



# Fairer Together

A new partnership for a fairer Islington

## Introducing Fairer Together

### Forward

**We're determined to make Islington fairer. We want this to be a place where everyone – whatever their background – has a decent chance for a long and healthy life, lived on their own terms.**

Our borough has great strengths. It's a place of fantastic energy, diversity and assets: thriving businesses, a passionate and committed voluntary and community sector, excellent public services with a long history of working well together and – most importantly – the 240,000 people who live here.

However, despite these strengths, life is still not fair for too many people in our borough. Over the last ten years, austerity and spiralling living costs have exacerbated poverty and inequality. 21.7% of people live in income-deprived households with 47.5% of our children growing up in poverty.

Too many people in our borough are in danger of being left behind: the disaffected young boy being sucked into youth violence, the parents struggling to raise their children in a context of poverty and poor housing conditions, the pensioner who hasn't spoken to anyone in weeks.

So what can we do? Despite the challenging context, we are committed to working together, across Islington, to ensure that tackling inequality and promoting fairness are firmly at the heart of everything we do. We believe that the best thing we can do locally to make Islington fairer is to intervene early where problems occur, or better still, prevent them from happening in the first place. We have bold ambitions – we want to be the best in the world at prevention and early intervention, enabling everyone in Islington to start well, live well and age well.

Bold ambitions require bold action. This is not about a series of small projects, but a long-term, fundamental shift in our approach. Evidence shows that public services are changing. The balance is shifting away from market-based approaches in favour of trust and relationships; away from projects and programmes towards movements that articulate a moral imperative for change; and away from interventions delivered to individuals towards change developed and delivered collectively with and by communities.

We have established the Fairer Together Partnership to confront our challenges together. We believe that if we put our collective energy and resources behind shared goals, principles and ways of working, we will be able to build a fairer Islington. The challenges local people are facing – and will continue to face over the coming years – cannot be solved by a single organisation working in isolation. To address these challenges, we will need to draw on all of our skills, experiences, assets and resources to find new and creative ways of doing things together.

We want to start a conversation with you – local people, frontline staff, managers, and leaders across the public, voluntary and community sectors – about what the Fairer Together Partnership should look like. We have some ideas – which we set out in the pages that follow – but we don't have all the answers. Over the next few months, we want to work with you to think collectively about:

- the key challenges for us in Islington over the coming years
- a shared set of goals and priorities around which we can all unite
- the principles or ways of working that will help us to achieve our goals
- how we can best use our collective resources to deliver tangible change for local people.

Over the next few months we want to take the big questions about our future into the community, to hear from people living and working in our borough about what they want. This is a call to action – to think about what kind of place you want to live and work in, and what we can do together to make that happen.

Join us in this endeavour to build a Fairer Together. To be fairer for everyone in Islington, we must be **Fairer Together**.

Cllr Richards  
Leader of Islington Council

Dr Jo Sauvage  
Chair, Islington Clinical Commissioning Group

Co-chairs of the Fairer Together Borough Partnership

# Part 1: the case for change

## Challenges

Islington is bursting with opportunities – for partnership, for innovation, for prosperity. But alongside all of these opportunities, persistent and pernicious poverty and inequality continue to blight the lives of too many. Islington has one of the highest rates of child poverty in the UK and is home to one of the highest proportions in London of working age people claiming out-of-work benefits.

Alongside this growing inequality our public services are facing unprecedented pressure. Since 2010, Islington Council alone has had to make savings of £250 million. Rising demand and an ageing population are creating huge challenges for the NHS.

Ten years after the ground-breaking Fairness Commission, six years after the Employment Commission and three years after the Fair Futures Report, things have changed more rapidly than we could have ever imagined. And they will continue to change over the years ahead. Brexit, demographic change, digitalisation, the 'gig' economy, global warming – these are just some of the major changes ahead which threaten to make life even more challenging for our residents.

