



Bury Health and Wellbeing Board
3rd September 2026

Update on Public Service Reform

Bury's Public Service Reform Journey

The public service reform programme in Bury has had 2 main strands for 5 years:

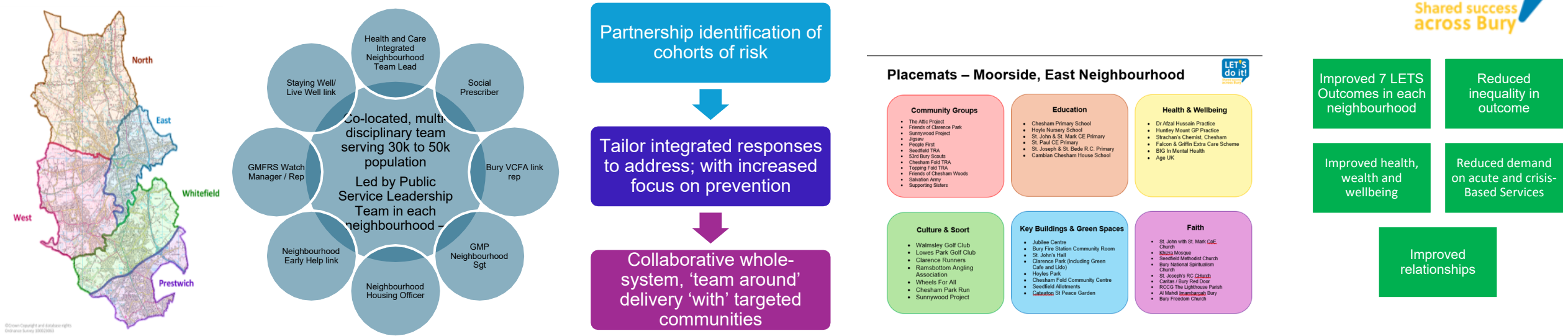
- Driving a model of neighbourhood team working in each of Bury's 5 neighbourhoods – creating the conditions and practicalities for front line staff at place to know each other, work more effectively together, and have a shared understanding of the strengths and risks of the local places and communities.
- To change the nature of public service delivery to one that works with, supports and invests in the strengths based relationship with people and communities

This is delivering on Bury's LET's Do It strategy in both the 'what' we do and 'how' we do it – as shown in the next slide



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 Elements of our neighbourhood model



1. Integrated Adult Health and Care Teams (INTS) - including co-located District Nursing and ASC Teams with an aligned Neighbourhood mental health model and MDTs linked to every GP practice involving wider partners including Social the VCSE.



2. Neighbourhood Leadership Teams - (formerly public service leadership teams) bringing together those partners with an opportunity to contribute to the wider determinants of inequality - including housing, DWP, income maximization team, GMP, schools, live well services and others, and focused of cohorts of particular risk of harm reflective of the neighbourhood



3. Implementation of the GM Live Well model – public services and the VCSE working with local communities to create conditions for people to thrive, not just survive, removing barriers to opportunity and tackling health, social and economic inequalities.



4. Neighbourhood approaches to supporting children and families - Developing a model of family hubs, bringing a range of NHS, council and wider public services to support families with young children to ensure the best start in life.

Locality Plan priorities for integrated health & care

The Model of Neighbourhood working is also a cornerstone of the Locality plan – the strategy for the health and care system in the Borough.



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

- | | |
|---|--|
| 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 | Optimising Care in institutional settings and prioritising the key characteristics of reform |

Public Service Leadership Teams

- 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)
- Intention to integrate the 'integrated support' through a 'Team Around' approach. Includes housing engagement; health and care integrated leads; social prescribers; Live and Stay Well; police and fire neighbourhood leads; Family Help leads; public health; and voluntary sector infrastructure representatives
- Core features
 - Neighbourhood Profiles
 - Partnership identification of cohorts of risk
 - Collective insight of community assets/ opportunities to connect local people into



Public Service Leadership Teams – what works well

- Developing relationships across place-based colleagues who increasingly know each other and work in collaboration, eg work in Whitefield through Op VARDAR recognised by GMP awards as exemplar of partnership activity
- Increased place-based awareness / action of role of front-line colleagues on identifying and responding to susceptibilities – eg damp and mould/
- Increasingly partners identifying data/ insight to target activity and recognising the need for partnership approaches to address as looking at whole person/family/system
- Increased awareness of community assets and networks through getting out into neighbourhoods more
- Anchor points for partners, eg CABB neighbourhood sessions informed and in collaboration with PSLT input
- Teams that aren't necessarily place based being increasingly aware/ connected into specifics of neighbourhoods/ communities Wellness



