





Lead delivery partner



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Welcome



"Our strongest asset is our accumulated wisdom. Today we want to harness that wisdom, build a coalition of action and drive a shared movement of change.

"This is about a radical shift in how we approach health and care. It is not just about a new model of care; it is about a fundamental overhaul in ways of working and thinking. One that requires deep collaborative effort that not only engages people and communities in decision-making but transforms how we conceive of care - moving from a traditional medical model to a biopsychosocial approach that supports the whole person; one that moves from a deficits approach to recognising the strengths individuals and their networks bring to creating and maintaining good health; one that releases the latent creativity and innovation of practitioners and enables them to focus on the outcomes that matter through collaborative delivery. At its heart moving from institutional power to community power — asking what matters to you, doing with, not doing to.

"We know there is no one size fits all. This is about creating the trusted relationships and the right capabilities, leadership, culture and enabling infrastructure in local Places alongside hardwiring the changes. I have had the privilege of speaking to multiple Places progressing Neighbourhood Health across the country that are seeing tangible results, including improving people's health and well-being, improving their confidence in co-managing their health conditions and reducing emergency hospital admissions. This programme is designed to systematically share existing knowledge from Places progressing Neighbourhood Health across the country and accelerate our collective progress."

Dr Minal Bakhai, General Practitioner, Director of Primary and Community Transformation and Improvement, Senior Responsible Officer for the National Neighbourhood Health Implementation Programme

1. Strategic Overview

The National Neighbourhood Health Implementation Programme is about rethinking how we work together and how we deliver care to support the health and wellbeing of our communities, recognising that health is wider than healthcare.

It is a large-scale change programme that builds on existing knowledge from Places already progressing Neighbourhood Health and seeing results - both in improving care for the initial cohort we will begin with, and in developing the structures, mechanisms, and relationships that underpin Neighbourhood Health, spreading this learning systematically to other Places across the country, while supporting each Places to shape Neighbourhood Health in ways that work for their communities.

In Wave One, we aim to:

- support Places to begin to deliver care differently for people with long term conditions and rising risk of escalating need
- generate the necessary changes in culture and integrated working across neighbourhood and Place teams
- provide rapid feedback loops to national policy to surface barriers to change
- create mechanisms to accelerate spread across neighbourhoods.
- share learning from across the country and create the social movement for change
- create an opportunity to shape key enablers rooted in the experience of those delivering the changes e.g. funding flows, digital technology

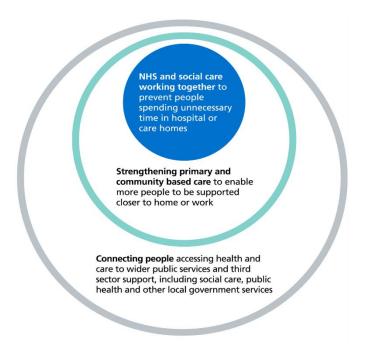
This is not a one-size-fits-all model. It is about creating the enabling conditions for collective learning and collaboration, building on the strengths and wisdom that already exists within and between Places and neighbourhoods. By working together and investing in local capability, we can design and deliver services that are personalised, sustainable, and rooted in the realities of people's lives.

National Context

Neighbourhood Health is a central priority in the <u>NHS 10 Health Year Plan</u> and an important part of the Government's Health Mission. It supports the Government's three shifts: from hospital to community, from sickness to prevention, and from analogue to digital. Moving towards more proactive, preventative, integrated care that is locally driven.

This work sits alongside Integrated Care System strategy, as strategic commissioners, which aims to overcome fragmentation, improve access and experience, improve population health and make the best use of resources.

Diagram showing the aims for all neighbourhoods over the next 5 to 10 years¹



Wave One Places will begin by focusing on supporting adults with long-term conditions and rising risk of escalating need.

It has been inspiring to see the ambition and progress already being made in your areas, as reflected in your applications for driving Neighbourhood Health. We will tailor the programme to recognise where each Place is starting from. To ensure this we will:

- Work together on testing new ways of working and strengthening foundations using the drivers for change (below) as a starting point to identify areas for focus
 and build on what you have.
- Share learning, ideas and techniques for implementation from other Places and subject matter experts (what works, what doesn't and 'how to') to inspire, adapt and problem-solve locally.
- Facilitate implementation of high-impact, high-value interventions that improve outcomes for people.
- Develop the mechanisms to accelerate the spread of Neighbourhood Health into other areas.
- Shape the systems and enablers that help Neighbourhood Health to thrive and provide feedback nationally.