Too often as public services we are approaching these issues in silos. If we view local people's complex lives solely through the lens of our own delivery we will fail to see the bigger picture and tackle the underlying causes. To solve interconnected challenges we need interconnected services: that means holistic thinking, coming out of our comfort zones to develop new ways of working built around the needs of local people.

## Poverty and inequality in Islington

- In 2019, Islington was the 6th most deprived borough out of 32 London local authority areas.
- More than 8% of households with people aged 60+ are living in fuel poverty.
- Islington has the second highest proportion of working age population claiming sickness and disability benefits (6%) in London, with the proportion of jobseeker's allowance claimants increasing by 26% from 2009.
- Educational attainment is a key determinant of future employment and poverty risk. And yet, in 2017/18, 1,404 Key Stage 4 pupils attending state-funded schools in Islington had a 3-point lower Attainment 8 score (46.3) than the London average (49.4). Local pupils identified as disadvantaged had a significantly lower attainment score (42.6) than both the Islington and London average.
- Highest level of income deprivation affecting children. 28% of residents under 18 were living in families facing income deprivation in Islington, compared with 18% in London.
- Learning disabilities and mental health are strongly associated with poverty, incurring extra costs and often reducing capacity to work. Only 7.7% of people with learning disabilities in Islington were in paid employment (compared to 18% in Harrow), while

4% of adults in contact with secondary mental health services were employed – 2% less than the London average.

- Racial and ethnic inequality persists – 30% of those claiming JSA in December 2018 were black, although black residents account for only 12% of Islington's population. In 2018/19, Black Caribbean pupils in Year 11 were on average receiving one grade less for 4 out of the 10 slots included in the Attainment 8 figure compared to all Islington pupils.
- Inequality extends to life expectancy, too – Islington men and women have one of the lowest life expectancies amongst London boroughs. A boy born and growing up in Islington can expect to live until 79, whereas a boy in Kensington and Chelsea could live until 83 years – a difference of four years. Within Islington, life expectancies vary significantly by ward – a girl born and growing up in St. Peter's ward can expect to live for 10 years less than a girl from St George's ward.
- For our older people, income deprivation and social isolation are persistent challenges. In 2017/18, in Islington, only 41% of adult social care users over the age of 65 reported having as much social contact as they would like. This figure ranked 12<sup>th</sup> highest out of all 32 London Boroughs. In 2019, Islington had the fourth highest levels of income deprivation affecting older people in London.
- Around 745 households (7 per 1,000) in Islington are living in temporary accommodation (2017/18) and just under 700 households are severely overcrowded.

## Opportunities

The national context encourages us to confront our challenges collectively. The NHS Long Term Plan, published last year, aspired for every local area to have an Integrated Care System (ICS) over a larger footprint – in our case, North Central London – by April 2021. These systems will be supported by borough-level integrated care platforms, enabling health and care organisations to take collective responsibility of resources and maximise wellbeing for everyone through prevention and early intervention.

The NHS Long Term Plan also establishes Primary Care Networks (PCNs) as an essential building block of every Integrated Care System. PCNs bring GPs together across a community, working with hospitals, social care, mental health, pharmacies and community organisations to solve key challenges associated with demographic growth and an ageing population.

Alongside this national trend towards greater collaboration and partnership, there are already excellent examples of how we have made this work locally in Islington to create tangible change for residents.

- **Bright Start** transcends organisational boundaries, offering joined-up support for under-5s in multi-purpose children's centres across the borough
- **The Keel Project** has provided multi-agency wrap-around support for families affected by domestic abuse, involving eight agencies – including Police, Islington Housing, and CAMHS
- **The Locality Team** prototype at Newington Barrow Way in the north of the borough has fostered inter-organisational working, breaking down information silos.

- **The Proactive Ageing Well Service (PAWS)** provides a community based care model for moderately frail older people, with colocated staff from AgeUK and the Whittington and support from the multidisciplinary team including a Geriatrician and GP.

