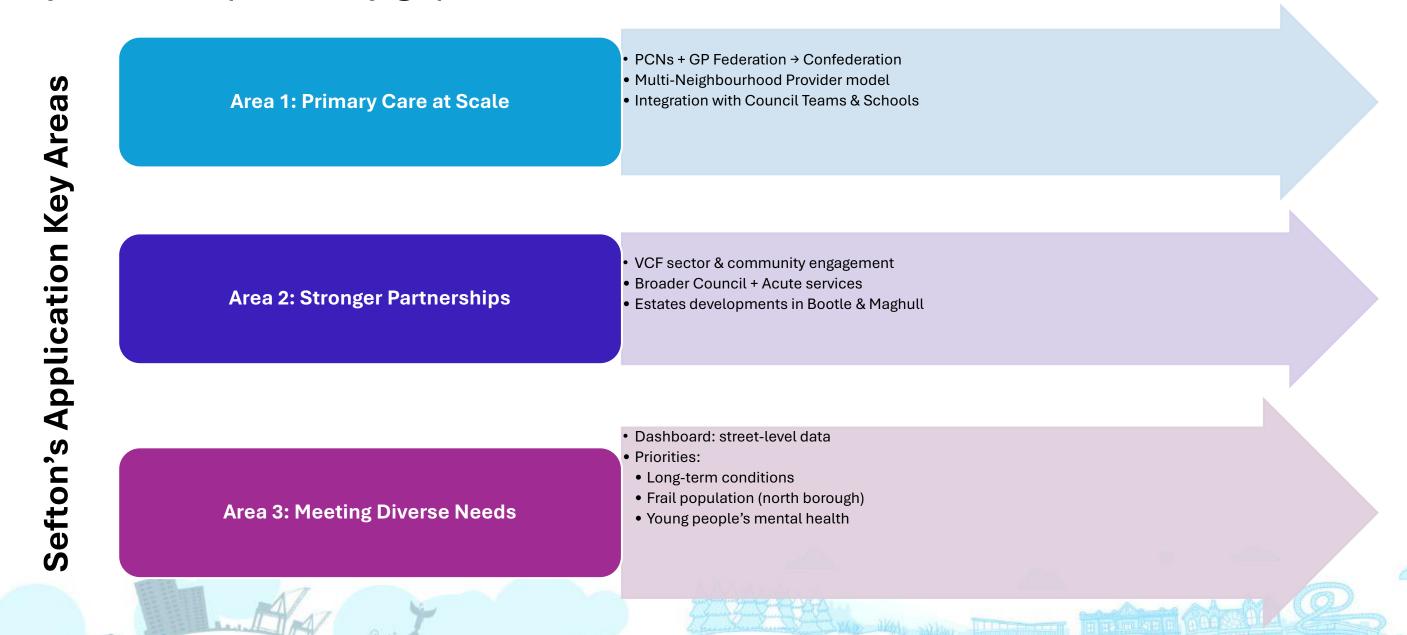
Tracy Jeffes - Interim Place Director



Sefton Ambition as a Pioneer

Sefton Partnership

- Development of a Multi Neighbourhood Provider model
- Target high-need groups based on PHM data
- Enhanced estates (Bootle & Maghull)
- Close 10-year life expectancy gap



Sefton Partnership

Sefton Neighbourhood Health Partnership





Cheshire and Merseyside

















Mersey and West Lancashire Teaching Hospitals







Proposed Governance

Sefton Partnership

Sefton Neighbourhood Model **Operational Group**

Neighbourhood Health Core Group – Operationally driving delivery of programme Leads of all subgroups & leads for BI, Finance, Coms

People and communities Group

Lead Rachel Jones/Tracy Jeffes

Population Health Management Leads Fiona Doherty/ Pat **McGuinness**

Intermediate Care with Home

first Approach

Leads Dave Marteau/ Alisa

Nile

Neighbourhood Team Development [New Target] Operating Model]

Urgent Neighbourhood

Services

Leads Dave Marteau/Sharon

Dooner

CYP

Adults

Modern General Practice Leads Jan Leonard/Rachel Stead/Clare Touhey

Standardising Community Services Lead Emma Danton/ *Karina

*Sefton Link on Core group

Better at Home

Digital

Woodyer-Smith

Funding Opportunities



What we have done so far

Sefton Partnership

Integrated service

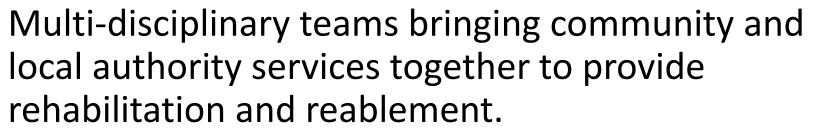
supporting discharge and admissions avoidance.