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¹ https://www.england.nhs.uk/long-read/neighbourhood-h,lth-guidelines-2025-26/

- Spread learning from sites to others as part of a social movement of change.
- Track a few consistent key outcomes rigorously to understand impact and learn from others.

This journey is about learning together. By taking a test-and-learn approach in partnership with communities, and by sharing what works, we can shape a way of working that is nationally supported and locally owned.

A Social Movement for Neighbourhood Health

Neighbourhood Health is more than a model - it is a shared movement for change. It brings together people and organisations from across health, social care, and the voluntary sector with a common purpose: helping more people to live well, not just treating illness when it arises.

This movement is about working and thinking differently. It creates the space for experimentation, collaboration, trust, and storytelling, working with people and communities to shape solutions that meet the needs of those using them. By connecting leaders, professionals, communities, and local organisations, it turns shared learning into collective action - building a culture where knowledge, ideas, and insights are exchanged openly and used to drive improvement everywhere.

At its heart, this is about people. It's about providing high-quality, more holistic support that considers the whole person - not only their medical needs, but also the social and emotional factors that affect their health - doing with, not doing to. Through trusted roles and partners, people can access a wider network of support beyond healthcare, addressing the root causes of health, not just illness. It is powered by relationships, sustained by shared values, and driven by the belief that together we can build stronger, healthier communities.

A website has been created to support the Neighbourhood Health social movement, which you can find here: https://neighbourhood-health.co.uk/

Our Collective Approach to Leadership

Dr Minal Bakhai is leading the National Neighbourhood Health Implementation Programme (NNHIP) (GP, Director of Primary and Community Transformation, SRO for the NNHIP), with Dr Claire Fuller (Co-National Medical Director, NHS England) and Tom Riordan (Second Permanent Secretary, Department of Health and Social Care (DHSC)) as joint Senior Responsible Officers for Neighbourhood Health.

The National Neighbourhood Health Implementation Programme (NNHIP) is guided by a joint taskforce between the Department of Health and Social Care and NHS England, chaired by Sir John Oldham.

This work is also supported by national delivery partners who bring a wealth of expertise and energy. NHS Horizons is the lead provider for this programme and brings fresh thinking and collaboration skills to help create large-scale spread and change. NHS Horizons, Private Public Ltd (PPL) and the National Association of Primary Care (NAPC), will deliver the coaching support to the 43 sites. NHS Midlands and Lancashire Commissioning Support Unit contributes specialist knowledge in project management, system design and improvement. The Strategy Unit will be leading the insights and measurement, and NHS Confederation will support the social movement and gather insights from the member organisations.

2. Neighbourhood Health Infrastructure and High Impact Interventions

The following goals and drivers of change are based on the experience and evidence of those progressing Neighbourhood Health.

These will be tailored to the sites depending upon your existing mechanisms and framework, i.e. to build on what you have.

Over 35 structured interviews have been undertaken with mature Places progressing neighbourhood working, alongside a review of the evidence. This insight has been distilled into the following goals and drivers of change, which were then tested and further refined with over 300 partners from across the whole health and care system – both NHS and non-NHS, This included NHS organisations, Local Authority, voluntary and community sector organisations, patient and professional representative bodies, academics, Places delivering the change, frontline practitioners, people with lived experience, and community leaders. This is to ensure the programme is evidence-led and rooted in the experience and reality of those delivering the change.

These will form a starting point for implementation for Places to refine further, adapt and generate new ideas. These should be seen as the beginning, not the end.

The Why: Goals

Key goals for Neighbourhood Health for people with long term conditions and rising risk of escalating need are:

 People experience improved health and wellbeing through support and connection where they live.

- People can confidently co-manage their long-term conditions.
- Teams are empowered to work together to tailor health and care with people and communities.
- Value is maximised from every pound spent creating greater system financial sustainability by shifting funding and resources from hospital to community, and towards proactive, preventative support.

All these goals contribute to reducing the gap in healthy life expectancy between the poorest and richest. Equity is a golden thread that runs through all of these.