“It has been a valuable ‘getting to know you’ exercise and we’ve recognised recurring themes for clients... Co-location helps create shortcuts and speeds up outcomes. It’s also about creating a culture of integration. You learn a lot more by sitting with colleagues and running things by each other. People are sometimes a bit wary about asking questions so it makes it easier to join the dots.” (Andrew, North Area Housing Manager and senior practitioner, Locality Team)

“Multi-disciplinary team working spreads knowledge and helps create a team-wide vision. It makes it much easier to make links – although we still have to work within existing boundaries and processes.” Michael, Area Housing Manager and senior practitioner Locality Team

## What we’ve learned so far about effective partnerships

**Shared vision:** Partnership and integration can be superficial if staff don’t know why they’re doing it and local people don’t know what’s happening. The vision needs to be clear, owned by everyone and continually communicated with identifiable branding and reliable timescales.

**People-centred services:** Services should be designed around the needs of local people and be embedded within community assets for ease of access, for example, social, emotional and mental health services being delivered from youth and community centres rather than in clinical spaces.

**Leadership:** A unified front ‘from the top’ helps manage anxiety around change and brings people on the journey. Leaders engage stakeholders to ensure all are involved from the beginning of the vision development and the transformation process.

**Time:** Effective partnerships take time. People need time to understand and engage in the process. It’s important not to rush and to get the details right to reduce anxiety and confusion.

**Shared space and information:** Sharing spaces and information helps to create shortcuts, speeds up delivery and enables staff to build relationships and identify common themes and priorities.

We can also see amazing examples of progress elsewhere in the UK – including The Wigan Deal and Leeds’ Child Friendly City.

**The Wigan Deal**, introduced in 2011, is an informal agreement between the council and everyone who lives or works in Wigan. The Deal aims to assist local people, the council, and businesses to work together to create a better borough through a series of pledges committing everyone to improve the environment, health, the economy, and more.

The Deal empowers the local and health authority to transfer power and assets to the community, fostering a culture of collaboration that gives council staff, local people and

businesses permission to innovate. The Deal starts from the premise that local people have the capabilities to solve challenges in their lives. The council is there as back up support.

All workers in Wigan – social workers, refuse collectors, administrators – are trained to engage with the community. Emphasis is placed on listening, and letting people who use services take the lead.

**Leeds wants to be the most child friendly city in Europe.** Its vision was built from the views of thousands of young residents on how to make the city a better place to play, live and grow up. This consultation led to the '12 wishes' – the practical concerns of children and young people for a safer journey to school, a city centre that is welcoming, and to be treated by adults with respect.

As part of this ambition, the 'Restorative Practice Model' was introduced. This model gives practitioners more time to own and find enduring solutions and families are seen as part of the solution, not the problem. Training is offered so that practitioners make the most of their time. The shared idea is to restore, and build strong relationships; to challenge as well as to support; to inspire more families to make positive changes.

The model emphasises working with families, building relationships, putting the family at the heart of potential solutions, acting early on the development of challenges, and having one worker and one plan for each family.

Inspired by these new developments, researchers, intellectuals and think tanks are beginning to point to a new era in social policy, though they describe it in different ways: the Institute for Public Policy Research describes a 'relational state'; the New Local Government Network proposes a 'community paradigm'; Ratio has advanced a 'relational social policy'. But all are unified in their view of placing local people, relationships, and community at the centre of new partnerships between strong public services and an active and engaged civil society.

### **The New Local Government Network's four paradigms of public service delivery**

**Civic paradigm:** Lasting from the sixteenth to the early twentieth century, this was based on an evolving patchwork of independent bodies delivering limited public services funded by voluntary contributions and, increasingly, some tax.

**State paradigm:** From the 1940s through to the early 1980s public services were unified under central government and entirely tax-funded with the goal of providing universal, comprehensive and free-at-the-point-of-use provision. The State Paradigm extended the hierarchical systems already evident under the Civic Paradigm, based on the firm belief that officials and experts knew best how to care for the wider public. Service users and communities were widely regarded as passive recipients.

**Market paradigm:** This developed in the 1980s and is now reaching the end of its era of influence. It sought to improve the cost and efficiency of public services and to widen the choices available to users by marketing provision and involving the private sector in delivery.

