Public Document Pack



Health and Wellbeing Board

Date: Thursday, 7 December 2023

Time: 2.00 p.m.

Venue: Committee Room 1 - Birkenhead Town Hall

Contact Officer: Mike Jones Tel: 0151 691 8363

e-mail: michaeljones1@wirral.gov.uk **Website:** http://www.wirral.gov.uk

Please note that public seating is limited therefore members of the public are encouraged to arrive in good time.

Wirral Council is fully committed to equalities and our obligations under The Equality Act 2010 and Public Sector Equality Duty. If you have any adjustments that would help you attend or participate at this meeting, please let us know as soon as possible and we would be happy to facilitate where possible. Please contact committeeservices@wirral.gov.uk

This meeting will be webcast at https://wirral.public-i.tv/core/portal/home

AGENDA

- 1. WELCOME AND INTRODUCTION
- 2. APOLOGIES FOR ABSENCE
- 3. DECLARATIONS OF INTERESTS

Members of the Board are asked whether they have any personal or prejudicial interests in connection with any application on the agenda and, if so, to declare them and state the nature of the interest.

4. MINUTES (Pages 1 - 4)

To approve the accuracy of the minutes of the meeting held on 21 September 2023.

5. PUBLIC AND MEMBER QUESTIONS

Public Questions

Notice of question to be given in writing or by email by 12 noon, Monday 4 December 2023 to the Council's Monitoring Officer via this link: Public Question Form and to be dealt with in accordance with Standing Order 10.

For more information on how your personal information will be used, please see this link: <u>Document Data Protection Protocol for Public</u> Speakers at Committees | Wirral Council

Please telephone the Committee Services Officer if you have not received an acknowledgement of your question by the deadline for submission.

Statements and Petitions

Statements

Notice of representations to be given in writing or by email by 12 noon, Monday 4 December 2023 to the Council's Monitoring Officer (committeeservices@wirral.gov.uk) and to be dealt with in accordance with Standing Order 11.

Please telephone the Committee Services Officer if you have not received an acknowledgement of your question/statement by the deadline for submission.

Petitions

Petitions may be presented to the Board if provided to Democratic and Member Services no later than 10 working days before the meeting, at the discretion of the Chair. The person presenting the petition will be allowed to address the meeting briefly (not exceeding three minute) to outline the aims of the petition. The Chair will refer the matter to another appropriate body of the Council within whose terms of reference it falls without discussion, unless a relevant item appears elsewhere on the Agenda. If a petition contains more than 5,000 signatures, it will be debated at a subsequent meeting of Council for up to 15 minutes, at the discretion of the Chair. Please give notice of petitions to committeeservices@wirral.gov.uk in advance of the meeting.

Questions by Members

Questions by Members to be dealt with in accordance with Standing Orders 12.3 to 12.8.

6. HEALTH AND WELLBEING STRATEGY UPDATE AND THEMATIC REPORT ON IMPLEMENTATION OF PRIORITY 1 (Pages 5 - 22)

The Appendix may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact janeharvey2@wirral.gov.uk if you would like this document in an accessible format.

7. UPDATE RE NEIGHBOURHOOD MODEL (Pages 23 - 34)

The Appendices to this report may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact nesta.hawker@nhs.net if you would like this document in an accessible format.

- 8. COST OF LIVING UPDATE (Pages 35 52)
- 9. CONTAIN OUTBREAK MANAGEMENT FUND CLOSURE REPORT (Pages 53 66)
- 10. DELIVERY OF WIRRAL HEALTH AND CARE PLAN (Pages 67 80)

The PDF file below may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact <u>julian.eyre@nhs.net</u> if you would like this document in an accessible format.

11. AGEING POPULATION REPORT (Pages 81 - 88)

The Appendix may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact beverleymurray@wirral.gov.uk if you would like this document in an accessible format.

- 12. BETTER CARE FUND (BCF) QUARTER 2 RETURN (Pages 89 94)
- 13. COMMUNITY, VOLUNTARY AND FAITH SECTOR REFERENCE GROUP UPDATE (Pages 95 122)
- 14. WORK PROGRAMME (Pages 123 128)

Terms of Reference

The terms of reference for this committee can be found at the end of this agenda.



Public Document Pack Agenda Item 4

HEALTH AND WELLBEING BOARD

Thursday, 21 September 2023

PRESENT:

Cllr Jean Robison Chair

Mark Armstrong Magenta Living

Simon Banks Director of Place (Wirral), NHS Cheshire and

Merseyside

Dave Bradburn Director of Public Health Wirral Council

Cllr Phil Gilchrist Wirral Council
Cllr Jeff Green Wirral Council

Graham Hodkinson Director of Adults and Care, Wirral Council

Adrian Jones Department for Work and Pensions

Cllr Kieran Murphy Wirral Council
Cllr Sue Powell-Wilde Wirral Council
Kirsteen Sheppard Healthwatch Wirral

Matthew Swanborough Wirral University Teaching Hospital NHS Foundation

Trust

Claire Wedge Wirral Community Health and Care NHS Foundation

Trust

12 WELCOME AND INTRODUCTION

The Chair welcomed everyone and read the webcast notice.

13 APOLOGIES FOR ABSENCE

Apologies for absence were received from:

Abel Adegoke Primary Care Council

Julie Grey Clatterbridge Cancer Centre
Dave Hammond Wirral Community Health and Care

Louise Healey Department for Work and Pensions

Sir David Henshaw Wirral University Teaching Hospital

Andy Lomas Magenta Living
Matthew Moscrop Merseyside Police
Councillor Amanda Onwuemene Wirral Council

Simone White Director of Children Services, Wirral Council.

14 **DECLARATIONS OF INTERESTS**

There were no declarations of interests.

15 MINUTES

Resolved:

That the minutes of the meeting of the Health and Wellbeing Board on 20 July 2023 be agreed as a correct record.

16 PUBLIC AND MEMBER QUESTIONS

No questions, statements or petitions were received.

17 BETTER CARE FUND (BCF) PLAN 2023/25

The Head of Integrated Services presented the report of the Director of Care and Health which provided a summary of the proposed content of the Better Care Fund (BCF) Plan for 2023/25. It described how the plan would achieve the Government's priorities for 2023/25 and support the ambitions of the Healthy Wirral Plan. It set out the detail of the budget areas to be pooled in 2023/24 as part of the mandatory Section 75 agreement with the Integrated Care Board.

Members noted that there would be engagement with the Board over the developing plans and they discussed aspects of the focus on neighbourhoods, such as leadership, boundaries, funding and links with other Plans.

Resolved: That

- 1. the content of the BCF Plan for 2023/25 (the BCF 2023/25 Plan was approved by the NHSE in August) be approved and validated.
- 2. the Board be assured that the plan will achieve the government's priorities for 2023/25 and support the ambitions of the Healthy Wirral Plan
- 3. the detail of the budget areas to be pooled in 2023/24 as part of the mandatory Section 75 agreement with the Integrated Care Board be noted.

18 WIRRAL PLACE BASED PARTNERSHIP BOARD MINUTES

The Director of Place (Wirral) for NHS Cheshire and Merseyside introduced his report which provided the latest ratified minutes of the Wirral Place Based Partnership Board.

Members queried the detail on some items and discussed the value of approving minutes. Officers offered to consider focusing on programme delivery progress.

Resolved:

That the minutes of the Wirral Place Based Partnership Board held on 22nd June 2023 be noted and the approved minutes of the meeting held on 27th July 2023 be requested when available.

19 **HEALTHWATCH WIRRAL UPDATE SEPT 2023**

The Business Development & Volunteer Manager of Healthwatch Wirral presented this report which shared the emerging trends and themes gathered from public views and personal experiences relating to health and care. An overview of the background to Healthwatch Wirral was also given.

Members noted that key concerns of users were communication with professionals, access to dental care and appointments.

Resolved:

That the report be noted.

20 CHESHIRE AND MERSEYSIDE JOINT FORWARD PLAN 2023-28

The Associate Director of Strategy and Collaboration at Cheshire and Merseyside Integrated Care Board introduced this report which provided an update on the contents of the Cheshire and Merseyside Joint Forward Plan (2023-28) including priorities for 2023/24. This report also updated the Board in relation to the proposed approach to updating the Cheshire and Merseyside Health and Care Partnership Strategy and republishing the Joint Forward Plan by March 2024. It was noted that the Plan was the responsibility of the NHS but had to take into account other plans such as the Health and Wellbeing Strategy and the Health Care Partnership Strategy as well as national NHS requirements.

Members queried progress on various initiatives and programmes and the extent of individual responsibility for health.

Resolved: That

- the Cheshire and Merseyside Joint Forward Plan (2023-28) be noted and it be confirmed that the Joint Forward Plan includes the relevant local priorities contained within the Wirral Health and Wellbeing Strategy.
- 2. the following proposals be noted: Cheshire and Merseyside Interim Draft Health and Care Partnership Strategy to be updated to align with the All Together Fairer recommendations and plans even more closely Cheshire and Merseyside Joint Forward Plan to be produced as a system delivery plan focussing on the updated contents of the Health and Care Partnership Strategy with the additional mandated NHS content produced as an appendix to this Joint Forward Plan.

21 MEMBERSHIP OF HEALTH AND WELLBEING BOARD

The Consultant Lawyer presented the report of the Director of Law and Governance which provided the reviewed the formal membership as contained within the Wirral Council Constitution and propose any amendments to Wirral Council's Constitution and Standards Committee and then to full Council. Changes were recommended to reflect changes in job titles, the replacement of the Clinical Care Groups with the Integrated Care Board and the disbanding of Local Are teams.

The Chair suggested that a workshop be held to consider whether the correct people and organisations were included in the membership list.

It was noted that on lines 12,13 and 14 it is the Chief Executives of those Trusts who were members and other persons would be added to the Deputies column.

Resolved: That, subject to lines 12,13 and 14 it is the Chief Executives of those Trusts who were members and other persons would be added to the Deputies column, Constitution and Standards Committee be recommended to adopt the revised membership list as provided in Appendix 2 to the report.

22 **WORK PROGRAMME**

The Consultant Lawyer presented the report of the Director of Law and Governance which gave the proposed work programme for the following Municipal Year.

Resolved: That subject to workshops being added the proposed Health and Wellbeing Board work programme for the remainder of the 2023/24 municipal year be noted.



HEALTH AND WELLBEING BOARD 7 DECEMBER 2023

REPORT TITLE:	HEALTH AND WELLBEING STRATEGY	
	IMPLEMENTATION UPDATE	
REPORT OF:	DIRECTOR OF PUBLIC HEALTH	

REPORT SUMMARY

As requested by Members at the Health and Wellbeing Board in July 2023, this report sets the Health & Wellbeing Strategy within the wider system context of related plans and strategies that are connected to the wellbeing of residents. The report also provides an overview of the implementation plan for the 'game changers' within each of the four priority areas and clarifies the routes by which board members will be kept informed of progress and involved in influencing the strategic direction.

The priorities of the Health and Wellbeing Strategy are aligned to the ambitions of the Wirral Plan.

This matter affects all wards within the borough. It is not a key decision.

RECOMMENDATION/S

The Health and Wellbeing Board is asked to:

- 1. Confirm that this report represents an appropriate overview of the broader system context for the Health & Wellbeing Strategy.
- 2. Acknowledge the proposed implementation plans for the priority areas.
- 3. Agree the proposals for future reporting, engagement, and involvement of the Board.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 At Health and Wellbeing Board in July 2023, Members requested clarity regarding the place of the Health & Wellbeing Strategy within the array of plans and strategies relating to Health & Wellbeing across the Wirral system. Members also requested an implementation plan across the four priority areas of the strategy, along with an assessment of the impact of the strategy to date This paper is an attempt to provide that context, with the caution that the work taking place across the local system is complex and varied, which means that any representation of the overall picture will be subject to amendments and additions as we move forward.

2.0 OTHER OPTIONS CONSIDERED

2.1 National guidance sets out the requirement for Health and Wellbeing Boards to produce a joint Health and Wellbeing Strategy. No other options have been considered.

3.0 BACKGROUND INFORMATION

- 3.1 The Health and Wellbeing Strategy is dynamic and evolving and as such, it should be acknowledged that there are significant elements of implementation that do not yet have detailed action plans and performance frameworks. As a system partnership, we have agreed to take a different approach to tackling the root causes of poor health and wellbeing, in an attempt to make a meaningful impact with a smaller group of core issues. The approach to these core issues will flex and respond to changes in local circumstances as appropriate.
- 3.2 At the Local Government Association (LGA) board development session on 12th September 2023, the leadership model around Wirral's Health & Wellbeing Strategy was highlighted by LGA colleagues as being an example of good practice.

3.3 Setting the context

It has been acknowledged that the Health & Wellbeing Strategy cannot and should not encompass every single aspect of activity or workstreams that relate to Health and Social Care. This strategy is about focussing on areas of joint system effort to achieve impact within workstreams that have the largest potential to reduce inequalities and/or population health outcomes. It is therefore crucial that we achieve the right balance between acknowledging that a wide range of related activity takes place beyond the scope of the Health & Wellbeing Board and ensuring that the right connections are made between the complex picture of activity across the Wirral system. This relationship is described in Attachment A, where the involvement and engagement of the Board and the level of reporting level to the Board becomes greater as the circles get smaller.

3.4 Attachment B sets the Health and Wellbeing Strategy within the context of the 'related system activity' that is currently taking place across Wirral. It is important to note that whilst most existing strategies and plans align most obviously to one particular theme, there are many crossovers and multiple areas of work that are

linked or require linking as the strategy implementation progresses. The additional outcomes that we can maximise through the linkages across priority areas is currently being explored through the agreed overarching partnership focus of Employment (which is the subject of the first focused priority area session for the Board).

3.5 Attachment C highlights the wide range of intelligence and insight that has not only informed the choice of priority areas but will serve as routes and sources of evidence of impact as the strategy continues to be implemented.

3.6 Related System Activity

Attachments D to H provide a summary of the key programmes that are currently operating within Wirral that are already progressing and impacting on the priority areas of the Health and Wellbeing Strategy. These are accompanied with an acknowledgement of the structures/committees that the various workstreams currently report through, along with a reminder of linked strategies. Whilst a great deal more detail exists for each of the workstreams of related work, an attempt has been made for the purpose of this paper, to highlight some key examples of impact for local residents. Board members can be provided with links to the various programmes if greater detail is required.

3.7 Implementation plans for the 'game changers'

Attachments I to L represent an overview of the proposed implementation plans against each of the 'game-changers' within the four priority areas. A series of short-to-medium-term actions have been identified by the Joint Leads (working with colleagues, residents and local communities and reinforced by evidence and local intelligence/insight wherever possible). As stated in 3.1 of this report, it should be acknowledged that this strategy is dynamic and evolving and as such, some of the proposed actions require further work across the system in order to agree named leads, timelines for delivery etc. It is expected that any actions that have been identified as 'short-to-medium-term' will be achievable within the lifespan of the current Health and Wellbeing Strategy (i.e. up until 2027), but that actions identified as 'longer-term' are likely to run through to a strategy refresh/rewrite for 2027 and beyond.

3.8 Accompanying the proposed actions is a short list of indicators (both quantitative and qualitative) that will allow the board to judge whether the set of actions are having any real impact on the health of our residents and on the persistent inequalities within Wirral. In terms of impact of the strategy as a whole on longer-term indicators such as the gap in Life Expectancy and various mortality measures, it is proposed that these from part of the annual report of progress to the Health and Wellbeing Board and are set within the larger framework of the 'All Together Fairer' Beacon Indicators. Board members should note that a stocktake is currently underway to identify activity across Cheshire and Merseyside that is related to the themes and system recommendations in the 'All Together Fairer' (Marmot) report. We believe that our Health and Wellbeing Strategy and the associated Implementation Plan place Wirral in a strong position.

3.9 Next steps: update reports to Health and Wellbeing Board

In order to ensure that Board members can not only be kept updated on progress across the entire strategy, but can also influence and shape the strategic direction within the priority areas, the following approach is proposed.

- 3.10 In line with the recommendations arising from the recent LGA development session, a focused, 'deeper dive' session on one of the priority areas will be held at each quarterly meeting of the Board. It is proposed that these operate on a rolling programme of each of the priority areas 1-4 in turn (so the focus for the March 2024 Strategy Update Report would be Priority Area 2: Strengthen health and care action to address differences in health outcomes).
- 3.11 An annual report of progress across all areas of the Health and Wellbeing Strategy will be brought to the Board. This will include an assessment of progress across the indicators linked to the 'game-changer' action plans, an overview of the key longer-term population health indicators (set within the larger Beacon Indicator set linked to the 'All Together Fairer' plan) and an update to the series of attachments presented in this paper.
- 3.12 In the event of unpredicted blockages to progress or proposed changes in direction to the implementation plan, it is recommended that, where necessary, such exceptions are put to the Board at each meeting. This will enable Senior Responsible Officers, Joint Leads and the Health and Wellbeing Implementation Group to access the support and steer of the Board in a timely manner.
- 3.13 Where required, and on the steer of the Chair of the Board, specific training/spotlight sessions will be arranged for Board members.

4.0 FINANCIAL IMPLICATIONS

4.1 Implementation of the strategy will include aligning existing resources more appropriately and using the strategy to lever in and focus additional resources across the system.

5.0 LEGAL IMPLICATIONS

- 5.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.
- 5.2 Development of a Health and Wellbeing Strategy is a legal duty under the Health and Social Care Act 2012.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There is a need for ongoing commitment from council officers along with a wide range of partners to deliver the priorities within the Health and Wellbeing Strategy. The roles of joint leads for each priority area will require significant focus and capacity.

7.0 RELEVANT RISKS

7.1 Any risks related to the implementation of the Health and Wellbeing Strategy will be identified via the Health and Wellbeing Implementation Group and reported to the Health and Wellbeing Board where necessary.

8.0 ENGAGEMENT/CONSULTATION

8.1 A programme of engagement with local people in order to ensure that this strategy remains relevant and impactful is ongoing. The strategy is being delivered in partnership with representatives across the Wirral system, including residents.

9.0 EQUALITY IMPLICATIONS

9.1 The Health and Wellbeing Strategy has been underpinned by equality and diversity impact assessments and strives to address the inequalities that have been highlighted. Ongoing impact assessment of the strategy implementation will be undertaken to ensure that equality and diversity impacts are considered and addressed. An Equality Impact Assessment for the Health and Wellbeing Strategy can be located at https://www.wirral.gov.uk/communities-and-neighbourhoods/equality-impact-assessments

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 The link between both internal and external environments and health is well-evidenced. The delivery of the Health and Wellbeing Strategy will support and supplement the 'Cool Wirral 2' partnership strategy to tackle climate impacts. Work with partners to tackle indoor air pollution will also be important.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 The Health and Wellbeing Strategy will support the delivery of the concepts of community wealth building e.g. community resilience increasing local employment opportunities.

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APPENDICES

Attachment A: Components of strategy implementation

Attachment B: Wirral system activity linked to HWBS priority areas.

Attachment C: Intelligence sources linked to the Health & Wellbeing Strategy

Attachments D – H: Key programmes and impact of related activity

Attachments I – L: Implementation plans for priority area 'game-changers'.

BACKGROUND PAPERS

 https://www.wirralintelligenceservice.org/strategies-and-plans/wirral-health-wellbeingstrategy-2022-27

TERMS OF REFERENCE

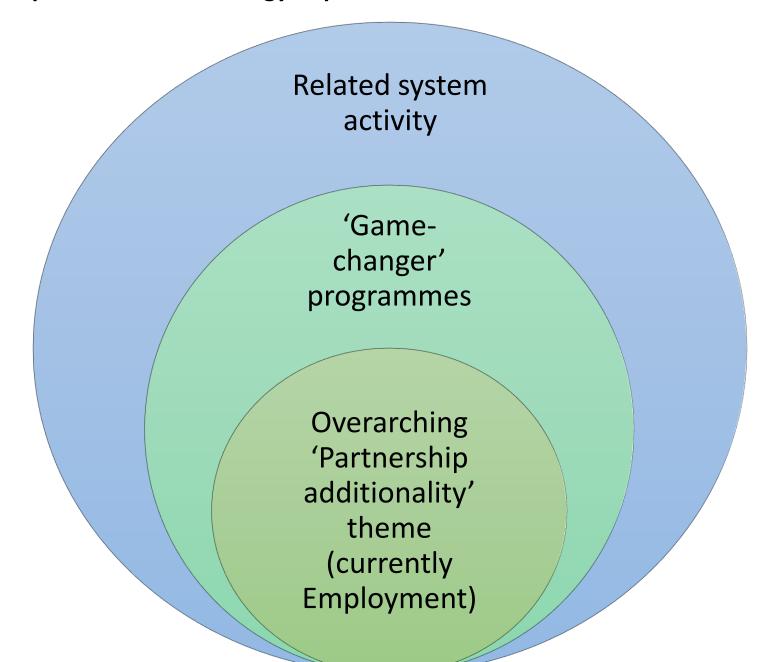
This report is being considered by the Health and Wellbeing Committee in accordance with Section B of its Terms of Reference:

(b) To seek to meet those needs through leading on the ongoing development of a Health & Wellbeing Strategy.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board	20 July 2023 23 March 2023 29 September 2022 15 June 2022 23 March 2022 9 February 2022 3 November 2021

Attachment A: Components of the strategy implementation



Attachment B: Wirral system activity linked to HWBS priority areas NHS Planning Guidance Wirral Health & Care Place Plan **P2 P1** C&M Integrated Care Partnership Strategy Wirral Economic Strategy Wirral Health Protection Strategy Council Plan C&M Cancer Alliance Plan Wirral's Strategic Regeneration Framework **C&M CVD Prevention Strategy** Birkenhead 2040 Combating Drugs Partnership Plan Get best health All Together Fairer **Neighbourhood Plans** Strengthen health outcomes from All-Age disability strategy and care action to economy and All Together Fairer address differences regeneration in health outcomes programmes Page Create safe and **Ensure the best** healthy places for start in life for all Early Years Strategy people that protect Wirral Community Safety Strategy 2021-25 children and young **SEND Strategic Action Plan** Air Quality Strategy health and promote **Future in Mind Strategy** people Active Travel Strategy a good standard of Wirral Youth Justice Strategic Plan Environment & climate emergency action living Wirral Domestic Abuse Alliance plan All Together Fairer • Wirral's Strategic Regeneration Framework Wirral Plan **P3 P4** Local Plan Active Wirral Strategy All Together Fairer

Attachment C: Intelligence sources linked to the Health & Wellbeing Strategy

- Regeneration Insight
- Employment workshops insight
- Wirral's State of the Borough Report
- Community Insight tool
- DWP Quantitative data
- Office for Health and Disparities Evidence