Development of locality model and Integrated Care
Teams across neighbourhoods for over 10 years.



Home First



Outcomes

- 63% increase in pathway 1 referrals post go live and still expanding
- Increased discharge home with support with a 59% reduction in Length of stay
- 78% of patients independent with no ongoing care needs



Sefton Partnership

What we have done so far



Adverse Childhood
Experience
Programme

- 500+ participants completed 10-week trauma informed approach to support participants to understand impact of ACEs, improve self-esteem, and develop positive coping strategies.
- Increased uptake of health checks and health screening. Participants have been supported to stop smoking, access volunteering, increase physical activity, gain independence. Measurable improvements in mental wellbeing.







Children & Young
People Primary
Mental Health
Pathway

- Children's mental health support delivered in collaboration with the PCN, CAMHS and VCF
- 76% of those accessing the pathway have an improvement in their presenting issue eg anxiety



Complex Lives
Scheme

- Primary care led scheme for people who are homeless or have complex lives
- Promoting health and independence through collaborative working with the PCN,
 Social Care and VCF partners
- Strength of partnership working seeing elimination of organisational barriers, leading to a more seamless experience for people who struggle to navigate 'traditional' health and care systems.

Sefton Partnership

- Prevention and early intervention are central especially around frailty, mental health, CVD, and lifestyle change.
- Collaboration and integration across NHS, VCSE (Voluntary, Community, and Social Enterprise), and local partners is essential.
- **Data and insight** must drive action using profiling, mapping, and patient journey tools to identify need and track outcomes. Expand usage of insight tool
- Neighbourhood and locality focus tailor approaches, avoid one-size-fits-all, empower communities, and test locally.
- **Simplification** reduce bureaucracy, clarify pathways, and align systems for joined-up care.

What is neighbourhood health?

Sefton Partnership

Six ways to make a difference for people and communities



Making it easier to see your GP
 Helping local practices have more time for

the people who need them most.



2. Providing more care in the community, keeping people out of hospital With hospital only for treatments that can't be given elsewhere



Focusing on those who need extra help
 Reaching people most at risk early, before
 things get worse



4. Acting early, not late Shifting from "fixing problems" to preventing them

Source: NE Lincolnshire: NNHIP National Event | Manchester | October 2025



 Helping people manage their own health Giving people the tools, skills and support to live well with long-term conditions



6.Working as one team around you Bringing together doctors, nurses, social care, and community support so you don't have to repeat your story





Embedding VCFSE in Neighbourhood Health: Sefton

Presented by:

Angela White, Chief Executive and Rachel Jones, Assistant Chief Executive

VSNW webinar - Monday 8 December 2025



Locality Working

There are approx. **2,765 VCF sector services** available to Sefton residents across the 3 localities – North, Central & South, delivered by **approximately 1,150 groups.**

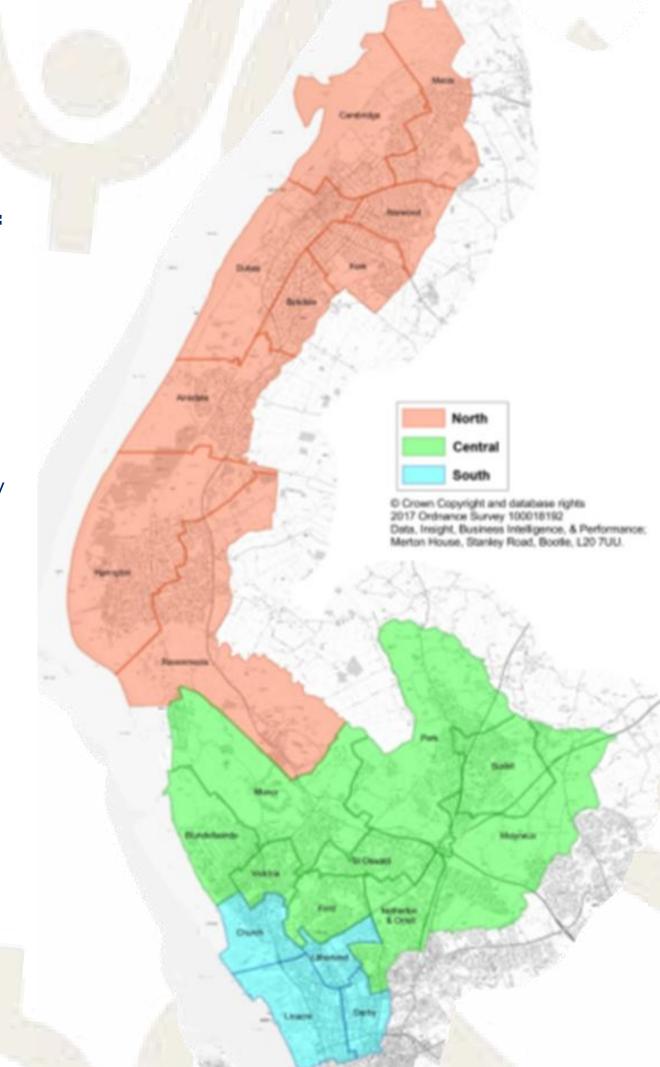
Around 2,000 of these services are delivered by organisations physically located in Sefton.