It did not, however, effectively dismantle the hierarchical practices of the previous paradigms. Rather, it introduced a strongly transactional element into the relationship between service and user.

**Community paradigm:** Emerging in the late 2010s, the fundamental principle underpinning this paradigm is to place the design and delivery of public services in the hands of the communities they serve. In this way, a new, egalitarian relationship can be built between public servants and citizens: one that enables the collaboration necessary to shift to prevention; one that requires communities to take more responsibility for their own well-being; and one that means citizens and communities can genuinely 'take back control'.

The success of the initiatives described here, both in Islington and beyond, is a taste of the promise the future holds. But our ambition can only be achieved through a fundamental shift in public service provision: eradicating silos, building trust and honesty across organisations, and putting local people firmly in the driving seat.

## QUESTIONS

1. What are your aspirations for local people?
2. What are the key challenges they are facing?
3. How might these challenges change over the coming decade?

# Part 2

## The Fairer Together partnership

We have come together to form the Fairer Together Borough Partnership to confront these challenges head on.

**"Fairer"** to highlight our fundamental and continuing commitment to tackling inequality through early intervention and prevention, empowering everyone in Islington to start well, live well and age well.

**"Together"** because this is the only way we will be able to make a significant impact in the future. The effects of inequality are not confined to – and can't be prevented or addressed by – any one service. From local people, police, schools, and community leaders, to nurses, firefighters, and volunteers – we all have to play our part in building a fairer Islington.

We see this new partnership taking shape in a number of ways:

1. A shared approach to strategy and investment
2. Shared principles of ways of working – the Fairer Together Way
3. Integrated Locality Teams to ensure more joined up support for local people
4. New Community Networks to bring together key players in each locality around common goals and priorities

Working together in this way will allow us to see the big picture across all of our services, identifying opportunities to add value, improve outcomes and reduce duplication and costs.

**1. A shared approach to strategy and investment:** If we want to tackle inequality and make Islington a fairer place to live and work, we need to ensure that everyone in our borough is able to start well, live well and age well. This is our starting point for developing a shared approach to strategy and investment across the partnership. Using these themes for the Fairer Together Partnership demonstrates the breadth of our ambition for everyone in our borough whilst highlighting the importance of taking a “life-course” approach.

We recognise that the social, economic and environmental conditions in which we are born, live, work and age lead to different trajectories and outcomes – not only over the course of a lifetime, but into future generations too. To tackle inequality, we need, therefore, to be thinking about early intervention and prevention at every stage of life.

For each of the **start well**, **live well** and **age well** themes, we want to consider the following questions:

- What are our shared aspirations for local people? What do local people say they want for themselves?
- What are the key priority outcomes that we can all mobilise around?
- How much are we investing across our respective organisations?
- What are we currently delivering in this space?
- What are the key services/sources of support for local people at the moment?
- What do we want the system to look like in future? What are the opportunities for doing things differently together?
- What are the key actions, activities, areas of work over the coming months and years?

## **Our aspirations for local people**

### **Start well: The greatest place for children and young people to grow up**

- Children start school ready to learn
- Children and young people grow up in households with good levels of income
- Children and young people are happy and healthy with a good level of emotional wellbeing
- Young people leave school life-ready, and in education, employment or training

### **Live well: A place where people are proud to live, with a decent home, fulfilling jobs and healthy lives**

- No one sleeping rough on Islington streets
- People having the skills they need to access good jobs that are right for them, and to progress
- People living healthy, independent lives, with access to good quality care and support when they need it
- High quality, accessible mental health care and support for all.

## **Age well: A place where older people live healthier, happier, longer and more independent lives**

- Everyone feeling connected and having as much social contact as they want
- People being supported to stay well and live at home for as long as possible
- People who are no longer able to live independently being well supported
- High quality, accessible mental health care and support for all.