Measures to track goals for the target cohort:

Over the next two years, we want to be bold and collectively strive to achieve significant progress against these goals, enabling a long overdue shift in care from hospital to community, from sickness to prevention, from analogue to digital. We will do this by creating the freedom to test, learn and support each other with developing new ways of working and generating novel solutions. The National Neighbourhood Health Implementation Programme is working as part of the wider neighbourhood programme, and will support the following ambitions:

- increase in patient-reported outcomes (PROMs) and patient-reported measures (PREMs)
- increase in people's activation (confidence, skills, knowledge) to manage their long-term conditions
- improvement in staff experience
- reduction in outpatient activity
- reduction in unplanned hospital admissions

National metrics to track progress for the target cohort will be designed with your input. Depending on the specific characteristics of your target cohort, sites may choose to focus initially on making progress on particular outcomes where there are opportunities for rapid improvement.

The How: Ways of Working at Place and Neighbourhood

The primary drivers for Neighbourhood Health are:

- 1. Build shared multi-organisational leadership, common purpose and common way of working, accountable to communities for what matters to them.
- 2. Understand and set clear actionable goals focused on pressing local challenges.

- 3. Co-design care and delivery with communities and practitioners, mobilising and coordinating and strengthening all the assets in the system and community.
- 4. Devolve and pool budgets at Place with authority and streamlined governance to facilitate achieving shared outcomes and value-based care.
- 5. Implement new enabling mechanisms for people, estates, digital, data and financial flows.
- 6. Empower teams to work together seamlessly, moving across organisational boundaries, with freedom to test, learn and adapt.
- 7. Understand the experience of working in other organisations/settings and develop relationships through joint leadership, training and development at all levels of the local partnership.
- 8. Uphold a relentless focus on outcomes, learning and improving as you implement in partnership with people and communities.
- 9. Develop the structures and mechanisms to scale neighbourhood working and shift resources into the community. Identify, adapt and spread effective approaches.

Reflect on where you are with these and the key areas of focus. Your National Coach will help you to tailor your own six and 12-month goals.

The What: High impact actions (primary drivers) for adults with long term conditions and rising risk of escalating need.

- 1. Use shared data and local insight to identify adults with one or more long-term conditions and rising risk of escalating need. Over the next 12 months maintain a relentless focus on improving outcomes and reducing risk in partnership with people and communities most affected by health inequalities.
- 2. Coach practitioners to systematise co-management of long-term conditions with individuals, families and carers and tailor care planning around what matters to them. Move away from single-disease pathways to approaches that work for people with multiple conditions (leveraging the benefits of technology).
- Co-ordinate care around individuals and neighbourhoods with a named multiagency, multidisciplinary 'team of teams' who can collaboratively provide 24/7 proactive and reactive whole person support and rationalise overlapping functions.
- 4. Build deep community relationships through trusted roles and partners and actively support people to access community-led solutions and strengthen their connection with their community and Place.

Reflect on where you are with these and the key areas of focus. Your National Coach will help you to tailor your own six and 12 month goals

Wave One – what to expect

In the first wave (2025/6), every Place will be partnered with a National Coach, supported by regional workshops, peer learning networks, subject matter experts and shared resources and tools. This creates both the structure and momentum for Places to learn, grow, and lead - becoming exemplars of Neighbourhood Health and sparking a wider movement for change.

Key Stakeholders in a Place / Neighbourhood

Each Place will bring together a team that reflects the whole system, including:

- people with lived experience/community leaders
- Neighbourhood Team Leads
- primary care, including PCN clinical directors and wider services such as pharmacy, optometry, dental, and audiology
- · Local Authorities, public health and social care
- community services
- the care sector
- voluntary, community and social enterprise partners
- acute and mental health providers



Teams will also need to draw on additional expertise such as:

- Community insight to make sure lived experience shapes decision making, design and delivery.
- Data (including population health management), digital, workforce/training, finance, evaluation, communication and commissioning leads, to ensure enablers are aligned locally and the right skills and resources are in place.
- Frontline practitioners feedback and local learning.
- Local leaders to spread learning across multiple frontline teams and partners simultaneously.

The Neighbourhood Health Compact

One of the first activities for Local Improvement Coaches is to support the development of a Compact Agreement. A template of the Compact can be accessed on SharePoint.

The Compact is about how we work together. It recognises that every Place is different and that our strongest asset is the wisdom and experience already within our workforce and communities.

It sets out shared commitments, principles, and ways of working that harness that wisdom and enable collaboration between the Place and the programme. It provides the foundation for maximising National Coach support and creates the right conditions for success through clear roles, responsibilities, and mutual accountability.