Public Service Leadership Teams – opportunities

- Reaffirm consistent understanding of role/ remit/ function (recognising will look/feel slightly different given tailored to specifics of neighbourhood)
- Expansion into 'Team Bury at Place' style teams – across multiple sectors
- Distributed leadership of each PSLT to demonstrate genuinely 'Team Bury' constructs – as committed to through PSR Steering Group
- Reset/ articulate Children & Families inputs – recognising Best Start in Life/ Families First agenda, alongside education.
- Hardwire Place Department colleagues in to link through place-shaping opportunities (eg regen/ housing schemes) more explicitly
- Interest in utilising PSLTs to shape place-based conversations on GLD and DA repeats



Public Service Leadership Teams – Evolving membership and connectivity

Initial iterations of teams



Evolving developments

- Education including Early Years settings
- Broader housing providers
- Key regeneration/ economic development colleagues
- Commissioned services based on specific cohorts of risk identified
- Wellness colleagues
- Specific place based initiatives – eg Live Well/ Pride in Place

Children and Young People

Family Hub model to delivery Bury's Best Start Local Plan

- Ensuring every children has the best start in life through early identification and support
- Supporting families via parenting and home learning environment programmes
- Provide integrated support through our family hubs

Strategically:

- Seeking opportunities to bring services together
- Delivering through family hubs or within each neighbourhood as appropriate
- Focus on early identification and prevention with a proportionate universalism approach particularly around:
 - Parenting
 - Home Learning Environment
 - Supporting children with additional need
 - Early Years Foundation Stage Development

- East Bury Family Hub and Chesham Fold Best Start Family Hub...plus utilising space at Hoyle Maintained Nursery School for delivery and deliver from local parks and even a nursing home
- Whitefield – conversion of existing Whitefield Children's Centre and alignment to Live Well Centre
- Future years: Radcliffe including current Radcliffe Children's Centre, Bridge House and space within new Radcliffe Hub' Bury North and West Children's Centre for North; and utilising space within Jewel and Phoenix Centre within Prestwich



Children and Young People

- Families First – Neighbourhood and Strengths Based Approach within Safeguarding Partnership Multi-Agency Response to Need
- Communities of Practice predicated on the 5 neighbourhood footprints is the foundation block of SEND reforms for schools – education, educational psychologist, broader health partners connected on neighbourhood footprint and connected into broader place based teams.
- Good level of Development risk cohort identification within neighbourhoods



Neighbourhood Team working – Live Well

Fourth component part of this work is the local implementation of the GM **Live Well** programme.

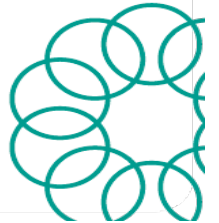
- On Sunday 16th August the flagship Whitefield Live Well Centre formally opened as a focal point for investing and connecting community assets in Besses and across Whitefield, along with new public service spaces in the neighbourhood (Whitefield Community Fire Station, uplands medical centre)
- We are connecting all the components of the new offer in Radcliffe - Radcliffe Hub, Radcliffe Primary Care Centre, Bridge Street, the Star Academy, existing community based assets such as the Growing Together Radcliffe Centre, and Pride in Place funding, to make a more consistent joined up offer
- We will commence a review of the Live Well opportunities in East Bury, Ramsbottom, and Prestwich
- Cross-referencing of hallmarks of Live Well spaces with Wellness offers locally eg Library specifications/ options
- Connectivity into VALOUR Programme – Live Well through the lens of Veterans & Armed Forces community.
- [Live Well in Greater Manchester | Bury VCFA](#)

Live Well

everyday support in
every neighbourhood

together
we are

**GREATER
MANCHESTER**



Neighbourhood Team working – Live Well



**Live
Well**

everyday
support in
every
neighbourhood



**Live
Well**

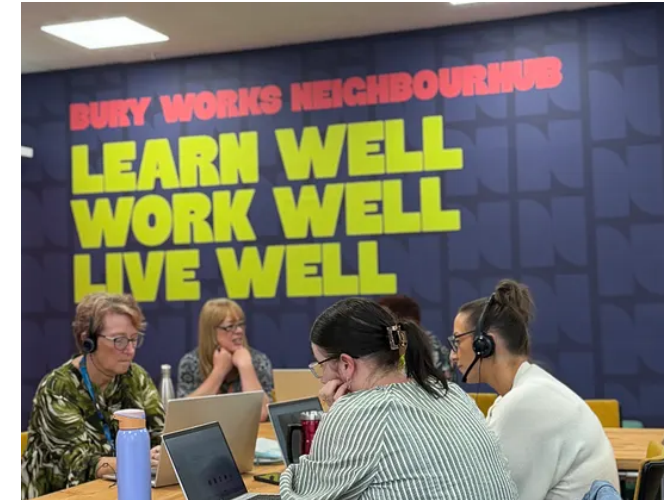
everyday
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Furthering Neighbourhood working

