

Neighbourhood Working in Bury A Context for the Implementation of Live Well

Paper for Health Scrutiny Meeting

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1. Locality Plan Commitments

Locality Plan Priorities



We work together across the Bury Integrated Care Partnership to :-

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| 1 | Scale our work on Population Health Management - Improve population health and reduce health inequality of those in the most disadvantaged areas |
| 2 | Drive prevention, reducing prevalence and proactive care – supporting Demand Reduction through primary intervention, secondary preventions and tertiary prevention |
| 3 | Transforming Community Care in Neighbourhoods - fully realising the benefit of neighbourhood team working with a focus on the assets of residents and communities and providing proactive care |
| 4 | Optimise Care in institutional settings and prioritising the key characteristics of reform. |

Neighbourhood Working

- The neighbourhood level is the **building block** for organisations to work together and the **foundational unit for delivery** recognised across public service organisations.
- There is a **look and feel of one public service workforce functioning together**, unrestricted by role titles or organisational boundaries – working for the place and people.
- **Aligning services** within and around neighbourhood areas allows us to **start with the person and begin in the home**.
- The benefits to our populations are both **better integrated delivery** and **targeted approaches to enable early intervention to prevent future problems**.
- This approach will **help to reduce pressure on acute and specialist services**, allowing them to focus their resources on those who need it most.
- It relies on a level of **integrated leadership, accountability, performance and governance structures**.

Our Neighbourhood Model Principles

- Reflective of the 5 main towns in the borough – Whitefield, Prestwich, Radcliffe, Bury and Ramsbottom – each of which has its town centre masterplan thus connecting reform to growth
- Creating opportunities for front line staff to know each other and problem solve and not just refer to each
- Integrated public service teams – covering the range of preventative support across health and care, community safety, employment support, housing and the VCFSE
- Shared appreciation of the strengths and assets of the community
- Co-location of teams and partner agencies. Shared resources, skills and strengths
- Daily huddles and MDTs – bringing partners together to get to the root cause of issues and support those in the community most at risk
- Combining models of risk stratification to identify cohorts of avoidable risk, harm and cost, with the knowledge and experience of people in the place
- A more strategic approach to investment– for example scaled up investment in housing with care. Investing in prevention and community resilience – including through VCFSE partners
- Improving economic activity and participation – for example, DWP trailblazer opportunity
- Better organised public services but with a shared approach to engaging communities and residents differently.

2. Neighbourhood Working in NHS plan

- The NHS plan emphasizes integrated care, prevention, and community-based support to improve health outcomes and reduce pressure on hospitals.
- Neighbourhood working is central to this vision, bringing together health, social care, and voluntary services at a local level. It fosters collaboration among professionals and residents to address specific community needs, tackle inequalities, and promote wellbeing.
- By aligning services around neighbourhoods, the NHS aims to deliver more personalized, proactive care, closer to home. This approach strengthens relationships, builds trust, and empowers communities to take an active role in shaping their health and care services.

3. programme Working in the
borough.

Integrated Neighbourhood Working in Bury

Joined up services across 5 identified neighbourhoods; working with communities to relentlessly focus on prevention and earlier early intervention; maximising local assets and spaces in each neighbourhood to enable people to thrive.

Bury's model of 'integrated support' with a neighbourhood focus by default:

North	East	West	Whitefield	Prestwich
Each neighbourhood has a Neighbourhood profile and analysis of need, identification of cohorts of risk to tailor and target integrated person-centred activity				
Co-located multidisciplinary teams in each neighbourhood, led by a Public Service Leadership Team, integrating 'integrated support' through a 'Team Around' approach. Includes housing engagement; health and care integrated leads; social prescribers; employment support; Live and Stay Well; police and fire neighbourhood leads; Family Help leads; public health; voluntary sector infrastructure representatives				
Joint delivery of strengthened Integrated Neighbourhood Team (INTs) (Adult Care and Health) model including social prescribing and increasing alignment of mental health early intervention and prevention.				
Rapidly developing model of family hubs described by neighbourhood and delivering the prevention and early intervention strategy for children and increasingly connected to schools				
Finalising the Live Well model and specifically within this the neighbourhood-based employment support model.				
Strengths based approach built on LETS Behaviours to further engagement, participation and reduce inequalities, e.g co-designing interventions with lived experience groups.				
Collective insight of community assets and networks, with which to work with communities and connect people at place as examples of Live Well spaces, coordinated by Bury Voluntary, Community and Faith Alliance				

