

## **Greenwich Hub for Influence, Voice, and Engagement Theory of Change**

The Greenwich Hub for Influence, Voice, and Engagement (G-HIVE) aims to support the Statutory and Voluntary Sectors, and local communities, in the Royal Borough of Greenwich to redress the deep-rooted inequalities in the borough. This will be delivered by:

- Creating a powerful infrastructure and set of activities that better ensure representation of local communities' needs and aspirations
- Building a culture of system change, with a focus on developing strong, professional, and beneficial relationships with local communities, groups, and organisations based on trust
- Improving consultation and co-design processes, which include the voices of seldom-heard communities, to ensure continued progression of community development, engagement, and participation

Inputs	The resources which are used to deliver the activities within G-HIVE		
Outputs	The products which are produced through the activities within G-HIVE		
Outcomes	The achievements and changes made because of the outputs within G-HIVE		
Impacts	The longer-term achievements and changes made because of the outputs within G-HIVE		
Indicators	The measurements for progress made towards the impacts of G-HIVE		

## Definitions



Inputs	Outputs	Outcomes	Impacts	Indicators
Activity 1				
Established resources to create a digital infrastructure which contains information on engagement and representation across the Health and Social Care System	A database and website which will support the collection and collation of information gathered, insights gained, and changes made so as to inform current and future consultation, co-creation, co- design, and co-production processes	High quality and up-to-date information available to the Statutory and Voluntary Sectors, and local communities, to use in the design, development, and delivery of their projects, programmes, services, and activities Engagement is enabled in ways which facilitates the development of projects, programmes, services, and activities which meets the needs and aspirations of local communities, including those which are seldom- heard	Health and Social Care System able to deliver projects, programmes, services, and activities which are data-led and insight-driven, and involve local communities, including those which are seldom-heard	New and current projects, programmes, services, and activities designed (or redesigned) based on the current needs and aspirations of local communities, including those which are seldom- heard



Inputs	Outputs	Outcomes	Impacts	Indicators
Activity 2				
Develop tools around best practice on co-creation, co- design, and co-production activities, practices, and processes through insights shared from the Statutory and Voluntary Sectors, including Community Leaders, and the Private Sector when relevant	Creative and accessible approaches to co-creation, co-design, and co- production activities, practices, and processes developed and implemented, which take a needs-led approach to engagement Support and advice provided for the Health and Social Care System with regards to their capacity building in relation to representation and engagement of local communities' needs and aspirations	Health and Social Care System influenced to change with evidence and specific information, advice, and guidance for enabling recommended change, including the implementation of feedback mechanisms Statutory, Voluntary, and Private Sectors supported to change and improve their consultation and engagement activities, with a flexible approach taken to enable adjustments during said activities based on evidence and need	Health and Social Care System able to deliver projects, programmes, services, and activities which are data-led and insight- driven, and involve seldom- heard communities Longer-term sustainability of data and information gathering processes which bypass changing funding streams and opportunities Statutory, Voluntary, and Private Sectors co-learning from each other in relation to co-creation, co-design, and co-production activities, practices, and processes, including unintended outcomes, which builds trust in local communities	Feedback from the Health and Social Care System before and after requested support occurs and information, advice, and guidance provided



Inputs	Outputs	Outcomes	Impacts	Indicators
Activity 3				
Audit current learning and development needs within the Health and Social Care System Coordinate workshops, trainings, networking events with the Statutory and Voluntary Sectors, and local communities	Networking opportunities for the Health and Social Care System to build and develop strong, professional, and beneficial relationships and networks so that key stakeholders understand each other and their roles within it Workshops and trainings hosted and curated on how the Health and Social Care System is structured and operated to facilitate and support the Voluntary Sector to navigate it Workshops and trainings hosted and curated to help the Health and Social Care System understand, improve, and facilitate engagement and representation of local communities' needs and aspirations	Better, improved, and more effective engagement and inclusion of the Voluntary Sector, and local communities, within the Health and Social Care System, including organisations who represent seldom-heard communities Increased knowledge of the Health and Social Care System and improved abilities to influence and engage with it Creation of knowledge, skills, and abilities in relation to co-creation, co- design, and co-production, to find new ways of delivering projects, programmes, services, and activities, including providing improved points of access	Space provided for the Statutory and Voluntary Sectors, and local communities, including those which are seldom- heard, to learn from each other about what does and does not work based on previous consultation, co- creation, co-design, and co- production activiites, practices, processes Preventative projects, programmes, services, and activities implemented within primary care which reflect local communities' needs and aspirations	Number of new and current preventative projects, programmes, services, and activities designed, redesigned, or adapted based on feedback from the Voluntary Sector, including local communities



Inputs	Outputs	Outcomes	Impacts	Indicators
Activity 4				
Support the Voluntary Sector, and local communities, to navigate the Health and Social Care System better through a range of both physical and digital resources	Connect Voluntary Sector organisations, and local communities, into specific individuals and departments within the Statutory Sector so that the needs and aspirations of a broader range of local communities are listened to and acted upon	Better and more efficient engagement and involvement of the Voluntary Sector, and local communities, in projects, programmes, services, and activities delivered by the Statutory Sector Improved Voluntary Sector, and local communities', knowledge of the Health and Social Care System, including their ability to influence it	Improvement of trust and confidence of local communities in the Health and Social Care System, including seldom-heard communities Increased co-creation, co- design, and co-production within projects, programmes, services, and activities between the Statutory and Voluntary Sectors	Feedback from the Voluntary Sector, and local communities before and after requested support occurs Number of Voluntary Sector organisations, including local communities, supported to successfully navigate the Health and Social Care System



Inputs	Outputs	Outcomes	Impacts	Indicators
Activity 5				
Organise activities which bring the Health and Social Care System together to co- create, co-design, and co- produce G-HIVE	Annual Voice and Influence Conference hosted by G-HIVE which is based on the commitments, principles, and standards of the Voice and Influence Charter to evaluate the impact of G-HIVE within the Health and Social Care System Future actions and commitments co-defined and agreed publicly between the Statutory and Voluntary Sectors, and local communities, in order to continually progress community development, engagement, and participation within the Health and Social Care System	G-HIVE is recognised as a key stakeholder with regards to voice, influence, representation, and engagement activities, practices, and processes G-HIVE activities reflect the needs and aspirations of the Health and Social Care System around representation and engagement	G-HIVE designs, develops, and delivers activities which supports the Health and Social Care System so that it can deliver voice, influence, representation, and engagement activities, practices, and processes effectively Improvement of trust and confidence of local communities in the Health and Social Care System, including seldom-heard communities	Content of the Voice and Influence Conference inclusive, co-designed, and co-produced in a way which represents the breadth and diversity of local communities Attendance and representation at the Voice and Influence Conference from a range of Statutory and Voluntary Sector stakeholders, and local communities G-HIVE changed and adjusted in line with the needs and aspirations of the Health and Social Care System Number of signatories to the Royal Borough of Greenwich Voice and Influence Charter