WELCOME



Lunch and refreshments provided





THE OYSTERFLEET HOTEL
21 KNIGHTSWICK RD
CANVEY ISLAND SS8 9PA

Leading for the future

– a place-based
approach to leading
Sport and Physical
Activity in local
communities

Liona Bravo

(Programmes and Policy, Greater London Authority)

Jason Fergus;

(Director Active Essex)

- Why are we here!?
- The purpose of the course is to bring together a group of local people from different sectors and organisations who are passionate about the role that physical activity and sport can play in changing lives and strengthening communities, increasing confidence to do things differently and work in more connected ways.





Let's do some introductions!

- Making room for thinking environment within circles
- The most important element of a Thinking Environment is to listen with undivided presence.
- That means listening sympathetically. Listening without judgement. Listening without interruption.



A participatory learning experience

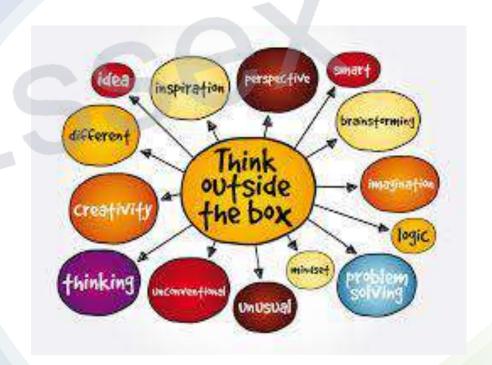
for civic and community leaders

ready to lead courageously

- A 'learning journey' for systemic disruption and 'doing things differently'
- A community of practice developing a space for growth & collective wisdom
- Where the personal meets the professional - inner & outer work

Our next 2 days together?

- . Phones to a minimum
- Time keeping- everyone is responsible
- Adult learners
- . Collective learning style
- Handouts will be emailed through
- Please feel free to take notes
- . Chatham house rules



Our time together today

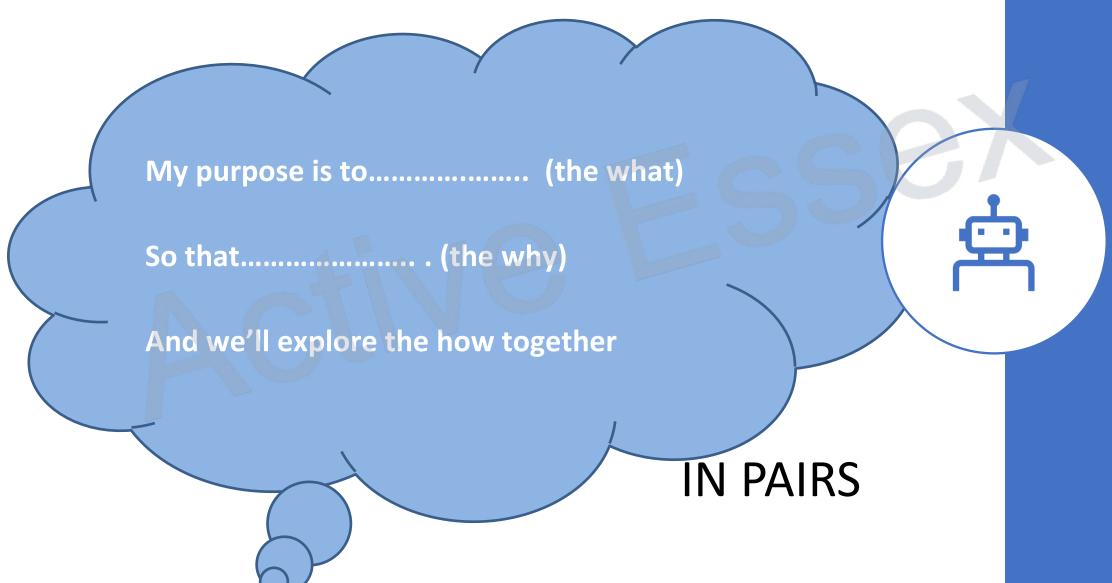
- Understanding the new context
 - Building a shared purpose
 - National and local perspectives
- Understanding the local health system
 - The health system
 - Integrated care systems
- Understanding system thinking, system change and collaborative leadership
- Reaching & Understanding our Communities

Understanding our context

Getting above the mess!

Our purpose Our journey so far

What's my purpose?