The Compact also confirms the Place's commitment to developing the leadership, capabilities, and infrastructure needed locally, and embeds a culture of continuous learning through peer exchange, communities of practice, and reflective performance review.

3. Roles and Responsibilities

Each Place team will bring together a Local Improvement Coach, senior leaders, clinical and managerial expertise, programme management, and dedicated support functions, working alongside their National Coach. Together, their role is to create the conditions for Neighbourhood Health to flourish - rooted in relationships, shared purpose, and collective action.

We know every Place will be starting from a different point. Some will have well-established neighbourhood teams and ways of working; for others this will be the start of a journey. The programme is not a prescriptive, one-size-fits-all approach. It provides a supportive framework and learning environment tailored to where each Place is starting and will facilitate neighbourhood working through acting and learning together to improve outcomes for people with long-term conditions and rising risk. It is action and delivery focused.

The Local Improvement Coach

At the heart of each Place team is a Local Improvement Coach - someone with the time, skills, and credibility to guide the work locally and connect with the national programme. The Local Improvement Coach will work closely with the National Coach. They will be supported to:

- Communicate the reason and intent for change.
- Build local improvement capability and facilitate neighbourhood relationships and new shared ways of working.
- Identify people in positions to make things happen in the target neighbourhoods.
- Facilitate changes in the model of care for the target cohort.
- Keep energy and momentum alive between workshops.
- Model collaborative behaviours, listen well, be evidence and outcomes driven, and keep focus on tackling inequalities.
- Share learning from national coaching in large-scale change back into their Place.
- Spread learning simultaneously to their neighbourhoods and frontline teams working with other local leaders.
- Surface barriers to progress with rapid feedback loops to national teams.
- Share experience from practical delivery and learning to help shape national enablers, e.g. digital, funding flows.
- Track progress and outcomes on a monthly basis.

The role works best when supported by a project manager / team, ensuring the work has the resources it needs to thrive.

Experience shows that Local Improvement Coaches bring the most impact when they combine:

- strong interpersonal skills and trusted relationships
- first-hand experience of working in health or social care
- a deep commitment to neighbourhood working and the confidence to work across organisational boundaries
- skills in facilitation, quality improvement, and using data for learning
- senior leadership experience

In the Appendix, you can find access to the role summary of the Local Improvement Coach.

Data, Analytics and Evaluation

Places will need to identify a local analyst or analytical leader who can work alongside the Local Improvement Coach and the national team. The analyst will need:

- knowledge of the local data architecture, tools and data sharing agreements
- experience or understanding of population health management approaches
- understanding of primary and community data alongside acute data
- have the necessary networks to draw on analytical capacity across the system

Familiarity with some of the technical aspects of robust impact evaluation would be desirable (although training will be provided via the programme's Intelligence Centre).

The programme will bring together analysts across all Wave One sites alongside subject matter experts to develop an analytical and measurement plan in the first four weeks.

The National Coach will work with the Local Improvement Coach, the Place team and the local analyst to complete a baseline for analytics and evaluation. The baseline will:

- assist with further defining the cohort selection
- set local outcomes and measures
- include a logic model / theory of change / model of care
- clarify datasets and codes for recording interventions
- reference Place current practice of risk stratification and population health management
- summarise the ambition of the programme

Guidance for how to measure progress against national programme goals is being developed and will include input from sites.

How We Work Together

The programme is about creating the right conditions for collaboration to grow. Each Place team will help nurture:

- shared accountability for outcomes
- inclusive, cross-sector teams
- a culture of trust, openness, and psychological safety
- use of data and evidence as a guide for improvement
- active involvement of people and communities in shaping solutions
- growth of local capability through coaching, peer learning, and workforce development
- enabling leadership and management testing, adapting, and evolving. Together
- a clear and proportionate approach to governance and risk management

National Coaches will work alongside Places to model and strengthen these behaviours, providing support, perspective, and constructive challenge.

A National Learning Community

By being part of this programme, your Place is also part of a wider national community of neighbourhood leaders.

Through workshops, online networks, and peer exchanges, Places will connect, share, and learn from each other. A dedicated <u>LinkedIn group</u>, <u>website</u>, and monthly network meeting will provide space to share insights, tools, and emerging practices.

Through these forums, each Place contributes to something bigger than itself - a national movement where wisdom is shared, progress is accelerated, and communities benefit from collective action.