P1

Get best health outcomes from economy and regeneration programmes

P2

Strengthen health and care action to address differences in health outcomes

- Core20PLUS5 Adult and C&YP profiles
- Wirral Health Protection Strategy
- Wirral Inequalities Neighbourhood Profiles
- Pharmaceutical JSNA
- Quantitative Research
- Drug and Alcohol Insight
- Risk and Resilience Insight
- Sexual Health Insight
- CVD Prevent data

age 13

- Early Years Strategy
- SEND JSNA
- Young Carers JSNA
- Healthy Child Programme audits
- Emotional HWB Needs Assessment
- Early Years and Maternity Profile
- Risk and Resilience Insight Report
- Sexual Health Insight
- CYP Core20+5 datasets

Ensure the best start in life for all children and young people

P3

Create safe and healthy places for people that protect health and promote a good standard of living

P4

- NICE guidance(NG6)
- Active Travel Strategy (Draft)
- Air Quality JSNA
- Safer Wirral Tracker
- Fuel Poverty interactive report
- Healthy Cities Generator Tool HIA
- Community Insight Tool
- Cost of Living Insight Briefing
- Warm Hubs Insight report

Attachment D: P1 Key programmes and impact of related system activity

- Activity/programme
- 'Reach Out' engages eligible unemployed or economically inactive young people and adults to support their progression into education, employment, and training via a suite of flexible, tailored employment support services.
- 'Help Out' 'pre-employment' service aimed to tackle people's health and wellbeing barriers before residents are able to consider looking for employment.
- Healthy Cities tool to measure health impact of regeneration programmes piloted as part of Dock Branch Park masterplan
- Positive Inclusion Programme and range of events during Summer to look at employment opportunities and skills gaps for young people in Wirral
- LCR has funded the 'BE MORE' careers and skills portal to help young people and adults make informed careers related decisions
- Supported employment programme

Page 1 Linke plans and reporting routes

- Wirral Economic Strategy 2021-26
- Birkenhead 20:40 Strategic Regeneration Framework
- Reported through: Economy, Regeneration & Housing Committee, Adult Social Care & Public Health Committee

Impact

- 3,000 local people supported by Wirral Worklessness Support Service from Sept 2019 to July 2023, resulting in 1,473 previously unemployed residents into jobs
- 33 Apprenticeship opportunities created with local SMEs through Wirral Apprenticeship Programme
- Positive inclusion programme supported 99 vulnerable young people into employment, education or training (EET) during last year (Wirral 19-21 EET outcomes consistently above national average)

Attachment E: P2 (general) Key programmes and impact of related system activity



- Cancer Early Diagnosis primary care Early Diagnosis Enhanced Service, Targeted Lung Health Checks, new Faecal Immunity Test (FIT)
 pathway, Early diagnosis community engagement.
- Respiratory Clinic established at 'Change Grow Live' Respiratory nurse provides assessments and support for COPD and some other respiratory conditions
- Hub and Spoke model for Spirometry to support COPD diagnosis
- Increased community cardiology service and ambulatory heart failure nurses at A&E
- Earlier access to a range of diagnostics
- Increased investment within the VCFSE sector via Better Care Fund, focusing on improving the timeliness and outcomes associated with hospital discharges
- Community Cardiology service reviewed against 'Hypertension against the NHS Equality Delivery System framework'



Linker plans and reporting routes

- NHS Planning Guidance and the Long-Term Plan
- Wirral Health & Care Place Plan
- Cheshire & Merseyside Cancer Alliance Plan.
- C&M CVD Prevention Strategy.
- Reported through Wirral Place-based Partnership Board, COREPlus25 Group, CVD Working Group, Neighbourhood Steering Groups, Cheshire & Merseyside Integrated Partnership, Wirral Combating Drugs Partnership,



- Patient cancer journeys shortened as patients attend multifunctional appointments as opposed to a series of separate appointments covering assessment and diagnostics
- Reduced waiting times for tests for a wide range of conditions including heart disease, lung conditions and cancer
- Reduced heart failure admissions with patients offered Hot Slot appointments and reduced lengths of stay for heart failure patients.
- External review found Wirral Community NHS FT's Community Cardiology Service to have delivered well in all equality domains
- Number of inpatients of WUTH who remain in hospital, but no longer meet the criteria to do so, reduced from 220 to 100 from 2021/22 to 2022/23

Attachment F: P2 (CVD) Key programmes and impact of related system activity

Activity/
programme

Page 16

Linked plans and reporting routes

- September 2023 CVD Prevention workshop with Core20plus5 group that identified different approaches that could be taken to implement earlier detection opportunities and management of CVD with a focus on the most vulnerable.
- 'BP@Home' programme and Housebound Hypertensive project equipping housebound patients across Wirral and the most vulnerable from areas of deprivation with blood pressure monitors and supporting them to submit readings to general practice for follow up and improving self-care/ access for at risk population.
- Blood Pressure Quality Improvement (BPQI) disease registers installed on Wirral general practice systems
- health checks delivered in community locations targeting people who do not traditionally come forward or who find it difficult to access primary care
- NHS Health checks programme open to all eligible population aged 40-74, aimed at reducing and managing CVD risk factors. To reach those most at risk, this programme was supported from April 23 by 'NHS health checks in the community' programme (delivered by 3rd sector)
- Annual health checks for people with learning disabilities (facilitated by Cheshire and Wirral Partnership)
- Health checks for people with serious mental illness (SMI)(delivered by Health Junction CIC)
- NHS Planning Guidance and the Long-Term Plan
- Wirral Health & Care Place Plan, Core20Plus5 guidance
- C&M CVD Prevention Strategy.
- Reported through Wirral Place-based Partnership Board, COREPlus25 Group, CVD Working Group, Neighbourhood Steering Groups

Impact

- 'Treatment of hypertension to target' performance improved following the BP@Home programme from 59% (Dec 22) to 64% (Sept 23)
- From 2021/22 to 2022/23, 43% increase in number of people with high blood pressure identified in general practice
- Biggest increases of those receiving NHS Healthchecks is in quintile 1 (most deprived). Uptake figures for this year are significantly higher that at the same point last year, owing to the combination of the statutory programme and the 3rd sector community outreach programme.

Attachment G: P3 Key programmes and impact of related system activity



- Wirral has its first Family Hub (Seacombe)
- Cradle to Career (C2C) programme well-established in North Birkenhead
- Early Help Alliance, Domestic Abuse Alliance, Zillo, Sandbox
- Midwifery Continuity of Care model is being implemented
- Community of Practice has been established for mainstream, FE, SEND and alternative provision to bring together Careers Leaders to share best practice and provide peer to peer support
- Continuing local insight into issues and needs of local children, young people and families to inform developments
- Family Nurse Partnership has delivered training to the broader children's workforce on advanced communication skills with vulnerable families



- Early Help Strategy, Youth Offer,
- Reports through: Children, Young People & Education Committee, Partnership for Children, Young People and Families, Family Hubs Steering Group, Early Years/Best Start Strategy Group, C2C and BTC steering Group, Future in Mind Steering Group, Strategic Public Health Maternity Group, Children's Centre Advisory Group, Wirral Domestic Abuse Alliance

Impact

- Seacombe Family Hub services for families to access in one place including: Midwifery Services, Health visiting services, sessions for under 5's (from universal to targeted interventions sessions), extension of specialised SEND support, food bank, DV support
- C2C Compared to previous years, a child in North Birkenhead is less likely to be referred into social care and less likely to have their social care needs escalated. Referrals to social care have reduced significantly and now remain lower than other areas of Wirral.
- Over 7,000 people helped in first year of Early Help Alliance
- More women being supported through the increased number of teams delivering. Midwifery Continuity of Care

Attachment H: P4 Key programmes and impact of related system activity

Activity/ programme

Page 18 Linked plans and reporting routes

Impacts

- Healthy Homes Community Outreach to address poor housing & inequalities, operating drop-in support to residents having issues with private landlords
- Fuel Poverty Service commissioned to support residents
- Household Support Fund distributed to local communities
- Local Plan developed and currently in consultation phase
- Low-carbon housing retro-fit programme ongoing
- Climate action survey completed with residents and used to direct communications and engagement.
- Climate action hub established
- Wirral Community Safety Partnership Grants Programme established
- Wirral's EVOLVE project launched in May, a 3-Phase operational delivery framework to tackle Serious Organised Crime threats at Local level
- New Health Protection Strategy (commended by UKSHA), focussed on 7 priority areas aimed at reducing risk and keeping residents safe
- Wirral Community Safety Strategy 2021-25
- Reported through: Policy & Resources Committee, Environment, Climate Emergency and Transport committee, Economy, Regeneration & Housing Committee, Cool Wirral Partnership, Wirral Community Safety Partnership, Fuel Poverty Strategic Group
- £1.4 million in grants distributed to the CVF sector to support local people and communities affected by cost-of-living.
- 845 full housing surveys completed in 22/23 through the Healthy Homes programme and 614 'Warm and Adapted Homes' program clients provided with advice on energy efficiency, including the provision of LED light bulbs. Over 3000 referrals were made from this service to external support agencies.
- Since December 2023 the Fuel Poverty service has supported 505 residents with benefits and welfare advice, maximised residents benefits to the total of £909,585.08, supported 744 individuals with their attendance allowance and pension credit claims amounting to £1,639,199. 74 individuals have been provided with specialist fuel advice and 272 have been provided with a fuel voucher
- The Household Support Fund has distributed £6,098,690 in support since July 2023 supporting across the following initiatives government fuel rebate scheme, winter fuel payments, help with council tax, emergency financial support schemes, discretionary housing payments, additional support for vulnerable pensioners and cost of living support.

- Make recruitment processes simpler to navigate and standardise where possible across borough. Remove barriers to entry level jobs in HWB Anchor Institutions
- Develop processes to Recruit on attitude Train for skills
- Strengthen role of employment brokerage (eg DWP, InNW)
- Improve engagement with young people re emerging job opportunities
- Share workforce data across partnership
- Publish Public Health Annual report on Employment to heighten system awareness

Impact evidenced by:

- Case studies/success stories
- Reduction in vacancies in local Anchor Institutions
- Better insight into employment barriers for Wirral residents

Attachment I: P1 Implementation Plan Widening participation and access to jobs

Longer-term actions:

- Develop a single pathway into recruitment for Wirral's Anchor Institutions
- Development of a skilled workforce across HWB Anchors. Sharing recruitment, training opportunities etc

Impact evidenced by:

- Case studies/success stories
- Reduction in gap between least and most deprived UC claimants' rate
- Reduction in the vacancy gaps in Anchor Institutions
- Reduction in vacancies in Als

Overseen by:

- Economy, Regeneration & Housing Committee
- Adult Social Care & Public Health Committee

Note: 'Reviewing our procurement systems' to commence Q1 2024/25.

- Develop a set of actions following the CVD Prevention workshop (held in September).
- Secure ongoing funding for Housebound Hypertension and BP@Home projects
- Evaluate the community health check pilot
- Explore options for closer integration of various 'Health check' programmes across Wirral
- Improve access and sharing of data/intelligence across partners to measure performance and outcomes relating to CVD

• DAction plans to be developed across key Core20Pplus5

Health & Care inequality areas

Overseen by:

20

- Wirral Place-based Partnership Board
- COREPlus25 Group
- CVD Working Group

Impact evidenced by:

- Increased identification of hypertension in most at-risk groups
- Increase in people from most at-risk groups having Healthchecks
- Case studies from Wirral residents evidencing greater awareness of blood pressure

Attachment J: P2 Implementation Plan Implementation of a CORE20Plus5 delivery plan, with initial focus on CVD

Longer-term actions:

- Integration with programmes of support that deal with underlying reasons behind levels of preventable hypertension and other long terms conditions that are largely preventable (e.g. type 2 diabetes, obesity) in the community.
- Local delivery of the national 'Major Conditions
 Strategy' (CVD is one of six major conditions groups).
- Implementation of the new 'WorkWell' Partnership Programme, with local systems providing support to disabled people and people with health conditions who want help to start, stay or succeed in work

Impact evidenced by:

- Decrease in heart attacks and strokes amongst Wirral residents
- Decrease in inequality gap for heart attacks and strokes
- Decrease in obesity related diseases

Note: Workshops with first 2 neighbourhood' groups are underway. Action plans will follow in due course

- Establishment of further Family Hub settings and satellites, with integration of Early Help Alliance and 3rd sector
- Early Help Advisors as single point of contact for Early Help for families in 4 locality areas
- New Emotional Mental Health & Wellbeing model to begin April 2024
- Commission new 'Risk/resilience' model to launch September 2024
- Midwifery Continuity of Care evaluation to be repeated (on births between July and December 23) and further teams rolled out Spring 24
- Systemic Practice training to be further rolled out and embedded across the whole system

• Explore options for Early Childhood Services co-locating with

dhildren's Centres.

 CB and LA Neighbourhood working models to develop effective working relationship to drive outcomes

Overseen by:

- Children, Young People & Education Committee
- Partnership for Children, Young People and Families

Impact evidenced by:

- Increase in successful resolutions of Early help to families
- Case studies evidencing the benefits for families
- Reduction of safeguarding escalation

Attachment K: P3 Implementation Plan Best start in life Early Help & Family help

Longer-term actions:

- Further integration of health, care and wellbeing support streams within local communities
- C2C evaluated, informing roll out of elements of programme where greatest impact could be
- Greater alignment of education curricula and skills training with emerging business/industry needs
- Family Hubs and satellites continue to evolve and strengthen links with other neighbourhood/locality approaches (eg ICB-led neighbourhood groups)
- Early Help Alliance and 3rd sector become an integral part of the Family Help/Family Hubs localities
- Partners to develop a strong 'Team Around the School' Approach

Impact evidenced by:

- Reduction in families accessing support for the first time at higher levels as needs are being met earlier on
- Young people have appropriate training/skills for available vacancies resulting in improved EET
- Reduction of young people presenting to hospital with mental health/substance misuse??
- Reduction in short term school absence and increased overall attendance

- Continue to invest and deliver the Fuel Poverty Service to support households in fuel poverty or at risk of living in fuel poverty.
- Drive further benefits maximisation through recommission of 'Ask Us Wirral' service
- Identification of fuel-poor households to deliver targeted action (linked to primary care identifying patients with eg respiratory problems)
- Expansion of the Healthy Homes team
- TEVOLVE programme: Problem-solving/Implementation groups to be set up in Beechwood, Noctorum and Woodchurch, along with community projects fund

Overseen by:

- Economy, Regeneration & Housing Committee
- Environment, Climate Emergency and Transport committee
- Wirral Community Safety Partnership

Impact evidenced by:

- Increasing realisation of appropriate benefits
- Increased levels of identification from partners of fuel-poor residents
- % of successfully-resolved issues identified via EVOLVE groups in 3 areas

Attachment L: P4 Implementation Plan Fuel Poverty Violence Reduction

Longer-term actions:

- Work with Local Plan to ensure energy efficiency standards in new build housing improves.
- Increase number of properties going through lowcarbon retro-fit programme
- Exert influence over new-build properties for safe, 'future-proof' and efficient housing stock
- Enhance prevention and resilience amongst 'prefrail' residents so that they can remain independent for longer
- Continued community work to build trust, identify and overcome potential barriers, restore community confidence.

Impact evidenced by:

- Reduced reported fuel poverty
- Reduction of levels of crime in Wirral
- Residents reporting feeling safer



HEALTH AND WELLBEING BOARD 7TH DECEMBER 2023

REPORT TITLE:	UPDATE RE NEIGHBOURHOOD MODEL
REPORT OF:	ASSOCIATE DIRECTOR TRANSFORMATION AND
	PARTNERSHIPS
	CHIEF EXECUTIVE WIRRAL CVS

REPORT SUMMARY

The purpose of this report is to provide the Health and Wellbeing Board with an update on the development and implementation of the Wirral Neighbourhood Model which is one of our guiding priorities within the Wirral Health and Care Plan for 2023/24.

The neighbourhood model also supports the delivery of the Wirral Health and Wellbeing Plan as outlined in this report.

RECOMMENDATION/S

It is recommended that the Board note the update given on the progress to date of the development and implementation of the Wirral Neighbourhood Model.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION

1.1 The refreshed Wirral Neighbourhood Model is a community led approach to tackling health inequalities experienced in neighbourhoods working with local community leaders to co-produce solutions.

The approach moves from focus on ill health and deficits to building on community assets and strengths to promote better health and wellbeing.

This paper shares an update on the current position and next steps in terms of the implementation of the model across Wirral.

- 1.2 The neighbourhood model also supports the delivery of the priorities in the Wirral Health and Wellbeing Plan.
- 1.2.1 The Health and Wellbeing strategy has five priorities, these are:
 - Priority 1: Create opportunities to get the best health outcomes from the economy and regeneration programmes
 - Priority 2: Strengthen health and care action to address differences in health outcomes
 - Priority 3: Ensure the best start in life for all children and young people
 - Priority 4: Create safe and healthy places for people to live that protect health and promote a good standard of living
 - Priority 5: Create a culture of health and wellbeing, listening to residents and working together

As the Neighbourhoods programme develops this way of working will become a key enabler for making progress in Priorities 2, 3, 4 and 5 as set out below;

1.2.2 Key Links to Priority 2

- Address differences in health outcomes by changing the way we deliver health and care services focusing on population health outcomes, with an understanding of needs within our communities and an emphasis on those who can benefit most.
- Increase interventions that prevent health problems and offer support at an early stage focusing on people and communities at greatest risk of poor health outcomes. For example through joint efforts to provide opportunities for all Wirral residents to be more active, increasing vaccination uptake, tobacco control and fuel poverty.
- Assist people to age well by keeping them healthy and connected to their communities for as long as possible in their own home.
- Developing integrated, seamless support services within local areas, delivering health and care services with local people as equal partners.
- Using the Core20PLUS5 approach to guide and drive local action. Core20PLUS5 is a national NHS England approach to inform action to reduce healthcare inequalities at both national and system level. The approach defines a target population the 'Core20PLUS' and identifies '5' focus clinical areas requiring accelerated improvement.

 Systematically assess health inequalities related to our work programmes and collectively identify and implement actions to help reduce differences in health outcomes.

1.2.3 Key Links to Priority 3

- Work together to support parents and carers to help their children to achieve a
 good level of development in their early years, and to prepare them for the school
 years (i.e. School Readiness). To have the biggest impact, we will focus most of
 our efforts in communities that need it the most, in order to reduce the unfair
 differences that too many of our children experience.
- Redesign and improve our support and prevention services so that wherever
 possible, they are based in the heart of local communities and are easily
 accessible, integrated, modern and adaptable to the changing needs of children,
 young people and families.
- Consulting with partners and local communities to produce 'Family Hubs' model for our future, where the local system will come together to provide high-quality, whole-family, joined up family support services.
- Identifying the elements of 'Cradle to Career', 'Breaking the Cycle' and '1001 Days' programmes that are making the biggest difference to local families, through evaluation and ongoing discussions with local people.
- Agreeing, together with young people, families and other partners, what is needed to properly help our young people to deal (at an early enough stage) with the variety of issues that can cause them problems (e.g. mental health, substance misuse, sexual exploitation).

1.2.4 Key Links to Priority 4

- Enable people to connect with other people in their communities, feel safe and love where they live.
- Developing a partnership approach to the current cost-of-living crisis to ease the impact on people already experiencing financial hardship, prevent people becoming financially insecure and to help people when they need it.
- Implementing the new Local Plan in a way that improves health through the design of places and new homes, alongside existing homes, and access to services through co-location.
- Work together with partners to deliver the priorities of the Wirral Community Safety Strategy 2021-25, supporting residents to feel "safe" where they live, work and visit.

1.2.5 Key Links to Priority 5

- Build on the strengths and assets of individuals and communities to protect and build health into all that we do.
- Continue listening to, and working with, local people and community groups to deliver this plan, feeding back what we have done together.
- Working with the Health and Wellbeing Insight Group to establish an ongoing programme of community insight with local people linked to the Strategy priorities, to measure impact, and influence ongoing action and Strategy delivery.
- Connecting the work of the Community, Voluntary and Faith Network (formerly known as the Humanitarian Cell) and the Health and Wellbeing Board to make sure we are working together to support the delivery of this Strategy whilst reflecting the real time priorities of local people.

- Engaging proactively with communities to ensure that our actions are meeting the needs of local people and that we are doing things in a way that involves people with lived experience in the design of places and services.
- Equipping our workforce with the skills and tools to support people to improve health based on the things that matter to you and which builds on your strengths.

2.0 OTHER OPTIONS CONSIDERED

2.1 We need to work in partnership with communities in neighbourhoods and listen about what is important to them and what we can do together to make a difference that starts to change the variance in health outcomes and reduce the inequalities we see across Wirral. Through adopting a Neighbourhood based approach we aim to contribute to the Wirral Place vision to create equity for people and place and opportunities for all to secure the best possible future for our residents and communities.

3.0 BACKGROUND INFORMATION

- 3.1 Wirral is a Borough of contrasts, of incredible community spirit and strong local partnerships. Wirral is as diverse as it is distinctive. Named one of the happiest places to live in the UK according to a recent survey, Wirral has 50 miles of rural walking routes, cycle areas and beaches, 24 miles of coastline and some of the best parks and green spaces in the Country boasting 30 Green Flags. An untapped built, industrial, maritime and social heritage that is internationally significant whilst also being a very connected and accessible destination A place to live, work, and to do business.
- 3.2 However, it is a place of inequalities, with some of the most affluent and deprived wards in the UK on opposite sides of the motorway, which runs through the middle of the Borough. Some groups have been, and will be, much more affected through issues such as unemployment, redundancy, loss of income, debt and hardship, with children, families, and young people living in poverty. Even in the more affluent areas issues such as, an ageing population, dementia, cost of heating and social isolation are having a significant impact. Health outcomes in Wirral have also subsequently deteriorated. 35% of the population in Wirral live in the 20% most deprived wards in England and we have poorer than expected health outcomes for a number of national benchmarks. People, from our most deprived communities, are not just dying earlier, but they also spend more of their life in ill health before they die.
- 3.3 The refreshed Model commenced early 2023 and is a guiding priority within the Wirral Health and Care Plan. Whilst we have a different approach, the geographic boundaries of our 9 neighbourhoods remains the same. Our aim in the early stages is to build community capacity through VCFSE partners. The map of the neighbourhoods is shown in Appendix 1.
- 3.4 To achieve the Wirral Neighbourhood Model we want to support communities that are 'connected, confident and in control'.
- 3.4.1 We believe that **Connected** communities –

- Are people who connect with each other, VCFSE groups and statutory services.
- Have increased social and emotional wellbeing opportunities to form meaningful relationships and reduce social isolation.
- Have accessible services and activities that promote equal opportunities across our diverse community and allow for residents voices to be heard and understood.