This means there are **765 services** available to Sefton residents which are delivered by organisations **based outside Sefton***

*Data sourced from Sefton CVS's 'Here For You' directory; www.directory.seftoncvs.org.uk There is a VCF sector *workforce of 3,950 employees and *39,506 volunteers, with volunteers providing *over 52,705 hours of volunteering evexry week.

The VCF sector contributes *£70.8 million GVA to the Sefton economy each year.

*Statistics taken from Cheshire and Merseyside State of the Sector report 2023, VSNW





Voluntary Sector role in Neighbourhood Health

- Community-Based Services
- Address Health Inequalities
- Preventative and Early Intervention:
- Part of Integrated/Neighbourhood Teams
- Community Voice

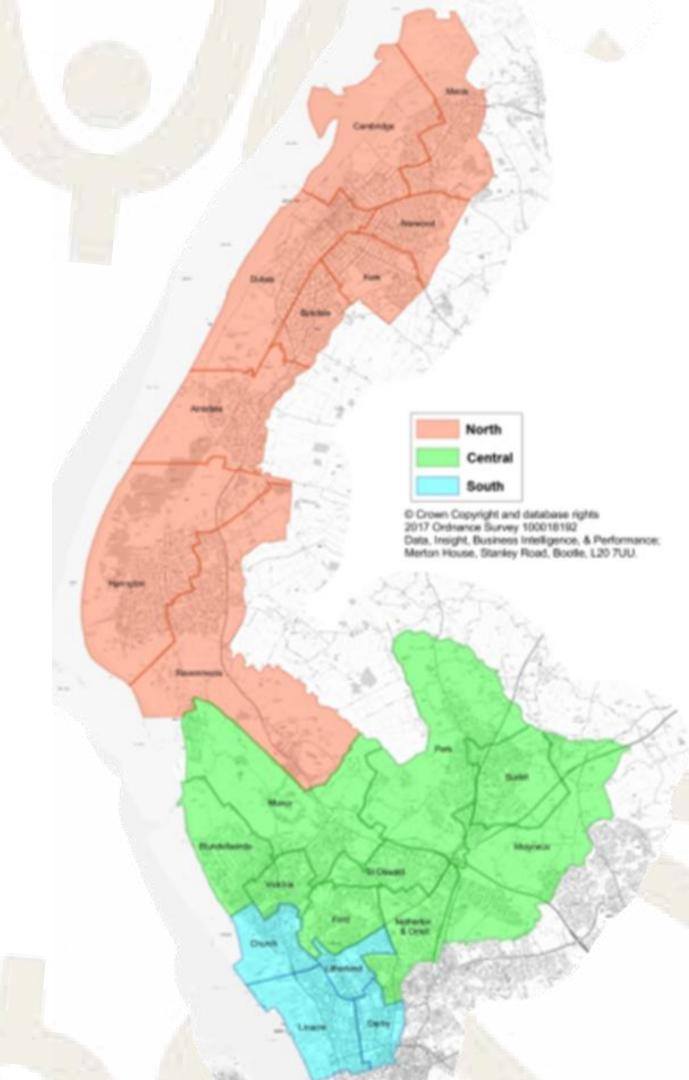


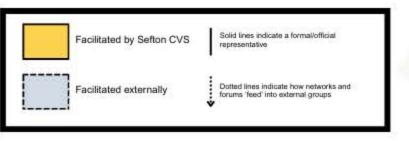


Opportunities to Influence

- Strategic Representation
- Local Community Insights
- Developing New Models of Care
- Co-production and amplifying Community Voice
- Locality (Neighbourhood) Working