As Wave One develops, Places will provide rapid feedback loops to national teams to help shape national policy and programmes and act as a faculty for their Integrated Care System - mentoring others and spreading what they've learned. In this way, we build not only stronger neighbourhoods locally, but also a growing movement for Neighbourhood Health nationally.

Local Improvement Coaches are at the heart of this movement: connecting people, supporting teams to test and adapt, and helping Neighbourhood Health grow into a sustainable way of working. National Coaches will be connected closely to the national programme team.

Neighbourhood Health School for Change Agents

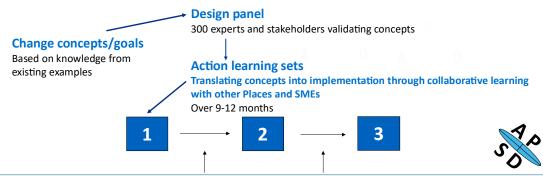
The School for Change Agents by NHS Horizons is a free, online, self-paced course designed for everyone at any level to develop their skills to create meaningful change. It is packed full of content and cutting-edge change methods to gain the skills, knowledge, and confidence to make change happen. This is being developed into the Neighbourhood Health School for Change Agents and will be available soon.

To join the current School and this global community of change agents, visit the Horizons website.

Wave One Collaborative Improvement Methodology

The infographic below describes the methodology the National Neighbourhood Health Improvement Programme will be following:

NNHIP Methodology: Systematic Knowledge Transfer



Action periods: coached implementation for local context using multiple test and learn cycles.

Monthly data progress reports come to Taskforce but also visible to all sites (encouraging competition)

Development of new ideas (concepts), knowledge and learning to share across sites

Support

National and Local coaches; Senior Leadership sponsors (LA and ICB); Output from taskforce enabling groups; Real time country wide knowledge transfer; Capability building; Peer discussion groups online i.e. a social movement for change Access to subject matter experts; Test beds to shape enablers e.g. digital, funding flows, indicators

A collaborative is a time-limited method for spreading and adapting existing knowledge to multiple sites to achieve a common aim. It consists of a series of learning workshops interspersed with action periods during which sites are supported to enact changes and track progress using a common set of metrics which will be designed with input from Wave One Places. The basis for the workshops is practical ideas that have resulted in improved systems, together with teaching/learning on the techniques of implementation.

The programme is action-orientated; therefore, the collaborative will not be a gettogether to simply discuss issues or a set of conferences. It will drive rigour in delivery.

Each Place team will be supported by a dedicated National Coach, tailored resources, access to regional and national learning networks, and tools to help bring Neighbourhood Health to life.

This wave is about **action and local delivery** - by testing and learning together, identifying barriers, and highlighting what enables real change. To get the most from this, we will work together around some shared commitments:

Regional workshops and subject matter expertise: Over the first year, three
full-day regional workshops will bring teams together, creating space to share
ideas and learning; accelerate development of implementation plans; share
techniques for implementation from examples across the country (what works,
what doesn't and how to), alongside support from subject matter experts, to feed
into practical plans for change locally.

Place coaches will be asked to nominate 18 key team members (including themselves) who will attend. Our advice is to nominate people who are in positions to make things happen in your target neighbourhoods, and between you covering all your partner organisations (NHS and non-NHS). We would also strongly encourage citizen participation. We ask that where possible, the same members attend all three regional learning workshops. Their continuity of presence is vital in setting the foundation for involvement in the programme and ensuring the right people are engaged from the outset.

- Local time together: Between these workshops, your Local Improvement Coach and National Coach will help facilitate the changes and keep the energy and momentum alive - supporting teams through coaching, facilitating online exchanges, connections and expert input, improvement methods and application of new insights in real time. Progress will be tracked monthly.
- **Consistent participation**: We encourage the same people to stay involved throughout the year, so that knowledge and relationships build over time.
- Sharing learning: Each Place will contribute light-touch reflections and track a
 key set of measures each month. This isn't about performance management and
 about helping everyone see what's working and where and collectively learn
 together.

4. Timelines and Outcomes

To get you started, these are your top priorities for the first few weeks of the programme. Access to the full Place Journey Map can be accessed on SharePoint.

