

HEALTH AND NATURE DORSET

Working together to increase the access to, use of and connection with the natural environment to support and enhance physical and mental wellbeing across Dorset.



HAND Workshop 1 February 2022 – Themes

Our Vision: To maximise collaboration to increase the use of Dorset’s natural environment to deliver health and wellbeing benefits.

Themes Grouped by Questions

Q1 Themes:

Collaboration, Shared Vision (Aims and Objectives), Systems Level Impact, Research and Evaluation, Facilitating Delivery of Nature-Based Health and Wellbeing Benefits.

Q2 Themes:

Shared Vision (Aims and Objectives), Capacity and Commitment, Communication and Partnership Working, Developing Wider Partnerships.

Q3 Themes:

Resources, Theory of Change, Utilising Existing Resources, Promoting HAND, Resources for Evaluation and Impact.

Q1. How will we know if we have been successful?

Theme 1: Collaboration

- Why do we want to collaborate?
- Collaboration within organisations as well as between organisations.
- A more systematic way of sharing opportunities.
- Sharing insight and information.
- Joint communication. Shared across partners with shared message being given.
- Wider partnership possibilities with more concise vision.
- Identifying partners for collaboration - working with public as priority?
- Understanding voice of the community - particularly those who don't engage or facing biggest barriers. (How do we capture the barriers that face the people who need the most access and what solutions we can co-produce with.)
- Targeting conversations with non-park users.
- Learning from what's happening in other counties with possible collaboration across SW once we have success collaboration in Dorset / Collaboration with groups in other areas in SW doing the same thing - capture and share learning.
- Collaboration between green org and health org - HAND to facilitate communication with the right people. (HAND facilitate conversations across environment and health sector.)
- Learning from national partners and other groups
- HAND to enable collaboration between organisations OR collaboration with public.
- Shared learning as a key deliverable.
- Understanding of objectives of other organisations so able to see where commonalities lie.

Theme 2: Shared Vision – Aims & Objectives

- Share a similar vision, e.g., all partners advertise a programme.
- Public commitment to shared strategic aims from organisations involved in HAND.
- Same message but can be expressed in different ways.
- Aims and objectives need to be constant across partnership. Find common ground that fits well with each organisation. Commit to make changes. Joint campaigns.
- Could there be overarching set of aims that we sign up to. Can we find a way to show that we have bought into that and is relevant? Embed it.
- Awareness of HAND – not by chance but by design.

Theme 3: Impact at System Level

- HAND activity will be embedded in and supporting local health plans.
- Recognition and value at all levels of the system. e.g., for ICS needs to be strategic. Whole levels. place and neighbourhood. 'golden thread'.
- Local specific needs in conjunction with national research.
- Understanding social prescribing.
- Green sector understands health sector better.
- Inequalities at forefront rather than assumed.

Theme 4: Research and Evaluation.

- Local level evaluation be supported by more strategic e.g., tools etc.
- Identify skills in partnership. All need to gather better data. If we don't have skills, then we look for external help.
- There are challenges evaluating link between access to nature and health benefits - all we need to prove is that we are increasing numbers (almost a given there will be health benefits.)
- Every partners' responsibility to collate and report on data relevant to evaluation.
- Pilot parks looking at evaluation and testing out new approaches to evaluation.
- Do surveys of residents and look at take-up and footfall. If successful we will have reduced inequality of access.
- Understanding of health research as well as countryside sector.
- Using national research.
- Test by doing.
- Understanding what research already exists.

Theme 5: Facilitating Delivery of Nature-Based Health and Wellbeing Benefits.

- HAND helping organisations to deliver H&W to population.
- Improve health and wellbeing and reduce inequalities.
- Reducing inequality of access to nature-based wellbeing.
- Maximise green sites for local populations.
- Greenspaces are more accessible to people who have been underserved.
- Activity design.
- Funding opportunities based on reaching health inequalities.
- Also focus on smaller greenspaces.

Q2. What actions or changes are needed to maximise collaboration?