3.4.2. We believe that **Confident** communities –

- Have the resource and confidence to 'do' rather than feeling 'done to'
- Are supported to build capacity within neighbourhoods to create sustainable engagement that improves wellbeing and drives health outcomes.

3.4.3. We believe that communities that are in **Control** –

- Are empowered to have their voices included and heard in decisions that are made, ensuring that the process is meaningful and open.
- Promote increased community engagement and motivation for all residents to 'get involved'. Allowing community leaders and residents to take ownership of their neighbourhoods.
- 3.5 We recognise that this is a new approach within Wirral and that to give it the best chance of transforming how the Local Authority and the NHS work alongside our community we will need to listen and learn throughout. Building positive relationships and trust within neighbourhoods will be key.
- 3.6 As a result of this we will be using a 'phased approach' test this out. We are going to trial this new way of working in two neighbourhoods that the data tells us have the greatest levels of health inequalities. We have called them our 'trailblazers' and we will learn as we support these two neighbourhoods in establishing this new community led approach. Engagement with the residents will be key and the trailblazers will also test out ways of encouraging residents to get involved, to feel connected, build in confidence and feel more empowered.
- 3.7 These two trailblazer neighbourhoods were identified using a 'tartan rug' of health outcomes. The tartan rug is shown in Appendix 2. The tartan rug was utilised to identify four neighbourhoods with the most challenged health outcomes and then an Expression of Interest from the Community, Faith, Voluntary and Social Enterprise (CFVSE) sector identified two neighbourhoods where there was a collation of CFVSE organisations keen to test out the new model. These two collations of CFVSE organisations will lead on the development of the new community approach and on the engagement with local residents. Active listening to residents will be key. Qualitative Insight team are undertaking research with the residents and the output from this is due at the end of November. A neighbourhood engagement event is being planned for early 2024 which will be targeted specifically for residents and the community. This will be an asset based event for that particular neighbourhood and look to build on existing strengths and identify more opportunities.
- 3.8 Our trailblazer neighbourhoods are Birkenhead A and Wallasey C. Interim chairs from the CFVSE have been agreed and a workshop in each neighbourhood has now taken place to launch the model in each neighbourhood. These workshops had

representation from across key stakeholders and the feedback from the workshops will be discussed in the first Neighbourhood Core Group. Each neighbourhood has a Core Group which will act as the engine room for encouraging more community led involvement and initiatives. Although the majority of these initiatives will not require additional funding, there is some funding available to support the testing of new community led initiatives. In other areas where a similar community approach is more established, a number of the initiatives were for social or interest groups such as a community choir, table tennis which have resulted in increased social and emotional wellbeing opportunities to form meaningful relationships and reduce social isolation.

- 3.9 We will be closely monitoring the work of the two trailblazers and will use this learning to help us roll this out across the Borough. A learning workshop is taking place early 2024.
- 3.10 It is planned that the next two neighbourhoods will be mobilised before the end of March 2024 and how these will be identified and initiated will follow from the learning event. All nine neighbourhoods will be established by March 2025.

4.0 FINANCIAL IMPLICATIONS

4.1 There are potential financial implications arising from this report which are required to support the development of the model. The Cheshire and Merseyside Integrated Care Board are funding the leadership input from the CFVSE sector and some additional funding has been allocated to support the testing of the community trying out new ways to build on the assets already in their neighbourhood.

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1. The neighbourhood model is integral to the priorities of both the ICB and Wirral Council and is therefore supported by both organisations. Additional resource has been secured from the CFVSE.

7.0 RELEVANT RISKS

7.1 The neighbourhood model sits within the governance framework of Wirral Place and progress against its development is monitored within the Steering Group and reported to the Wirral Strategy and Transformation group. The risks are identified and managed in the Project Group on a monthly basis and from here risks that require escalation are reported to the Steering Group. Risks of the model are concerning lack of engagement to the model and that the model may not address health outcomes as planned.

8.0 ENGAGEMENT/CONSULTATION

8.1 The development of the neighbourhood model has been collaborative with key stakeholders, in particular the CFVSE who have led on the rollout of the model. The

model is community led and therefore the priorities in each neighbourhood will be agreed by the Core Group which will be led by a community leader. The Wirral Council Qualitative Insight team are also undertaking engagement in the neighbourhoods with residents to gain their input for the neighbourhood model.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council and NHS Cheshire and Merseyside have a legal requirement to make sure their policies, and the way they carry out their work, do not discriminate against anyone. Within the Health and Care Plan there is a framework for our approach to tackling health inequalities and each programme of work will complete impact assessments to ensure any adverse impact is identified and mitigating actions but in place where possible. An Equality Impact Assessment is not required for this report.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 Wirral Council and NHS Cheshire and Merseyside are committed to carrying out their work in an environmentally responsible manner, and these principles will guide the delivery of the Place Director's objectives in Wirral. Tackling health inequalities in a priority the ICB and NHS Cheshire and Merseyside.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Community Wealth Building in Wirral focusses on partnerships and collaboration. This is the principal focus of the neighbourhood model and without which the model will not be successful. The aim of the model is to enable neighbourhoods to become more connected, confident and in control and through their initiatives address the health inequalities and contribute to the development of a resilient and inclusive economy for Wirral.

REPORT AUTHOR: Name

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APPENDICES

Appendix 1 Wirral Neighbourhood Map Appendix 2 Tartan Rug

BACKGROUND PAPERS

Wirral Health and Wellbeing Strategy 2022-27 Wirral Health and Care Plan 2023-24 NHS Cheshire and Merseyside Joint Forward Plan 2023-24

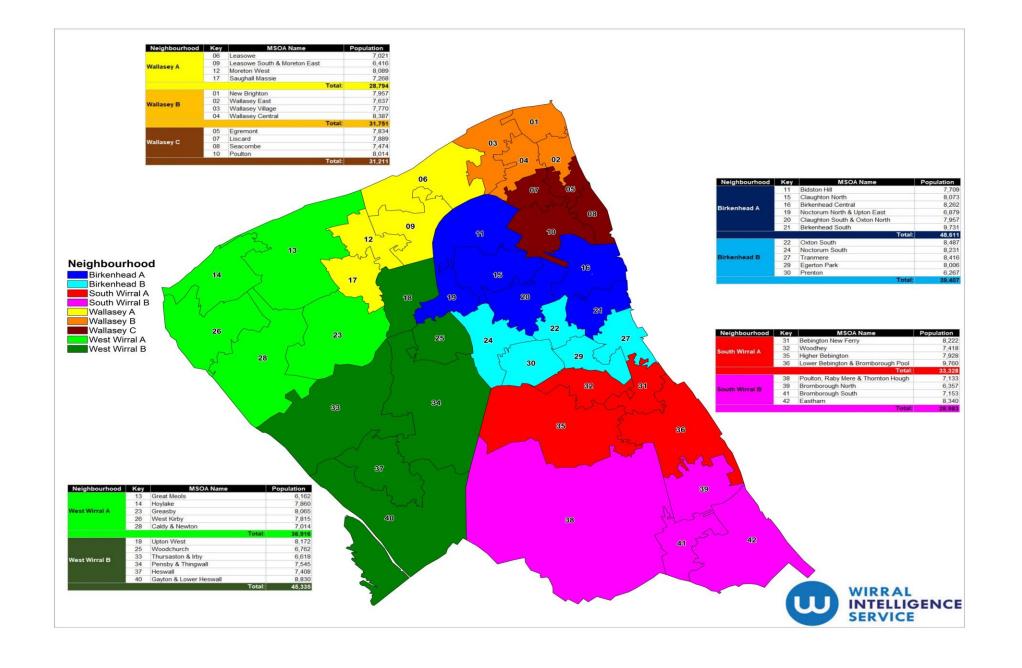
TERMS OF REFERENCE

This report is being considered by the Health and Wellbeing Board in accordance with Section (e) and (f) of its Terms of Reference,

- (e) To drive a collaborative approach to commissioning of improved health and care services which improve the health and wellbeing of local people
- (f) To consider and take advantage of opportunities to more closely integrate health and social care services in commissioning and provision.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date



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				Γ				<u> </u>	
		Birkenhead A	Birkenhead B	South Wirral A	South Wirral B	Wallasey A Wallasey B	Wallasey C	West Wirral A	West Wirral B
Theme	Indicator	Birkenhead Central Claughton North Claughton South & Oxton North Noctorum North & Upton East Birkenhead South	Egerton Park Noctorum South Oxton South Prenton	Bebington New Ferry Higher Bebington Lower Bebington & Bromborough Pool Woodhey	Bromborough North Bromborough South Eastham Poulton, Raby Mere & Thornton Hough	Leasowe Leasowe South & Moreton East Moreton West Saughall Massie New Brighton Wallasey Central	Wallasey Village Egremont Liscard Poulton Seacombe	Great Meols Caldy & Newton Greasby Hoylake	Gayton & Lower Heswall Heswall Pensby & Thingwall Thurstaston & Irby Upton West Woodchurch
High Level H&W Strategy Outcomes	Life Expectancy at Birth (Males) Life Expectancy at Birth (Females) Healthy Life Expectancy (HLEx) at Birth (Males) Healthy Life Expectancy (HLEx) at Birth (Females) % of Life Spent in Good Health (Males) % of Life Spent in Good Health (Females)	71 70 80 77 77 74 77 76 82 80 79 80 48 48 64 62 66 53 50 52 64 64 58 56 67.6% 68.6% 80.0% 80.5% 85.7% 71.6% 64.9% 68.4% 78.0% 80.0% 73.4% 70.0%	79 80 77 81 71 81 87 82 84 76 60 58 59 65 50 61 68 64 67 52 75.9% 72.5% 76.6% 80.2% 70.4% 75.3% 78.2% 78.0% 79.8% 68.4%	10.00	81 82 78 82 81 87 83 84 62 71 63 68 64 72 64 69 76.5% 86.6% 80.8% 82.9% 79.0% 82.8% 77.1% 82.1%	80 77 78 82 79 81 77 84 80 80 84 83 85 79 64 54 59 66 59 66 58 64 55 60 66 62 69 61 80.0% 70.1% 75.6% 80.5% 74.7% 81.5% 75.3% 76.2% 68.8% 75.0% 78.6% 74.7% 81.2% 77.2%	80 75 78 73 72 87 80 81 79 77 65 55 60 53 50 66 57 61 56 53 81.3% 73.3% 76.9% 72.6% 69.4 75.9% 71.3% 75.3% 70.9% 68.8		84 81 83 82 80 73 87 82 87 86 82 79 73 66 66 69 64 54 75 68 68 70 64 55 86.9% 81.5% 79.5% 84.1% 80.0% 74.0% 86.2% 82.9% 78.2% 81.4% 78.0% 69.6%
Population	Age 65+ (%) Age <25 (%) Non-White British People (%) Indices of Multiple Deprivation Score	38.6% 31.4% 26.3% 20.0% 35.7% 37.2% 8.4% 16.9% 9.0% 11.0% 6.1% 17.1%	31.2% 28.3% 30.0% 28.5% 34.6% 7.1% 7.2% 8.5% 7.7% 13.4%	31.5% 28.2% 28.7% 29.2% 8.3% 6.4% 7.5% 6.5%	27.7% 25.3% 28.7% 22.3% 5.8% 4.2% 4.7% 5.6%	18.0% 17.5% 24.1% 25.8% 24.6% 22.2% 17.9% 30.9% 34.5% 28.4% 25.0% 23.8% 27.5% 29.3% 6.2% 6.6% 5.9% 4.5% 8.3% 4.5% 6.8% 29.0 51.6 34.8 15.0 32.8 17.1 35.0	25.5% 33.6% 29.4% 36.0% 37.5 6.0% 7.7% 6.2% 9.4% 10.1	26.5% 24.9% 22.2% 25.3% 26.3% 5.4% 8.2% 4.8% 7.4% 8.4%	23.2% 24.2% 25.2% 24.0% 27.3% 32.3%
alatiduan and wayna naania	Children (under 16) in absolute low income (%) Children (under 16) in relative low income (%) School readiness - good level of development at 2-2.5 yrs (%) Average Attainment 8 Score	32.5% 31.9% 13.4% 9.9% 16.7% 27.5% 51.7 37.2 61.7 60.8 55.6 52.2 21.9 19.5 32.0 32.2 25.2 25.8	15.6% 10.9% 16.9% 14.5% 26.8% 67.4 69.1 68.4 68.7 57.5 30.3 31.2 28.4 41.1 25.5	17.7% 7.9% 10.8% 9.2% 65.5 81.6 75.7 64.3 26.3 36.7 25.9 38.1	17.4% 6.2% 12.4% 3.4% 59.5 71.9 63.8 79.2 30.7 39.4 31.1 45.7	10.2% 18.5% 10.8% 10.4% 12.8% 9.4% 12.1% 12.4% 22.7% 14.6% 13.7% 16.5% 13.6% 16.2% 67.3 49.9 52.2 53.5 61.1 70.2 72.0 24.5 23.4 24.8 34.3 23.9 37.6 32.6	10.9% 21.2% 16.3% 24.2% 28.8 78.8 51.4 65.2 53.1 45.4 38.4 26.1 30.9 19.1 22.9	7.6% 5.6% 6.5% 7.2% 7.8% 78.2 69.0 68.0 79.3 62.1 33.8 42.7 41.3 36.4 38.4	3.6% 7.5% 9.7% 9.2% 10.3% 19.2% 81.7 67.0 72.4 74.6 56.9 63.2 45.5 41.9 38.2 32.7 33.1 32.5
Strengthen health and care action to address differences in health outcomes	Emergency hospital admissions (rate) Hospital admissions mental/behavioural (per 100k) Depression prevalence Cancer prevalence Childhood obesity (Yr 6) Smoking (18+) Diabetes prevalence Cardiovascular disease prevalence Limiting long-term illness	23.9% 22.5% 21.2% 19.3% 19.8% 21.3% 3.2% 3.1% 3.3% 3.6% 3.5% 3.2% 27.7% 28.3% 24.5% 12.5% 25.0% 29.3% 20.0% 23.1% 13.9% 14.2% 17.2% 22.1% 7.9% 8.4% 7.3% 7.4% 7.8% 7.9% 1.4% 1.0% 1.4% 1.1% 1.3% 1.1% 28.2% 33.0% 21.6% 25.8% 25.1% 27.6%	545.4 421.2 663.8 340.4 950.6 21.4% 18.4% 19.2% 16.6% 23.2% 3.5% 3.5% 3.4% 3.9% 3.3% 21.2% 17.3% 24.0% 15.2% 27.4% 15.7% 12.1% 16.6% 10.5% 20.0% 7.8% 7.1% 7.3% 7.4% 8.2% 1.2% 1.3% 1.1% 1.2% 1.2% 24.4% 18.3% 24.0% 19.1% 31.7%	823.0 399.4 587.4 462.8 21.5% 16.2% 16.9% 17.8% 3.8% 4.0% 4.2% 3.7% 23.7% 16.7% 19.3% 14.0% 18.3% 10.2% 13.6% 11.5% 8.0% 6.9% 7.3% 7.0% 1.2% 1.2% 1.3% 1.2% 26.2% 19.1% 20.4% 18.4%	477.2 181.7 459.6 355.2 15.7% 15.9% 17.4% 13.4% 4.4% 4.3% 4.5% 4.6% 21.1% 18.2% 19.4% 10.8% 14.3% 9.3% 13.8% 9.2% 7.4% 6.7% 7.2% 6.6% 1.3% 1.4% 1.5% 1.2% 22.6% 16.9% 21.2% 17.3%	451.0 618.2 432.7 302.7 666.1 262.3 733.3 20.8% 21.3% 19.2% 16.9% 19.7% 17.3% 20.4% 3.4% 3.7% 4.2% 4.2% 3.2% 3.3% 3.2% 22.9% 23.2% 24.4% 16.2% 21.1% 17.9% 23.3% 14.6% 17.6% 14.7% 10.2% 16.4% 11.4% 16.9% 7.6% 8.3% 8.5% 7.7% 8.0% 7.2% 7.9% 1.1% 1.1% 1.2% 1.3% 1.2% 1.2% 1.2% 23.2% 29.8% 25.6% 20.8% 27.6% 18.3% 25.6%	411.8 693.6 473.2 528.2 807.3 16.8% 20.5% 19.3% 22.0% 21.3 3.6% 3.2% 3.3% 3.2% 3.2% 20.9% 21.4% 17.0% 25.8% 26.7 11.8% 18.4% 15.2% 21.1% 19.9 7.4% 7.8% 7.6% 7.8% 7.9% 1.2% 1.2% 1.3% 1.2% 20.2% 28.2% 23.6% 28.1% 28.7	2 281.3 323.2 314.1 441.1 396.7 6 15.2% 13.1% 15.2% 13.5% 13.5% 6 4.2% 4.6% 4.8% 4.7% 4.8% 6 12.5% 11.1% 11.1% 11.6% 10.0% 7 9.9% 8.9% 9.3% 12.4% 12.1% 6 6.8% 6.4% 6.8% 6.5% 6.7% 6 1.1% 1.2% 1.6% 1.2% 1.2% 7 18.3% 15.3% 18.6% 21.2% 20.2%	12.2% 13.1% 13.9% 13.7% 14.9% 21.8% 5.1% 5.3% 5.4% 5.5% 4.3% 3.2% 8.3% 15.2% 18.4% 17.1% 20.8% 29.8% 8.8% 11.0% 9.4% 9.2% 11.7% 18.9% 6.3% 6.7% 6.8% 6.8% 8.2% 8.5% 1.5% 1.6% 1.4% 1.4% 1.3% 1.2% 14.5% 20.5% 18.9% 19.9% 20.6% 27.5%
Page ଧର	Food vulnerability index score People living alone Unpaid carers JSA and UC Claimants (%) Economically Active (16+) Total annual household income (thousands) Net annual household income, after housing costs (thousands) Average personal debt per head Social housing Fuel poverty No car ownership Pension credit claimants	347.9 345.3 239.4 365.6 218.4 266.3 35.5% 55.7% 31.6% 53.6% 29.8% 42.3% 10.6% 9.9% 10.2% 9.2% 10.7% 10.0% 7.3% 11.1% 3.3% 3.7% 4.1% 7.6% 53.0% 48.3% 59.0% 53.1% 55.9% 56.1% £30.3 £26.0 £40.2 £37.8 £35.0 £29.7 £15.8 £16.9 £25.7 £28.5 £21.7 £18.8 £453 £365 £600 £549 £692 £453 54.6% 51.1% 7.4% 14.4% 35.7% 22.2% 28.7% 23.6% 12.5% 13.2% 16.9% 22.2% 44.4% 60.0% 22.1% 28.9% 27.7% 45.5%	160.6 96.2 168.8 195.7 306.4 34.7% 24.7% 39.2% 28.1% 41.9% 10.7% 10.6% 9.8% 10.9% 10.3% 4.2% 2.0% 4.5% 2.9% 6.9% 58.8% 61.7% 59.9% 58.4% 52.5% £34.5 £44.5 £36.9 £43.1 £29.0 £23.7 £29.7 £24.0 £29.2 £17.9 £699 £754 £558 £656 £501 13.5% 2.8% 10.4% 11.0% 35.2% 16.7% 8.9% 15.2% 11.3% 22.9% 25.9% 13.1% 33.3% 17.2% 45.3%	296.2 220.3 310.3 86.1 36.6% 27.4% 32.6% 27.6% 10.0% 10.9% 9.4% 10.3% 4.8% 2.0% 2.1% 2.2% 56.5% 60.1% 62.2% 60.8% £35.2 £43.8 £40.0 £45.5 £22.7 £28.5 £27.8 £28.9 £581 £730 £747 £673 30.9% 7.6% 15.2% 8.3% 20.5% 11.9% 14.5% 13.5% 34.6% 13.6% 20.3% 16.2%	161.5 120.5 173.1 339.6 31.5% 27.4% 29.2% 26.8% 11.0% 10.3% 11.2% 10.1% 2.5% 1.2% 2.2% 0.9% 57.8% 55.5% 60.4% 50.1% £37.3 £47.1 £39.2 £51.0 £26.6 £32.6 £26.6 £35.3 £774 £794 £841 £634 16.4% 2.9% 12.4% 0.9% 14.5% 8.0% 12.3% 7.6% 21.5% 11.6% 18.8% 9.1%	2.7% 3.1% 3.1% 2.6% 2.8% 2.5% 2.9% 161.8 254.6 244.7 117.2 210.1 80.9 247.7 26.9% 36.8% 33.8% 29.9% 46.9% 25.8% 37.4% 11.5% 11.3% 11.6% 11.4% 11.3% 10.5% 10.2% 4.0% 5.9% 3.2% 2.2% 4.0% 2.4% 3.4% 59.9% 53.2% 54.4% 57.8% 54.0% 60.4% 57.5% £40.8 £31.9 £35.2 £38.5 £36.9 £44.4 £35.8 £25.1 £19.8 £24.3 £28.1 £24.4 £28.3 £23.4 £653 £584 £663 £735 £488 £736 £550 16.7% 41.2% 16.0% 3.2% 11.2% 2.1% 7.7% 13.6% 19.3% 13.8% 10.3% 14.1% 12.3% 17.3% 18.6% 35.8% 23.1% 11.3% 31.0% 15.2% 28.6% 11.8% 27.9% 16.0%<	128.3 230.1 174.7 209.0 251.0 35.5% 41.0% 34.2% 36.9% 39.8 11.1% 11.0% 10.2% 10.4% 9.7% 2.3% 7.2% 3.8% 7.3% 8.8% 57.3% 54.0% 58.6% 56.9% 52.9 £40.9 £33.3 £36.3 £31.1 £28.6 £27.9 £22.2 £23.0 £17.9 £17.9 £689 £523 £561 £502 £38 7.4% 14.7% 6.4% 25.7% 31.8 12.0% 19.1% 16.2% 22.8% 23.3 20.0% 38.0% 30.1% 40.5% 46.7	7 81.3 177.3 126.3 233.9 302.4 % 27.6% 26.3% 29.9% 35.8% 38.0% % 11.0% 10.2% 11.2% 10.6% 9.9% % 2.0% 1.2% 1.3% 1.9% 2.1% % 59.7% 53.6% 52.3% 54.8% 54.7% 3 £48.3 £53.2 £45.2 £44.3 £40.2 4 £30.3 £38.9 £31.6 £30.1 £28.5 9 £712 £571 £609 £597 £499 % 3.4% 2.7% 4.1% 6.0% 9.0% % 7.6% 7.4% 7.7% 11.5% 11.5% % 10.5% 9.0% 12.1% 19.4% 20.9%	172.0 244.3 150.3 131.9 259.8 308.6 24.8% 36.8% 29.1% 28.8% 34.1% 39.6% 9.3% 10.1% 11.2% 10.8% 10.2% 9.6% 1.0% 1.5% 1.4% 1.4% 2.3% 4.5% 50.6% 52.4% 55.6% 53.9% 56.2% 54.4% £56.9 £40.7 £43.5 £44.0 £39.5 £31.4 £37.5 £28.5 £29.3 £31.5 £27.7 £21.7 £565 £626 £668 £706 £773 £528 1.0% 13.6% 6.2% 3.4% 11.3% 35.6% 6.4% 11.4% 9.7% 9.7% 10.3% 16.9% 8.1% 17.4% 12.0% 11.6% 18.2% 35.6%
	All crime (per 1k pop) Community needs index score E-withdrawn	202.1 486.4 81.8 96.3 100.2 200.0 122.9 108.4 99.1 88.3 103.7 106.8	94.1 61.4 105.5 37.3 168.5 101.6 84.6 84.6 67.8 128.8	135.1 35.2 80.2 70.5 98.8 64.0 80.7 76.3	113.9 24.0 68.0 46.4 94.9 68.3 87.5 40.4	89.7 109.6 81.5 39.8 112.1 50.3 81.1 94.9 109.5 123.5 123.7 137.8 63.1 127.5 0.0% 69.9% 37.4% 0.0% 0.0% 0.0% 0.0%	61.3 155.9 103.7 165.5 176.5 42.8 93.7 93.5 128.3 130.5	3 34.7 32.1 38.2 63.9 77.0 8 107.3 94.0 88.8 84.3 91.0	24.7 46.0 40.7 29.2 67.2 155.7 96.6 98.6 102.1 93.8 113.2 114.1

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HEALTH AND WELLBEING BOARD

7th December 2023

Report Title:	COST OF LIVING UPDATE
Report of:	DIRECTOR OF PUBLIC HEALTH

REPORT SUMMARY

This report provides the Health and Wellbeing Board with an update on cost-of-living work being taken forward by Wirral Council and partner organisations of the Health and Wellbeing Board. The report offers an overview of the challenges residents and businesses are facing because of cost-of-living pressures and the mitigating actions that are in place to support them and help alleviate some of these pressures.