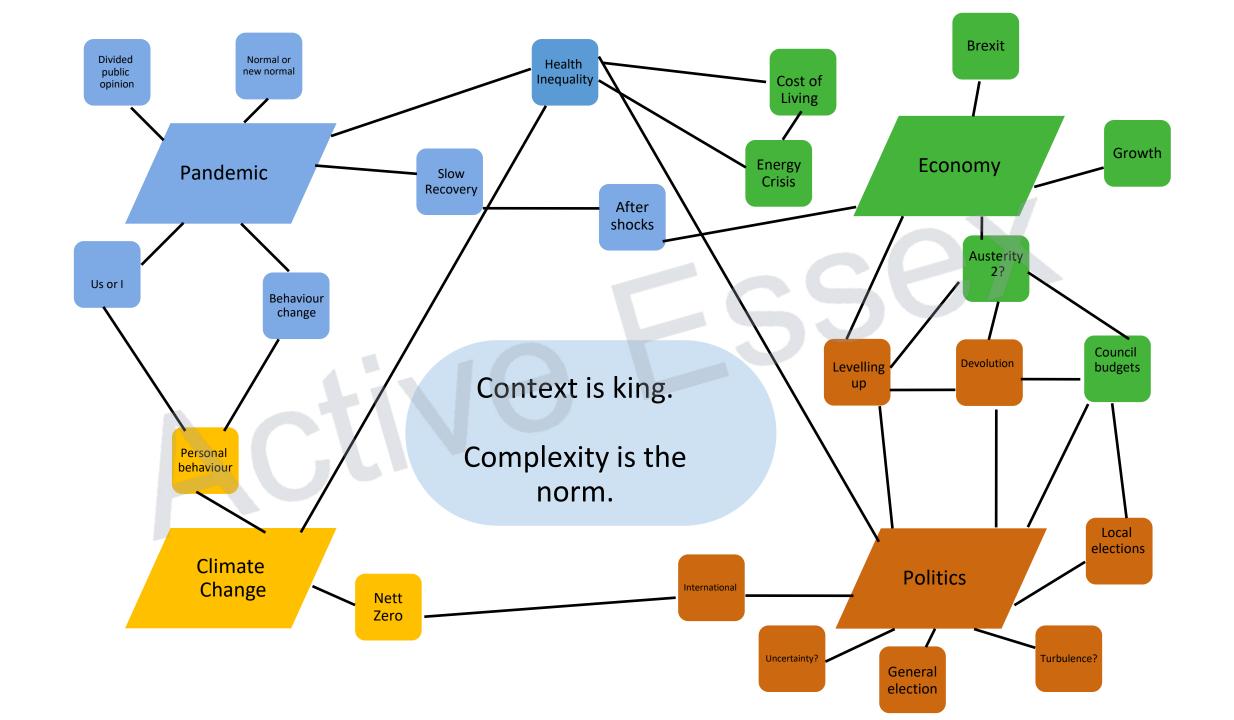
My purpose is....

Enable confident, ccourageous and empathise leadership in the physical activity sector

So that all our diverse communities have access to opportunities that enhance their lives, especially those in the most need.

The National Context... Including Uniting the Movement





Uniting The Movement.

Expand our place- based working

Expand our work on leadership

Help shape the future of leisure

Advocate and work with health systems etc

Invest where need is greatest

Revolutionise how national 'partners' work locally

Place Expansion Commitment



£250m over next 5 years to expand our place-based partnerships to 80-100 additional places via the network of people in our existing LDPs and Active Partnerships alongside a universal offer that all places can benefit from and deepening in the existing pilot areas.

To deliver impact against:

- Increasing Activity
- Decreasing Inactivity
- Tackling Inequality
- Providing positive experiences for children and young people

Recent Milestones

- Government's Strategy 'Get Active' launched on 30th August 2023
 Strong focus on increasing participation and ensuring sport and physical activity is accessible to everyone regardless of background or postcode.

 Places significant importance on tackling inequalities, which ties in well with Uniting the Movement, Sport England's own long-term commitment.
 - Place Partnerships Announcement on 7th November 2023
 Expansion of our investment into communities to ensure those with the greatest need are able to be physically active.

Place Need Classification (PNC)



For expanding our place-based partnerships, we will classify a place as somewhere of greatest need when data indicates there is *both* "sport and physical activity need" and "social need".

