

**Health Creation must become 'business as usual' for sustainability of health and social care and embedded in systems alongside the treatment illness and prevention of ill health.**

### Thirteen Calls to Action for ICSs – organisations, sectors and partnerships

- 1. Adopt the six features of health creating practices as your organisation, network and system values:** By doing this you are supporting embedding of a new culture based on respectful relationships. Enlightened organisations will start to see the possibilities of building these into their recruitment and workforce management processes. THCA adopted them, alongside the Nolan principles for public life, within our [Code of Conduct](#).
- 2. Consider holding your ICB, ICP and Provider Collaborative meetings in community venues:** Invite community members to talk to you about what it's like to live in the place. Ideally, each member of the board would do a walkabout partnered one-to-one with a person from that community. This will help your senior team to connect with the realities of life for people they have a responsibility towards.
- 3. Hold protected time for community connections:** Release all members of your workforce from day-to-day tasks by providing two hours of 'protected connecting time' every month to spend in conversation with people from the local community or people who have lived experience of poverty, trauma or discrimination finding out what is happening in that community and what matters to them.
- 4. Invest in connection:** ICSs should invest a proportion of their budget to their whole workforces – including the most senior and clinical NHS staff – to connect and build relationships with other sectors and communities through trusted partners. Job descriptions need to include 'relationship-building' as core. Investing in relationship-building will pay off in the long-term.
- 5. Invest in community connectors and leadership:** Continue to invest in and develop your Community Connector programme along with other community champions, community development and local area coordinator activity. Invest in community-led grass-roots organisations. These programmes and organisations offer activities that are highly valued by communities and that are inexpensive and once the constructive relationships are in place, they can support many different aspects of transformation and change.
- 6. Establish a Health Creators' Network:** Establish a network for your Health Creation Champions (across your cross-sector workforce and putting communities in the lead). Provide a budget that enables them to meet regularly, share their learning and Health Creation approaches across sectors and work differently.
- 7. Practice community-informed decision-making:** Codesign routes for your ICB, ICP and Provider Collaborative decision-makers to be directly informed by community members, people with lived experience and frontline Health Creators on a wide range of issues. This means: listening to them in the places where they go, involving them in the response, inviting representatives to sit at your top tables, consistently offering feedback.

---

## Thirteen Calls to Action for ICSs – organisations, sectors and partnerships

**8. Invest 1% of the entire ICS budget in health creating communities:** to support relationship building, health creating activity and community led organisations to emerge and flourish in communities with the highest levels of poverty and worst health outcomes.

**9. Community-owned multi-purpose spaces:** Where appropriate, hand control and ownership of suitable premises to local communities to create multi-purpose spaces where they can connect, self-organise and participate in creating community health. Offer to hold clinics, meetings and a range of outreach support in those venues offering informal routes into more formal services.

**10. A Health Creation Covenant:** Develop a Health Creation Covenant with communities at place-level. Record ways in which you will develop a positive dynamic in the relationship between Systems (senior leaders and frontline staff) and communities and people with lived experience of poverty, trauma and discrimination.

**11. Measuring community connectedness:** Adopt a simple measure of the connectedness of your communities within your regular performance monitoring framework. The social capital index such as the Collective Efficiency Scale (Stamford University, online) or Office for National Statistics indicators (2021) are two possibilities.

**12. Shift the balance of NHS investment and focus** from over-emphasis on reactive care to greater focus on prevention, early support, and improved care in the community through building strategic connecting capability in primary care to work more effectively with communities, supporting community strengthening, and with other local partners outside the NHS to bring out health creating systems.

**13. Support all organisations, sectors and partnerships to take a more health creating approach:** provider trusts (acute, mental health, community, ambulance), local authorities (public health, social care, strategic housing, health visiting), primary care including pharmacy, voluntary, community, faith and social enterprise sector (VCFSE), cancer alliances, housing providers, schools and colleges, police, fire service.



Visit our [website](#) for more information on the work of The Health Creation Alliance or to become a member.