This matter affects all wards in the Borough; it is not a key decision.

The activities outlined in this report support the vision of the Wirral Plan 2021 - 26, to 'create equity for people and place' and will contribute directly or indirectly to the five themes of the Plan:

- Sustainable Environment
- Brighter Futures
- Inclusive Economy
- Safe and Pleasant Communities
- Active and Healthy Lives

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to:

- 1. Note the latest updates and activity that have/are being carried out by partner organisations.
- 2. Continue to develop appropriate joint arrangements and actions to help mitigate the impacts of the cost-of-living pressures on residents.

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 Following the Council's Policy and Resources Committee in November 2022 the Health and Wellbeing Board were nominated to take the lead strategic role for action to tackle cost of living challenges in the borough.
- 1.2 This report provides members of the Health and Wellbeing Board with an update on the pressures local people are facing due to cost-of-living pressures and the current activity being taken to try and mitigate impacts and support local people.

2.0 OTHER OPTIONS CONSIDERED

2.1 Other options considered include not taking local action in relation to the cost-of-living pressures or to act as individual organisations. These options pose a risk to the health and wellbeing of residents, risk duplication of effort and an uncoordinated approach. Therefore, they have not been considered.

3.0 BACKGROUND INFORMATION

- 3.1 Households in the United Kingdom have experienced a significant fall in living standards since late 2021. As of January 2023, 92% of UK households reported that their cost-of-living had increased compared with a year earlier. In the same month, 67% of households had experienced monthly increases in their cost-of-living, down from a peak of 91% in the Summer of 2022.
- 3.1.2 Living standards decreased mainly because of the increase to higher food, electricity, and fuel costs. The crisis is even more acute for the poorest UK households, which typically spend a higher proportion of their income on food and housing costs. Although real households' disposable income (RHDI) grew by 1.2% in Quarter 2 (Apr to June) 2023, (Office for National Statistics here) many families are still facing real hardship.
- 3.1.3 Although the UK economy returned to growth in 2021 and avoided high levels of unemployment, inflation has reached levels not seen for decades. In October 2022, the CPI inflation rate reached 11.1 percent and is not expected to fall below the Bank of England target of two percent until at least 2024. While wages are currently growing, they are not keeping up with these rapid price rises, with regular pay falling by 2.6 percent in November 2022 when adjusted for inflation. The Office for National Statistics (ONS) calculates that total earnings in the three months to July 2023 were 8.5% higher than in the same period a year earlier. The ONS suggest the earnings figures were affected by one-off payments to NHS staff and civil servants but that real pay adjusted for inflation rose at an annual rate of 1.2%.
- 3.1.4 The war in Ukraine has also exacerbated inflation, particularly in relation to food and energy, the two sectors driving much of the high inflation. The crisis in the Middle East has not yet had major economic effects in the UK but as the crisis continues it may have a further detrimental effect on the economy.
- 3.1.5 Energy prices in particular have hit UK households hard, especially following an increase to the energy price cap (a mechanism to limit what suppliers charge per unit of energy) in April 2022. And although the price cap dropped from 1 October 2023 to an annual level of £1,923 many households are still feeling severe economic pressure as we head into winter.
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- 3.1.6 Poverty, poor health outcomes and health inequalities are inextricably linked. The Marmot Review (see here) and others have established that the lower one's social and economic status, the poorer one's health is likely to be. Extensive qualitative and quantitative analysis has been collated to understand current and projected impacts on Wirral residents, as well as reviewing evidence for local action that can be taken to mitigate the impacts; this can be found here.
- 3.1.7 A full breakdown of up-to-date statistics on how the Cost-of-Living Crisis is affecting Wirral can be found here

Latest updates from Health and Wellbeing Board Members

3.2 There is an extensive range of help and support in place across Wirral, with many agencies working in partnership to help coordinate an effective and comprehensive offer locally. The following is a snapshot of some of the latest activity.

3.2.1 Wirral Council

- The Council leads a wide range of support with partner organisations across
 the borough. A key part of this is co-ordinating effective communication to
 ensure that people in Wirral know about all of the support that is available to
 them and how to access it in one place.
- Information about the support available for people struggling to make ends meet is constantly updated on the Wirral Council website (here).
- **Wirral Infobank** contains detailed information on the wide range of support available including:
 - Benefits and tax information and advice
 - Debt or financial hardship, organisations offering advice and information on managing debt, or financial hardship grants
 - Housing options
 - Managing your finances
 - Community food support
 - Emergency food and fuel support
 - Warm hubs and Neighbour Hubs
 - Free or low-cost community activities

Wirral Infobank is available $\underline{\text{here}}$. There is also a helpline on **0151 606 2005** for people unable to go online.

Small Grants Fund

3.2.2 Community groups can apply for up to £20,000 to help local residents in need £650,000 of Small Grants Programme funding is available for frontline groups in Wirral who can help residents who are struggling to afford food and other essential items. Information and recipients of the previous round of the Small Grants fund can be found at the Wirral View Website here

Warm Hubs

3.2.3 Provision of Warm Hubs is being led by the Community, Voluntary and Faith (CVF) sector. There are currently over thirty public areas where people can go to keep Page 37

warm and socialise, spread right across the borough. Full details of all the Warm Hubs can be found here.

Magenta Living

- **3.4** Magenta living have developed their own Cost of Living Strategy which outlines their approach and a range of support including:
 - Financial Inclusion support to apply for the Rent Relief Fund providing £77,500 of funding to date.
 - Providing E-vouchers through which they have issued £2000 worth of supermarket vouchers to customers in need.
 - Cost of Living factsheets and Cost of Living Roadshows to engage with customers and promote support from other organisations. Using a benefit calculator and regularly signpost their customers to help and support through creative use of their website and social media.
 - Working in partnership with Wirral Food Bank to implement an emergency food hamper system for crisis intervention for customers.
 - Working with the Torus Foundation to supply Fuel Vouchers, and with Energy Project Plus to provide advice and vouchers to their customers.
 - To tackle furniture poverty, they are working with Refresh Furniture to provide good quality safe home furnishings.

3.5 Wirral Community Health & Care NHS Foundation Trust

Integrated Care Coordination Team

Provides holistic assessment of the home environment, including economic wellbeing.

• 0-19s Service

Grocery Corner – non-perishable food items and self-care items delivered to Birkenhead and within Birkenhead Healthy Child Clinic. This offers immediate support plus some longer-term options are also available. Links to social supermarket within children's centres and refer for budgeting advice. Also works with support from the Life Church, e.g. summer packs and for distribution in school holidays and Christmas boxes. Drop-in centre in St Catherines to meet together before or after clinic to get a cup of tea from the café offering a warm and friendly environment.

Christmas Hampers

In partnership with the children's centres and round table groups to support the delivery of Christmas hampers alongside toys from Radio City toy appeal.

Signposting and benefit support

Families are supported to access CAB sessions at children's centres to ensure that all the correct entitlements are accessed for their family. Also support access to the Healthy Start scheme which provides milk and fresh food for families via a shopping card that they can use in recognised stores. Advise and refer to organisations and provide support for access to fuel vouchers and budgeting support.

White goods and referrals for essential items

Linked with agencies and charities, referrals for families who require any essential items. St Vincent de Paul is often used as a referral option for this, and this charity have been able to ensure access to white goods/cots/prams.

Holiday Access Funding

Support with partners review of HAF funding allowing venues to request funding to offer summer activities and access to clubs with meals, fit club team have also supported with the advice and support around the food choices to ensure that the providers are offering healthy, nutritious meal choices within this offer.

Support for Staff

Health Service organisations all have a wide range of services aimed at alleviating cost-of-living pressures faced by their own staff.

Healthwatch Wirral

Healthwatch Wirral are initiating several local projects to help try and alleviate some 3.6 of the problems local residents face from the cost-of-living crisis. Wherever possible they go out into local communities to try and avoid people having to travel. They ensure information about debt, benefits and energy bills are regularly highlighted in their newsletter and high-profile social media campaigns. They are also involved in imaginative campaign to distribute ipads within the local community to help tackle digital exclusion.

Merseyside Fire and Rescue Service

- 3.7 The National Fire Chiefs Council have developed a Toolkit which is used by each Fire and Rescue Service in England and Wales – Merseyside Fire and Rescue **Service** (MFRS) have adopted this toolkit which can be found here. MFRS visit 60,000 properties each year in Merseyside to talk with residents about Home Fire Safety. At these visits, particularly throughout the colder months, Firefighters and Fire Prevention staff give detailed information on cost-of-living support including:
 - 1. Correct candle usage
 - 2. How to heat a home efficiently and safely
 - 3. The dangers of drying clothes near open fires
 - 4. Checking old or faulty electrics or electric appliances (such as electric heaters or electric blankets)
 - 5. The importance of chimney inspections/cleaning if using an open fire
 - 6. The importance of Carbon Monoxide alarms if using an open fire
- 3.8 Fire service staff are also able to identify and signpost those who require support from Housing providers, Local authorities, Utility companies etc.
- 3.9 For fire service staff they have a socio-economic deprivation staff network which meets quarterly so that our staff are represented at a strategic level.

Jobcentre Plus

3.10 Jobcentre Plus actively promote the Governments Help for Households support which can be found here. They work closely with local partner organisations, to coordinate support, signposting their customers for appropriate advice. Page 39

Economic Resilience

- 3.11 Under Investment Priority 'Community and Place' of the Liverpool City Region UK Shared Prosperity Fund (UKSPF), a £2m support scheme has launched to help the region's most vulnerable residents withstand the cost-of-living crisis. The Combined Authority (CA) has joined forces with The Women's Organisation, Citizens Advice and other community providers to offer the Better Off Support (BOS) programme.
- 3.12 The scheme will deploy a range of targeted advice, guidance and support to people hardest hit by the sudden rise in the price of food and energy to help them escape financial chaos and achieve a level of personal stability. BOS will help people deal with debt and manage their money whilst providing support to maximise income, as well as guidance on energy efficiency and how to access home improvement schemes.
- 3.13 Locally, Wirral Council is delivering on three investment priorities which will assist in mitigating the economic impacts of the cost-of-living for our residents and businesses, these are:
 - Phase 1 'Communities and Place' which can be delivered from April 2022 and aims to foster local pride and build safe and resilient neighbourhoods. Phase 1 will see a broad range of initiatives including additional promotion of local high streets to encourage people to use their local shops and support high street sustainability, there will be a campaign for 'Small Business Saturday' on 2nd December 2023 and a weeklong campaign for Wirral in Spring 2024.
 - Phase 2 'Local Business' support commenced 1 October 2023, aiming to create jobs, promote collaboration, and increase private sector investment. Wirral Council commissioned Wirral Chamber of Commerce to deliver a fully funded Business Support Service which is universally available to all Wirral businesses and entrepreneurs. Recognising the increased cost-of-living, the Business Support Service offer's advice and support for businesses to implement sustainable energy solutions to assist in the reduction of high energy costs along with general business support and guidance around all other topics. The Phase 2 'Local Business' strand will support the commission of specialist support for an identified growth opportunity in the borough.
 - Phase 3 'People and Skills' will commence in April 2024 and will improve skills and qualifications to reduce economic inactivity. The Local Authority led flagship Employment & Skills programme will provide bespoke employment support to economically inactive people to help them re-enter the labour market. This programme will be the successor programme to the ESF funded 'Ways to Work' Programme. The redesign will focus on those furthest from the labour market and will also strengthen the recruitment and redundancy support offer for businesses.

4.0 FINANCIAL IMPLICATIONS

4.1 Wirral council has been allocated £ 6,098,690 for the latest iteration of the Household Support Fund. The scheme and funding span a 12-month period 01.04.2023 – 31.03.2024. This is a change from the 3 previous rounds, each of which ran for a 6-month period. The HSF R4 Small Grants Programme (Winter 2023 scheme) has now been launched and applications have already been received.

- 4.2 The main areas of support will continue to offer children food provision across school holidays through NEO community. They deliver to every school in the area. The other main funding stream offers fuel support to residents with both arrears and ongoing fuel support.
- 4.3 The small grant scheme supported 43 organisations to deliver a total of £609,717 with £583,926.00 going to support vulnerable people in the community and £25,791.00 to cover the admin/delivery of the projects.
- 4.4 The table below shows how these allocations have been distributed. The amounts have been allocated in accordance with guidance provided by the Department of Work and Pensions.

	Organisation	HSF	4 Proposals
Wirral Household Support			
Fund - small grants	Various organisations		
programme		£	1,300,000.00
Early Years food, bulk school	No. Community		
pantries & essentials hampers	Neo Community	_	4 000 000 00
(school holidays)		£	1,300,000.00
School Emergency Food	Neo Community	_	400 000 00
Pantries - fresh deliveries	-	£	186,000.00
Additional Emergency	Wirral Council	_	000 000 00
Financial Support spend		£	200,000.00
Financial support with fuel	Wirral Council via Fuel Bank	£	700,000.00
(pre-paid meters)			
Financial support with fuel (Energy and water debt) -	Wirral Council referrals from CAB		
direct debit customers	& EPP	£	1,100,000.00
Crisis support with emergency		~	1,100,000.00
heating	Energy Project Plus	£	46,000.00
neating	North Birkenhead Development	~	40,000.00
Crisis support with white goods	Trust & St Vincent de Paul		
Chois support with write goods	Society	£	160,000.00
	1	~	100,000.00
Housing Support Costs (Rent)	Wirral Council	£	100,000.00
Food support for out of school	LIAE Education CIC		
activities	HAF – Edsential CIC	£	150,000.00
Housing Ropofit Only Cohort	Wirral Council		
Housing Benefit Only Cohort	Willar Coulicii	£	30,000.00
Care Leavers support -	Wirral Council / Neo Community		
pantries and energy	Willar Council / Neo Community	£	67,600.00
Older person support / freeing	Age UK		
up NHS beds	Age Of	£	100,000.00
Childrens services support for	Wirral Council	£	
vulnerable families	Willai Coulicii		500,000.00
Administration costs	Wirral Council and Partners	_	450 000 00
		£	150,000.00
Total Award		£	6,093,600.00
Balance			£ 9,090.00

4.3 Further details with regards to the indicative spend outlined in the above table are available in appendix 1.

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5.0 LEGAL IMPLICATIONS

- 5.1 Many of the services and support mechanisms provided by the Council are carried out through a variety of legal powers that assist those functions, having regard to the public sector equality duty, best value, and other requirements.
- 5.2 As well as exercising its powers under these specific provisions, the Council has a wide-ranging general power of competence that will enable it to act in this way to secure the best interests of the Borough, its economy, and the persons resident or present in its area.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 All partner organisations are integrating Cost-of-Living work into their existing work programmes.

7.0 RELEVANT RISKS

- 7.1 Failure to recognise and respond to cost-of-living challenges will put residents at risk from a whole set of consequential impacts, if they are not able to access funding required to afford their basis needs. This includes:
 - Falling into poverty
 - Poor physical and mental health
 - Evictions from accommodation and the impact on health of poor housing
 - A decrease in educational attainment
 - Loss of employment, business and livelihoods
 - Exposure to unscrupulous individuals e.g., loan sharks
 - Negative impacts on community safety caused by potential increases in theft, burglary, and other relevant crime
 - Increased safeguarding risk of the grooming and exploitation of children, young people, and vulnerable adults, posed by organised crime gangs/county lines activity.

If the Council and partner organisations do not respond to cost-of-living challenges in terms of fulfilling community leadership roles, the consequential impact on residents could be long-term, and may result in exacerbated financial and capacity pressures on the Council and its partners in the future.

8.0 ENGAGEMENT/CONSULTATION

8.1 The Council coordinates partnership working and engagement to ensure an effective and comprehensive range of support. Partners have been working together for some time to determine the impact, mitigations already in place and what additional support can be provided if required.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

9.2 There is scope for there to be fundamental equality implications as a result of the cost-of-living challenge. Several pieces of insight have been undertaken with local people to inform the work programme ensuring the voice of residents and those who are particularly vulnerable are informing policy and communications. The reports are available to view at the following link here

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 Actions to mitigate the cost-of-living challenge will also contribute towards attainment of Wirral Cool 2 Strategy, and the Councils carbon net zero target by 2030. For example:
 - Heating and powering buildings currently makes up 40% of the UK's total energy usage. Support provided to reduce risks of fuel poverty may include improving the energy efficiency of homes, which will have a beneficial impact on reducing carbon emissions.
 - Initiatives related to supporting people in food poverty may also support the reduction of food waste.
 - initiatives to support local businesses to support sustainable energy usage in support of reduced energy costs

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 The activity identified in this report will take place across Wirral and will be based around the local public sector and community organisations active in the Borough. These 'anchor institutions' will work together to mitigate impact on local residents and businesses as far as possible.

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APPENDICES

Appendix 1 – Household Support Fund – Winter Allocation

BACKGROUND PAPERS

Local Government Association, Cost of Living Evidence Hub: https://www.local.gov.uk/our-support/safer-and-more-sustainable-communities/cost-living-hub

Cost of Living Crisis, Wirral Intelligence Service JSNA (Joint Strategic Needs Assessment), Wirral Council:

https://www.wirralintelligenceservice.org/state-of-the-borough/cost-of-living-crisis-2022/

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section (C) of its Terms of Reference: To provide a local governance structure for local planning and accountability of health and wellbeing related outcomes

SUBJECT HISTORY (last 3 years)

Health and Wellbeing Board	Date

Cost of Living	29 September 2022



HEALTH & WELLBEING BOARD

Thursday, 7 December 2023

REPORT TITLE:	HOUSEHOLD SUPPORT FUND 4 (1 APRIL 2023 – 31 MARCH 2024) UPDATE
REPORT OF:	DIRECTOR OF FINANCE

REPORT SUMMARY

This report provides a summary of the proposed spend of government's Household Support Fund (£6,098,690) for the period 1 April 2023 to 31 March 2024, which is available to support those most in need with the cost of food, energy (heating, cooking, lighting), water bills (including sewerage) and other essentials.

ALLOCATIONS PROPOSED TO POLICY & RESOUCES

1. Health and Wellbeing Board is recommended to note the update progress of the local allocation of the Household Support Fund as outlined below:

Name	Organisation	HS	F 4 Proposals
Wirral Household Support Fund - small grants programme	Various organisations	£	1,300,000.00
Early Years food, bulk school pantries & essentials hampers (school holidays)	Neo Community	£	1,300,000.00
School Emergency Food Pantries - fresh deliveries	Neo Community	£	186,000.00
Additional Emergency Financial Support spend	Wirral Council	£	200,000.00
Financial support with fuel (pre-paid meters)	Wirral Council via Fuel Bank	£	700,000.00
Financial support with fuel (Energy and water debt) - direct debit customers	Wirral Council referrals from CAB & Energy Project Plus	£	1,100,000.00
Crisis support with emergency heating	Energy Project Plus	£	46,000.00
Crisis support with white goods	North Birkenhead Development Trust & St Vincent de Paul		
	Society	£	160,000.00
Housing Support Costs (Rent)	Wirral Council	£	100,000.00
Food support for out of school activities	Holiday Activities and Food Support – Edsential CIC	£	150,000.00

Housing Benefit Only Cohort	Wirral Council	£	30,000.00
Care Leavers support - pantries and energy	Wirral Council / Neo Community	£	67,600.00
Older person support / freeing up NHS beds	Age UK	£	100,000.00
Childrens services support for vulnerable families	Wirral Council	£	500,000.00
Administration costs	Wirral Council and Partners	£	150,000.00
Total Award		£	6,093,600.00
Balance			£ 6,090.00

HOUSING SUPPORT FUND 4 - SUPPORTING INFORMATION

Wirral Household Support Fund – small grants programme (£1,300,000)

This in the past has included community-based food and welfare support groups, including many that played a key role supporting residents through the pandemic, Applications were accepted for up to £20,000 (plus up to £2,000 administration costs) to help ensure that food and essential items are available to those most in need in their local communities.