Refreshing Neighbourhoods Working in Health and Care in Bury

We will build on the existing Neighbourhood infrastructure of Integrated Neighbourhood Teams and Public Service Leadership Teams to work with our partners to deliver implement the NHSE Neighbourhood health guidelines and GM Neighbourhood model. The emphasis will be on:

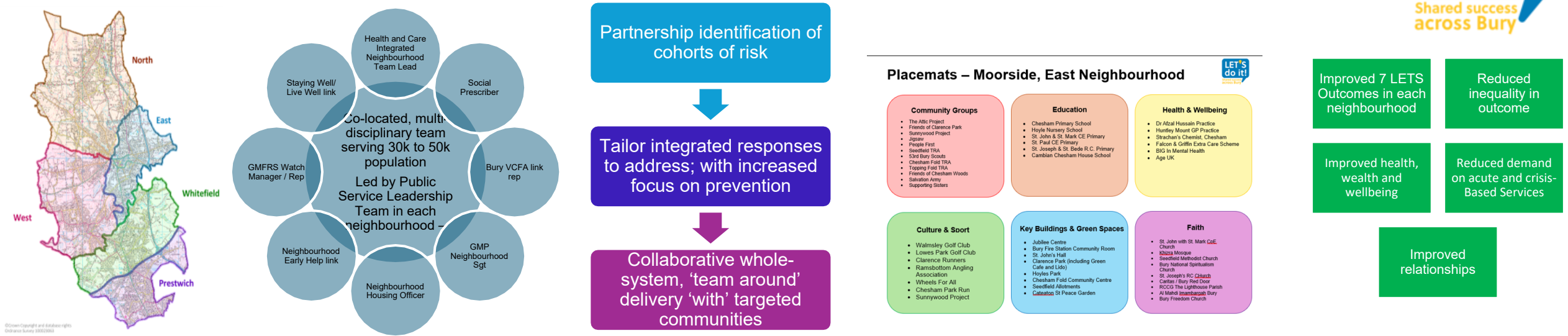
- Providing better care close to or in people's own homes, helping them to maintain their independence for as long as possible.
- Promoting self-care, supporting early intervention and reducing health deterioration or avoidable exacerbations of ill health.
- Identifying opportunities for greater use of digital infrastructure and solutions to improve care.
- Supporting further service integration and joined up working between services including the VCSE.

Priorities:

1. Review the existing model of Active Case Management and MDTs and implement recommendations including the development of improved approach to impact evaluation.
2. Development and delivery of the Neighbourhood plans aligned to the local GP contract and agreed population health priorities with an emphasis on proactive personalised care and secondary prevention for CVD, respiratory and frailty, maintaining active input from health and care partners into the Public Service Leadership Teams and development and delivery of Neighbourhood People & Communities Plans.
3. Strengthen communication and integrated planning and delivery between key neighbourhood partners including GP Practices, PCNs leadership, community health services, adult social care, public health, care homes , community pharmacy and the voluntary sector.

Neighbourhood working in Bury, LET's Do It!

5 neighbourhoods against which public services corral, led by partnership place based teams who identify specific cohorts of risks against which to integrate on as a multi-agency response and proactively plan to prevent future need; building on and up the collective strengths within the neighbourhood to deliver improved outcomes for residents, communities and systems (reducing inequality and the impact of this)



Faster than average economic growth

Whole-system; whole place approach to maximise opportunities & connectivity of local people to these

Local

- Concentration around five agreed neighbourhoods – connecting local residents; local practitioners; local assets
- Identification of localised cohorts of risk and vulnerability with local practitioners working differently on a multiagency basis
- Identification, targeting and tackling of inequalities (health, social, economic)
- Community led (communities intersecting of place, identity and experience)
- Maximising connectivity and maturity of working in GM system whilst delivering distinctly by respective neighbourhoods