Sport and physical activity need

This data speaks most directly to our mission to increase activity, reduce inactivity and reduce inequalities



Social need

Data that describes places where outcomes are less favourable

Place Need Classification (PNC)



• LA-level: general level of need identified across the whole or a significant proportion of a LA area

• MSOA-level: need identified within specific pockets or neighbourhoods within a LA

How we best utilise the data to inform local approaches will be codesigned and co-produced with place partners.

Place Need Classification (PNC)

Whilst data is a powerful, objective way of helping to identify places of need, it is not the only consideration...



Angela Hutchings CEO Castle Point Borough Council

Reflection on tables and questions



Understanding the Health Landscape.

Rebecca Jarvis
Alliance director
South East Essex Alliance

Defining Health and Wellbeing

What does it mean to you to be healthy?

On your table discuss



What do we need to know?!

What is health, wellbeing and population health?

What are health inequalities?

What is Proportionate Universalism?

What are Integrated Care Systems?

ICS, ICB, ICP, PCN... what does it all mean? (The Kings Fund)

Integrated care systems (ICSs)

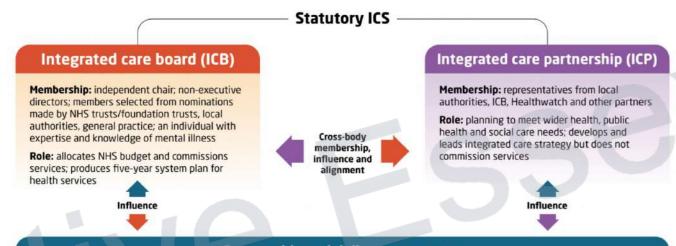
Key planning and partnership bodies from July 2022

NHS England

Performance manages and supports the NHS bodies working with and through the ICS

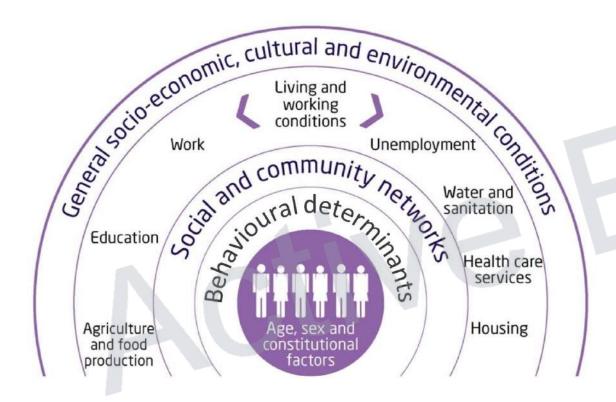
Care Quality Commission

Independently reviews and rates the ICS



Geographical footprint	Partnership and delivery structures	
	Name	Participating organisations
System Usually covers a population of 1-2 million	Provider collaboratives	NHS trusts (including acute, specialist and mental health) and as appropriate voluntary, community and social enterprise (VCSE) organisations and the independent sector; can also operate at place level
Place Usually covers a population of 250-500,000	Health and wellbeing boards	ICS, Healthwatch, local authorities, and wider membership as appropriate; can also operate at system level
	Place-based partnerships	Can include ICB members, local authorities, VCSE organisations, NHS trusts (including acute, mental health and community services), Healthwatch and primary care
Neighbourhood Usually covers a population of 30-50,000	Primary care networks	General practice, community pharmacy, dentistry, opticians

The Kings Fund >



What determines Health and Wellbeing?

What is Population Health?

- •The phrase 'protecting and promoting health', is often replaced with the term 'population health'. This includes the whole range of determinants of health and wellbeing, such as town planning or education, which are quite separate from health services.
- •The King's Fund defines Population Health as: An approach aimed at improving the **health** of an entire **population**.
- •Using this term rather than 'public health' also helps avoid any perception that this is only the responsibility of public health professionals. Instead it's about creating a collective sense of responsibility across many organisations and individuals.

Population Health is not the same as Population Health Management

What are Health Inequalities?