It was proposed to hold two rounds of bidding cover the summer and winter periods. The summer period has now concluded, details of successful bids are shown below

Organisation / charity	Total	Areas of benefit
Equilibrium North West Reprieve Project	£20,000.00	All areas
Hype Merseyside - Vibrants Parks	£12,600.00	Birkenhead & Wallasey
The Oak Community Project at Christ the		Birkenhead, Bromborough &
King Church	£18,700.00	Wallasey
Eastham Community Church St Marys	£1,250.00	Eastham
The Positivitree - Send Support	£20,000.00	All areas
Tranmere Rovers in the Community	£20,000.00	All areas
Koala North West	£6,500.00	All areas
Involve North West	£19,750.00	All areas
Shaftesbury Youth Club	£18,900.00	All areas
Rotary E-Club of District 1070 - Coats4kids	£11,825.00	Greasby, Hoylake, West Kirby

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£21,000.00 £10,500.00 £19,950.00 £9,870.00 £15,120.00 £21,000.00 £16,800.00 £7,350.00	All areas All areas Birkenhead & Prenton All areas
£19,950.00 £9,870.00 £15,120.00 £21,000.00 £16,800.00	All areas All areas Birkenhead & Prenton All areas
£9,870.00 £15,120.00 £21,000.00 £16,800.00	All areas Birkenhead & Prenton All areas
£15,120.00 £21,000.00 £16,800.00	Birkenhead & Prenton All areas
£21,000.00 £16,800.00	All areas
£16,800.00	
·	147 - 1 - 1 - 1
£7,350.00	Woodchurch
	Moreton and surrounding area
£15,000.00	Birkenhead & Prenton
£16,149.00	Birkenhead & Wallasey
£8,400.00	Wallasey
£13,650.00	Prenton
£16,800.00	All areas
£20,700.00	Wallasey & Seacombe
£10,500.00	Beechwood
£10,500.00	Eastham & Bromborough
£9,980.00	Wallasey & surrounding area
£11,140.00	All areas
£10,371.00	All areas
£21,000.00	All areas
£21,000.00	Wallasey & surrounding area
£13,230.00	Bidston, Birkenhead, Tranmere & Claughton
£10,500.00	Noctorum
£10,500.00	Leasowe
£15,750.00	Birkenhead & surrounding
£20,000.00	All areas
£8,505.00	All areas
£4,725.00	All areas
£4,872.00	South Wirral area
£5,330.00	Rock Ferry and surrounding
	£8,400.00 £13,650.00 £16,800.00 £10,500.00 £10,500.00 £10,371.00 £21,000.00 £21,000.00 £13,230.00 £10,500.00 £15,750.00 £20,000.00 £4,725.00 £4,872.00

Church		area
Nightingales	£19,500.00	All areas
Neo Community	£18,900.00	All areas
Future Challenges	£10,000.00	All areas
Vale House Community Centre	£8,400.00	Wallasey and surrounding area

Small Grants Winter Scheme

The winter scheme was open for bids between the 30 October and the 13 November, the bids are in the process of being assessed.

Successful Bidders will have until the 15 March 2024 to spend their allocation and will be subject to the established audit requirements (submission of receipts, etc.), which is consistent with the monitoring of previous small grants programmes.

Details of the successful bids will be shared with councillors.

Early Years food, essential hampers during school holidays & Emergency School Food Pantries (£1,300,000)

Targeted support through the provision of food & essentials hampers will be provided to families eligible for 2 Year Funding/Early Years Pupil Premium (precursors to eligibility for Free School Meals when a child starts primary school).

Other local families with children under 5 who may need the same support will be signposted to their nearest Children's Centre to discuss applying.

Primary, secondary, special schools, leaving care provision and Sixth Form Colleges will be given a store of ambient items for the children to take home and use over the winter period. The project builds on the success of a similar scheme delivered in partnership with local charity Neo Community.

School Emergency Food Pantries Fresh Food Provision (£186,000)

Working with the Schools Pantries to provide 93 schools with £500 vouchers to allow them to purchase and provide additional items of fresh food to complement the existing offer of dry and long-life goods. These vouchers will be provided in instalments at a cost of £ 46,500 per quarter.

Emergency Support Fund (£200,000)

Transfer of monies to the council's Emergency Support Fund (ESF) to allow additional grants to be made. This existing fund administered by the council is accessible to all residents across the borough and provides a wide range of emergency support. Residents are signposted for support in addition to information provide within council publicity relating to cost-of-living support and on the council's website. This a fundamental ask of the government guidance as this scheme available and open to all.

Financial Support with Fuel and with Fuel & Water Debt (£1,800,000)

Vulnerable residents who are unable to pay for the fuel they need to heat and power their homes or are struggling to deal with fuel and water debt can apply for help in several ways:

Those with pre-payment meters can request a fuel voucher (gas and electric) from national charity, Fuelbank Foundation, via their local delivery partners Citizens Advice Wirral, Involve Northwest and Energy Projects Plus, as well as via the Emergency Financial Support Scheme (see below).

People who pay by direct debit can apply for help towards their fuel and water costs, which will be paid directly to their utility provider following an assessment and referral by Citizens Advice Wirral.

People struggling with fuel and water debt can request help to clear or reduce their debt from Citizens Advice Wirral and Energy Projects Plus.

People in crisis situations who are unable to repair or replace broken or obsolete heating and do not qualify for help under other programmes can apply to local charity Energy Projects Plus for help under the Crisis Support with heating scheme.

Energy Projects Plus (£46,000)

Capital funding for heating & plumbing appliance repair/replacement for vulnerable, low-income Wirral residents without recourse to such funding elsewhere, or who would be at a disadvantage if they were required to wait for other schemes to process their application.

Crisis support with white goods (North Birkenhead Development Trust & St Vincent de Paul Society) (£160,000)

Throughout the various iterations of the Grant, community-based partners, North Birkenhead Development Trust and St Vincent de Paul Society (Wirral), have provided white goods and other essential items to vulnerable households who do not meet the threshold for Council support through its Financial Support with Welfare Needs Scheme. A further allocation of funding will see this support continue over the coming months. This support is available and distributed across the whole of the borough.

Housing Support Costs (£100,000)

The Fund allows for support with housing costs, in exceptional cases of genuine emergency where existing housing support schemes do not meet this exceptional need. Where eligible, ongoing housing support for rent must be provided through the housing cost element of Universal Credit and Housing Benefit rather than the Household Support Fund. In addition, eligibility for Discretionary Housing Payments (DHPs) must first be considered before emergency housing support is offered through the Household Support Fund. Wirral must first consider whether the claimant is at statutory risk of homelessness and therefore owed a duty of support through the Homelessness Prevention Grant. This funding cannot be used to provide housing support on an ongoing basis or to support unsustainable tenancies, or to provide mortgage support. The use of the Fund for this purpose will be administered through the Council's Revenues and Benefits service. Eligibility is expected to be limited based on the criteria stipulated.

Out of School activities - Holiday Activities and Food Support (£150,000)

The holiday activity and food programme (HAF) is a national programme that supports benefits related free school meal eligible children during the spring, summer and winter holiday periods. Over the previous summer/winter we had over 43 clubs and activity venues running over the holidays and the household support fund is funding the food element of the project. Each child attending will receive a nutritious meal each day, they attend the programme. This is a great opportunity to reach thousands of Households during the school

holidays, and with the pressures on everyone's budget, this will give children a warm, exciting and magical time. The HAF project is funded by the Department for Education, managed by Wirral Council, and coordinated by Edsential CIC.

Support for recipients of Housing Benefit (£30,000)

There is a very small cohort on households who receive Housing Benefit and no other benefits provided by the Department for Work and Pensions. The guidance explicitly mentions support for this group as they had missed out on the £900 Cost of Living Payments made by central government. Payment of £900 is to be paid via a Post Office Voucher scheme in November to ensure support is provided to those who need it most.

Care Leavers Food Pantry (£67,600)

Working with the councils Children's Services to provide funding to enable the food pantry to purchased additional items of fresh food to complement the existing offer of dry and long-life goods.

Quality of Life Support for Over 65's (£100,000)

Working with Age UK this grant will allow them to support several projects across the Wirral.

Supporting people to enhance their quality of life with specific focus on, Nutrition, Maintaining/increasing independence at home, Avoidance of hospital admissions, Prevention of carer breakdown and financial support to carers/vulnerable older people for essential items/bills. This funding aims to support around 800 unique individuals, with those in most need receiving more than one area of support. Individuals will be those already registered with Age UK services, and new people that they encounter at Arrowe Park Hospital, in our charity shops and through referrals into services.

They envisage 60% of recipients to be over 65 and that 70% of those supported will have a long-term health condition. Clients from all parts of the Borough will be supported, but there will be targeted support in Wallasey and Birkenhead.

Support for Vulnerable Families (£500,000)

Children's services provide significant support that children and families both from our statutory services and from our extensive early help offer. Our early help offer is non-statutory and is delivered in partnership with community voluntary and faith organisations across the Wirral.

Children's services receive around 12,000 plus contacts per year from professionals and families with concerns about the welfare of the children in the household. Due to the increased challenges regarding fuel poverty and the cost-of-living and are identifying more of these families in dire financial straits. They are no longer able to afford the basics (food, clothing, gas and electricity). For some they are meeting these costs but then cannot afford another basic need (for example bus fare to school etc). For these families they always look for a long-term solution.

They will attempt to help them resolve their financial crisis. However, short term bridging finance is often required, as many of these families have already exhausted funding from other sources. These are cases where there is no other source of funding or help is available. The additional money will be spent in small individual family grants and offered along with the support and advice needed.

Administration costs (£150,000)

HSF Scheme guidance allows for a reasonable level of administration costs to be allocated from the funding. Wirral are utilising this funding to support the administration of the whole programme including but not wholly dealing with the increased administration costs of operating an increased application-based assistance schemes under Emergency Support Fund and small grants programs.

DEPARTMENT OF WORK AND PENSIONS (DWP) VISIT

We were approached by the Local Welfare Assistance policy team at the DWP, to hold an in person visit with Wirral Council to help broaden the DWP's understanding of how the Household Support Fund is being used day-to-day as well as to explore the logistics, outcomes, and operational delivery of the scheme in practice and to explore the role and impact of the Household Support Fund in our community. These meetings are being undertaken with several LAs.

We invited some of our integral partners and stakeholders to join us for this meeting. These are Third Party Organisations who work closely with Wirral Council, supporting our distribution of the DWP Household Support Fund, and to help demonstrate the role and impact of the Household Support Fund in our community.

Members of the Household Support Fund Delivery Team outlined how the funding has been utilised in this and previous tranches of Household Support Fund. Representatives from NEO, Wirral's CAB, Make it Happen (SGP Recipient) and internal colleagues from Housing Options and the Councils Communications Team were also present.

These are some of our integral partners and stakeholders who work closely with Wirral Council supporting our use of the DWP Household Support Fund. Their delivery experience coupled with a clear understanding of community issues faced by our residents is invaluable.

The meeting was very successful with the DWP official noting that that the Wirral have been very proactive in our approach, making wide reaching efforts to ensure that the funding remains available to all in need, but continues to be compliant with the DWP directive for spend.

Each of our partners spoke about the positive outcomes and were able to provide examples of the huge impact Household Support Fund has had on the residents they support.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Policy & Resources Committee	14 June 2023
Officer Decision Notice – Household Support Fund (Oct	8 December 2022
22 – March 23)	
Policy & Resources Committee	9 November 2022
Officer Decision Notice – Household Support Fund	28 June 2022
Officer Decision Notice – Household Support Fund	26 October 2021
Officer Decision Report – COVID Local Support Grant –	8 July 2021
extension No.2 (21 June 2021 – 30 September 2021)	
Officer Decision Report – COVID Local Support Grant	20 April 2021
(COVID Winter Grant Scheme – extension)	
Officer Decision Report – COVID Winter Grant Scheme	16 March 2021
Children, Young People & Education Committee	28 January 2021
Children, Young People & Education Committee	1 December 2020
Officer Decision Report – COVID Winter Grant Scheme	24 November 2020
Children, Young People & Education Committee Children, Young People & Education Committee	28 January 2021 1 December 2020

Policy & Resources Committee	11 November 2020



HEALTH AND WELLBEING BOARD 7 December 2023

REPORT TITLE:	CONTAIN OUTBREAK MANAGEMENT FUND GRANT CLOSURE REPORT
REPORT OF:	DIRECTOR OF PUBLIC HEALTH

REPORT SUMMARY

The purpose of this report is to provide a summary to Health and Wellbeing Board on Wirral's use of the Contain Outbreak Management Fund, following the decision by Policy and Resources Committee in June 2023, as the time limited, one-off funding has concluded. The Contain Outbreak Management Fund contributed to the ambitions of the Wirral Plan.

This matter affects all wards within the borough; it is not a key decision.

RECOMMENDATION

The Health and Wellbeing Board is recommended to note the contents of the report.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 This report provides an update on the Contain Outbreak Management Fund (COMF) and outlines how this grant funding was utilised locally to keep Wirral residents safe from Covid-19 and deliver projects to support residents with the wider impacts of the pandemic.

2.0 OTHER OPTIONS CONSIDERED

2.1 The decision to report to the Health and Wellbeing Board regarding the COMF grant was taken by Policy and Resources Committee, and therefore no other options have been considered.

3.0 BACKGROUND INFORMATION

3.1 **Background**

The COVID-19 pandemic has been the most challenging emergency the Borough of Wirral, and the Council has responded to in recent times. The nature of the pandemic saw the Council react at speed to implement government policy and local priorities to limit the spread of the virus, protect the health of all our residents and ensure the most vulnerable in our communities are safe and cared for.

3.2 Wirral's COMF Allocations

Wirral received a total of £14,784,031 COMF, starting with the initial allocation in mid-2020. Figure 1 provides a breakdown of Wirral's COMF allocations received, from the initial payment in June 2020, to the final allocation in May 2021. On an annual basis, local authorities were informed of decisions to extend the time period for full COMF utilisation. In 2022, we were informed that the end date for COMF expenditure was March 2023.

3.3 COMF allocations were sporadic, and there was very little certainty around levels of funding and time constraints for use. This feedback has been shared with national bodies, both during the height of the pandemic, and in the recovery phase to help inform future planning.

Figure 1: Wirral Contain Outbreak Management Fund allocations (June 2020- May 2021)

Allocation	Month Received/Confirmed	Total
1	Jun-20	£2,733,018
2	Nov-20	£2,701,000
3	Nov-20	£866,126
4	Dec-20	£1,018,320
5	Jan-21	£648,022
6	Mar-21	£1,134,039
7	Mar-21	£1,434,906
8	Mar-21	£1,666,343

9	May 2021	£2,582,257
		£14,784,031

3.4 Governance and Grant Criteria

The UK Health Security Agency provided funding criteria to local authorities on the required use of COMF. Directors of Public Health were responsible to sign off expenditure via national grant returns, and local authorities were instructed to utilise COMF in line with their judgement, on areas that would deliver the greatest impact, across:

- Public Health action on the impact of COVID-19 on health outcomes and health inequalities, and
- Public Health recovery projects aimed at directly addressing health inequalities.
- 3.5 In Wirral oversight of COMF during 2020 and onwards operated through the Council's COVID-19 governance arrangements, and the Strategic Outbreak Cell, which was chaired by the Director of Public Health and reported to the Council's Tactical Co-ordination Group (TCG). Regular updates on the development and delivery of Wirral's Local Outbreak Management Plan were provided to the Adult Social Care and Public Health Committee, as well as to Group Leaders and local MPs, by the Director of Public Health.
- 3.5 Following additional COMF allocations distributed to local authorities in 2021, a cross party Working Group was established, following recommendation from the Policy and Resources Committee. The COMF Working Group met regularly, to review and enable detailed consideration, guidance, and support for the development of activities and initiatives, funded by COMF. The Working Group had oversight of proposals for COMF expenditure and received updates on delivery of grant funded projects from the Director of Public Health and relevant officers.

3.7 **COMF Expenditure**

Using the COMF criteria, Wirral's expenditure was managed under two overarching themes: initially the Local Outbreak Management response, and then in the latter stages of the pandemic, the Renewal and Recovery projects. Figure 2 provides a summary of Wirral's COMF expenditure by overarching themes and projects.

Figure 2: Overview of Wirral COMF expenditure by theme

Theme	Total Spend
Local Outbreak Management Response (Total)	£9,319,271
Community engagement	£3,830,847
COVID-19 Outbreak Hub	£2,819,544
Housing and homeless support	£704,025
Infection prevention control service	£501,516
Communications	£482,232
Regional Test and Trace Hub	£390,247
Support for educational settings	£246,514
Public Health intelligence	£213,484

Vaccination and testing	£130,862
Renewal & Recovery (Total)	£5,464,760
Community, Voluntary and Faith sector grants	£1,547,723
Cost of living grants	£1,304,492
Digital inclusion projects	£1,000,318
Fuel poverty projects	£501,500
Debt management and employment support	£501,044
Winter resilience	£487,183
Mental health support for children and young people	£122,500
Overall Total	£14,784,031

3.8 Local Outbreak Management Response

In 2020 all local areas were mandated by government to develop Local Outbreak Management Plans outlining how local areas will break chains of transmission to prevent and contain outbreaks and protect high risk setting and residents. The COMF grant was a key enabler to successfully delivering against the objectives in Wirral's Local Outbreak Management Plan, funding the wide-ranging priorities and objectives. COMF supported Wirral's Public Health team to work in partnership with colleagues and across the system to prevent, contain and manage local outbreaks and transmission. COMF enabled Wirral's approach to be flexible, sustainable, and collective, working as a system, across a number of priorities. Figure 3 provides an overview of the key activities, services, and projects delivered using COMF within Wirral's Local Outbreak Management Plan.

Figure 3: Wirral's Local outbreak management priorities funded by COMF

Priority	Summary of key activities, services, and projects
Ensure access to timely local data and intelligence to inform local activity to prevent and manage outbreaks.	Implemented robust local surveillance system to manage outbreaks and provide support to variety of settings through Wirral's COVID-19 Hub. Implemented and developed case management platform leading to improvements in the collection and reporting of data, and proactive identification of exposures/potential outbreaks. Council leadership in daily multi-agency surveillance meetings at local and regional levels to understand epidemiology, and direct prevention and control measures, community engagement activity and targeted communications. Public Health intelligence contributed to the Cheshire & Merseyside data and analyst network, helping to sustain regional understanding and likely system demands.
Engagement and Communication	Supported communications under the 'Keep Wirral Well' branding, enabling a strong focus on engagement and communication, with a clear strategic, insight-led approach.
Build trust and participation through effective community	Developed a test, trace, isolate, and vaccinate communications plan to reinforce key messages, helping to reduce transmission, aligned to changing national policy.

engagement and Established a Community Champions' network enlisting communication. over 600 local champions who helped by distributing guidance and encouraging adherence and behaviour change in local communities. The programme was jointly evaluated as part of the LGA behavioural change programme and has been upheld as good practice at a national event. Invested in local Community Connector service, recruiting extra Community Connectors, to undertake proactive engagement with communities with lower testing and vaccination uptake. Invested in local ethnic minorities link workers, to enhance existing engagement with communities, to maximise participation with testing and vaccination. Higher-risk Partnership led by the Council's COVID-19 Hub on settings, prevention and management of outbreaks in high-risk communities, and settings, implementing robust review processes and using locations local intelligence to proactively support higher risk settings. Co-ordinated health and social care response; overseeing capacity, trends, resources, updated guidance, led system Identify and support high risk workplaces. partnership, responding to emerging system pressures. locations, and Council's COVID-19 Hub School Support Team provided communities to dedicated support and guidance on national policies and implementation of required measures for various settings. prevent and manage Engaged with local third sector, voluntary and other outbreaks. organisations, and groups to respond to needs of local communities particularly at risk of COVID-19. Worked with the local business sector, including Wirral Chamber of Commerce, to support COVID-safe organisational settings, including development of business toolkit to maintain safe working environments. **Supporting** Developed a Humanitarian partnership, co-ordinated by the vulnerable and Council, with over 100 local groups, working together to underserved support local communities. communities Developed targeted communications in areas of high incidence, highlighting guidance/support available, and maintained contact with clinically extremely vulnerable Proactively support individuals and residents. Worked with local multicultural third sector groups to communities. support access to regular symptom free testing. ensuring test, trace, isolate, and support systems are accessible and meet the diverse needs of communities. Vaccination In partnership with NHS, supported roll out of COVID-19 vaccination programme, in line with Joint Committee on Vaccination and Immunisation priorities. First COVID-19 Support the roll-out of the COVID-19 vaccination administered in Wirral on 8th December 2020.

Prioritised homeless people and rough sleepers for the vaccine programme, identifying and COVID-19 vaccine using local data, intelligence, and tackling inequalities engagement to address areas of low uptake within local in vaccine coverage. communities. Facilitated targeted COVID-19 vaccination Q&A sessions for social care staff with clinical experts from midwifery. pharmacy, and general practice. Increased access opportunities with outreach vaccination programme, delivered in partnership. **Testing** Developed flexible local testing offer across symptomatic, asymptomatic and outbreak testing, including an in-house Identify cases of testing service commencing in December 2020. Wirral was COVID-19 by one of the first areas to commence symptom-free ensuring access to community testing in the UK. testing for those Developed and sustained Wirral's Testing Strategy aligning with and without to the national plans for community testing. symptoms and for Implemented outreach and mobile testing and test kit outbreak distribution, targeting testing in high-risk settings, for the most vulnerable residents. management. Provided training and quality assurance around testing processes in workplaces and other settings. **Contact tracing** Delivered an in-house local contact tracing service, participating in national programmes, helped improve case completion rates by use of local knowledge and support. Effectively deploy Worked collaboratively with the Cheshire and Merseyside local contact tracing Hub, Public Health England and the Department of Health to reduce the and Social Care Local Tracing Partnership forums, to onward transmission influence and strengthen the local contact tracing system, of COVID-19. reaching people national systems were unable to, and responding to high-risk complex cases and settings. Supported health and social care, schools, local businesses and other settings through intelligence led contact tracing and where a focused outbreak response is appropriate. Support for self-Produced targeted guidance on self-isolation accessing the isolation self-isolation payment scheme, wider welfare support and Ensure access to non-financial support available. support, including Worked with Wirral Chamber and local businesses to where appropriate support awareness of employer responsibilities in financial support, to supporting staff to self-isolate when required. ensure people who Supported people at risk of being unable to self-isolate, need to self-isolate through follow up messaging and proactive welfare checks. can do so. Provided practical support throughout isolation period for most vulnerable, or at risk of not being able to isolate. Engaged with local communities to understand barriers for self-isolation, using insight to address gaps in local response and other areas of support. Responding to Responded locally to a Variant of Interest across the

Variants of Concern (VOC)

Develop robust plans and working with local, regional and national partners to enable surge capacity, to respond to local outbreaks and VOC. Northwest, in December 2021 working with national and local partners to undertake enhanced contact tracing, access to additional symptomatic testing capacity and effective public communications.

Developed local plans outlining surge responses related to enhanced contact tracing, testing, communication, and engagement.

Compliance, Enforcement and Living with COVID-19 (COVID secure)

Work collaboratively to guide, inform and support local compliance with regulations and restrictions, support local enforcement where necessary, and plan for gradual re-opening of wider society.