Enterprising

- Innovative approaches to targeted prevention and earlier early intervention (avoiding high cost interventions with poor outcomes)
- Bringing population health and physical place shaping together (people and places) to create condition for 'good lives'
- Positive risk taking to be creative, including maximising use of new technologies
- Relentless focus to remove, reduce, delay acute and crisis demand
- Shift in power as close to those affected by decisions [nothing about you without you]
- Tailor approaches recognising spectrum of need/ support offer – not one size fits all in separate silos

Reducing deprivation and inequality

Co-ordinated; targeted activity to address root causes and drivers of inequality/ barriers to life chances

Together

- Partnership, integration; collaboration – but not necessarily in a single base – maximising opportunities for practitioners/ people to come together effectively
- Person centred with 'Team Around' approach – more cohesive; less siloed.
- Having a shared understanding of collective place (communities and their strengths)
- Broader and more consistent neighbourhood framework – single 'neighbourhood' lens
- Joined up dialogue with communities
- Alignment of resources
- Integrating 'integrated' support – health, housing, employment

Strengths

- Empowered communities supporting their resilience and creating conditions to thrive
- Strong VCFSE including infrastructure – local MOU building on VCFSE accord (ahead of national Civil Society covenant)
- Asset based, considering the whole person/ family and their networks
- Further develop relationships between professionals and communities; develop trust and place leadership
- Further develops insight and dialogues to improve inclusion
- Learning culture for further improvements
- Focus on what people can do, and their abilities, rather than benefit types; sanctions; waiting lists

4. Live Well in GM

See GM Live Well Hallmarks - [hallmarks-version-1.pdf](#)

Our shared vision:

To ensure everyone can access great everyday support in every neighbourhood

We're tackling health, social and economic inequalities by changing how we work with people and communities, and in public services.

We're growing community action, power and wealth, so that everyone:

- **Has access to a wide variety of activities, support and information**
- **Is heard and enabled to contribute**
- **Has the resources to make change happen**

By developing a locally led approach, supported by public services, we can ensure great everyday support is available to everyone, in every neighbourhood.

Live Well principles guiding implementation

"Live Well isn't another plan. It's a movement for change that honours the agency that is already in communities to find solutions that work for them."



Community-led and system-enabled

Our practice is both community-led and system-enabled. This means we are led by Greater Manchester's communities who determine and take action on what matters most to them. And we work to transform our systems via new, better ways of working that can actively grow community action, power, and wealth. This principle is at the heart of the Live Well Learning Framework, with more detail available in the Appendix.



Rooted in communities' everyday lives

We recognise that residents need both formal and informal routes to Live Well — building support around trusted people and places.



Reducing inequalities across Greater Manchester

We focus on people and places most affected by structural discrimination and inequality, recognising how these intersect and compound across different communities. We name racial injustice as a key driver of health and economic inequality, actively resource and measure racial equity, and ensure diverse communities shape and lead this work.



A radical shift in our public service model

We build on Greater Manchester's trailblazing history of public service reform to drive cultural and systemic change. We shift power and resources to communities, grow a shared social model of neighbourhood working, and build a wider movement for change.



Connected, coordinated and collaborative

We support the development of a joined-up network of individuals, communities, and voluntary and statutory sectors, underpinned by equal partnerships, trust and shared learning.



Focused on prevention and root causes

We tackle the social, economic, and environmental conditions that shape people's lives, health and wellbeing — addressing structural inequalities such as racism and discrimination, and taking Public Service Reform further into prevention.



Live Well Offers

Live Well Offers are united by common principles and practice. Some take place within Centres and Spaces, while others are connected to them. The Live Well workforce, which includes community connectors, volunteers, social prescribers, peer supporters and public service staff helps people navigate these offers, ensuring support is holistic and joined-up.



Live Well Spaces

Live Well Spaces work alongside Live Well Centres and Offers as trusted places rooted in the community, offering low-barrier access to support and social connection.