Theme 1: Shared Vision - Aims & Objectives (again)

- Clear aims etc right from the start.
- Clear and simple aims and objectives (to create a shared vision).
- Agreed set of actions to allocate resources to.
- Understanding which strategies are best and should be involved with.
- Do we steer through issues? Or is it projects? Or programme? Need to be clear. what is the expectation?
- Need to be clear on actions that HAND is supporting.
- What is preventing collaboration? Lack of objectives, capacity limitations driving motivation to be involved.
- Showing benefit of joint working but being able to explain - elevator pitch.

Theme 2: Capacity and Commitment

- Resource - someone to actively do it and promote the work.
- Strong chair.
- Dedicated space and time.
- We need partners who are committed to HAND and committed to being actively involved.
- Provide training/networking and resources and can share what we may already have.
- Work in the partnership to decide who does what. Could take turns to share tasks.
- Need 'doers', people that actively contribute and don't sit as silent partners.
- Pull on expertise of the partners.
- Needs people to do the practical aspects.
- Commitment crucial.
- Commitment from organisations to donate their time.
- Draw resources in to generate actions together.

Theme 3: Communication and Partnership Working

- Decent websites that are updated regularly (and are linked together).
- Mixture of communication. Static (websites etc), meetings etc too for regular quick moving content (Keeping up-to-date mustn't just be about a website).
- Need open and honest conversations between partners.
- Open communication between partners.
- Opportunity for partners to meet on a regular basis.
- Partners need to reflect on what we are doing - what is working and what is not working?

- Informal discussions too.
- Not a talking shop.
- Collaborative groups work best when action-focused - not just around info sharing.
- Collaborative not contractual.
- Clearing house role - channel resources to places/people that would be most effective.
- Acting as a broker.

Theme 4: Developing Wider Partnerships

- More time from health organisations.
- Who are the most appropriate health partners to work with?
- Broader than central health services e.g., drug and alcohol abuse teams.
- Include people who are actioning the reach into communities.
- Include community organisations e.g., Dorset Mind, Children's foundation.
- Sharing mechanism for organisational priorities e.g., health projects.
- Allow other org to see how their objectives can be met through the partnership.
- What health priorities can the natural env help deliver?
- Build awareness of HAND at ICS level - PH level - place level.
- Place or theme-based projects.

Q3. What resources are needed to make these changes?

Theme 1: Resources

- Not just about money.
- Time commitment.
- Management of HAND should be done as part of organisational commitment to making this work.
- Leadership from decision makers (early involvement from councillors.)
- Energy, time and commitment to collaborate.
- Constant energy on both health and environment - we are looking at change process so takes time.

Theme 2: Theory of Change (determines resources and actions)

- Looking where our energy is best placed - the TOC can highlight where the doing needs to be done.
- Agreed theory of change – what are the actions?

Theme 3: Utilising Existing Resources

- Link into what is already there.
- Organisations can see where they fit into it.
- Be clear on people involved in the steering group - why they are involved.
- Convening and facilitating role - bringing people together.
- Look at current priorities in health e.g., inequalities, mental health, disabilities, aging well, anticipatory care and falls.
- Need to identify then request for in kind support.

Theme 4: Promoting HAND

- Good advertising.
- Awareness – newsletter, volunteers, text, Facebook, word of mouth, in the surgery (clear action plan).
- Build online information - create more of a marketing pitch, convey the benefits. One pager - what is it?
- Visual representation of what the outputs could be e.g., video, animation.
- Selling the dream.

Theme 5: Resources for Evaluation and Impact

- Evaluation - how do we know we made a difference. Narrow down key measures of success at each level. System - is this making a difference on impact of service use, then neighbourhood and local level... 'Evaluation and insights'.
- System, place, local and embed in each of these.
- A lot of resources required for evaluation, gaining insights and demonstrating impact (an ongoing process.)
- Decide key performance indicators (KPI) first involve partners to gather and pull together.
- 'Green keeper' report gave a monetary value to greenspace - interest to leadership. Help secure funds from health system or grants. Give it value. Janna to send report.
- DREC did report which is going to health inequality group in Feb - useful feedback from people. (Nathalie to send report).