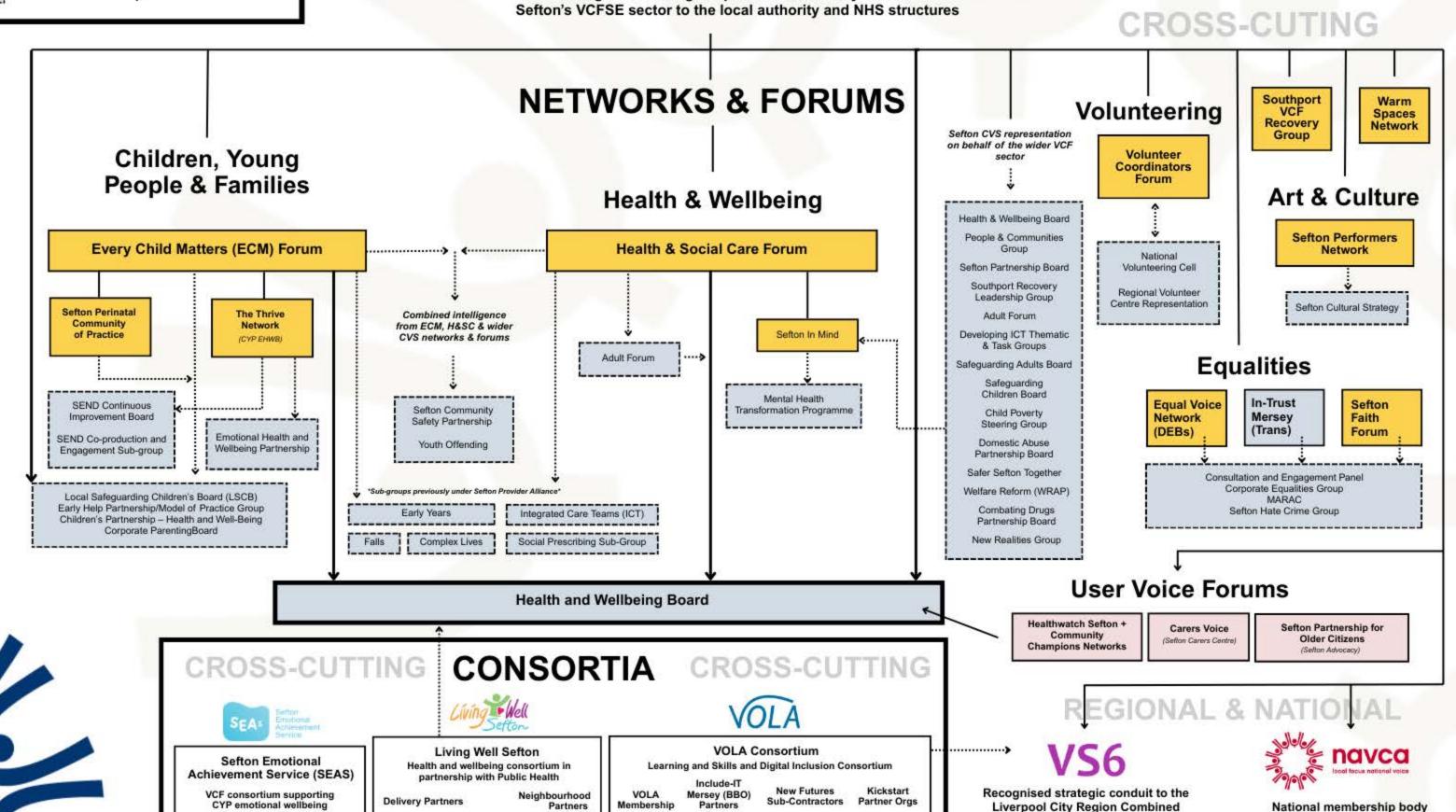








Recognised strategic representative eco-system for



Authority, Metro Mayor, LEP, C&M

Partnership (via VSNW)

for local infrastructure

organisations

Community Insight and Intelligence Tool

For VCF and Public Sector Organisations in Sefton

This online form allows staff and volunteers working directly with residents to share information about the issues, experiences and situations that are impacting on local communities throughout Sefton.