Live Well Neighbourhoods

Live Well Centres, Spaces and Offers are part of a wider Live Well Neighbourhood — a connected local network of people, communities, VCFSE, public services and businesses working together to improve wellbeing and reduce inequalities.

Live Well Centres

Live Well Centres act as a front door — both physically and through their connected workforce — to a wide network of Live Well Spaces and Offers, providing a broader range of community-based and targeted support across the neighbourhood.

Live Well Centres

Live Well Centres are welcoming spaces where people can get everyday support without stigma, judgement or long waits.

Whether it's help with housing, health, mental health and wellbeing, debt, employment, food, or feeling connected, Live Well Centres are there for the things that matter most. They are places where people can speak to someone who listens, understands and helps. Centres bring together VCFSE-led and public sector support under one roof, with trusted people on hand to be alongside residents and connect them to what they need.

Live Well Centres will also be supported and enabled by digital solutions — with offers available in the Centres themselves and connected to them — ensuring residents can access support in person and online.

Each centre is rooted in its local community and connected to a wider network of Live Well Spaces and Offers. By March 2026, every borough in Greater Manchester will have at least one Live Well Centre. The ambition is to grow this network so that, by 2030, every neighbourhood of 30,000 - 50,000 people has one. Over time, Live Well Centres may also work together as part of a pan-GM “no wrong door” approach — ensuring a strong, collective response across the region to the specific needs of dispersed communities.

Key features



An open door to trusted connected support

Live Well Centres are trusted places where anyone can get help with everyday essentials. They bring together the full strength of the VCFSE and public sectors, working side by side. Inside, you'll find the Live Well workforce, including community connectors, volunteers, social prescribers, peer supporters and public service staff— all in one place.

Support is joined-up, flexible and personal. People aren't simply signposted or passed on — they're met by trusted and skilled people who listen, understand the full picture, and stay alongside them. Support is tailored to each person's needs and strengths and reflects the reality of connected lives. Access is simple: just come inside or get in touch. There are no confusing forms or long waits. Outreach is part of the offer too — through pop-ups and drop-ins in places people already trust.



Welcoming, inclusive accessible support

Live Well Centres feel more like a living room than a waiting room. They are friendly spaces that offer a warm welcome — a brew, a smile, a hello. Help is offered in quiet, safe and relaxed environments, where staff know your name and trust is built through everyday interactions and familiar faces.

The people matter as much as the space. Staff reflect the communities they support, with a commitment to cultural humility, equity and care. Peer supporters and people with lived experience help build trust, connection and hope, working in partnership with public servants.

Support is culturally- and trauma-responsible, anti-racist and flexible to individual needs and strengths. Adjustments are made so no one is left out. People can access online resources, local information and activities in ways that suit them, making sure everyone feels connected and included.