Health inequalities are differences between people or groups due to social, geographical, biological or other factors. These differences have a huge impact, because they result in people who are worse off experiencing poorer health and shorter lives. (NICE, 2016)

The **determinants of health** are the key drivers of health inequality

Causes of Health Inequalities

Wider determinants of health

The lives people lead

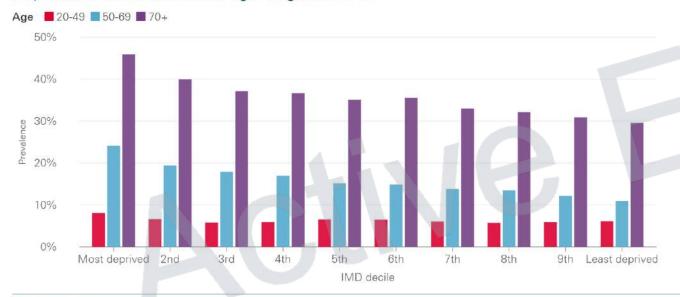
The health services people use

- Financial status
- Employment and work
- Environment
- Education
- Housing

- Tobacco
- Blood pressure
- Physical activity
- Alcohol
- Cholesterol
- Obesity

- Primary care
- Secondary care
- Preventative care
- Community services

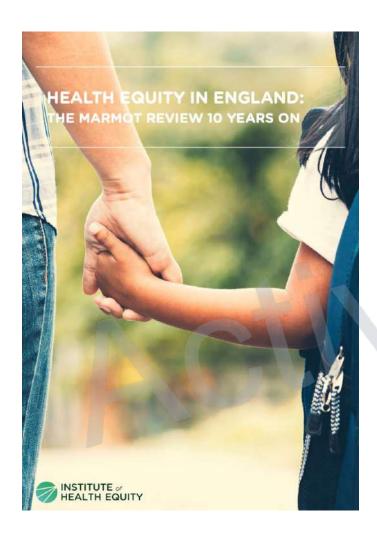
Prevalence of multimorbidity (two or more long-term conditions) by Index of Multiple Deprivation (IMD) decile and age: England, 2019



The Health Foundation © 2021

Source: Clinical Practice Research Datalink (CPRD), Aurum database, Analysis from CPRD protocol number 20_143 • Long term illnesses: Asthma, Atrial Eibrilation, Cancer, Coronary Heart Disease, COPD, Depression, Anxiety or other, Diabetes (Types I & II), Heart Failure, Stroke or TIA.

Poor health and deprivation



• Ten years since the publication of 'The Marmot Review' for the first time in more than 100 years life expectancy has failed to increase across the country, and for the poorest 10% of women it has actually declined. Over the last decade health inequalities have widened overall, and the amount of time people spend in poor health has increased since 2010.

Recommendations from 'Health Equity in England: The Marmot Review'

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a healthy living standard for all
- Create and develop healthy and sustainable places and communities

'Health Equity in England: The Marmot Review 10 years on' - Recommendations for taking action

- Develop a national strategy for action on the social determinants of health with the aim of reducing inequalities in health.
- Ensure proportionate universal allocation of resources and implementation of policies.
- Early intervention to prevent health inequalities.
- Develop the social determinants of health workforce.
- Engage the public.
- Develop whole systems monitoring and strengthen accountability for health inequalities

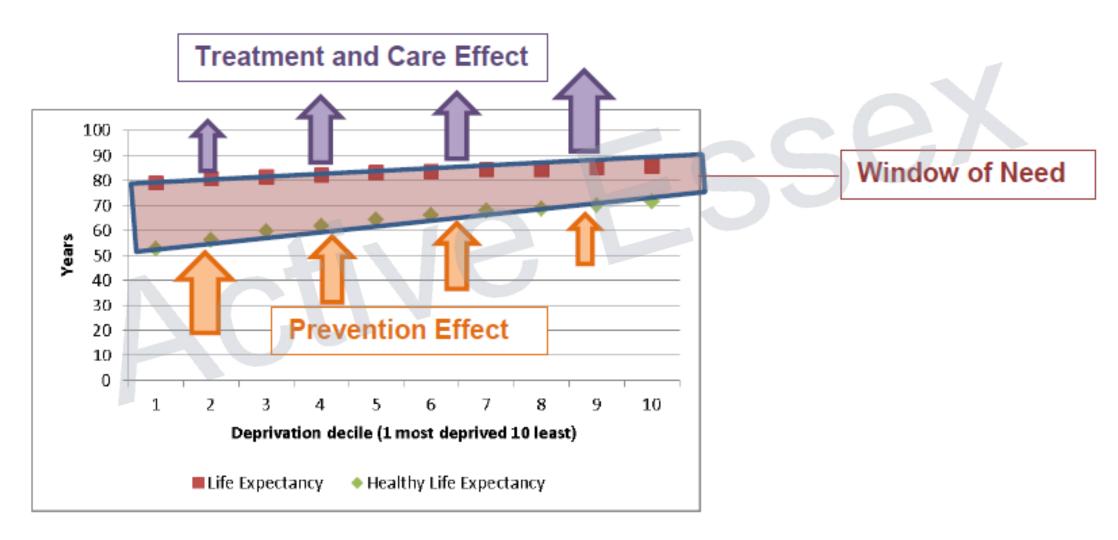
The resourcing and delivering of universal services at a scale and intensity <u>proportionate</u> to the <u>degree</u> of need.