Established systems between COVID-19 Local Outbreak
Hub and Environmental Health and Enforcement, to
manage local compliance and enforcement.
Supported joint working across Liverpool City Region on
compliance and regulations multi-agency partnership,
ensuring consistency across Merseyside.
Monitored operations and compliance of local businesses
responding to reports of non-compliance, conducting
thousands of visits to businesses, supporting organisations
to operate safely.

Contributed to planning for local recovery, and gradual reopening, supporting with testing and vaccination, provided consistent guidance.

Governance, accountability, and resourcing

Establish robust governance structures for decision making with clear accountability and effective resource use.

Adapted robust emergency response governance system established in March 2020, implemented local COVID-19 governance structure to manage and respond effectively. Managed and responded effectively to COVID-19 through strong partnerships at strategic and operational levels across local, regional, and national stakeholders. Built resilience in our experienced and established local teams.

3.9 Recovery and Renewal

In addition to the direct impacts of COVID-19 it was recognised that the pandemic and the local response to contain transmission was leading to many wider impacts. In response to national strategy and policy around living with COVID-19, a cross Council strategic renewal group established in 2021 developed a programme focused on recovery and renewal. Using feedback from a range of stakeholder, and local intelligence and insight, recovery and renewal projects were developed, with the aims to:

 Respond to the impacts of COVID-19 on the health and wellbeing of our communities, including the impact of social issues like social isolation, financial

- worries or concerns, increased poverty, and increased vulnerability of specific groups of residents such as our homeless population.
- Ensure support to our most vulnerable residents continues throughout a transition period as COVID-19 evolved, providing help and support to people when and where they need it.
- Support schools and colleges to ensure children can return safely, building on partnership working as schools open their doors again for learning.
- 3.10 Projects were proposed by the Strategic Recovery and Renewal Group, approved by the Director of Public Health and Strategic Outbreak Cell, and monitored by the COMF Working Group. Many of the renewal and recovery projects enhanced existing services which were overwhelmed with demand due to the pandemic. Figure 4 provides an overview of the key activities, services, and projects delivered using COMF within the Recovery and Renewal Programme.

Figure 4: Recovery and Renewal priorities funded by COMF

Priority	Summary of key activities, services and projects
Children's Health and Emotional Wellbeing	Invested in local 0-19 service, providing additional posts within the existing team which helped address the backlog of contacts and pressures resulting from the COVID-19 restrictions, and the direct impact of the pandemic on
Enhance current support for children and young people's health and emotional wellbeing.	children and young people. Commissioned a broad ranging programme of support for children, young people and school staff with Action for Children, to help support children's emotional health and wellbeing, providing practical tools and coping skills to help prevent more intense mental health issues.
Resilient communities	Delivered a borough wide grants programme, designed with the Community Voluntary and Faith (CVF) sector, which provided additional resources to small charities and local
Enable improved connectiveness, hope, identity, meaning and purpose and empowerment for communities.	grassroots community-based organisations. A wide variety of CVF projects were delivered using this grant funding including employment focused projects, projects supporting health and wellbeing, children's mental health and supporting community spaces. The funding also helped many organisations apply for additional external funding to sustain projects post March 2023. The impact of the investment was far ranging from improvements in people's wellbeing to gaining employment or accessing further education for young people.
Cost of Living Programme of initiatives to help support residents with increasing cost of living.	Developed CVF Cost of Living Grants programme with the sector and Wirral's cost of living strategic response group, encouraging a collaborative response. COMF funded projects across Wirral, with a focus on food poverty, fuel poverty, warm hubs and vulnerable groups. The programme funded 15 projects that included warm hub provision in 54 locations across the Borough. Fuel poverty collaborative established between five

	organisations, Wirral Foodbank, Age UK, Wirral CAB, Energy Project Plus and Involve Northwest, investing in additional staffing and resources across services to support residents across Wirral with fuel poverty, including specialist energy advisors, benefit maximisation support, debt management support, warm home packs, emergency heaters, LED Bulbs, emergency out-of-hours support with fuel including evening and weekend provision, winter warm campaign for over 65's. Service extended following the initial 12-month period, to cover winter 2023 – 24.
Employment Support Support for residents	Commissioned a holistic employment support service (Help Out) with Involve Northwest to complement the existing worklessness service (Reach Out), improving access to employment opportunities for local people by providing
to access employment opportunities.	wraparound support to improve mental health and wellbeing, supporting people to be 'job ready', addressing individuals' fears and barriers.
	Provided outreach support to engage unemployed people with the service, engaging with local employers to promote vacancies e.g.in social care and NHS.
Information and Advice Service Support for residents to access timely and appropriate advice and signposting to services.	Invested in additional specialist staff as part of Information and Advice commission delivered by Wirral Citizens Advice Service, Ask Us Wirral, to support with food poverty, fuel poverty, debt, maximising income and other advice issues for residents.
Digital Inclusion	Designed in partnership with stakeholders, COMF funded the delivery of four overarching digital inclusion projects,
Support digitally excluded residents, to improve digital access and abilities.	providing positive outcomes for residents, led by One Wirral CIC, Health Junction, Wired, Age UK, Citizens Advice Wirral and the Council's Children and Young People's Team. In total, 22 organisations participated in the projects,
	delivering digital drop-in sessions, one to one and group training, providing access to equipment and online resources, encouraging learning and new skills.
	Sessions were developed with resident feedback, on areas such as health and wellbeing, accessing online services, financial inclusion, skills and education, online safety, and
	employment. Feedback from residents showed improved confidence and motivation to use digital technology and improved wellbeing through social interaction, learning new skills within community settings.
Homeless Support	Invested in additional resources to provide intensive

Support for settings for socially excluded groups including hostels and homeless shelter.	support required with managing the impacts of COVID-19, for example, ensuring those with chaotic behaviours are complying with isolation requirements, through additional staffing and practical measures to increase likelihood of compliance, and reduce the risk of further spread of the virus. The funding has also supported enhanced infection prevention control measures and increased cleaning, which will continue to reduce the risk of COVID-19 spreading within the setting, helping to keep vulnerable people safe.
Mental Health System partnership approach and training to better understand mental health needs and support residents with mental health challenges.	Commissioned the delivery of Mental Health First Aid training for residents across Wirral, targeting key public facing roles across local business sectors, and within the Council, including elected members.
Enhanced local insight to support better outcomes for residents.	Resourced a system and infrastructure for generating qualitative insights and applying scientific analysis to inform policy, improve public services, and deliver positive results for people and communities in Wirral.
Winter Resilience Support for the COVID-19 emergency welfare response.	COMF funding contributed to Council's response services, complementing national Household Support Funding, supporting residents to access food, fuel, and other essential items. Funding helped to deliver a collaborative response connecting people with support, and supported provision including the emergency food warehouse, and out of hours help with food and utilities, including emergency support during challenging winter period and Christmas 2021.

3.11 Enduring capabilities

COMF helped to establish services, projects and activities which have been sustained beyond the scope of the time-limited funding, through the Public Health Grant. Examples of these include:

 Fuel poverty collaborative – The initial programme was funded for a year and following review by the Director of Public Health and lead commissioner, was extended using Public Health Grant funding to continue until March 2024, ensuring that additional support for residents with fuel poverty continued throughout the winter months.

- Wirral's Health Protection Service Wirral established a Local Outbreak Hub in 2020 to lead in the delivery of the Local Outbreak Management Plan. This team quickly formed excellent working relations and strong partnerships locally and regionally, to achieve the desired outcomes of the Plan. For example, our good links with IPC teams, and positive relationships with Environmental Health and Enforcement colleagues locally, supported the development of local good practice in successfully managing outbreaks, engaging local settings and businesses, and supporting to reduce transmission. In 2022, the Hub was reviewed and reduced significantly in capacity and transitioned into the Wirral Health Protection Service, funded by the Public Health Grant, to lead on the partnership delivery of Wirral's Health Protection Strategy, whilst sustaining surge capacity and the essential responsive expertise locally to address health protection issues and outbreaks.
- Qualitative Insight The COVID-19 pandemic reinforced the importance of working in partnership with local communities, listening to and understanding their needs. Building on existing local intelligence, the qualitative insight service gathers and synthesises qualitative information, which is key to supporting policy implementation and improving health outcomes. The work of this team supports across a breadth of programmes being delivered by the council, including public health commissioning, neighbourhoods, and regeneration, as well as the Health and Wellbeing Strategy. The service is now funded by the Public Health grant and was subject to a comprehensive review in 2023 led by the Director of Public Health.
- Wirral Infobank During the pandemic, COMF supported with the development
 of Wirral Infobank one single database for local people with a range of
 information, signposting and resources available within local communities/areas.
 This resource has now developed much wider than COVID, with over 2,500
 entries supporting residents with a range of topics, from cost-of-living to local
 activities. https://www.wirralinfobank.co.uk.
- Digital Inclusion COMF funded several digital inclusion projects to tackle the digital divide highlighted during the COVID pandemic. As part of this work the TechKnow Digital Inclusion group was set up. This group undertook a collaborative approach, working with 18 partner organisations to provide a variety of digital projects to address the digital divide in Wirral. The projects looked at the impacts of improving accessibility and access to online services, developing skills and education and through this increasing job opportunities, and improving health and wellbeing through using digital equipment and skills to allow people to connect with others, find new hobbies and work on their own self-care using online resources. At the end of 2022, representatives from Wirral's digital inclusion project team joined the Liverpool City Region Digital Inclusion Network, supporting the sharing of best practice, funding opportunities and criteria needed to help support digital inclusion projects.
- In 2023 Wirral CVF organisations were supported to apply for a UKSPF grant focused on Digital Connectivity for Community Facilities. The fund has so far awarded £105k to various organisations across Wirral (including two directly involved with the TechKnow project), with a further £150k available for Wirral projects in 2024.

4.0 FINANCIAL IMPLICATIONS

4.1 Wirral Council has received a total of £14,784,031 from the COMF which covered the period June 2020 to March 2023. This report draws to a conclusion the use of the one-off, time limited grant which was provided to all local authorities during the COVID-19 pandemic and confirms the full utilisation of Wirral's allocation as per the conditions of the grant.

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications directly arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 This report is for information for Members of Wirral's Health and Wellbeing Board and as a result there are no resource implications.

7.0 RELEVANT RISKS

7.1 There are no ongoing risks relating to this report. Project risks related to the use of the COMF grant were managed by the Director of Public Health through the governance procedures outlined in section 3.4 of this report.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 The use of the COMF grant in Wirral was closely informed by local evidence, intelligence, and insight. Wirral's Outbreak Management Plan was delivered in partnership and collaboration with multiple stakeholders helped to shape and develop projects and grants enabled by COMF.
- 8.2 COMF grant was utilised to enhance Wirral's capabilities around engagement with residents and communities, enabling the development of local insight service.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity. Equality considerations were a key component of the actions noted this report, however there are no further direct equality implications arising.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no direct environment and climate implications arising from this report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 The COMF grant contributed to supporting the delivery of the concepts of community wealth building e.g. community resilience increasing local employment opportunities.

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APPENDICES

N/A

BACKGROUND PAPERS

 Contain Outbreak Management Fund Guidance -https://www.gov.uk/government/publications/contain-outbreak-management-fund-guidance-financial-year-2021-to-2022

TERMS OF REFERENCE

This report is being considered by the Health and Wellbeing Board in accordance with Section C of its Terms of Reference:

(c) To provide a local governance structure for local planning and accountability of health and wellbeing related outcomes

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Policy and Resources Committee	9 th June 2021
Adult Social Care and Public Health Committee	13 th October 2020 19 th November 2020 18 th January 2021 2 nd March 2021 7 th June 2021 29 th July 2021 23 rd September 2021 13 th October 2021 16 th November 2021 25 th January 2022 3 rd March 2022 14 th June 2022 25 th July 2022





HEALTH AND WELLBEING BOARD

7th December 2023

REPORT TITLE:	DELIVERY OF WIRRAL HEALTH AND CARE PLAN
REPORT OF:	PLACE DIRECTOR (WIRRAL), NHS CHESHIRE AND
	MERSEYSIDE

REPORT SUMMARY

The Wirral Health and Care Plan is our collective plan on Wirral, for how the health and care organisations across Wirral will work together to progress with our agreed priorities and areas of work. These priorities are cognisant of, and support the delivery of a number of key national and Wirral Place level strategic aims, including the Wirral Plan 2021-26 and Wirral Health and Wellbeing Strategy 2022-27

This report presents to the Board the delivery dashboard for the programmes within the Wirral Place Health and Care Plan. The dashboard structure has been developed and agreed with the Strategy and Transformation Group (STG), which is a supporting group to the Wirral Place Based Partnership Board (WPBPB). The dashboard is reviewed by the STG and the WPBPB on a monthly basis. The dashboard provides an oversight of the whole programme portfolio, provides a monthly narrative update and Red Amber Green (RAG) rating of overall programme delivery, benefits, risks, and issues.

This report affects all wards and is not a key decision.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to note this report which provides assurance on the delivery and oversight of the Health and Care Plan programmes to the WPBPB.

SUPPORTING INFORMATION

1. REASON/S FOR RECOMMENDATION/S

1.1 This report is to provide the Board with information and assurance on the progress of the Programmes associated with the Wirral Health and Care Plan 2023-24. There is a requirement to demonstrate progress against the delivery of the priorities within the Plan to evidence the progress made to the Wirral Place Based Partnership Board. The programme dashboard provides that evidence.

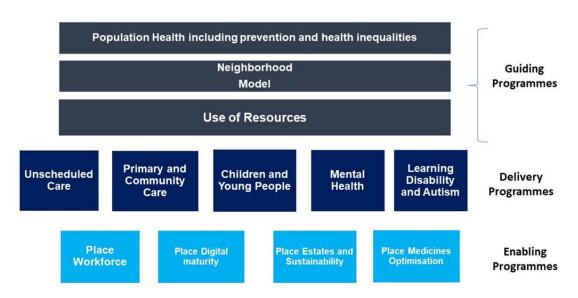
2. OTHER OPTIONS CONSIDERED

2.1 No other option has been considered as the report is at the request of the Board.

3. BACKGROUND INFORMATION

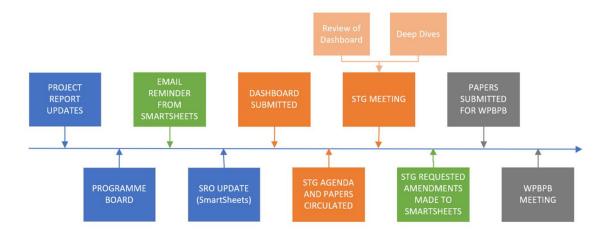
- 3.1. Following the publication of the Wirral Place Health and Care Plan 2023-24 and its endorsement by the Wirral Place Based Partnership Board (WPBPB) on 22nd June 2023 work has been undertaken led by the Wirral Improvement Team (WIT), with the Strategy and Transformation Group (STG) to build a delivery dashboard providing oversight of the whole programme portfolio within the plan.
- 3.2. For the avoidance of doubt, the programmes that constitute the portfolio within the Health and Care Plan are summarised in the figure below:

Wirral Place Programmes



3.3. The data and narrative that constitutes the dashboard was built through consultation with the Senior Responsible Officers (SROs) and Programme Leads for each constituent programme and the membership of the STG. An agreed process of recording and monitoring each programme allowed for the build of templates within the 'Smartsheet' Programme Management software, which allows for automatic uploading of information into the dashboard, ensuring that data only needs to be entered once.

- 3.4. Of the programme portfolio within the Health and Care plan; several of the programmes are managed directly through the WIT, whilst others are managed by partner organisation Programme Management Office (PMO) functions. However, the WIT oversee the collation and reporting of the whole portfolio, working with the SROs and programme leads.
- 3.5. The dashboard forms the information baseline for the monitoring and control of the suite of programmes within the plan. The monitoring process follows a clear timeline for report updating, review and adjustment. It also supports the detailed review of individual programme areas though a schedule of 'deep dives.' The monthly process is summarised in the figure below:



- 3.6. The 'Live' Dashboard is presented to the STG monthly, who act as the programme board for the portfolio, except for those programmes that it has been agreed should currently report directly to WPBPB. However, the whole portfolio will be shared including these areas for the completeness of information, and to ensure that there is a full 'read across' within the portfolio and a consideration of interdependencies.
 - 3.7. To build strong assurance into the oversight of the Health and Care Plan, the whole portfolio will be subject to a monitoring and control strategy which is under development with the STG. The strategy will define how Wirral Place Health and Care Plan programmes will be monitored and controlled to ensure that they are:
 - Effectively managed in line with best practice project and programme management standards
 - Focussed on action and delivery
 - Focussed on achieving positive, demonstrable outcomes for the Wirral system including its residents, health and care organisations and employees

The strategy will define clear tolerances, escalation governance and change authority.

3.8. A delivery Red Amber Green (RAG) rating is established by the Programme Lead and/or Senior Responsible Officer for each of the programmes. The criteria for these ratings is set out within a programme monitoring and control strategy providing tolerances and escalation points for the purposes of programme assurance.

3.9. The overall RAG rating for the Health and Care plan delivery in October was Green, with three programmes in the portfolio reporting Amber and the rest reporting Green. Based on the information within the October dashboard the board is directed to note the following highlights:

3.9.1. Guiding Programmes

- The **Neighbourhood programme** has held scoping meetings with the two trailblazer neighbourhoods, and core group workshops are scheduled to take place. Qualitative insight work has commenced with these neighbourhoods.
- A workshop is being organised by the Population Health Programme to explore approaches to improve early detection and better management of cardiovascular disease.
- The **Use of Resources** programme has identified two key delivery priorities; the financial recovery plan and value for money, which will now be established as projects.

3.9.2. Delivery Programmes

- The Children and Young People's Programme have identified the three key priorities for focus as Neuro-Diversity Pathways, Speech and Language Therapy and Complex Children. These are being reported to the Joint Health and Care Commissioning Executive Group for ratification in October 2023.
- The Learning Disabilities programme has co-produced strategies for all age disabilities, autism and supported employment which are on trajectory to deliver in March 2024. A remote monitoring scheme for people with Learning Disabilities in residential homes is being piloted in 2 Primary Care Networks (PCNs).
- The Mental Health programme has presented a Strategic Outline Case to the Wirral Place Based Partnership Board to support the development and investment in a new Mental Health Urgent Response Centre. Work is progressing on the Acute Review, Dementia Strategy and Community Transformation projects within the programme.
- The **Primary and Community** programme is progressing work on falls prevention, ageing well, and establishing population health management as a key driver. A workshop with key partners to further refresh the programme in anticipation of the 2024-5 planning round is being organised.
- The Urgent and Emergency Care Improvement Programme continues to make significant progress in the delivery of the key programme milestones. This progress has again continued across its five workstreams with the aim of improving urgent and emergency care services in Wirral. The sentinel measure of the programme success is a sustained reduction in the No Criteria to Reside (NCTR) numbers from 117 in September 2023 to 111 in October 2023, ahead of trajectory. The Wirral system had been a national and regional outlier for a significant period and is now ranked second in performance in Cheshire and Merseyside Integrated Care System (ICS).

3.9.3. Enabling Programmes

 Within the **Digital Maturity** programme, the focus has been on the migration work from the Wirral Care Record to the Cheshire and Merseyside Combined Intelligence for Population Health Action (CIPHA) system. Digital Care

- improvement projects are also underway for diabetes, hypertension, asthma, and dermatology.
- Work is underway to establish the key priorities within the **Estates and Sustainability** programme to align with the wider system requirements.
- The Medicines Optimisation programme has worked with partners to rationalise approaches to establish a single oversight group which will aid the programme prioritisation and governance arrangements. Wirral place pharmacy leads continue to meet and collaborate on Wirral wide work including safety.
- The **Workforce** programme held a System Workshop on 13th September 2023 to consider and agree key priorities for a Wirral Workforce strategy which will help to support the development of the programme.
- 3.9.4. Place Supported Delivery Programmes at Scale focus on the following priorities:
 - Elective Care: Industrial action continues to be a risk to the delivery of
 elective recovery. Wirral University Teaching Hospital NHS Foundation Trust
 (WUTH) continue to manage risk on an individual patient basis to ensure
 patient safety and in October attained an overall performance of 95% against
 plan for outpatients and an overall performance of 87% against plan for
 elective admissions.
 - Cancer: Two week waits performance at the end of October was 84.3%, the Faster Diagnosis Standard (FDS) was 73.37% in August against a National target of 75% by March 2024 and the 31-day treatment numbers are above trajectory and expected to continue.
 - **Diagnostics**: In September 93.94% of patients waited 6 weeks or less for their diagnostic procedure against the national standard of 95% and requirement for Trust's to achieve 90% by March 2024.
 - Maternity: Vacancies remain at less than 1%.

4. FINANCIAL IMPLICATIONS

4.1 The potential financial implications arising from the Wirral Health and Care Plan are considered within the individual programme benefits, risk and issue logs, and any specific financial implications would be addressed through the appropriate processes. The Use of Resources programme will focus on identifying opportunities to deliver further efficiencies to spending on Wirral.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications directly arising from this report.

6. RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 The Health and Care Plan programme structure includes enabling programmes for workforce, digital maturity, estates, and sustainability. Part of the remit of these programmes is to identify and support the specific resource implications of the delivery and guiding programmes.

7. RELEVANT RISKS

7.1 Each programme within the Health and Care Plan has identified the relevant programme risks and mitigations. A summary risk report is available within the 'Live' dashboard that identifies the red and amber rated risks across the portfolio of programmes. This dashboard is a standing agenda item at the Wirral STG as the Programme Board, and any key risk escalations are highlighted to the STG by the Programme Director for Wirral Improvement Team.

8. ENGAGEMENT/CONSULTATION

8.1 The programmes presented within the dashboard are specific to the Wirral Health and Care Plan, which has been developed collaboratively across key stakeholders across the Place through place workshops and with system colleagues within Strategy and Transformation Group meetings.

9. EQUALITY IMPLICATIONS

9.1 Wirral Council and NHS Cheshire and Merseyside have a legal requirement to make sure their policies, and the way they carry out their work, do not discriminate against anyone. Within the Health and Care Plan there is a framework for our approach to tackling health inequalities and each programme of work will complete impact assessments to ensure any adverse impact is identified and mitigating actions put in place where possible.

