

Brief History of Unique Improvements

The Unique Improvements team can trace its origins to the NHS Modernisation Agency which supported the NHS in the task of modernising services and improving experiences and outcomes for patients. From 2000, Linda Henry (Director of Unique Improvements) was the Executive Director of Inequalities and Engagement. Mike Hope, Adrian Smith, Julie Morgan (Senior Consultants in Unique Improvements) were all Assistant Directors these people were members of the team who developed the original model for the Healthy Communities Collaborative. This model successfully applied quality improvement approaches to community development and health improvement across a range of health topics. Collectively we worked with over 21 sites in England and Scotland to spread and sustain community led improvement.

Linda Henry left the organisation in 2006 with members of her team to establish Unique Improvements, seeking to develop the model in different ways not possible under the governance arrangements. Unique Improvements operates as a social enterprise. No dividends are paid; all profits are reinvested and a wealth of pro bono work carried out with communities and organisations to support its value driven approach and ethos. Examples include supporting community mobilisation in Sure Starts in Gateshead and working with communities in Blackburn with Darwen to support safeguarding in adults. Since 2006, Unique Improvements has developed its product base to include social marketing, needs assessment and bespoke training and support packages for organisations and communities. With specific reference to your project, we have developed and progressed the original Healthy Communities model into an award winning approach that can respond flexibly and successfully to local needs and which now uses community led social marketing methodology.

Our head office has remained in Liverpool but as our staff team has grown, we have moved to larger premises. We maintain the policy of co-locating with local communities where resource allows and examples include the setting up of a local office in North East Lincolnshire to support their Early Presentation of Cancer symptoms Collaborative Programme.

As mentioned above, our core staff team has grown and we also manage a network of over 30 Associates. As a business model this allows us to respond flexibly and rapidly to client needs. We are able to augment our own skills with a range of experience covering dimensions as diverse as strategy, commissioning, research, economic wellbeing, clinical specialities, organisational development and business support.