What is Proportionate Universalism?

Services are therefore universally available, not only for the most disadvantaged, and are able to respond to the level of presenting need.

It is not the same as targeting.

Closing the Gaps



Prevention Matters

Effective prevention interventions, including increased physical activity, can reduce demand and costs but prevention is not all about costs saving.

Less easy to quantify but as important is people being more independent and able to take care of themselves, living happier lives, is a key outcome of prevention.

Summary

- Many factors determine health and wellbeing.
- Health inequalities are persistent. On average, poorer people have worse health and die younger.
- Pre-existing social and economic inequalities left some part of the population particularly vulnerable to COVID-19 and have largely defined the contours of COVID-19 impacts.
- The health system constantly seems to change but the health issues do not really change.
- Prevention is growing in importance and there is potential for sport and physical activity to contribute.
- There are many opportunities to work in partnerships with the health and care system if we get the relationships right. But it's not a 'dash for cash'.

Emma Lane CEO Northwick Park Trust



System thinking, system change & system leadership.

Seeing and doing things differently



What is a system? Layers...

Language, myths, metaphors, stories, hierarchy of values, know how, assumptions, mindsets

International and national guidance & laws, local laws and policies, rules, regulations, codes, times and schedules

Built environment, natural environment, green and blue spaces, transport networks, homes

Schools, healthcare, businesses, workplaces, faith organisations, charities, clubs

Individual relationships, families, support groups, social networks

Individual capabilities, motivations, opportunities, knowledge, needs, behaviours, physical and mental health and wellbeing



Four common system characteristics

Social
systems are
self
organising
networks of
networks

They are perfectly designed to produce their outcomes

They resist
change,
constantly
reorganising
to stay the
same

No one
person or
point of view
knows what
is going on no one is in
full control



Whats not working?

Health

Physical inactivity kills 5.3 million a year globally











CBC News · Posted: Jul 19, 2012 4:28 PM EDT | Last Updated: July 19, 2012



Physical inactivity is associated with 1 in 6 deaths in the UK and is estimated to cost the UK £7.4 billion annually (including £0.9 billion to the NHS alone).

2008-2016 Active People measured participation in sport. Data over this period shows that adult participation levels varied only marginally around 36% indicting activity through sport changed very little over that period.

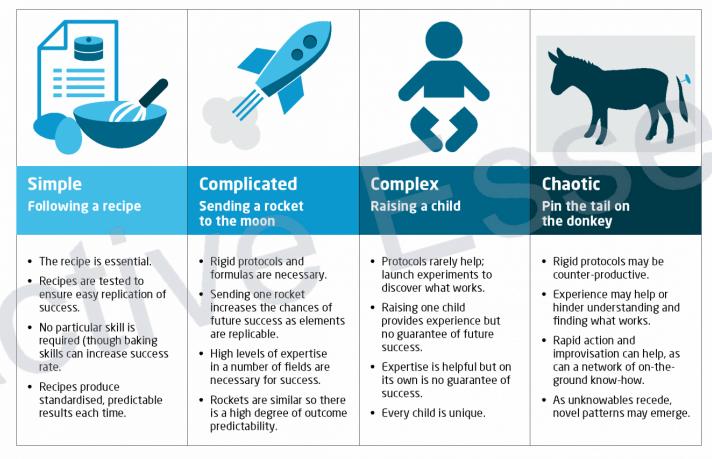
2014-2022 Active lives measured activity and inactivity. Data shows that levels of inactivity among the 16+ also varied very little fluctuating marginally between 25% and 27% despite Covid.

In both sets of data we find similar differences in terms of gender, ethnicity, age, disability and socio-economic status which also remained fairly static over the two periods.