## QUESTIONS

1. How can the Fairer Together Partnership help people to address the challenges they are facing?
2. What can we do to improve services?
3. What can we do to empower communities?

## Shared principles – the Fairer Together Way

Alongside the development of a set of shared ambitions for local people in Islington, we also want to articulate a set of shared principles, values and ways of working that will enable us to deliver. The learning from Islington and elsewhere – gleaned over a year of partnership workshops, Groundwork Groups, walking tours, and co-location – is that articulating the “how” in a way that speaks to people’s internal motivations is critical to the culture change paramount for successful delivery.

Over the next few months, we want to work with staff, partners, and local people to develop a shared set of principles – the Fairer Together Way – that explains what we’re about and what we believe.

These will be principles that people can unite around, that tell our story of how we will do things differently, and that guide us along the way.

Based on what we’ve learnt from our experience of effective partnership working in Islington and elsewhere, we’ve identified three key building blocks.

## Building strengths

The Welfare State has been the foundation for good health and development for several generations, but the world has moved on and we must move with it. The growing complexity of modern life means we must proactively ensure local people – and especially the most vulnerable – are equipped to navigate change. Our offer in future must be focused on doing with rather than doing to, working proactively with local people to identify what matters to them and build the skills and capacity – goal setting, planning, problem solving, conflict resolution, self-care – needed to make sustainable change.

The key to this is, of course, a good education: excellent schools, with a relevant curriculum, including softer life skills. But it is also about strengths-based practice across all services.

There is already a lot of work in the borough that is strengths-based. How can we build on this to increase opportunities to help citizens grow, to learn new skills, and think afresh rather than managing crises after the fact?

## Building relationships

To flourish, we all depend on the quality of our relationships: the extent to which we feel valued and the way that value is expressed in the relationships we have with those around us. It is these relationships that are often most successful in helping people back into work, improving mental health and wellbeing, or supporting English language acquisition. If social isolation or exclusion is the problem – whether due to poverty, discrimination, lack of confidence, language barriers, or mobility issues – then strong and positive relationships are the tonic.

Advances in research are uncovering the ways in which a healthy relationship improves health and development. This evidence encourages people to connect – not to fix, but to listen; not to jump straight to action; to be honest and straightforward; and to be kinder and more compassionate as a society. These ideas are already manifest in the trauma-informed work in Islington schools: teachers are trained to recognise how a pupil's history might explain behaviour and engagement with learning, as well as in health and care environments. How can we build on these examples to put relationships and relational approaches at the heart of practice across the borough?

## Building community

Relationships are important not only at the one-to-one level, but also at a community level. Some of the greatest advances in the health and development of U.K. citizens have come from that is known as population-wide public health work – using small changes in the behaviour of every single citizen as the means to reduce the proportion of people experiencing major disadvantage.

Through Fairer Together, we must find new ways of working with our communities so that more people feel they belong and are empowered to engage with and build trust in those around them, including those from different social and ethnic backgrounds. This means building social capital, shared responsibility, and encouraging community-led activities, institutions and approaches as a key source of support for local (particularly vulnerable) people, in partnership with – not as an alternative to – strong public services. It also means opening up opportunities for community members to be more involved in setting priorities, helping to break down silos between different services and leading the way in designing and delivering change.

These are just some of the ideas we want to explore – in collaboration with local people and the wider workforce – to help us articulate the principles that will define the Fairer Together Way, shaping communications and workforce development to help embed a shift in culture and practice across the partnership.

## Improving practice in Islington

## Trauma informed practice

Trauma-informed practice embeds an understanding of trauma into service delivery and care – avoiding re-traumatisation and supporting choice, safety and control to build resilient communities.

The Islington Mental Health and Resilience in Schools (iMHARS) framework, used by 52% of schools in Islington as a preventative approach to mental health, embeds a culture of support into schools so schools consider the impact of how they respond to pupils' emotional needs. Pupils are taught reflection skills and have weekly circle time; staff have weekly drop in surgeries and share peer support.

## Making Every Contact Count

Making Every Contact Count helps local people to improve their health and wellbeing by improving signposting and active listening skills.