When	Your Place Journey	Collaboration and learning
September (weeks one to four)	 Confirm as one of 43 Places. Onboarding with the National Coach and scoping. Develop and sign Neighbourhood 	
Discovery and setup	Compact (clarify ways of working, governance and expectations). Establish Place team. Undertake a baseline needs assessment. Identify priority stakeholders and establish an engagement framework. Establish an internal and external communication plan. Conduct initial 360 collaboration. assessment with the National Coach. Schedule fortnightly local workshops working with the National Coach to test collaborative working and governance. Input into baseline scoping with Intelligence Centre for analytics and measurement plan (support baseline development and outcome tracking). Hold Place kick off workshop.	
October (weeks four to eight)	 Identify target cohort. Co-produce priority improvement areas for action and six month and 12-month 	Attend Regional Workshop One: design sprint to accelerate planning.
Prioritisation and design	 goals. Align all partners around shared outcomes. Design delivery model identifying and mobilising all assets, partners and resources. Develop delivery plan – milestones, leads and evaluation framework. Host fortnightly workshops to test interventions: start testing interventions (e.g. multiagency MDT, supported comanagement etc). Identify micro-sites for early prototypes. Contribute to scoping for national learning: capture early insights. Input to the Intelligence Centre design. Submit first monthly progress report. 	Share learning nationally via stories & reflections.

Monthly Updates

Your insights are at the heart of shaping the Neighbourhood Health journey. Every reflection you share not only celebrates the progress you and your teams are making and helps shine a light on what works best so others can benefit. By capturing your experiences, we can learn together, adapt quickly, and keep improving the support available to you and to communities

Each month, alongside your National Coach, a member of the Place team will be asked to complete a short online reflection via the <u>National Neighbourhood Health Implementation Programme monthly coach submission e-form</u>. Training on how to use the form will be included in the onboarding process, and step-by-step guidance will also be available on SharePoint.

The e-Form is designed to capture what matters most: key learning, feedback on coaching support, and any barriers or enablers that are shaping progress locally. It is a space to share insight, celebrate achievements, and highlight where more support may be helpful.

Submissions are requested by the first Friday of each month, reflecting on activity and learning from the previous month. Submitting feedback isn't just about reporting progress – it's about storytelling, recognising achievements, and making sure your voice directly shapes how the programme grows. Each contribution helps build a collective picture of success, highlights innovation, and creates a supportive learning community where everyone feels valued.

The reporting periods can be found below:



The Intelligence Centre

Good decisions are built on good insight. The Intelligence Centre exists to support the National Neighbourhood Health Implementation Programme by providing a trusted source of evidence and learning. It is provided by the Strategy Unit: a specialist NHS team dedicated to improving the use of evidence in decision making.

Evidence is not just about numbers - it is about understanding what works, learning from experience, and applying that knowledge to shape better local solutions. It helps teams design effective neighbourhood approaches, test new ideas, and evaluate whether changes are making the difference we hope for.

The Intelligence Centre will be a practical resource for Local Improvement Coaches, neighbourhood teams, and Place partners. It will provide easy access to analysis, trackers, evidence reviews, training, advice, and tools that can support day-to-day planning and longer-term improvement. The Strategy Unit will work closely with Local Improvement Coaches and Place teams to understand what different stakeholders need, and we'll create resources in response - making sure the library remains practical, relevant, and shaped by the people who are using it.

Most importantly, the Intelligence Centre will share learning openly across and beyond the programme - drawing together lessons about what works in Neighbourhood Health and spreading insights that can strengthen the wider social movement for change.

A library of resources is available on <u>SharePoint</u>. This will continue to grow and develop throughout the programme.

For further information about the Intelligence Centre, please get in touch with the Strategy Unit: strategy.unit@nhs.net, and include 'Intelligence Centre' in the subject.

Learning from Success

Each month, Local Improvement Coaches will share short reflections to capture progress against agreed plans. These updates are less about monitoring and more about helping us learn together, celebrate achievements, and understand what makes the biggest difference.

Additional tools to support Places in tracking and learning from their successes will be made available through SharePoint as the programme develops, and will be shared on SharePoint.

Improvement Tools

A set of improvement and population management tools are available on <u>SharePoint</u>. These will grow over time, shaped by what coaches and Place teams say they need most. The aim is to make practical resources easily accessible, so that you can focus on supporting neighbourhoods to thrive.

Feedback Loops

Feedback is a vital part of how we learn and grow together. Each month, the coach reflection e-Form provides space to share insights and suggestions. In addition, we will hold monthly forums with coaches; and every event, such as training sessions or regional workshops, will include opportunities to give feedback.

This feedback isn't about ticking boxes; it's about removing barriers, creating a genuine loop of learning, where ideas and experiences flow back into the programme and help improve it for everyone.