If you work or volunteer for an VCF or public sector organisation working directly with residents in Sefton you can access the form by visiting:

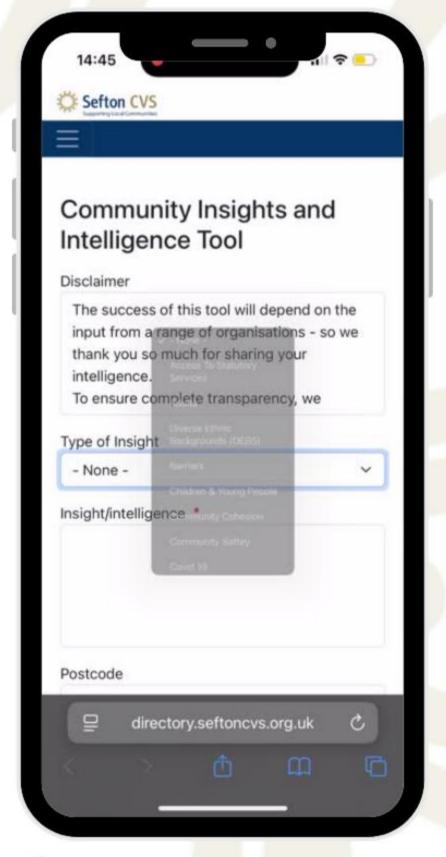
insights.seftoncvs.org.uk

The simple web form can be accessed from a mobile, smart device or laptop and can be completed in less than a minute.

More information and guidance on the tool can be found at: seftoncvs.org.uk/community-insights-and-intelligence-tool









Sefton CVS Sefton Partnership

Neighbourhood Health Hackathon

What does Neighbourhood Health mean to you?









Children's Respiratory Health

- Built on existing pilot
- Consideration of non-clincial causes of respiratory conditions

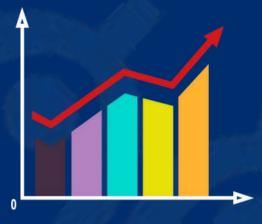
 (e.g. poor housing, family stress, parental smoking)
- Multi-agency Neighbourhood Task and Finish Group esablished to mobilise:
 - Sefton Council
 - South Sefton PCN
 - NHS Mersey Care
 - NHS Alder
 - VCSE Representation and Provision
 - Education
- Investment to enhance VCFSE capacity



Top Tips for influencing Neighbourhood Health



Build on what is already working



Share local intelligence and data



Consolidate VCSE sector voice via collective forums/alliance



Champion Health Equity





Advocate for the use of VCFSE assets and services at local level





Thank you for listening!

Find out more about the work we do: www.seftoncvs.org.uk

For more information on the VCF sector in Sefton or to discuss our initiatives please contact:

Angela White, Chief Executive, Sefton Council for Voluntary Service E: angela.white@seftoncvs.org.uk For more information on our health projects and partnerships please contact:

Rachel Jones, Assistant Chief Executive, Sefton Council for Voluntary Service E: rachel.jones@seftoncvs.org.uk

Follow us on socials







@Seftoncvs





















bedding the VCFSE sector in Neighbourho Health in St Helens

Sally Yeoman – Chief Officer, Halton & St Helens VCA Rachel Frankland, NNHIP Place Coach & Programme Manager