Free half-day training is provided for local people and frontline staff across the public sector, NHS and VCS.

## Strength-based approach

Strengths-based practice is the philosophy of focusing and using people's existing independent strengths and community networks in the provision of care.

This includes improvements to digital access and assistive technology, increasing personalisation of care, encouraging self-care, and embedding best practice amongst staff through training and shared practice.

## 3. Integrated locality teams

We see a shared approach to strategy and investment and the principles set out above taking us towards a new delivery model where partnership, collaboration and integration is the norm rather than the exception. One of the ways this might materialise is through new integrated, multi-disciplinary locality teams – one each for North, South and Central Islington – forming the core of a new early intervention and prevention offer.

Locality teams have the potential to bring together a range of functions and services, wrapping services around the individual or family, strengthening relationships and sharing knowledge and information so that more holistic support can be provided with fewer handoffs. This creates the space for our Fairer Together principles – building strengths, relationships and community – to come to the fore.

We see two approaches being critical here:

- Coaching – helping people to articulate goals for themselves and supporting them to achieve these

- Connecting – helping people to identify and tap into sources of support in their community – the social prescribing model.

Our plan is to roll out these new locality teams in two phases. In Phase 1, from April 2020, we are looking at virtual teams with three key elements.

### **Quick guide to the wards in each locality area**

- North: Hillrise, Junction, Tollington, Saint George's, Finsbury Park and Holloway
- Central: Highbury West, Highbury East, Mildmay, St Mary's, Canonbury, St Peter's
- South: Caledonian, Barnsbury, Clerkenwell, Bunhill

**Leadership team:** Leaders across health and social care, housing, employment, mental health and the community meet monthly to determine local priorities and enable the smooth integration of services to drive early intervention and prevention.

**Multi-agency working:** practitioners meet as multi-agency group to discuss and solve complex cases. Focus on joint care and building relationships.

**Staff development:** culture shift to embrace the whole person – warm handovers not cold referrals. Regular training and support to develop skills and build relationships

But we also want to start thinking about what this might look like in future. Beyond April, we want to look at the potential for integrated teams with new roles that enable staff to work more holistically in line with Fairer Together principles.

We will also explore the potential for creating new Fairer Together hubs through new capital investment. This will enable co-location, foster strong relationships, and create services accessible to local people –not experienced in silos.

## **4. Fairer Together community networks**

Fairer Together is not just about how we reframe our services but how we do so in partnership with our communities. This is about our role as place shapers or local leaders, bringing people together to explore local problems and collaborate to design and deliver solutions.

We want to develop place-based community networks, each with its own Network Manager, to match the same geographies as the locality teams. These networks would bring together key players in the local area, voluntary and community sector organisations, public sector leaders, and local people themselves, to share and discuss local issues and priorities and consider opportunities for working together.

Through these networks, we will encourage communities to thrive and help to develop strong relationships between the state, civil society and local people. They could be forums for:

- Community Voice – understanding how local people feel, creating a sense of belonging amongst communities, and gaining new perspectives on key issues and challenges
- Intelligence – building a shared understanding and knowledge of local assets, priorities, and key organisations within a community

- Collaboration – sharing intelligence and facilitating quality relationships, encouraging organisations and local people to work together to tackle shared challenges
- Social action – galvanising local people around key priorities and encouraging active citizenship so local people can contribute, volunteer and give to their community.

## Case study from the Octopus 'Stay well, live well' programme

### **JT's story**

Octopus, a registered charity, is a network of community centres that collaborate to improve the employment potential of those facing barriers into sustainable employment, engage communities in identifying and improving places and spaces for community use, bring diverse communities together to collectively improve their health and wellbeing, and support people to take a collective approach to neighbourhood improvement.

Octopus recently delivered 'Stay Well, Live Well' – a community-led model for reaching out to, and engaging with, marginalised communities experiencing health inequalities.

