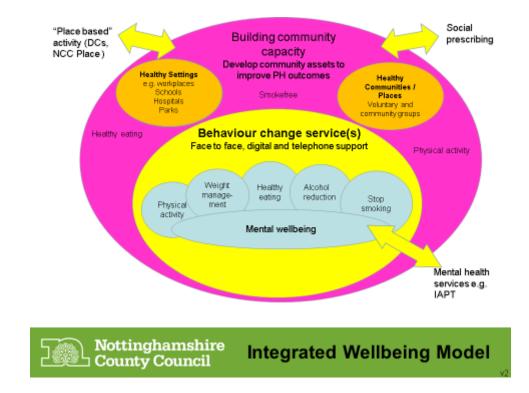
Appendix 5 – proposed model for an Integrated Wellbeing Service

The proposed Integrated Wellbeing Service (IWS) Model will be 'community' focused. What we mean by this is a service which seeks to work with groups within their local communities. The IWS model will have two key elements;

- Building community assets linking with 'Place based' developments, CCG lead social prescribing programmes and mental health services
- Behaviour change support, face to face, digital and telephone support.



The Integrated Wellbeing model brings services together and provides information, assessment and support within one service (virtually or in person). The service will deliver specialist behaviour change support and do this in the context of all the wider services that are in the local community. The service will be linked directly to community services which have a role in improving wellbeing. This link will develop through the term of the contract and healthy lifestyle information forming "healthy communities" and "healthy settings".

The model will refocus the behaviour change services and encourage signposting into community support services. The residents will have access to a wider variety of opportunities to gain information and support at a time that works for them. Mental wellbeing will be a key part of the service and underpin all the behaviour change elements.

We expect the new service model to improve the offer and experience of residents, by developing community based opportunities that are local and sustainable. The table below highlights how the new service will differ from what is currently provided and how the users experience will improve.

Current approach

Four organisations providing information and support.

Single services for weight management, increasing physical activity and healthy eating.

Alcohol identification and brief advice is delivered alongside the substance misuse services.

Workplace wellbeing support, Making Every Contact Count (MECC) and the tobacco declaration is provided by the NCC Public Health team.

Services are delivered in communities, within community venues.

People with multiple risk factors are cross referred and need to go to multiple services to gain the information and support, sharing their story several times.

There is no service focusing on supporting people with their emotional wellbeing. Some services do provide it, but it is measured in a variety of ways, making the additional value difficult to ascertain.

New approach

A single Integrated Wellbeing Service (IWS) will focus on behaviour change in relation to stop smoking, physical inactivity, obesity and poor diet, low level alcohol use, and mental wellbeing. This will follow a community asset based approach, not just working 'in' communities but working 'with' communities.

Behaviour change service will link with the wider offers in the community and provide additional resource to develop 'healthy communities' and 'healthy settings'.

Individuals will be required to share their story once and then supported to make the changes, one after the other or simultaneously, as preferred by the individual.

Improving mental wellbeing will be at the heart of all the behaviour change activity.

The virtual support will include a forward thinking digital offer that will be responsive to the changes in the community and technological advances, to ensure health and wellbeing information and support is available out of office hours.

The face to face support offer will be targeted to those requiring specialist support. This will be underpinned by the digital offer to improve monitoring and evaluation.