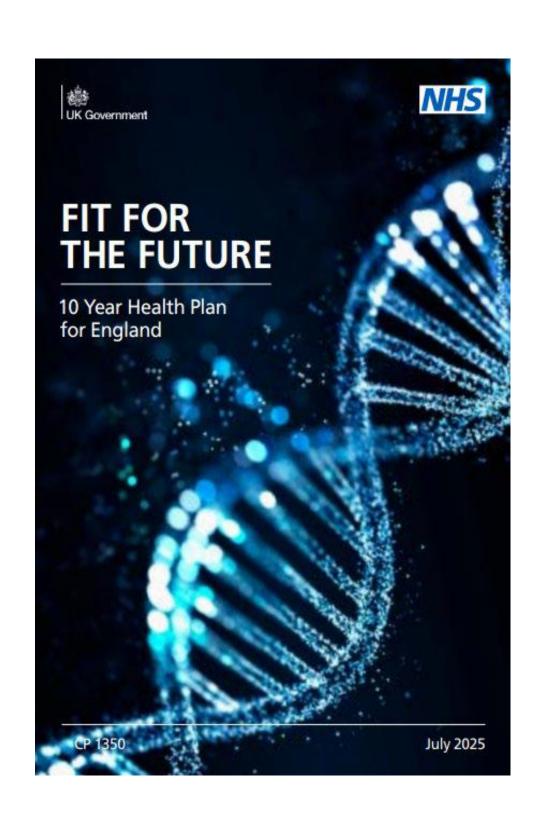


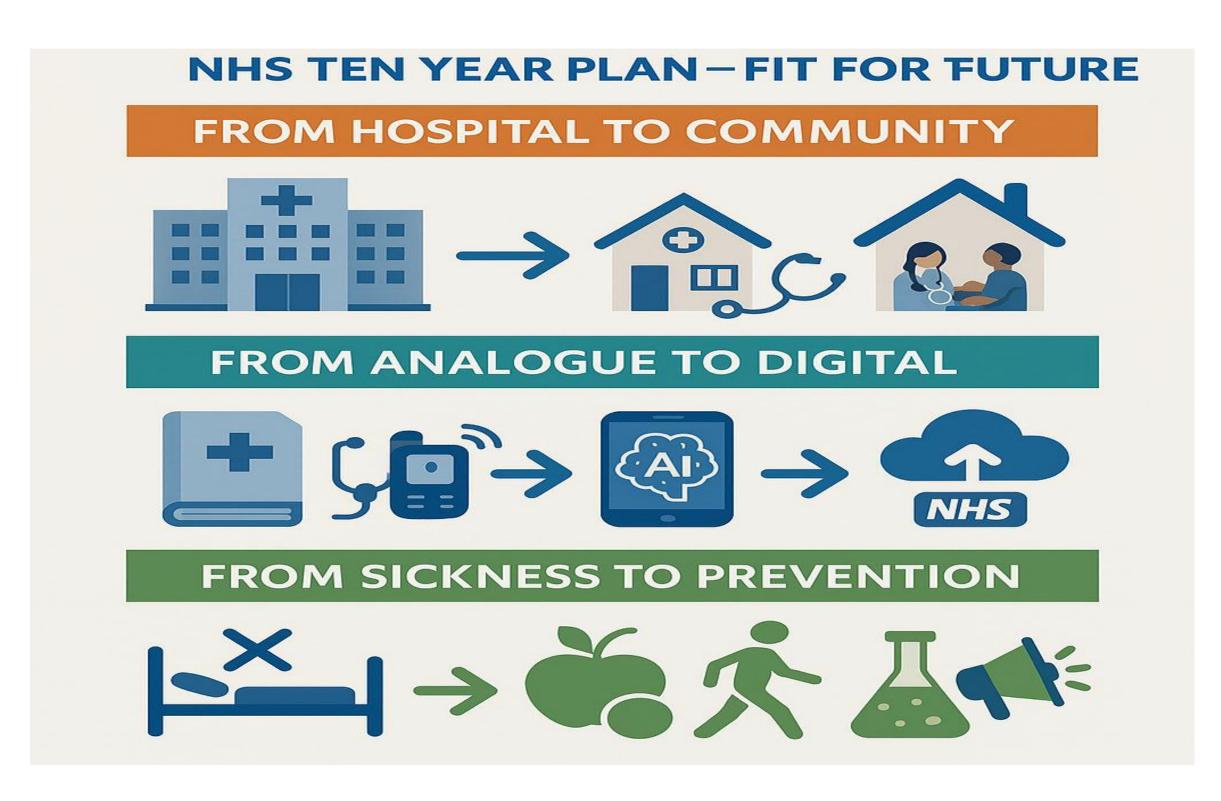




10 Year Plan: Fit for the Future









NHS Neighbourhood Health Guidelines 25/26

NHS and social care working together to prevent people spending unnecessary time in hospital or care homes

Strengthening primary and community based care to enable more people to be supported closer to home or work

Connecting people accessing health and care to wider public services and third sector support, including social care, public health and other local government services

NHS Neighbourhood Health Updates





Dr Claire Fuller National Medical Director NHS England

Tom Riordan Second Permanent Secretary Department of Health and Social Care

To: ICB Chief Executive, Local Authority Chief Executive and nominated local place coach

Cc:

NHSE Regional Director
Regional Medical Director
Regional Director of Primary Care and Public Health
NHSE Regional Neighbourhood Health Lead
ICB Head of Primary Care
LGA Regional Care and Health Improvement Advisor

9 September 2025

National Neighbourhood Health Implementation Programme (NNHIP)

We are delighted to confirm that you have been accepted to join wave one of the **National Neighbourhood Health Implementation Programme (NNHIP).** Congratulations to you and your team. We appreciate the time, thought and effort that went into your application and the collective engagement and support of local leaders you and your team convened.