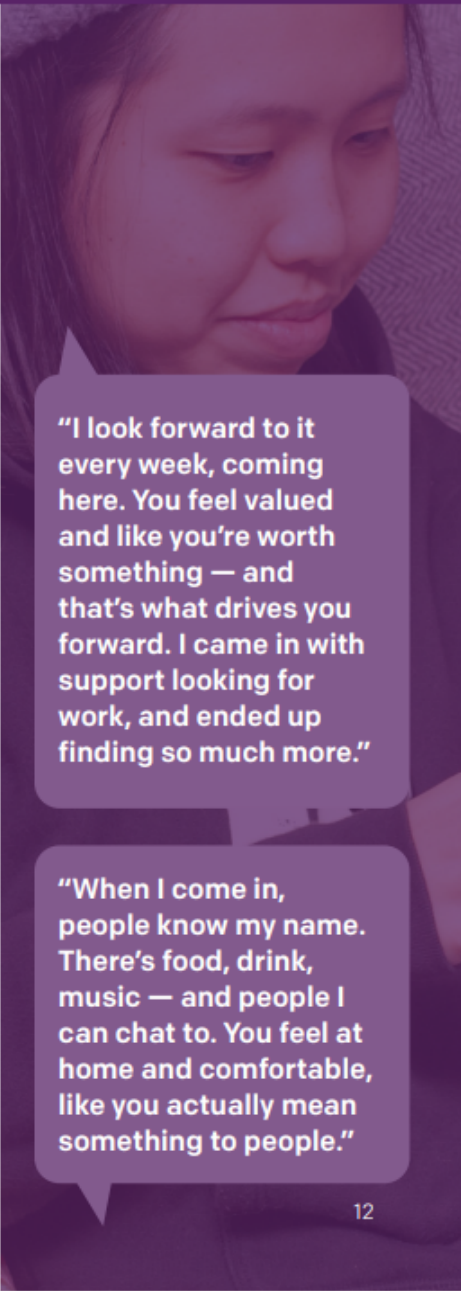


Led by people, rooted in community power

Live Well support starts with the person — their story, strengths, goals and what matters most. It's truly person-centred: delivered in partnership, with people leading the way and making decisions that work for them. But it doesn't stop with individuals. Live Well Centres are deeply rooted in community power. They build on what is already strong in neighbourhoods, amplifying the change that communities are already leading, and they work in close partnership with the wider network of Live Well Spaces and Offers.

Communities are able to shape what happens on an ongoing basis through co-design, participatory budgeting and lived experience-led decision-making. This ensures that Live Well Centres are dynamic and responsive: shaped by everyday experience, community-led partnerships, as well as the existing energy, assets and strengths already alive in every neighbourhood.

- **Delivered from recognised locations** that are easy to get to and well known by local people, building on existing venues like Family, Work and Skills, Youth and Health and Care Hubs.
- **Providing proactive outreach** from local venues, Live Well Spaces and out-and-about on the streets in communities so that no one is left out.
- **Intergenerational and universal** — inclusive of all ages and backgrounds, providing a full range of support, from crisis to everyday advice and connection.
- **Easy to access and disability friendly** — people can drop in, call, or reach out by email, without appointments or thresholds, with reliable and consistent opening times. Centres proactively remove physical, environmental and communication barriers, making sure support is genuinely accessible to all.
- **Welcoming, safe and inclusive space** — think kettles, sofas, calm décor and a friendly, human atmosphere — with environment, communications and services designed to be accessible and responsive to the needs and strengths of disabled people.
- **Joined-up public services**, working alongside VCFSE support, delivered by a consistent and trusted core team — the Live Well workforce, which brings together connectors, peer supporters, social prescribers, community organisations, and public sector staff.
- **Seamless connection to wider Live Well Offers** and wraparound support for housing, health and wellbeing, debt, welfare, food, employment, training, social connection and safety.
- **Clear and immediate crisis support**, longer-term help for those facing multiple challenges, and safety and protection when needed.
- **A diverse team that reflects the community** — a recruitment strategy that focuses on equity, diversity and lived experience representation.
- **Anti-racist and culturally responsive practice** — all staff are supported with training and reflection to understand how racism shapes mental health, access to care and trust in services.
- **Staff trained in Live Well values and practice** — using person-centred, strength-based, trauma-responsive approaches that foster prevention, equity, and work in partnership with people. Training is shared and delivered between Live Well Centres and Spaces.
- **Community engagement**, where Live Well Centres convene and support Live Well Spaces and Offers to come together, share learning, build strong relationships and foster collaborative working.
- **Digitally enabled and community-connected** — offering free WiFi, devices and support to access online resources and services.
- **Live Well Centres actively shape support** through participation in the wider Live Well network, alliances and place-based governance, ensuring decisions reflect diverse voices and lived experience.



“I look forward to it every week, coming here. You feel valued and like you’re worth something — and that’s what drives you forward. I came in with support looking for work, and ended up finding so much more.”

“When I come in, people know my name. There’s food, drink, music — and people I can chat to. You feel at home and comfortable, like you actually mean something to people.”