It would be fair to say that despite clear policy objectives and significant investment by councils and Sport England levels of inactivity have hardly changed particularly among priority groups. We keep doing the same thing and get the same results.

Simple. Complicated. Complex

Decision-making in uncertain times | The King's Fund (kingsfund.org.uk)



Source: Adapted from Glouberman S, Zimmerman B (2002). Complicated and complex systems: what would successful reform of Medicare look like? Commission on the Future of Health Care in Canada. Discussion paper 8.

Simple. Complicated. Complex

Two teenagers placed in foster care after weight loss plan fails

Family court judge says parents failed to help severely overweight children and did not understand worry of West Sussex social services



□ The family was supplied with fitness trackers from the local authority but failed to pass on the data from the devices. Photograph: Paula Solloway/Alamy

Two teenagers have been removed from their parents' care after social services raised concerns about their weight to a family court judge. The judge, Gillian Ellis, ruled that the children from Sussex be taken into long-term foster care. She described the case as "very sad and unusual".

Everyone agrees that this is a very sad and unusual case, of a loving family, where the parents meet many of the basic needs of the children, but the local authority has been concerned that the parents are not meeting the children's health needs, in that both children are severely overweight, and the parents have shown an inability to help the children manage this condition," said the judge in her ruling.

She added: "The case was such an unusual one because the children had clearly had some very good parenting, as they were polite, bright, and engaging."

"The children had failed to engage consistently in exercise despite the local authority providing Fitbits and paying for gym membership. The children were supposed to provide recordings from their Fitbits, but this had not been done. The mother blamed lockdown for the inability to exercise, but exercise could still be taken in the home or by walking outside. The attendance of the family at Weight Watchers had been inconsistent."



In pairs, discuss with the person next to you a problem you have at work.

Discuss if it is simple, complicated or complex.



"Systems don't change unless they are put under undue pressure"

Helen Goulden - Young Foundation

"Systems don't change easily.

Systems try to maintain themselves, and seek equilibrium.

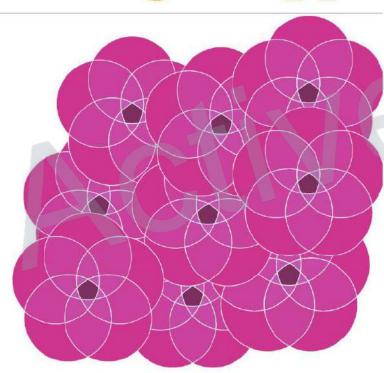
To change a system, you need to shake it up, disrupt the equilibrium.

That often requires conflict."

- Starhawk

System Change Happens Away From the Safe Centre

Change happens on the margins



In ecological systems as well as human systems the greatest change happens where two systems meet.

It requires diversity in order for change to occur.

All culture change happens away from the safe centre.

Where does system innovation and system change happen?





On your tables, discuss the mountain and meadow system change image.

Think to yourself - are you mainly on that mountain of bureaucracy and management, or mainly in the meadow of creativity and chaos?

Then discuss with colleagues - where would you rather be? How can you lead so people meet on the edge of the mountain and meadow, to create system change?



Part 2:

What can we do about it? Systems Leadership Strategies



What does systems leadership look like...

From		То
Creating traditional management structures	-	Taking the time to build relationships, networks and trust around a shared purpose
Top-down delegation		Increased capacity for decision making across different part of the system
Command and Control	-	A focus on empowerment participation and co-creation
Centralised decision-making		Decentralised process where people collaborate to reach agreement
Leadership as defined by designated role or individuals	-	Leadership viewed as a collective active that anyone in the system can take up
Working towards set goals using pre- defined methods	-	Promoting flexibility and adaptable ways of working
Different teams working in isolation from each other	-	Encouraging collaboration and knowledge- sharing across all levels of an organisations
Telling others what to do and assuming we know what's right	•	Learning together as equals
Egotistical and territorial		Being humble and breaking down silos



A key learning for us was the level of personal change needed to disrupt some of the ways of working that had become second nature.