This report is for information and an EIA is not required.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 The enabling programmes within the Health and Care Plan include an estates and sustainability programme which has a specific aim to target investment to support net zero carbon ambitions. Furthermore, the plan is cognisant of and guided by a number of key national, regional and Wirral specific strategy and policy requirements that focus Wirral Place on environment and climate implications. These include the Wirral Plan 2021-26, the Health and Wellbeing Strategy 2022-27 and Marmot Principles to build safe, sustainable and vibrant communities.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Community Wealth Building in Wirral focusses on partnerships and collaboration. These partnerships are led by Wirral Council with external partners and stakeholders, including residents. NHS Cheshire and Merseyside will support the Council in community wealth building by ensuring health and care organisations in the borough have a focus on reducing health inequalities and contribute to the development of a resilient and inclusive economy for Wirral.

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APPENDICES

Appendix 1 Wirral Health and Care Plan Dashboard

The PDF file below may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact julian.eyre@nhs.net if you would like this document in an accessible format.

BACKGROUND PAPERS

Wirral Health and Care Plan 2023-24

TERMS OF REFERENCE

This report is being considered by the Wirral Health and Wellbeing Board in accordance with its Terms of Reference.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Wirral Place Based Partnership Board	19 th October 2023 23 rd November 2023



Wirral Health and Care Plan Dashboard

Date of Report

November 2023

About the Wirral Health and Care Plan



Wirral Place Health and Care plan 23.24.11.d...

Escalation Reports



Wirral Health and Care Plan Benefits Report



Wirral Health and Care Plan Risk Report



Wirral Health and Care Plan Issue Report

Guiding Programmes

Neighbourhood Model Programme

Programme SRO

Programme RAG

About the Programme



Neighbourhoods Model

Graham Hodkinson

Programme Commentary

Initial scoping meeting held with trailblazer neighbourhoods Stakeholder list agreed with named individuals identified Core Group Workshops scheduled for 31 Oct (BH A) and 7 Nov (Wall C)

Qualitative Insights work underway with key questions defined and location list established

Communications lead identified to work closely with the programme, initial comms shared with key stakeholders

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Neighbourhood Care Model	No Change						Neighbourhood Care Model - Highlight Report

Population Health Management Programme

Programme SRO

Dave Bradburn

About the Programme



Population Health Management

Programme Commentary

- · A focussed workshop is planned for Autumn to explore the different approaches that the system can implement to achieve earlier detection opportunities and better management of CVD (heart attacks and strokes), with a focus on our most 'vulnerable' residents. The C20P5 group will be key to developing and co-owning this. There is also a big opportunity here for the initial Neighbourhoods groups to be the delivery vehicle (if CVD is chosen as their priority).
- The 'additionality' model being pushed through the HWB strategy implementation has already yielded some useful connections between Priority Area 1 (focussing on Employment and Regeneration) and Priority Area 2. Examples of this include:
- 1. National Workwell Programme. The aim of this programme is to create an integrated work and health support for people with disabilities and/or health conditions who want help to start, stay or succeed in work. The programme will be locally led, bringing together the NHS, local authorities and other partners, in collaboration with jobcentres. Julian Eyre will support this from the Wirral Improvement Team linked to the H&C plan and has made contact with the National Team for this programme. Bev Staniford and Heler Carney will lead for the council in terms of Economic Growth.
- 2. C&M ICB Anchor Institutions framework will now include the LCR 'Fair Employment' Charter. This will support the requirement to support fair wages. Julian Eyre will liaise with the SRO for the Workforce Programme within the H&C Plan to encourage NHS partners to sign up to the Fair Employment Charter.

Use of Resources Model Programme

Programme RAG Programme SRO Martin McDowell

About the Programme



Use of Resources Model

Programme Commentary

Summary: Finance, Investment and Resources Group (FIRG) will be utilised to support the delivery of the Use of Resources Model Programme. FIRG is place based and reports into the Finance, Investment and Resource Committee (FIRC) at a C&M level. Delivery of some elements of the programme will be determined by FIRC.

Progress this month: Two priorities for delivery have been determined, Financial Recovery Plan - incorporating QIPP, and Value For Money. Work will now take place to establish these as projects and update FIRG to enable programme progress monitoring.

FRP expected to be submitted for review by the ICB in September

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Financial Recovery Plan	No Change	•					Financial Recovery Plan - Highlight Report
Value For Money	No Change	•				•	Value For Money - Highlight Report

Delivery Programmes

Children and Young People Programme Page 75

Programme SRO Simone White

About the Programme



Children and Young People

Programme Commentary

WSoA progress - Performance meetings held monthly where progress against actions reported: 84.6% actions complete (green), 10.8% actions delays (amber) and 4.6% actions have not started (red). Mitigation plans in place.

EHWB transformation progress - Tender for SPA platform complete, Alliance tender underway. Slightly delayed Aug release now Sept but shouldn't impact overall timescales. My

Happy Minds funding agreed 100% coverage of Primary Schools. Thorne Heys - Joint commissioned specialist/transitional provision project underway. Work started on Complex Children's pathway. Joint Commissioning progress - Workshop held with senior leaders (Wirral Place & LA) agreed focus on 3 priorities: ND Pathway, SALT & Complex children. Paper confirming priorities will go to JHCCG in October for ratification.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report

Learning Disabilities and Autism Programme

Programme SRO Programme RAG

G Graham Hodkinson

Programme Commentary

Structure of the programme has been determined with associated projects and governance. Current All Age Disability Partnership Board TOR and membership under review for inclusion of a programme board function.

Co-Produced Strategies currently under review and development for All Age Disability, Autism and Supported Employment are all on track to deliver in March 2024.

Co-Produced Strategies currently under review and development for All Age Disability, Autism and Supported Employment are all on track to deliver in March 2024.

Remote Monitoring for residents in LD&A homes (pilot) now established in Healthy South Wirral and Moreton & Meols with patients actively being monitored in selected homes. Wirra has been asked to present at two events with national representation on the pilot to date.

Project Name	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
All Ages Disability						All Age Disability Revi - Project Highlight Report
Remote Monitoring for LD	•	•			0	Remote Monitoring for L - Project Highlight Report

Mental Health Programme

Programme SRO
Programme RAG
About the Programme

Suzanne Edwards

Mental Health

Programme Commentary

Case for Mental Health Urgent Response Centre to be presented at the WPBPB in November. Paper on the data review of acute beds and change of patient profile being completed with presentation to the Operational Committee in November, which will support the acute bed review. Timelines for delivery of the Dementia Strategy now developed and awaiting approval. New risk added to the Community Transformation project due to the request of additional funding from VCSE to support elements of role out. Workforce continues to be a significant challenge across all areas of Mental Health.

Escalation: Wirral Mental Health Forum Meeting cancelled in September due to high level of apologies. Could members of STG please ensure that the importance of attending this meeting is escalated to organisation representatives to ensure that the programme can progress as required.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Community Mental Health Transformation	No Change	•			•		Community Mental Health Transformation - Highlight Report
First Response	No Change	•		•	•	•	First Response - Highlight Report
SuperMADE	No Change	•					SuperMADE - Highlight Report
Integrated Housing	No Change	•		•	•	•	Integrated Housing - Project Highlight Report
Acute Capacity, Demand and Flow	No Change	•		•	•	•	Acute Capacity, Demand - Project Highlight Report
Dementia Strategy	No Change	•					Dementia Strategy - Project Highlight Report

Primary and Community Care Programme

Programme SRO

Jo Chwalko

Primary and Community Care

Programme Commentary

A review of NWAS data has indicated a significant reduction in attendances for falls from care homes since the introduction of the safe-steps assessment tool in all care homes and Mangar Eagle, in the 30 worst performing homes. Based on the estimated full year pickups (175), using pick up rates for Jan – Aug 2023, there could be a 50% reduction for the full year against 2022 (389).

Work continues to establish the agreed project groups to deliver the programme, with the opportunity to introduce population health as part of this programme being further investigated.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Falls Prevention and Management	No Change			•	•	0	Falls Prevention and Management - Highlight Report

Urgent and Emergency Care Programme

Programme SRO Programme RAG About the Programme

Janelle Holmes

Page 76
Programme Commentary

Wirral Place Health and Care Plan

Three out of five projects have now agreed their supporting metrics and are actively reporting (i.e. metrics that will lead to a reduction in the NCTR headline metric). The metrics for the Transfer of Care Hub have been agreed and the Cerner build change went live WC 18th September to enable the reporting of these metrics. There is BI development work required to produce these report, which, as soon as complete, these reports will be available.

The care market sufficiency project aims to increase the overall number of new hours picked up by 14% from 2,822hrs per month in April to 3,212hrs per month in September. Additionally, it aims to increase the number of new packages accepted by 10% from 263 packages per month in April to 288 packages per month in September. Both metrics cover al referral sources (e.g. community and acute). September's data shows both metrics are under their trajectory target. The overall number of new hours picked up is 2922 against a target of 3212 and the number of new packages accepted is 273 against a target of 288.

The Virtual Ward project aims to double throughput on its frailty ward from 40 patients per month in November 22, to 80 patients per month in August, then to 120 per month in November 2023. For the respiratory virtual ward the project aims to increase throughput from 60 per month in August to 70 in September, then incrementally to 120 per month in November 2023. September's data shows an increase in throughput on its frailty ward on the previous month, from 31 in August to 55 in September, the target of 80 was not met. Throughput on the respiratory ward decreased slightly on the previous month, from 53 in August to 51 in September, not meeting the target of 70.

The HomeFirst service is undergoing a large-scale expansion to its core staff base. As such, it aims to increase the number of patients referred by the service by 215% from 54 patients per month in April 23 to 170 patients per month in December 23. Up to 88% of the patients referred into the service will be from the acute hospital and will be patients who would otherwise have remained in hospital with no criteria to reside. The project trajectory has been revised this month. Performance for September shows that, overall, there has been an increase in referrals accepted on the previous month from 96 in August to 111 in September, however the target of 130 was not met. September's data shows that pick-ups from hospital have increased on the previous month from 72 in August to 83 in September, however the target of 129 was not met. September's data shows pick-ups for CICC are above target (13 against a target of 10).

Community Reablement are yet to agree project level metrics. However, action plans are in place and being actively tracked and managed by the project SRO.

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Virtual Wards	I mproving	•	•	•			<u>Virtual Wards - Highlight Report</u>
AbleMe	Improving	•	•		0	•	Community Reablement - Highlight Report
Transfer of Care Hub	No Change	•	•		•	0	Wirral Discharge Hub - Highlight Report
HomeFirst Expansion Project	No Change		•			0	HomeFirst Expansion - Highlight Report
Care Market Sufficiency	Improving	•	•	•	•	0	Care Market Sufficiency - Highlight Report

Enabling Programmes

Place Digital Maturity Programme

Programme SRO Programme RAG About the Programme Chris Mason W Wirral Place Health and Care Plan

Programme Commentary

Summary/Progress this month:

Healthy Populations:

- relating 1 opulations.

 **CIPHA Migration Migration from WCR to CIPHA is in initiation phase. We are engaging with system stakeholders to conduct a comprehensive gap analysis, which will enable us to determine which data flows need to be established as a pre-requisite. We are also engaging our clinical stakeholders to facilitate in design of new tools. Key milestones are as follows: Complete gap analysis' and confirm work plans with stakeholders (Jan24), Establish any outstanding data flows (Apr24), Replicate PHM tools within CIPHA (Jun-Dec24). · HIE development - Preparing scope and pre-requisites for project to connect Wirral Shared Care Record (HIE) to Cheshire Care Record. We plan to also determine wider C&M ShCR strategy to ensure we are in alignment.
- Improve Care:
- Diabetes To utilise CIPHA diabetic elective care patient list and target cohort with pre-hab offer using Surgery Hero app. Project now Live in pilot phase.
- (https://www.youtube.com/watch?v=-kJN56TgKIw)
- Asthma Piloting BT attachment to patients' salbutamol inhalers to effectively control usage. Pilot period now Live in pilot phase.
- Hypertension Housebound project now closed this aimed to facilitate Housebound Hypertensive patients in Wirral to engage with BP@Home and identify barriers. Key benefits have been recognised including provision of infrastructure for a significant proportion of this cohort to continue to engage with BP@home concept. We have subsequently proposed that this project is adopted and expanded across the rest of C&M. Further proposals have also been submitted to C&M to explore how we approach Hypertension P2 projects including Florence (automated SMS), health literacy apps, health checks etc.
- Telederm 1200+ cases raised, 42/45 Practices Live. Full rollout planned completion date: 11/23.

Project Name	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
WCR / CIPHA Migration	•		•			WCR / CIPHA Migration - Highlight Report
Health Information Exchange Enhancements	•	•	•	•	•	HIE Enhancements - Highlight Report
Teledermatology	•		•		•	Telederm - Highlight Report
Strategic Development Fund - Primary Care		•	•			DFPC - Highlight Report

Place Estates and Sustainability Programme

Programme SRO About the Programme Programme RAG Paul Mason W Wirral Place Health and Care Plan

Programme Commentary

Summary: The established Sustainability and Estates Group (SEG) will provide a supporting mechanism for programme delivery. SEG has hosted good examples of system wide working previously and baselining work has been developed. This has supported the completion of some key milestone achievements:

- Wirral Place Estates Programme (Completed) GB Partnership (attached)
 Develop agreed RFI Register (Completed Q3 2022-23)
 SEG Property Data Collection (Completed Q4 2022-23)

- Green Plan and Associated actions plan oversight (Completed Q4 2022-23)
- 5. Wirral Place Sustainability Group established (Completed Q4 2022-23)

Progress this month: Wirral Place Sustainability Group has developed the scope of its delivery plan to support the Wirral Health Plan. Priority projects have been identified. We now need to pause and re-assess SEG scope and deliverables to align with Wirral Health Plan frameworks which establishes, the appropriate governance and seek funding to support the delivery overarching programme.

Additionally SEG have developed a high level overview of a proposed integrated approach bestates regional healthcare. (Case for Change)

Collated a reflective story board that understands and integrates the collective progress we have made to date and next steps required to delivery a sustainable programme. (attached)

Continue to build Stakeholder relations across Wirral, e.g Wirral Council that fosters collaborative working and opportunities for Estates and efficiencies.

Supporting the PCN pilot 'Wirral Neighbourhood Hood Model'

Early discussions forming with Wirral Council and the Town Centre regeneration programme to understand opportunities for out patient and back office services.

Escalations/ Barriers to Delivery:

Need to understand overarching programme governance for SEG to reform to align, allowing information flow and decision making to be understood to provide system assurance.

Group need sight of (PCN) GP developed clinical strategies.

Assessment of requirements needs to integrated with Wirral Health Plan / programme

Need to identify leads for transformational change programmes and work packages through the SEG forum.

Need funding to support systems and programme delivery

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Accommodation Requests and Move Managemen	No Change						Accommodation Requests and Move Management - Highlight R€
Achieving Net Zero Carbon	No Change	•					Achieving Net Zero Carbon - Highlight Report
Capital Overview Prioritisation and Pipeline	No Change	•				•	Capital Overview Prioritisation and Pipeline - Highlight Report
Disposal and Void Management	No Change	•					Disposal and Void Management - Highlight Report
Estates Data Baselining	No Change	•				•	Estates Data Baselining - Highlight Report

Place Medicines Optimisation Programme

About the Programme Programme RAG **Programme SRO** Lucy Reid W Place Medicines Optimisation

Programme Commentary

Progress this month:

- Following agreement to create a single oversight group for MO delivery in Wirral, bringing together Medicines Management Committee and Wirral Pharmacy System Leads group the terms of reference for the group have been circulated, feedback received and are now finalised. The group is to meet for the first time on the 6th December. This aligns with wider Wirral Place MO and ICS governance arrangements.
- Really good engagement has continued between senior MO stakeholders which has enabled progress on programme governance arrangements
- The programme/project structure has been created in Smartsheets and continues to be developed
 Wirral place pharmacy leads continue to meet and collaborate on Wirral wide work.
- · Pharmacy leads meeting now includes safety as a focussed agenda item once a quarter to ensure wider system input, especially PCN, and shared learning.
- Promotional material has been developed for Wirral to support the antibiotic amnesty as part of World antibiotic awareness week, supported by the Wirral Improvement Team

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Programme Mobilisation	No Change						Programme Mobilisation - Highlight Report
Care Homes and Social care	No Change	0					Care Homes and Social Care - Highlight Report
Patient awareness and engagement	No Change	•					Patient awareness and engagement - Highlight Report
Mental Health	No Change	0				•	Mental Health - Highlight Report
Community Pharmacy	No Change	•				•	Community Pharmacy - Highlight Report
Polypharmacy and Tackling Health Inequalities	No Change	•				•	Polypharmacy and Tackling health inequalities - Highliq
Medicines Value	No Change	•					Medicines Value - Highlight Report
Medicines Safety	No Change	•				•	Medicines Safety - Highlight Report
Antimicrobial Resistance and Stewardship	No Change	•					Antimicrobial Resistance and Stewardship - Highlight F
Collaboration	No Change	•				•	Collaboration - Highlight Report

Place Workforce Programme

About the Programme Programme SRO **Programme RAG** Debs Smith W Place Workforce

Programme Commentary

Summary: Planning and programme enabling functions require the establishment of clear and achievable programme priorities for 2023-4 and beyond. From this an accountability and reporting framework for the wider programme will be established alongside agreed project sub groups, leadership and membership

Progress this month: The programme team are undertaking a thematic analysis of the outputs from the workforce workshop held in September and integrating these with identified programme priorities and wider workshop feedback. Work is also underway to ensure programme congruence with the Health and Wellbeing strategy elements around employment. There has been some delay in progress due to the capacity of colleagues during continued NHS industrial action. Escalations: None

Project Name	Project Status	Overall Project RAG	Milestone RAG	Benefits RAG	Risk RAG	Issue RAG	Highlight Report
Baseline Mapping for Wirral Workforce	No Change	•				•	Baseline Mapping for Wirral Workforce - Highlight Report
Wirral Workforce Strategy	No Change						Wirral Workforce Strategy - Highlight Report

At Scale Programme

Programme SRO Programme RAG About the Programme

Performance Charts



W Wirral Place Health and Care Plan

Programme Commentary

ELECTIVE ACTIVITY

In October 2023, the Trust attained an overall performance of 95% against plan for outpatients and an overall performance of 87% against plan for elective admissions Industrial action continues to impact activity delivered

REFERRAL TO TREATMENT

The national standard is to have no patients waiting over 104 weeks from March 2023 and to eliminate routine elective waits of over 78 weeks by April 2023 and 65 week waits by March 2024. The Trust's performance at the end of *September against these indicators was as follows:

• 104+ Week Wait Performance – 0

- 78+ Week Wait Performance 3
- 65+ Week Wait Performance 347
- 52+ Week Wait Performance 1781
- Waiting List Size there were 44,147 patients on an active RTT pathway. CANCER

Quarter 2 to date:

- 2 Week Waits performance at the end of October was 84.3%.

• Faster Diagnosis Standard (FDS) – was 73.37% in August (latest available data) against a National target of 75% by March 2024,
• 31 day treatment numbers - above trajectory and expected to continue.

As with all Trusts across C&M delivery of the 31and 62-day indicators remains a priority but given the increases in demand the recovery of performance against the targets remains a focus for 2023/24.

In September 93.94% (October submission due 17.11.23) of patients waited 6 weeks or less for their diagnostic procedure for those modalities included within the DM01. This is against the national standard of 95% and requirement for Trust's to achieve 90% by March 2024.

The Trust has commenced providing mutual aid for neighbouring Trusts for patients waiting longer than 6 weeks for diagnostic tests.

MATERNITY





HEALTH AND WELLBEING BOARD 7 DECEMBER 2023

REPORT TITLE:	AGEING POPULATION
REPORT OF:	DIRECTOR OF PUBLIC HEALTH

REPORT SUMMARY

The purpose of the report is to inform the Health and Wellbeing Board about some projected demographic changes for Wirral and highlight some potential implications.

This matter affects all wards within the borough; it is not a key decision. This report contributes to the Wirral Plan objective Active and Healthy Lives.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to note and comment on the report.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 This report provides an overview of projected population change on Wirral through quantitative analysis. The Health and Wellbeing Board is asked to note the findings.

2.0 **OTHER OPTIONS CONSIDERED**

2.1 No other options were considered as the report is for information purposes only.

3.0 BACKGROUND INFORMATION

- 3.1 This report was requested as part of the work programme for the Health and Wellbeing Board. It provides an overview of the current and projected population numbers in Wirral.
- 3.2 Statistics produced by the Office for National Statistics (ONS) show changes to the age-structure of the England population and latest population projections continue to show that the country's population is ageing. The two main factors driving this change are long-term improvements in life expectancy and decreases in the fertility rate¹.
- 3.3 Many people are living and working longer and can lead active, healthy, and independent lives into older age. However, age is a risk factor for many conditions and, as people age, they are more likely to live with a long-term condition, disability, and frailty. This is likely to have implications for health and social care.
- Research undertaken nationally², suggests that by 2040, the number of people living 3.4 with major illness in England is projected to increase by over a third (37%) of the population (2.5m people from 6.7m to 9.1m³). Most of this increase is the result of an ageing population, rather than an increase in disease prevalence. This suggests that although life expectancy is increasing, and people may be living longer, increasingly these extra years may be lived in poorer health.
- 3.5 There are a number of implications of an ageing population. In addition to the potential implications for health and social care, the projected changing demographics need to be considered when long-term strategies for workforce, built environment, housing, to name just a few are being developed.
- 3.6 As age is a risk factor for many health conditions it is important that there is a long term, preventative vision for healthy ageing across the life course.

3.7 **Current Population**

¹ONS,2020

⁽https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/subnation alpopulationprojectionsforengland/2018based)

Watt T, Raymond A, Rachet-Jacquet L, Head A, Kypridemos C, Kelly E, Charlesworth A. Health in 2040: projected patterns of illness in England. The Health Foundation; 2023 (https://doi.org/10.37829/HF-2023-RC03) Numbers do not add up due to rounding

The 2021 Census estimates the population of Wirral to be 320,200. Figure 1, in Appendix 1, shows the Wirral population compared to England. Wirral had a higher proportion of older population aged 65 years and over and a lower proportion of working aged people compared to England in 2021. Older people aged 65 years and over made up 22% of the population in Wirral in 2021. This compares to 18.5% in England overall and 18.8% in the North-West. In numbers, this was 70,390 older people aged 65 years and over living in Wirral in 2021.

- 3.8 Between the last two Censuses, the average (median) age in Wirral increased by two years, from 42 to 44 years of age. Wirral had a higher average (median) age than the North-West in 2021 (40 years) and a higher average (median) age than England (also 40 years).
- 3.9 The number of residents aged between 35 and 49 years decreased by approximately 8,900 (13.4%) between the 2011 and 2021 Censuses.
- 3.10 The population currently comprises almost 65,600 people aged 0 to 17 years.
- 3.11 Trends in number of births continue to decrease. The most recent births data (2022) showed the lowest number of births since Wirral was formed as a Metropolitan Borough in 1974.
- 3.12 Wirral currently has a higher proportion of women (51.6%) than men. This is in part due to higher average life expectancy amongst women.
- 3.13 There is considerable variation in the proportion of older people at ward level, with quite a stark West/East split, as Figure 2 in Appendix 1 illustrates. In Heswall 33% of the population are aged over 65, this compares with 12% in Birkenhead and Tranmere.