Upcoming Events

Details of upcoming regional face to face learning workshops and events for Local Improvement Coaches will be shared on SharePoint once available.

5.Sources of Support

Queries

If you have any queries or questions about the programme, please send them to england.contactneighbourhoodhealth@nhs.net

Website

A website has been created to support the Neighbourhood Health social movement, which you can find here: https://neighbourhood-health.co.uk/

Linked In Group

A dedicated <u>LinkedIn group</u> been created to support the Neighbourhood Health Coaches and Places in sharing tools and insights.

FAQs

A frequently asked questions document has been developed for Local Improvement Coaches and is available on SharePoint.

Regional Support

Support from the NHS England Regional Leads

NHSE Regional Leads offer valuable insight into the areas and Places. Details of the Programme Regional Leads are provided below:

Region	Lead Names	Email Address
North East & Yorkshire	Tracy Wright	tracy.wright28@nhs.net
North West	Linda Charles-Ozuzu	lindacharles-ozuzu@nhs.net
Midlands	Jacquline Barnes	jacqueline.barnes10@nhs.net
East of England	Sara Howlett	sarahowlett@nhs.net
London	Will Huxter	will.huxter@nhs.net
South West	Ben Roe	benjamin.roe@nhs.net
South East	Alicia Mason	alicia.mason6@nhs.net
	Geoff Berg	g.berg@nhs.net

Support from Care and Health Improvement Advisors

Care and Health Improvement Advisors (CHIAs) are a Local Government Association role and work with local authorities to understand their needs, provide advice and give support. National Coaches should connect with the Care and Health Improvement Advisor for their region and work with them to progress activities.

Details of the Care and Health Improvement Advisors are provided below:

Region	CHIA Name	Email Address
North East & Yorkshire	Richard Parry	richard.parry@local.gov.uk
	Neil Revely	neil.revely@local.gov.uk
North West	Kathy Clark	kathy.clark@local.gov.uk
Midlands (East)	Katie Norton	katie.norton@local.gov.uk
Midlands (West)	Margaret Willcox	margaret.willcox@local.gov.uk
East of England	Claire Bruin	claire.bruin@local.gov.uk
London	Steve Tingle	steve.tingle@local.gov.uk
South West	Steve Peddie	stephen.peddie@local.gov.uk
	Patricia Jones-	patricia.jones-
South East	Greenhalgh	greenhalgh@local.gov.uk

Local Coach Support and Resolution

Local Improvement Coaches have access to well-defined support pathways. These routes are designed to offer additional assistance when local solutions are not feasible, ensuring that any challenges encountered can be addressed effectively and do not hinder progress. Details of the process for support and resolution can be found below:

Step	Escalation Route	Contact
1	Local resolution	Issues raised with their National Coach (for local issues) or Local Improvement Coach (if not the person raising the issue).
2	Programme Escalation	 If unresolved, escalate to the Horizons Regional Lead (for programme issues). Molly Glynn Molly.Glynn@nhs.net for the North West, North East & Yorkshire and the Midlands Vicky Taylor Vicky.Taylor41@nhs.net for the Southeast, London, East of England and the Southwest
3	ICB / Local Authority engagement	If unresolved, escalate via the National Coach to the senior Board-level sponsors from both the Integrated Care Board and the Local Authority.
4	Regional escalation	If still unresolved, escalate jointly with the National Coach and the National Neighbourhood Health Implementation Programme Regional Lead to the Regional NHS England Lead and the Regional Local Authority Lead. *
5	National escalation	If the issue cannot be resolved regionally, refer to the National Neighbourhood Health Implementation Programme Senior Leadership Team. *

^{*} Please note that all communications **beyond programme resolution** should include:

- Nicola Gitsham, Head of Strategy and Policy, Neighbourhood Health, NHS England: nicola.gitsham@nhs.net
- Sam Price-Jones Head of Programme Management Office, Primary Care Transformation: s.price-jones@nhs.net

Key Contacts

The table below denotes the National Coaches and the Integrated Care System footprint they will be working in. You will be able to see who the other Coaches are within your region.