Angela Williams, Public Health Lead - East Riding of Yorkshire



So how can we intervene in systems, some key observations

Myron's Maxims

- Myron E. Rogers

People own what they help create The heart of co-creation

Real change happens in real work Actions not words

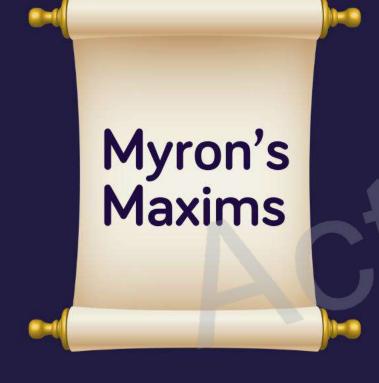
Connect the system to more of itself

Feedback loops are the source of health in systems, and create the conditions for change. Make them visible

Start anywhere, but follow it everywhere

Work with what matters and engage with what shows up and be prepared to go wherever it takes you

The process we use to get to the future is the future we get ive How we work together will be what tomorrow looks like





People own what they help create



Real change happens in real work



Those who do the work do the change



Start anywhere, but follow it everywhere



Connect the system to more of itself



The process we use to get to the future is the future we get



Activity: In pairs

- Thinking of Myron's Maxims
- •- Which ones resonate with you?
- •- What would your maxims be?

The flow that leads to strong system working

Make the move from co-existence to co-ownership

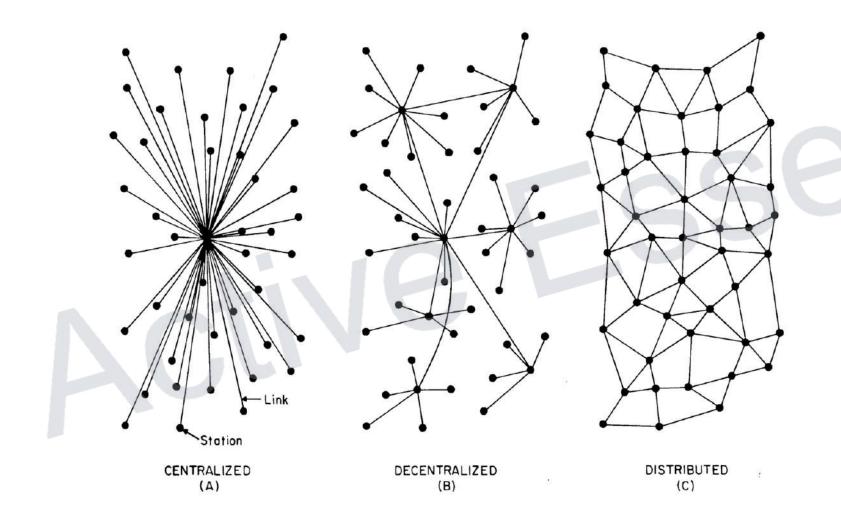




Part 2a:

The importance of Networks & Trust

Connections & Networks



So what do we need instead... systems approaches



Understand the Complexity (System Mapping)



Identify the right places to make a difference (Leverage Points)



Act in Collaboration across the system (Networks)

A formula for Trust...

David H. Maister and Charles H. Green

credibility + reliability + intimacy

self - orientation

A formula for Trust...Credibility

David H. Maister and Charles H. Green

"A <u>credible</u> leader is someone people will follow because he or she gathers the facts and forms a well-thought-out opinion that leads people in a viable direction for the goals they are trying to accomplish"

A formula for Trust... Reliability

David H. Maister and Charles H. Green

"Reliable leaders do what they say they will do. Reliability is about holding true to commitments"

A formula for Trust... self-orientation

David H. Maister and Charles H. Green

<u>"Self-Orientation</u> can be defined as a too-narrow focus on your own interests. Leaders have to have some selforientation because, without a strong point of view, they bring no value. But too much self-orientation can seem highly self-serving.

It's hard to trust leaders who exploit, or appear to exploit, their teams and companies for their own interests"

A formula for Trust... Intimacy

David H. Maister and Charles H. Green

"Intimacy, on the other hand, isn't so much about how you're seen as how you are. Intimacy is about building deeper connections with followers. We are all human beings with full lives that don't cease to exist within the four walls of work, and intimacy requires caring about people beyond just what they can do for us at work"

"Progress Moves at the Speed of Trust"

How do we build trust?