We continue to strengthen the articulation of neighbourhood team working in each place:

- GMP have reconfirmed their commitment to the PSLTs and neighbourhood reform principles through delivery of the Neighbourhood Policing Approach. This includes greater partnership problem solving on an agile basis to address specific place based demand.
- Alignment of core community safety offers through such approaches to both target high volume and repeat demand, and community driven opportunities to address, eg targeted work on Domestic Abuse repeats and work with Bury VCFA to develop Alliance approach for Standing Together investment.
- Council services increasingly mapping more explicitly to the work of neighbourhood teams and identified opportunities for collaborate – including Staying Well Services; Customer Contact and Collections (Welfare support provision) and connectivity through the recently expanded Neighbourhub in conjunction with DWP.
- The Neighbourhub, which has recently located to a larger premise provides a collaborative space for support on employment, skills, digital access and wellbeing. It includes access to Ingenus employment support; Growth Company training; in work progression; welfare support; and Bury Care Academy.



Strengths based approach to people and communities

- LET's Do It! in action centres around different relationships with people and communities.
- Embedding
- Strengths based documentation and processes to enable different, person-centred conversations rather than rigid 'assessment'
- Ward level neighbourhood placements providing detailed information on strengths and assets of communities have been developed, to increase mutual awareness and connectivity.
- Commitment to local VCFSE through local MoU to enhance recently refreshed VCFSE Accord and investment in Local Infrastructure provision. Local MOU focuses on:
 - Embedding the importance of the VCFSE sector to support co-design and co-production
 - Ensuring that the voice of the VCFSE sector and local communities is heard and valued in strategic governance
 - Ensuring a financially resilient VCFSE sector
 - Shared ambition for One Workforce – training/ coaching/ mentoring
 - Embedding social value



Demand Management/ Prevention Strategy

There is a recognition to further sharpen the delivery of reform approaches through a more integrated and compelling demand management strategy - articulating the work we need to do and the focus on those areas most likely to secure demand reduction.

There are two elements to this work currently:

- Work with Impower - in parallel to the work on strategic commissioning - to identify cohorts of financial opportunity where an early intervention would have avoided greatest public cost. This is being progressed currently with workshop being developed in January
- The identification of 10 principles of demand reduction that we should pursue



Demand Management/ Prevention Strategy

Co-production
with people and
communities

Neighbourhood
Working

Recognise,
Celebrate and
Invest in the VCFSE
sector

Build on
Community Assets
and Strengths

Proactive
Identification of
people and
families at risk

A single source of
information about
support and assets

Making Every
Contact Count

Commissioning for
Independence

Support to unpaid
carers

Technology
Enabled Care and
Support for
Independence



Demand Management/ Prevention Strategy

Co-production with people and communities

- Strengthened co-production processes in adults, and in children's particularly on the SEND agenda
- Lived Experience and Community Voice, including through dedicated subgroup of Adult Safeguarding Board
- Children and Young People VCFSE forum revitalised through Bury VCFA

Recognise, Celebrate and Invest in the VCFSE sector

- Anchoring Cohesion work and investment through VCFA, building of Live Well co-leadership
- LET's Value Volunteering and Bury Fund celebration events
- Updated Volunteering Strategy for the Borough
- Opportunity to further connectivity through Faith & Belief Covenant



Demand Management/ Prevention Strategy

Proactive Identification of people and families at risk

- Risk stratification processes in place for Good level of Development (school readiness) by neighbourhood and ward
- Partnership identification of specific cohorts of risk in each neighbourhood bringing together data, insight of households presenting more prevalent and highest intensity of demand

West

Young people experiencing obesity
48% of CYP in Year 6 in Radcliffe West are classified as overweight or obese



- Lee Buggie producing a West Obesity Dashboard
- Tailored local promotion of Weight Management materials [Weight Management | Bury Directory](#)
- Targeted engagement of Active Practice [Active Practice | Bury Directory](#)
- Resources to support active travel initiatives in West, and we have several West Schools registered as LETS Get Bury Active Schools (Think Dr Bike, Daily Mile, Walking Buses etc)
- LETS Live Well & Cook Well Grant – Live Well x Public Health campaign for up to 10 community groups, the idea fundamentally is around communities taking a lead on cooking courses for families / communities: [Let's Live Well & Cook Well | Bury VCFA](#)
- Obesity • [Untitled map / Untitled view • Kumu](#)
- Alignment with Bury Obesity Alliance but through the lens of Radcliffe.
- Identified opportunities to work with local groups on a Junior Park Run offer
- Public Health working on a wider piece of work with primary care around Obesity referrals / but also with Bury Live Well around family Weight management support so these are in the pipeline
- Connectivity to Radcliffe based HAF activity
- In development –Public Health liaising with education as to whether specific school breakdown of data available to further target interventions – in particular to target Teach Active [Greater Manchester Moving - 'Let's Get Bury Moving with Teach Active'](#)

West – what could / are we doing ?