The story of 'JT' is an illustration of the programme's success. JT had lost her husband and was very lonely. A leaflet about the activities at the Old Fire Station was delivered to her flat and she decided to come along. When she first stepped into the centre she had no expectation; she just wanted to get out and meet new people.

JT had a problem hip, due to which she was in a lot of pain and at times immobile. She goes for rehabilitation once a week where she does painting, mosaic work and uses the gym including getting a massage. She wanted to do more exercise so she tried the pilates but could not continue due to persistent hip problems. So she tried other activities available at the centre.

### JT's Feedback

JT is now a regular at the Old Fire station and also attends other neighbouring centres. She is glad she took the first step and now has good friends in the community.

"At first I joined in art and craft activities on Mondays with Anthony. We did pottery and papier-mâché and art with fabrics. Because I was coming here I heard about the sewing class and decided to try that. I now attend regularly. I also started attending other centres like Caxton House and the Girdlestone centre."

"My friend encouraged me to try exercise again with the Egyptian Dance. It is not too hard, It is the only other exercise I have found that I can do apart from rehabilitation and it is a lot of fun and I now attend every week unless I am in too much pain and cannot move."

Whilst we recognise and support the independence of Islington's voluntary and community organisations, there is growing evidence to support greater collaboration between the state and civil society, and there are a number of ways the Fairer Together Partnership could strategically collaborate with the sector to achieve shared aims and promote a more preventative approach to working. This could involve:

- Funding and investment – collaboration to establish joint investment, commissioning and funding opportunities where appropriate, with social value and community benefit embedded into our approach
- Places and spaces - provide and maintain access to high quality parks, community facilities, affordable premises and other infrastructure which strengthens community networks
- Training and capacity building – work with community partners to deliver high quality capacity building opportunities and promote collective learning and knowledge sharing across the borough
- Digital and communications – explore how digital opportunities can be used to encourage collaboration, share knowledge and learning, and promote community activities across networks (for example, a digital community book).

### **Example: Wigan Community Book**

The Wigan Community Book is a free online directory combining a register for community organisations, a calendar for local community events, and a platform to promote volunteering opportunities.

This helps residents access and connect with local services, activities and events in their community – 24 hours a day, 7 days a week.

## QUESTIONS

1. What values, principles and ways of working should we put at the heart of Fairer Together?
2. How can we put these values, principles and ways of working into action?
3. What are the top three things you would like to see as a result of the Fairer Together Partnership – or children, adults and older people?
4. Are there any examples of good practice that you can share with us?

## What difference could this make to local people?

### Start well - Saira's story

- Saira has two small children – twins Alia and Sonny aged two – and is in an abusive relationship
- She suffers from depression and poor self-belief, and has a long history of involvement with social services of whom she has a deep distrust.

### How could Fairer Together help Saira?

- Saira's health visitor, Hinnah, notices Saira has been missing appointments for the twins.
- Hinnah visits Saira and encourages her to try the local children's centre
- Saira agrees to meet Hinnah there the following week and is introduced to Meg, a Family Coach. Saira doesn't mention her relationship but says she would like some help getting into work

- Meg arranges employment support from iWork, matching her up with Mary, an Employment Support practitioner. Mary meets regularly with Saira, and they build a positive relationship
- As Saira gets more comfortable with the Children's Centre, she enrolls the children in the nursery. This frees her up to take up a part time apprenticeship at a local primary school
- Eventually, after a year, Saira discloses to Meg about the abuse in her relationship. Meg liaises with Solace Women's Aid to deliver direct support to Saira, e.g. through using the healthy relationship wheel. Saira decides to end her relationship with her partner
- Meanwhile Alia and Sonny are settling well at nursery. The nursery worker notices that Sonny has a potential speech delay and she encourages Saira to seek support from the Speech and Language adviser. Saira discusses this with the Family Coach and agrees to engage with the service.

## Live Well – Joyce and Anton's story

- Joyce and Anton live together and care for each other in a council flat
- Joyce was in poor health – hospitalised twice
- Anton has learning disabilities and is unemployed
- Recurring damp problems in flat have led to a deterioration in their health.