National Neighbourhood Health Programme Aims - St Helens

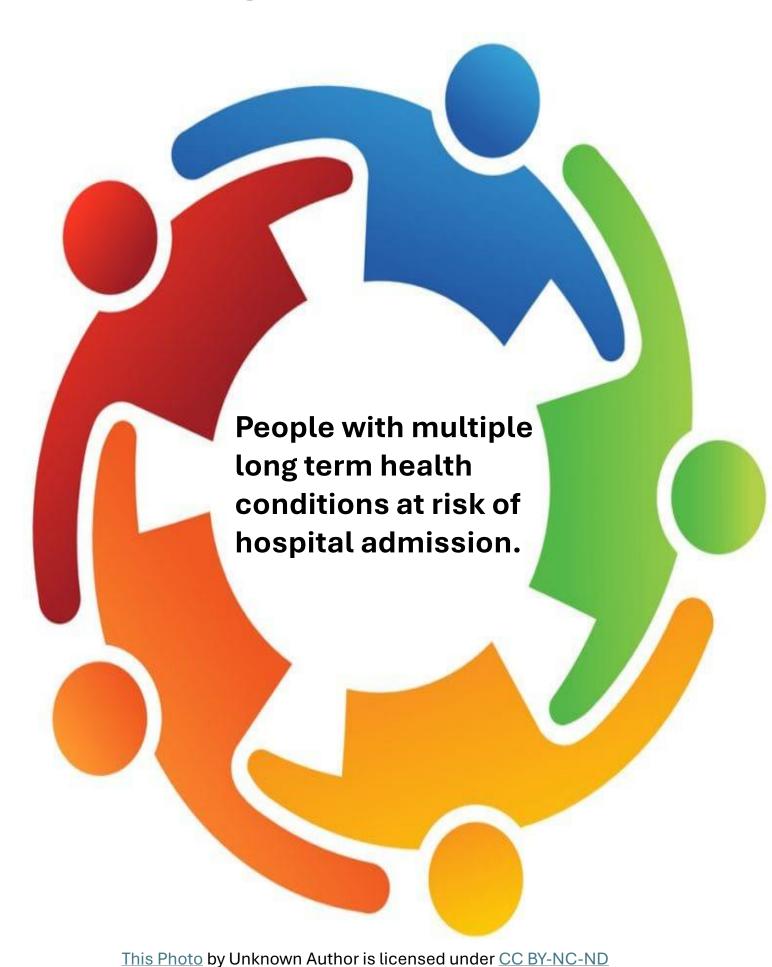


We want to find people with long term health conditions who need the most support.

Then bring the right people together to talk about the person's care and agree on one clear plan to help them

Create integrated teams in our neighbourhoods to help look after people who live nearby.

Make sure people get the help they need, in their homes and neighbourhoods.



What We Want to Happen

- Fewer people need to go to hospital for appointments.
- Fewer people go to A&E or are admitted to hospital without planning.
- It's easier for people to see someone at their GP practice when they need to.
- People feel more confident and know what to do to look after their long-term health problems.
- Staff feel happier and more supported at work.

NNHIP St Helens Work to Date

Formed a Neighbourhood Health Task Force Group (monthly).

Completed a maturity assessment and baseline assessment for the national team.

Utilised our population health tool (CIPHA) to decide and agree our initial prototyping cohorts.

Secured funding through the Beyond Programme to develop our CYP NH approach with the Families First Programme in Parr.

Attended a regional NNHIP workshop in Manchester in Oct (16 partners from St Helens). A de-brief meeting to share learning was held on 20/11/25 with 8 partners in attendance.

Hosted two Neighbourhood Health workshops with VCFSE partners in November. Hosted a Neighbourhood Health workshop with Primary Care colleagues in November. Hosted our first NH strategy meeting with MWL colleagues in December.

National Neighbourhood Health Programme - St Helens



North will help older people, aged 65 and over, who have health problems that last a long time and who may be frail.

Newton and Haydock will help people aged 18 to 40 who have more than one long-lasting health problem including asthma and/or COPD.

South will help people aged 18 to 40 who have more than one long-lasting health problem including asthma and/or COPD.

Central will help with the Families First Programme in Parr and will support children and young people who have more than one long-lasting health problem.



This Photo by Unknown Author is licensed under CC BY-NC-ND

What We Are Planning Building Our Integrated Neighbourhood Teams (INTs)

Our Integrated Neighbourhood Teams will **bring together everyone who cares for, or supports, a community**. They will include staff from the NHS, Social Care and the VCFSE sector. In St Helens we are developing four INTS.

Our INTs will have collective responsibility for improving the health and wellbeing of everyone in the local community both proactively and reactively. We are planning to have integrated leadership for each INT.

Our focus will be on **delivering holistic, person-centred care** that is flexible, joined-up, and preventative.

We will be **shifting from a risk adverse approach** by organisation to holding risk collectively.

Our initial focus will be **on building trust and working relationships** removing referrals and barriers. We plan to re-design team working days to maximise opportunities to work together, e.g. daily huddles, co-location.