- Pride in Place
- Radcliffe Hub / Live Well
- Kitchen Kit Distribution sites
- Nominate / signpost community cooking champions
- Mural – 2000+ steps comms
- HAF investment
- Digital resources (Slide 17&18)
- Hot Food Take Away Matrix Upskill
- [Bury Obesity Alliance | Bury Directory](#)
- [Bury Directory](#)
- Feed into Healthy Systems SPD



Bury Council

NHS Greater Manchester



LET'S do it!
Shared success across Bury

Demand Management/ Prevention Strategy

A single source of information about support and assets

- Beebot tool in development through work with Children and Families; proposal being explored for roll out to all other services. Proof of concept launch due November 2026
- Opportunity to align with other web-based tools to increase awareness and connectivity of place-based support



Greater Manchester Mental Health
NHS Foundation Trust

Achieve Bury

Drug and Alcohol, Treatment and Recovery Services

Achieve Bury, Star Suite, Second Floor, Radcliffe Primary Care Centre,
69 Church Street West, M26 2SP

Achieve provide drug and alcohol treatment and recovery services to individuals, families and communities. Achieve focus on delivering innovative and high performing substance use treatment and recovery with our partners using a proven approach that will promptly identify and support people affected by alcohol or drug use into appropriate treatment. We are committed to improving health and social outcomes for service users and families allowing more people to make a meaningful recovery from drug and alcohol use.

If you looking for support regarding your substance use issues, you can refer yourself to Achieve Bury:

Phone 0161 271 0020

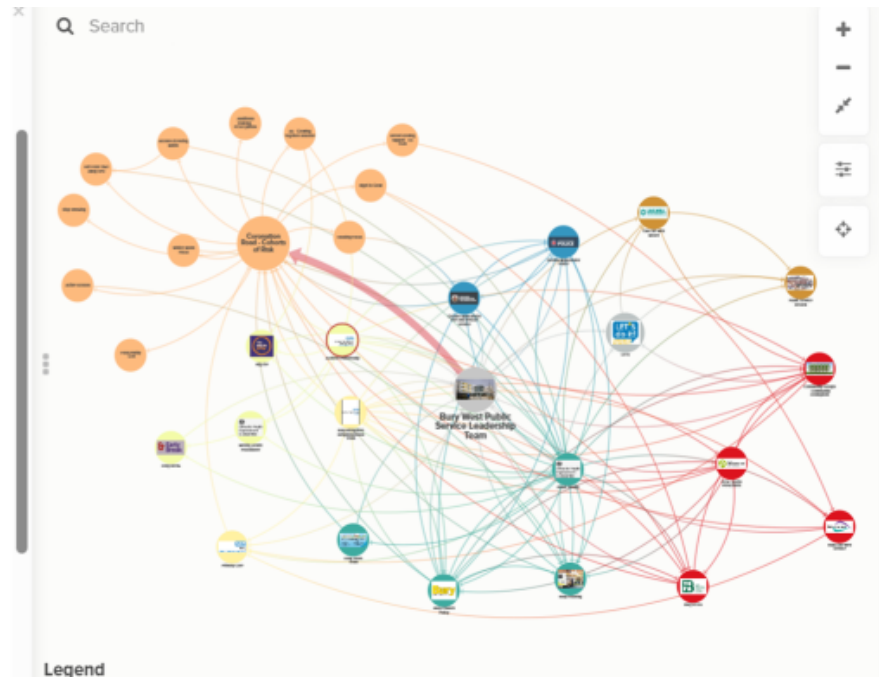
Visit Achieve Reception at Radcliffe Primary Care Centre

Email achieve.referrals@gmmh.nhs.uk

Referral form available at <https://www.gmmh.nhs.uk/achieve-bury>

GPs and other health professionals can also refer individuals to us via these contact details.

Support is also available for family members and others affected by someone else's substance use, contact details as above.



Demand Management/ Prevention Strategy

Build on Community Assets and Strengths

- Brokerage of opportunities to connect into anchor buildings and networks at place
- Place Based 'Connector' meetings and emerging Spaces of Hope
- Work to more clearly articulate neighbourhood estate offer to consistently detail anchor spaces for people to come together in

Make Every Contact Count – Prevent/ Reduce/ Delay

- Build confidence, information and pathways to maximise every interaction with residents to advise, connect, support and promote prevention offers and reduce escalation.
- Build on examples of Bury Essential Parent app and padlets supporting specific wellbeing topics