## How could Fairer Together help Joyce and Anton?

- When Joyce contacts Housing to organise a repair, the repairs officer notices that Joyce is in poor health and is struggling to care for Anton. He gets in touch with his locality team and a Family Coach – Vicky – is assigned to the family. Through information sharing with the GP, Vicky learns that Joyce has recently been hospitalised twice and is at risk of readmission, putting Anton's care in jeopardy.
- Vicky visits Joyce and Anton and focuses on getting to know them, understanding where they are at and their goals for the future
- Vicky liaises with Joyce, the GP, and Public Health to develop a Health and Wellbeing Plan that involves joining a local walking group and a Stop Smoking club
- She also supports Anton to think about his options and encourages him to apply for a health and social care course at the local community college. Anton really enjoys the course. With the help of iWork – who visited college to promote their services – he successfully applies for a job as an apprentice in Adult Social Care.

## Age well - Bert's story

Bert is 78 years old. He smokes and has heart failure

- He has financial problems and is socially isolated with no immediate family
- He is a "frequent flyer" at his GP surgery and often complains to the Council about young people on his estate.

## How could Fairer Together help Bert?

- Through his locality team, Bert is matched with a Personal Coach – Sam. Sam agrees to pop in to see Bert once or twice a week

- Bert reveals he is interested in gardening and so Sam looks on the new Islington Community Book to find out if there are any local gardening groups in the area.
- Bert joins the group and meets some new friends, Edith and Susan Edith recently gave up smoking with the help of a hypnotherapy app – which was recommended by a local stop smoking group –and encourages Bert to give it a try
- Having built up a relationship over a number of months, Bert confides in Sam about his financial problems and Sam books him an appointment with iMax. Bert is able to get help with his benefits and establish a repayment plan for his loan
- Bert stays in touch with Sam, Edith and Susan for many years.

## Part 3

### What happens next?

We want to start a conversation across the borough about what a Fairer Together Partnership might look like and how it could help to make Islington fairer for local people.

Launching in February 2020, we will kick-start a three month series of events, workshops and podcasts to engage attendees in lively and honest discussion about Fairer Together and its potential for driving change in Islington.

Our conversations will help us to co-design a blueprint for our borough partnership which we will launch in the summer. This will include:

1. Our shared aspirations for local people
2. Our shared principles – the Fairer Together Way
3. Priority outcomes – what we are aiming to achieve, and by when
4. Our shared Target Operating Model – how we will use and organise resources to ensure delivery, including through integrated locality teams and linked community networks
5. Detailed delivery plans – what needs to be done, by when, and by whom
6. Governance – how we will drive delivery across system
7. Learning and evaluation – how we will continue to learn, adapt and improve to ensure we deliver our goals over the long term.

Our events will start in the south in February and continue in the north in March and central in April. We plan to hold the following in each area:

#### **1: Introduction to Fairer Together Event**

Internal and external speakers

Workshop session to invite contributions

#### **2: Fairer Together Community Network Event**

For local voluntary and community sector groups

Workshop session to invite contributions

### **3: Fairer Together Focus Groups**

For local people including experts by experience  
Workshop session to invite contributions

**4: Podcasts** to share ideas with a wider audience

## Our ask of you

We want to hear from you! Please do get involved. Share your thoughts about the Fairer Together Partnership, our ambitions for local people, and shared priorities, principles and ways of working. Tell us about what you are already doing and how you think we can work together in future to deliver on our shared ambitions.

Email: [fairertogether@islington.gov.uk](mailto:fairertogether@islington.gov.uk)

Web: [www.islingtonfairertogether.org](http://www.islingtonfairertogether.org)

## Fairer Together Borough Partnership members

Islington Council, Islington Police, Healthwatch Islington, Manor Gardens, Peabody Estates, Islington Fire Brigade, Islington GP Federation, Whittington Health, Camden and Islington Foundation Trust, Islington CCG, University College London Hospital, Thornhill Primary School