"How do you see your organisation supporting the planned developments as part of the neighbourhood health programme."

There are several fantastic groups already delivering support across St Helens. This support is meaningful and can be life changing building solid community connections with trusted relationships often reaching people the NHS can't. We are happy to support and already have an offer for specific conditions e.g., Age UK Mid Mersey digital offer & Live Well Directory. We tend to take a holistic approach and focus on prevention and the broader health & wellbeing agenda. Groups often operate out of a range of community centres which can identify people in need within these communities. We can help with lived experience consultation; as this needs to be a vital part of the work. Leads from key VCFSE orgs need to sit in in the INT's and we need to utilise existing resources such as our social prescribing link workers.



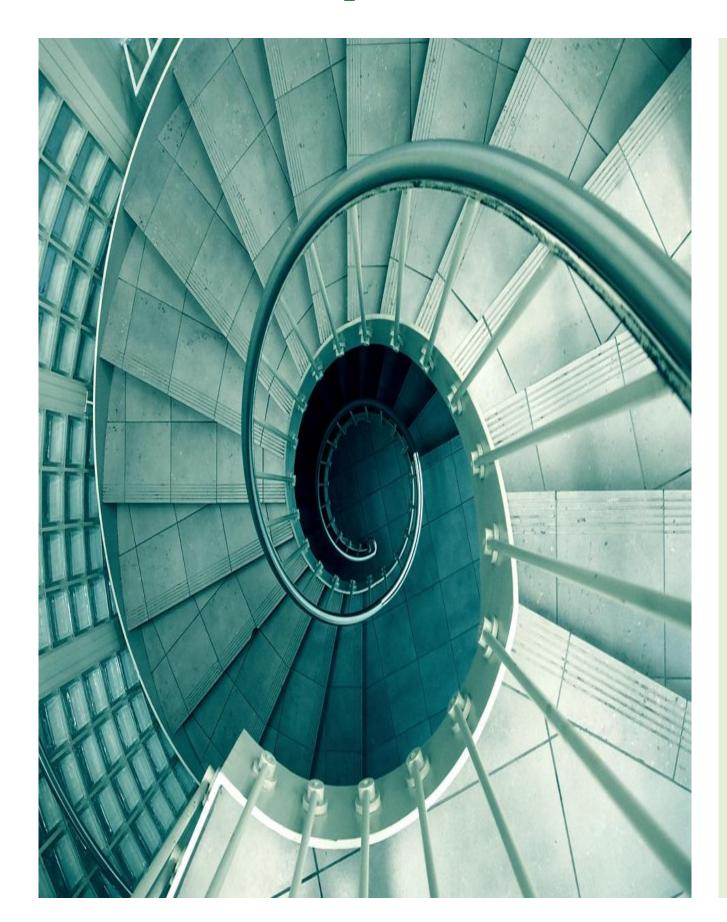
"What challenges do you think we are going to face in developing our integrated neighbourhood teams? How do you think we might overcome those challenges?"

"There needs to be a cultural shift from seeing the VFCSE sector as a 'cost' to an 'investment' with sustainable funding if there is an expectation of increasing role and demand. There needs to be redirection of investment from LA/NHS to VCFSE. What can the LA/NHS do to enable VCFSE involvement? The system needs to adopt an openminded approach with behaviour change seeing VCFSE as part of the team not an "add on". There is currently a paternalistic culture in the NHS when we need to make sure, we involve the people for whom the service is provided and address what's important to them not the system. The VCFSE sector can bridge this gap. There must be consideration for access and sharing of data (both ways) maybe via the Shared Care Record?

"Just because its hard, doesn't mean we shouldn't do it"

Next Steps





- Integrated Neighbourhood Team Steering Group (formerly Care Community Oversight Group) – 17/12/25.
- Monthly Neighbourhood Health Task Force Groups (service leads/director/CEO) - 08/01/26.
- Continue engagement with residents through GP Patient Participation Groups, Local Authority and VCFSE groups.
- Host pilot site/cohort specific workshops in Jan/Feb 26 to progress local neighbourhood conversations and the development of INTs.























Thank you

If you would like more information on how the neighbourhood health approach is being developed in St Helens, please contact

Rachel.Frankland@cheshireandmerseyside.nhs.uk



Embedding VCFSE in Neighbourhood Health

Cheshire & Merseyside webinar

Thank you for attending.

If you have enjoyed today's webinar, you may also be interested in future VSNW events, including:

• The Great North VCFSE Exchange: Making relationships with strategic authorities work

To find out more, visit www.vsnw.org.uk/events

Future events.