Region	Place	Coach Name
North East & Yorkshire	North East & North Cumbria	David Dixon
North East & Yorkshire	West Yorkshire	Giles Mahoney
North East & Yorkshire	South Yorkshire, West Yorkshire	Julia Sutton-McGough
North East & Yorkshire	Humber & North Yorkshire, North East & North Cumbria	Laura Sherburn
North East & Yorkshire	South Yorkshire	Siobhan Taylor
North West	Chesire & Merseyside	Andy Irvine
North West	Greater Manchester	David Segal
North West	Cheshire & Merseyside	Jeremy Martin
North West	Greater Manchester	Kathy Smith
North West	Lancashire & South Cumbria	Neil Middlemas
Midlands	Birmingham & Solihull	Alison Davies
Midlands	Black Country	Andy Brooks
Midlands	Leicester, Leicestershire & Rutland	Helen Stubbs
Midlands	Nottingham & Nottinghamshire	Ian Razzell
Midlands	Shropshire, Telford & Wrekin	Martin Evans
Midlands	Herefordshire & Worcestershire	Rebecca Lemin
Midlands	Birmingham & Solihull	Sabhia Khanam
Midlands	Coventry & Warwickshire	Sarah Walker
East of	Suffolk & North East Essex	David Benson
England		Emma Goddard
		Jenny Sanderson
East of England	Hertfordshire & West Essex	Natasha Larkin
Litgianu		Helen Buckingham
East of England	Cambridge & Peterborough	Nicola Ward

London	North West London	Holly Gatfield
		Vish Valivety
London	South East London, South West London	Iyoni Ransinghe
London	North East London	Scott Maslin
South West	Cornwall, Isles of Scilly	Andy Mullins
South West	Bristol, North Somerset, South	Emily Perryman
	Gloucestershire	Imogen Setter
South West	Dorset	Jo Christie
South East	Hampshire & Isle of Wight	Amanda Quincy
South East	Sussex	Gerard Sammon
South East	Frimley	Hamish Clifton
South East	Kent & Medway	Jack Short
South East	Surrey Heartlands	Kate Simpson
South East	Buckinghamshire, Oxford & Berkshire West	Priya Kumar

Closing Quote



"Successful implementation of neighbourhood health depends on more than policy or structure – you can't line manage organisations outside the NHS into change. You have to engage and facilitate at the frontline. Meaningful involvement of partners at a neighbourhood level is essential to achieving the hard deliverables. This isn't about imposing change from above, but about supporting local teams to tackle complex, wicked problems - from reducing A&E attendance to increasing citizen agency - through relationships, governance, and data structures that work in real time. The more examples we create, the easier it is to diffuse change throughout all Places."

Sir John Oldham, Chair National Neighbourhood Health Implementation Programme Taskforce

6. Appendix

Local Improvement Coach Role Summary

Position: Local Coach

Summary: Full-time Local Coach to lead a 12-month large-scale change on the National Neighbourhood Health Improvement Programme. The person in this role will be selected by "the Places" and trained in quality improvement methodologies to facilitate and deploy change.

Required Skills & Experience:

- Operational experience in health or social care.
- Strong interpersonal skills and the ability to collaborate effectively.
- Experience in using data to inform learning and decisions.
- Confidence to facilitate conversations across organisational boundaries.

Key Objectives:

- Collaborate with the National Coach and local "Place" teams to design and implement their approach to neighbourhood health, aligning with key programme components.
- Support the development and implementation of the Neighbourhood Health Compact between each "Place" and the national team.
- Build local improvement capability and foster neighbourhood teams throughout Wave 1 of the programme.
- Share learning from national coaching sessions on large-scale change with their "Place" team.
- Organise local workshops to test collaborative working in the first few weeks of the programme.
- Establish workshops to test interventions.

Useful Links

Our knowledge space

National Neighbourhood Health Implementation Programme Knowledge Space (SharePoint)

Neighbourhood Health website

Key national plans and guidelines

NHS 10 Health Year Plan

Neighbourhood Health Guidelines 2025-26

Approaches to change and operating models

NHS England — London » Introduction to the Targeted Operating Model

Leading Large Scale Change: A practical guide

NHS Horizons – Rapid Insight: the missing piece in how we lead large-scale change

NHS Horizons – Approaches to spread and scale

Creating Integrated Neighbourhood Teams - National Association of Primary Care

<u>Healthcare Central London – The Octopus</u>

PPL - London's Neighbourhood Health Service Simulation

South Central Foundation in Alaska System of Care

Royal College of Physicians: Time to Focus on the Blue Dots

Case studies

Neighbourhood Health – case studies of good practice

Achieving large system change in health care - PubMed