



# Isle of Wight Council

<b>Committee:</b>	Health and Wellbeing Board
<b>Date:</b>	25 April 2024
<b>Title:</b>	Anchor Institutions – working together to improve community health, wealth and wellbeing.
<b>Report From:</b>	Simon Bryant, Director of Public Health Fiona Maxwell, Acting Consultant in Public Health Hilary Todd, Associate Director Occupational Health and Wellbeing, Solent NHS Trust and Integrated Care System Programme Manager; Max Nicol, Community Wealth and Special Projects Officer, Isle of Wight Council

## Summary

1. A presentation and discussion on Anchor Institutions defining what they are and how the Island Anchor Institutions can promote improvements in the health, wealth and wellbeing communities and how we can work together to improve health and wellbeing for Island residents.

## Anchor Institutions

2. Anchor institutions are large organisations that are unlikely to relocate and have a significant stake in their local area. They have sizeable assets that can be used to support their local community's health and wellbeing and tackle health inequalities, for example, through procurement, training, employment, professional development, and buildings and land use.'
3. General areas and opportunities to use organizational/institutional resource to the benefit of the community can exist in the key areas of:
  - a. employment
  - b. procurement and commissioning for social value
  - c. use of capital and estates
  - d. environmental sustainability
4. Principles underpinning the application and development of anchor institutions thinking may be characterised as: doing what is already being done, in a way which brings greater community benefit. In other words, large institutions (generally) must employ people and buy goods and services and use buildings, but they can do so in a more targeted and locally-focused way, which adds benefit to local communities in terms of population health, addressing inequalities, strengthening the local economy and promoting sustainability and growth

5. The link between a community's economic status and the health and wellbeing of its population is central to many initiatives, particularly in the area of employment and economy. The relationship between work and health is complex and bi-directional – poor health affects employability and employment prospects but being in good employment provides the means by which individuals, families and communities can improve their physical and mental health.
6. People experiencing poor physical and/or mental health face additional barriers to employment including issues of accessibility, flexibility or working, necessary adjustments and stigma. In addition to asking how we as a system can support people to improve their health and potentially access productive employment, we also need to consider how we as employers can promote and support the entry, retention, or return to work of people experiencing poor health. Such initiatives require effective multi-agency working with shared objectives such that the skills and expertise of different agencies and organisations can operate in concert. For individual institutions, this can include:
  - Actively supporting the health and wellbeing of their own workforce, preventing and mitigating work-related ill-health, enabling people to remain in work and providing opportunities for development.
  - Actively supporting routes into employment within the organisation by considering recruitment, apprenticeships, outreach, etc, to those communities most likely to be impacted by inequalities in economic opportunity and adverse health outcomes.
7. Anchor institutions acting in concert across a system may be able to maximise these potential benefits by creating opportunities for:
  - Linking up institutions and matching need with resource across the system, creating opportunities for addressing inequalities together
  - Shared learning and experience
  - Shared intelligence
  - Reduced duplication
  - Shared principles for local frameworks to develop (e.g., staff wellbeing)

## **Decisions, recommendations and any options**

8. The Board is asked to:
  - a. To note this report and its accompanying presentation.
  - b. To consider links between the anchor organisations that are active on the Island and how these could be extended or strengthened to bring additional focus on health and wellbeing.

## Relevant information

Relevant information on anchor institutions (background, theory and examples):

- Health Foundation 2019 report '[Building Healthier Communities: the role of the NHS as an anchor institution](#)'
- The Kings Fund '[Anchor Institutions and how they can affect people's health](#)'
- NHS Providers '[Being an Anchor Institution: Partnership approaches to improving population health](#)'
- '[How Strong is Your Anchor? A measurement tool for health anchors](#)' UCLPartners
- [Health Anchors Learning Network](#)
- '[Harnessing the power of anchor institutions – a progressive framework](#)' Joseph Rowntree Foundation/Leeds City Council
- '[Your Anchor Network Journey – a practical guide to getting started](#)' Health Foundation/HALN

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