- 1. Start with our end in mind
- 2. Say sorry and be open about faults and mistakes
- 3. Create deep and genuine engagement
- 4. Build habitual connecting and then scale with 'process'
- 5. Connect the system back to itself share, introduce and Invite
- 6. Compliment & express gratitude
- 7. Build common language, us, our, we
- 8. Respect intentional consistency more than you revere intensity

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

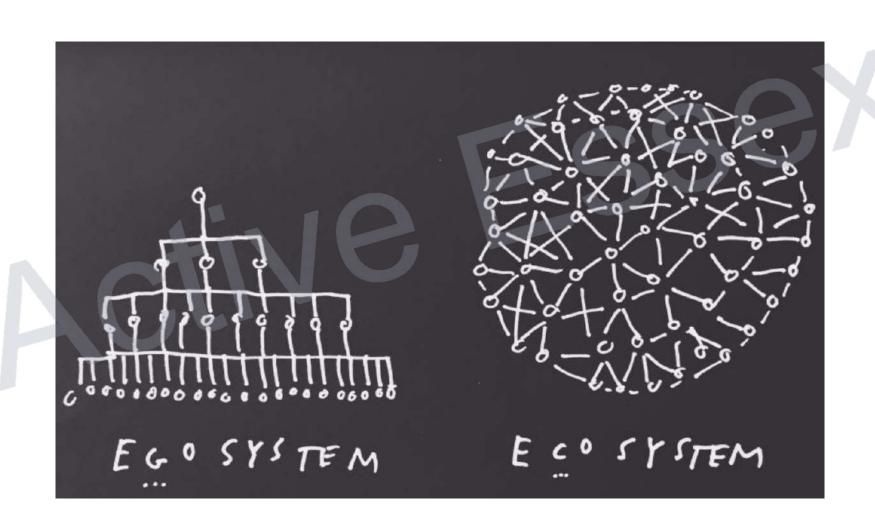


Change is an inside job - it starts within us

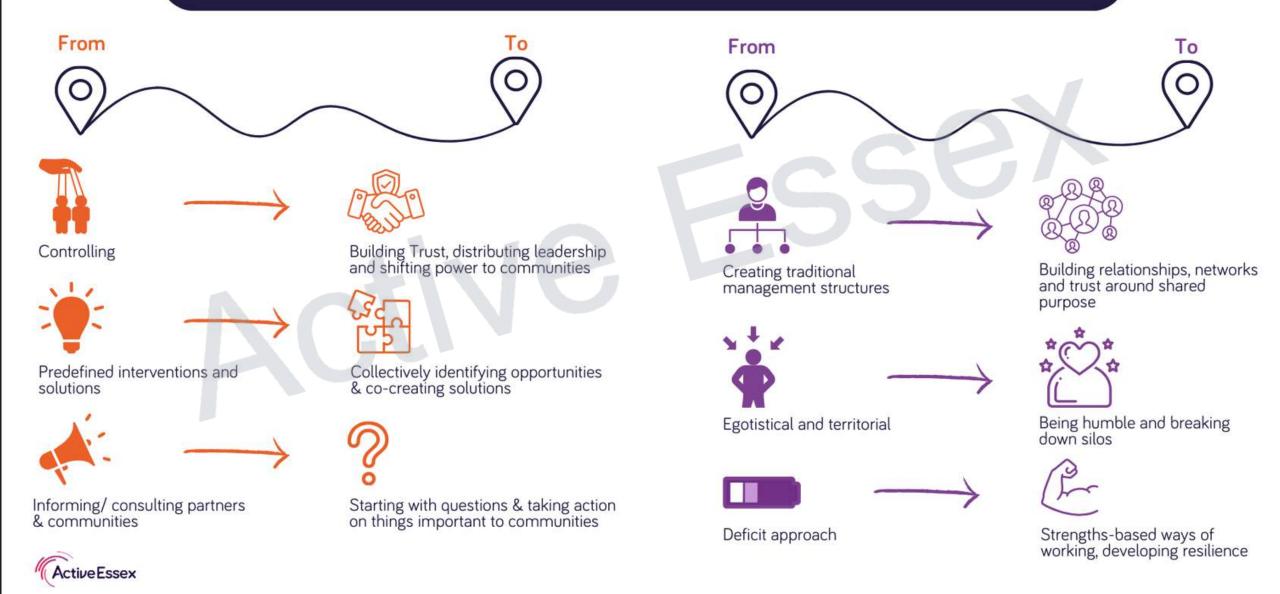
"The work of systems change must come from within, from a place of personal transformation"

- Bioleadership Project

Old vs New



Active Essex & Essex LDP - New Ways of Working



YOU SAY 'EVERYBODY CAN BE A GIANT', WHAT DO YOU MEAN BY THIS?

The importance of lived experience:

Stuart Long ATF