5. Live Well Implementation in the Borough

GM Live Well in Bury

- To support the implementation of this approach NHS GM and GMCA have identified and created a £10m fund. This will sit alongside the £10m regional investment from DWP Economic Inactivity Trailblazer work.
- Bury's implementation allocation for Live Well, based on demographic percentage of the regional population, will be £676k of which at least 50% (£338k) is to be allocated to the local VCFSE sector. In return for the regional investment there is a need for the locality to sharpen the local vision for Live Well in the context of Neighbourhood working, which locally is through our LET's do it! approach, and specifically identify the location and delivery model of an exemplar/ 'flagship' Live Well centre in the locality with this to be in operation by the end of 2025/26.
- Bury needs to have plan for Live Well Centre in each neighbourhood by 2030.

Approach

As part of Public Service Reform Programme, Bury has a strong track record in developing the model of neighbourhood working in each of 5 places in the

Our public service reform programme also recognised the importance of a strengths-based approach to individuals and communities in places – something core to the Lets Do It strategy and we have:

- A high performing VCFA creating the conditions for a movement of voluntary and community capacity and energy
- The establishment of the Bury Fund
- Organisations with a range of approaches to strengths based training and working
- Exemplar work on Ageing in Place, GM Moving funded programmes, VRU Alliance approaches and exemplar health inequalities programmes commissioned via community capacity
- New ways of listening to and engaging with community and working with VCSE leadership in areas less well developed.
- Note the MOU signed

Our approach to live well implementation is to build on these strengths and the strategic coherence created, and to particularly drive the neighbourhood estates strategy for the borough, to create the network of live well centres and live well places in the borough by 2030.

Phase 1 implementation is the regeneration of a currently disused former PRU in Whitefield as a focal point for community led working and public service delivery, to be delivered by March 2026. This is an ambitious programme, recognising there is not a legacy of community hubs to be ‘rebranded’, and essentially building the proposition in Whitefield from scratch.

Key to our approach is a comprehensive programme of community engagement and insight generation already led by VCFA, building on a programme of VCSE development in Whitefield over the past 18 months.

While Whitefield is our focus, in phase 1 of Live Well implementation we will continue with our neighbourhood team development and voluntary sector capacity building across all 5 neighbourhoods.

Exemplar Site - Whitefield

We will continue to develop and strengthen all aspects of our public service reform programme and in the context of live well. We will use the Live well funding specifically to focus on work in Whitefield.

The Bury Public Service Reform Group considered the potential location for the exemplar live well implementation. Whitefield was chosen for the following reasons.

- 1) Whitefield relatively under resourced in terms of VCSE capacity – VCFA have focused for 18 months or so in this space and there is movement and a comprehensive understanding of capacity
- 2) Parts of Whitefield (Besses) has limited public service presence –
- 3) Evidence of challenges in relation to pockets of neglect
- 4) Community Safety challenges – see this link for evidence of partnership already in action [Whitefield: Police crack down following 'number of violent incidents' | Bury Times](#)
- 5) Operation Vardar uncovered cuckooing as particular problem
- 6) Public Service leadership working increasingly well and maturely – see attached overview of the work.
- 7) Coterminous Primary Care Network
- 8) Support from Bury Housing colleagues that Whitefield is a priority area
- 9) In its social economic make up – areas of poverty close to areas of affluence – it is a microcosm of the borough as a whole
- 10) Noting the opportunity to connect reform to economic ambition through the Whitefield masterplan.

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The Potential Functions - prioritised

- A welcoming place in accordance with GM hallmark felt to be part of the community
- 2 Priorities:
 - Adults and Families in Poverty - housing, employment, DWP, substance misuse, DA etc
 - Family Hub implementation – a two site delivery (using the childrens centre close by) to the family hub model specification
 - Focal point for family hub with complex lives - Live Well –
- A based for the Integrated Neighbourhood Team – health and adult care including social prescribing, living well (mental ill health prevention)
- Focal point for public service leadership team
- Childrens Young people – youth provision, particularly utilising the sports hall.

Recommendations

Locality Board to:

- 1) Note the refresh of neighbourhood working in health and care in accordance with locality plan priorities and NHS plan objectives
- 2) Note the opportunity of alignment of our approach to neighbourhood working, and the Lets philosophy,
- 3) Note the GM live well programme and the proposed exemplar centre in Whitefield
- 4) All partners to consider further opportunity of alignment to the neighbourhood model. This is not additional. This is the default setting to how we work together.