3.14 Projected Population Trends

Population projections are produced by the Office for National Statistics. The latest available projections are derived from a 2018 base population.⁴ Projections are only available for Wirral as a whole, so no sub-borough analysis is possible.

- 3.15 The overall population of Wirral is projected to increase by just over 4% (from 2018 base) to 336,348 by 2043. This relatively small population increase masks large variation by age band as Figure 3 in Appendix 1 illustrates.
- 3.16 The total population age 65 years and over is projected to increase from 69,811 in 2018 to 93,081 in 2043.
- 3.17 Figure 4 in Appendix 1 presents projected population percentage change by broad age-band from the 2018 baseline year to 2043. As the chart illustrates, the largest projected percentage increases are amongst the older population.
 - The population aged 65 years and over is projected to increase by approximately 33% by 2043.

⁴ Population projections have not been updated by the Office for National Statistics since before the COVID-19 pandemic and anticipated publication in late 2023 of new projections has been delayed

- The largest projected increase is in the 90 years and over (97%) and 80-84 years (70%) population.
- The population aged 20-64 years is projected to decrease by 3% by 2043.
- The population aged 0-19 year is projected to decrease 7% by 2043.

3.18 Considerations

Given that age is a risk factor for many health conditions, the projected changes to the population age structure is likely to lead to increases in the total number of people living with various long-term conditions.

- 3.19 The stark inequalities experienced within Wirral is another important consideration. There is currently a higher burden of ill-health, with higher prevalence of many long-term conditions, in the more deprived areas of the borough and, on average, an earlier age of onset.
- 3.20 Focusing on a life course approach to healthy ageing and early prevention to reduce the impact of illness and improve the quality of people's lives for our growing and ageing population is key.

4.0 FINANCIAL IMPLICATIONS

4.1 The report is for information purposes only and there are no financial implications.

5.0 LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 The report is for information purposes only and there are no resource implications.

7.0 RELEVANT RISKS

7.1 The quantitative analysis provided within the report provides insight into how projected demographics could impact on the existing inequalities and high burden of ill-health in Wirral. The insight needs to be used to inform strategies and plans, as not doing so would increase the risks of not being able to address needs and improve health outcomes.

8.0 ENGAGEMENT/CONSULTATION

8.1 No direct public consultation or engagement has been undertaken in relation to this report. The insight within this report seeks to provide an understanding of our ageing population and forms part of the Wirral Joint Strategic Needs Assessment (JSNA). There is a commitment to ensure the voice of Wirral residents and communities is given equal weight to quantitative data and is reflected within the JSNA work programme.

9.0 EQUALITY IMPLICATIONS

9.1 There are no direct equality and diversity issues arising directly because of this report.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no environmental or climate implications that will be generated by any recommendations included in this report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 The report is for information purposes only and there are no community wealth implications.

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APPENDICES

Appendix 1 Figures illustrating changing population demographics.

BACKGROUND PAPERS

Watt T, Raymond A, Rachet-Jacquet L, Head A, Kypridemos C, Kelly E, Charlesworth A. Health in 2040: projected patterns of illness in England. The Health Foundation; 2023 (https://doi.org/10.37829/HF-2023-RC03).

Life expectancy in Wirral 2018-20

(https://www.wirralintelligenceservice.org/media/3666/life-expectancy-update-2018-20-final-accchkd.pdf)

TERMS OF REFERENCE

This report is being considered by the Health and Wellbeing Board in accordance with Section a of its Terms of Reference:

(a) To develop a shared understanding of the needs of the local community through the development of an agreed Joint Strategic Needs Assessment

SUBJECT HISTORY (last 3 years)

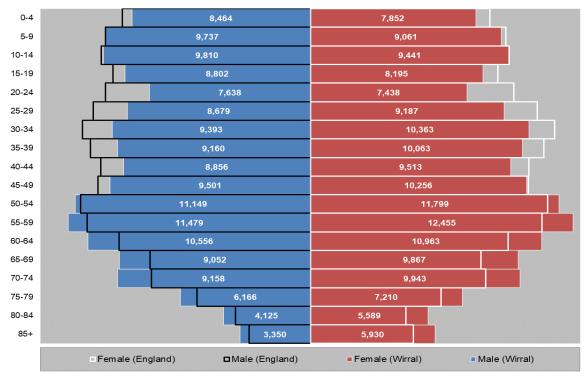
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Council Meeting		Date

N/A	
14/74	

AGEING POPULATION HEALTH AND WELLBEING BOARD 7 DECEMBER 2023

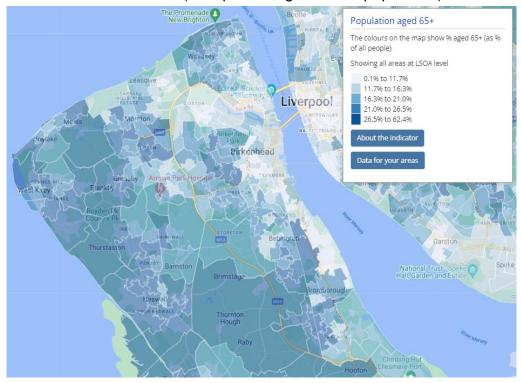
Appendix 1 Charts illustrating population change in Wirral

Figure 1: Population pyramid for Wirral and England, 2021



Source: Census 2021

Figure 2: Population aged 65 years and over (as a percentage of ward population)



Source: Local Insight, 2023

Figure 3: Current (2021) and projected (2043) population for Wirral

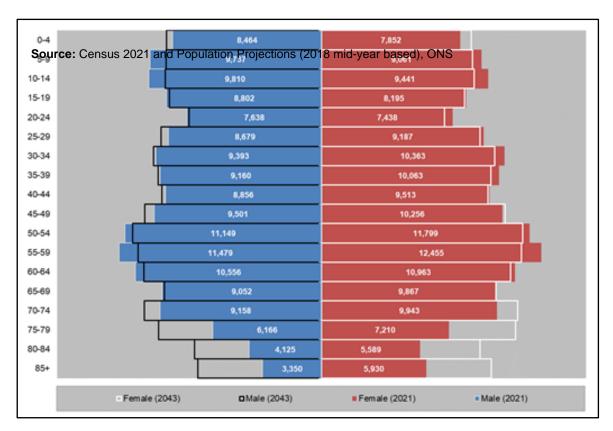
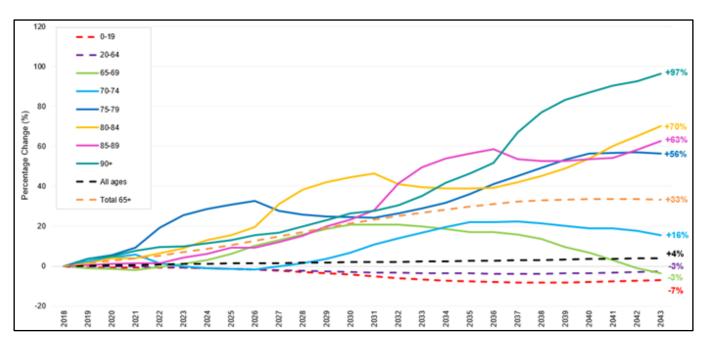


Figure 4: Population projections to 2043, Wirral



Source: 2018-based population projections, ONS



HEALTH AND WELLBEING BOARD 7 DECEMBER 2023

REPORT TITLE:	BETTER CARE FUND (BCF) QUARTER 2 RETURN
REPORT OF:	DIRECTOR OF CARE AND HEALTH

REPORT SUMMARY

This report summarises the mandatory Quarter 2 (Q2) report submitted to National Health Service England (NHSE). It provides data to demonstrate there have been no changes to the capacity and demand assumptions as set out in Wirral's 2023/25 Better Care Fund (BCF) Plan. It also demonstrates continued compliance with the requirements of the BCF fund and that the NHSE outcomes for 2023/25 are being met.

Performance against the objectives of the Wirral Plan is included in the reviews of each BCF funded scheme.

This is not a key decision.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to:

- 1. Note the continued compliance with the requirements of the BCF fund and that (NHSE) outcomes for 2023/25 are being met.
- 2. Note there are no changes to the capacity and demand assumptions included in the 2023/25 Better Care Fund (BCF).
- 3. Note the information provided will enable the Health and Wellbeing Board to influence the deployment of BCF services within the lifespan of this plan (2023/25) and future plans.
- 4. Note that the current position does not pose a risk to the Section 75 Agreement.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 Submission of the reports to the NHSE and Health and Wellbeing Boards is mandatory. They must provide evidence that systems have sufficiency within the care market, the NHS, and the Voluntary Community and Faith Sector (VCFS) to avoid admissions, maintain flow and provide intermediate care and reablement services. The Quarter 2 report must demonstrate the capacity and demand assumptions as set out in the 2023/25 BCF Plan were accurate. It is intended to provide assurance of continued compliance with the principles (vision) of the BCF and demonstrate that performance against the National Health Service Executive (NHSE) outcomes for 2023/25 has been achieved.
- 1.2 It provides the Health and Wellbeing Board with information that will enable them to influence the deployment of BCF services within the lifespan of the (2023/25) plan and future plans.

2.0 OTHER OPTIONS CONSIDERED

2.1 No other options were considered as the submission of a Q2 report is mandatory.

3.0 BACKGROUND INFORMATION

- 3.1 The BCF was established in 2014 to support integrated working across health and social care, housing and the voluntary community and faith sector to support personcentred care, sustainability, and better outcomes for people. The BCF represents a collaboration between:
 - Department of Health and Social Care (DHSC)
 - NHS England
 - Department for Levelling Up, Housing and Communities (DLUHC)
 - The Local Government Association (LGA)
 - The BCF plan articulates, at a place-based level, how the BCF is used to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers. Enable people to stay well, safe, and independent at home for longer.
 - The provision of care and support at the right time and in the right place.
- 3.3 The Better Care Fund (BCF) Policy Framework sets out the Government's priorities for 2023-25. These include improving discharge, reducing the pressure on Urgent and Emergency Care and social care, supporting intermediate care, unpaid carers, and housing adaptations.
- 3.4 The vision for the BCF over 2023-25:
 - Is delivering the Right Care in the Right Place at the Right Time.
 - Manages demand and reduces the cost of care.
 - Has clear accountability and governance arrangements.
 - Has resilience and flexibility to emerging issues in service delivery.

- 3.5 Quarterly reports must be submitted to the NHSE and Health and Wellbeing Boards. There was no requirement in 2023 to submit a Q1 report. Each report has a specific function.
 - Quarter 1 not required data included in Q2.
 - Quarter 2 summary of any changes to the capacity and demand plans between April 2023 and October as set out in the 2023/25 BCF Plan.
 - Quarter 3 confirm activity to date.
 - Quarter 4 An End of Year report on actual income and expenditure in BCF plans.
- 3.6 The report must provide evidence that there is sufficiency at place to meet demand. In Wirral, a Cheshire and Merseyside software model was used to determine demand in the hospital versus capacity (occupancy). This data identified the capacity required in intermediate care and other community services to maintain flow from the hospital, avoid admissions and enable people to be assessed at home. Whilst the demand levels for hospital discharge remains the same, the introduction of different approaches to discharge and increased capacity in the care market, has improved outcomes and the length of stay in hospital has reduced.
- 3.7 Analysis of the last 6 months suggests that whilst capacity has increased more work is needed to ensure there is sufficient capacity within the system to ensure people are assessed at home this is referred to as Pathway 1 (P1). This reduces the risk of inappropriate discharges on Pathway 2 (residential care), which can cause people to decondition and result in permanent admissions. Some examples are set out below from the Capacity and Demand Guidance Assumptions:
 - In May 2023 there were over 200 people who had no criteria to reside (NCTR) in hospital beds. In November 2023, since the inception of the hospital based Rapid Discharge Hub, that number has reduced to 99.
 - The Home First service, (a multi-disciplinary team approach to assessment of people in their own homes post hospital discharge) has accepted 150 referrals in November, the target was 170. It is expected as the service matures, in line with trajectories and contract, capacity will continue to be created, and targets achieved. The target date of 170 referrals is monitored at the Home First Board Meeting. It is anticipated that by December 2023 this target will have been achieved and future targets will be confirmed in Q3.
 - 102 intermediate beds are commissioned, 71 ward based and 31 in the community. A review of these services is underway focusing on performance against specification and readmissions.
 - The 10 beds, commissioned within a residential home providing interim support
 whilst a package of care was sourced has been reduced by 50% due to
 increased capacity in at home services as a result of the positive impact of both
 home first and community care market response.
 - Wirral MIND have delivered 339 hours of early intervention support delivered to 21 people between June and August to reduce the demand for Mental Health beds and placements. The service concentrates on people with Mental Health conditions and those at risk of suicide and offers alternatives to a hospital admission.

- The hospital based Single Point of Access (Age UK) will be mobilised in Q3 and will provide 270 discharge assessments and wellbeing packages of support. The intention is to connect people to services in the Community Voluntary and Faith Sector before discharge, as an alternative to commissioned services and to ensure people are supported to return home safely.
- In April 2023, 1376, people received a short term reablement domiciliary care service. In September 2023, this figure increased to 1576. In addition, and since November 2023 funding has enabled a domiciliary care provider to increase their capacity and since November 2022, 220 additional mobile nights have been provided. Whilst capacity has increased in the domiciliary care sector in terms of the numbers of hours delivered, this is being delivered to people with more complex needs who require larger package sizes and therefore the numbers of people in receipt of the service has not grown greatly to the same extent of hours delivered.
- The Council is developing a Reablement service offer to support this system priority. The model (AbleMe) will support people before reaching a crisis and potential admission to a hospital or care home setting. AbleMe will be mobilised in January 2024. This service will provide personal care and connect people to their communities and the voluntary community and faith sector. It will reduce demand for domiciliary care in the community and avoid hospital admissions. Capacity within the new service offer will be accurately calculated when the service is mobilised.

4.0 FINANCIAL IMPLICATIONS

4.1 A risk share arrangement is in place, as part of the Section 75 agreement.

5.0 LEGAL IMPLICATIONS

5.1 A Section 75 agreement is in place between the Council and NHS Cheshire and Merseyside Integrated Care Board (ICB).

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 Can be managed within existing resources.

7.0 RELEVANT RISKS

7.1 There is a risk that demand for services will become greater than the available capacity. Risk is monitored at the Executive Discharge Cell and other system leadership groups. This includes oversight of intelligence and data on the performance of key service areas.

8.0 ENGAGEMENT/CONSULTATION

8.1 Engagement with service providers is ongoing.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision, or activity. There are no direct equality impacts from this report.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 Funded services are delivered locally, and community care providers are currently deploying a range of initiatives to support the Council with the climate emergency response, and this includes the use of electronic vehicles and e-bikes.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Funded services primarily recruit local people, and community care providers are contracted to pay the Real Living Wage with an enhanced payment. NHS and Community Care Market providers are both large employers of people who work in Health and Care in Wirral.

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APPENDICES

N/A

BACKGROUND PAPERS

BCF Q2 Return Capacity and Demand Guidance Assumptions

TERMS OF REFERENCE

It is a National, mandatory requirement that the End of Year Template is approved by the Health and Wellbeing Board.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board	29 September 2021
(S75 Agreement)	
Adult Social Care and Public Health Committee	13 October 2021
(Pooled Fund Arrangements)	
Health and Wellbeing Board	9 February 2022
(Better Care Fund)	
Health and Wellbeing Board	23 March 2023





HEALTH AND WELLBEING BOARD

Thursday 7 December 2023

REPORT TITLE:	COMMUNITY, VOLUNTARY AND FAITH SECTOR
	REFERENCE GROUP UPDATE
REPORT OF:	DIRECTOR OF LAW & GOVERNANCE

REPORT SUMMARY

The report provides the latest updates and proposals from the Community, Voluntary and Faith (CVF) Sector Reference Group. The Reference Group was established as a mechanism to promote the views of the CVF Sector to the Health and Wellbeing Board.

This matter affects all wards. It is not a key decision.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to note the content of the reports of the Community Voluntary and Faith Sector Reference Group as appended to this report.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 To enable the Health and Wellbeing Board to be consider the updates and proposals put forward by the Community, Voluntary and Faith Sector Reference Group.

2.0 OTHER OPTIONS CONSIDERED

2.1 No other options were considered as part of this covering report.

3.0 BACKGROUND INFORMATION

- 3.1 The Health and Wellbeing Board considered a report at its meeting on 29 September 2021 named 'Formation of the Community, Voluntary and Faith Sector Reference Group' which sought to the Board's development of a progressive and effective working partnership with the Reference Group.
- 3.2 It was intended that the Reference Group would provide updates to the Health and Wellbeing Board on the work that it was undertaking.

4.0 FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from this covering report.

5.0 LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from this covering report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no direct resource implications arising from this covering report.

7.0 RELEVANT RISKS

7.1 There are no direct risks associated with this covering report.

8.0 ENGAGEMENT/CONSULTATION

8.1 The Chair and Group Leaders represented on the Health and Wellbeing Board have been consulted on the reports submitted by the CVF Reference Group.

9.0 EQUALITY IMPLICATIONS

- 9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.
- 9.2 Any actions arising from the reports submitted by the CVF Reference Group may required Equality Impact Assessments to be undertaken at the appropriate time.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no direct environment and climate implications arising from this covering report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 There are no direct community wealth implications arising from this covering report.

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APPENDICES

Appendix 1 – covering report for the update

Appendix 2 – Community, Voluntary and Faith Reference Group Update

Appendix 3 – Precis List

Appendix 4 – recent papers received and reviewed by the CVF Reference Group

BACKGROUND PAPERS

Report to the Health and Wellbeing Board 'Formation of the Community, Voluntary and Faith Sector Reference Group' 29 September 2021 Council Constitution

TERMS OF REFERENCE

This report is being considered by the Health and Wellbeing Board in accordance with Section C of its Terms of Reference:

(e) To drive a collaborative approach to commissioning of improved health and care services which improve the health and wellbeing of local people.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board	29 September 2021
_	9 February 2022
	15 June 2022
	29 September 2022
	21 December 2022
	23 March 2023
	20 July 2023



APPENDIX 1

HEALTH & WELLBEING BOARD

Thursday, 7th December, 2023

REPORT TITLE:	COMMUNITY, VOLUNTARY & FAITH SECTOR
	REFERENCE GROUP UPDATE
REPORT OF:	COMMUNITY, VOLUNTARY & FAITH SECTOR
	REFERENCE GROUP

REPORT SUMMARY

This report provides the latest updates and proposals from the Community, Voluntary and Faith Sector Reference Group (CVF-RG). The CVF-RG was established over 2 years ago as a mechanism to develop and promote works and the views of the CVF Sector to the Health and Wellbeing Board (HWBB). Their update is included in Appendix 2.

Appendix 3 provides a precis of 6 relevant key documents of the involvement of people and places of the redesign of local services relating to health and wellbeing as measured by health inequalities.

In the aftermath of the Covid pandemic significant changes in legislation have been brought forward, more recently the Levelling Up and Regeneration Act, all directly arising from lessons learnt from the pandemic, and in particular the need to fully involve communities and residents and their Elected Members (EM's) in the complexities of change and the decision-making processes that affect them.

The CVF-RG and Community Voice (CV) have been in step with these developments throughout as evidenced by the previous papers brought to the HWB. In this, the sixth update, short reports are made by CVF-RG members, on Community Hubs (Eastham), Green and Open Spaces, Family Hubs and Children's disabilities.

CV has kept abreast of research into best practice and further significant government papers on Policy, Health and Social Integration: joining up care for people, places and populations and a Bill on Levelling up and Regeneration. Several new research papers seeking to understand and address the complexities of community and place involvement have recently come forwards. Short precises of these key documents are provided in the update. An abbreviated list of publications is also provided listing new, relevant, and up to date papers.

These documents will be the main documents used to inform the delivery of the prototypes, the formation of partnerships and the transformations at community level as required in recent legislation and guidance.

This is highlighted in the success of the development and delivery of the Cost of Living funding grant secured in Eastham in late 2022 to deliver a "Warmer Hubs" project with

partners working together in a "bottom up" approach to benefit the health and wellbeing of the residents and community in Eastham.

A presentation on this community led project will be given to the meeting.

The aims and objectives of the development of Community Hubs, agreed with local elected Members, together with an action plan are being developed which will complement and extend the plans for engagement with communities, as already approved by the HWBB, to specific neighbourhoods.

In respect of the Family Hubs update a video titled "WAS NOT HEARD" from a safeguarding board will be shown which highlights the need to create communities and spaces where children/parents listen and support each other.

The matter affects all wards. It is not a key decision.

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to:

- (1) note the continuing progress of the CVF Reference Groups work on Community Hubs, Family Hubs, Green and Open Spaces and People Plan for Nature.
- (2) note the contents of the attached reports, and the continuing involvement and support of the CVF Reference Group in the delivery of the Council's approved Health and Wellbeing Strategy and to the continued development of work for engagement with communities and residents.
- (3) support the setting up of a workshop to consider and develop how better services and systems could be provided in the future for children with disabilities and their families.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 To enable the Health and Wellbeing Board to consider updates and proposals put forward by the Community, Voluntary and Faith Sector Reference Group.

2.0 OTHER OPTIONS CONSIDERED

2.1 No other options were considered as part of this covering report.

3.0 BACKGROUND INFORMATION

- 3.1 The Health and Wellbeing Board considered a report at its meeting on 29 September 2021 named 'Formation of the Community, Voluntary and Faith Sector Reference Group' which sought to inform the Board's development of a progressive and effective working partnership with the Reference Group.
- 3.2 It was intended that the Reference Group would provide updates to the Health and Wellbeing Board on the work that it was undertaking. The principal aim of the CVF Reference Group is to build and support the development of local community infrastructure, in support of ongoing programmes and plans to meet the health and wellbeing needs of Wirral's communities and residents.
- 3.3 The Reference Group has provided updates on their work on Local Infrastructure Development in support of Health and Wellbeing needs, based on a plan for the establishment of a prototype study in four wards involving community and family hubs and their work on the full utilisation of open green space in support of health and wellbeing needs.
- 3.4 At the meeting of the HWBB in March, 2023 two further areas of work in support of the principles and application of working together in partnership with elected members, communities and residents/young people were presented namely the People Plan for Nature and Street Safety.
- 3.5 The CVF Reference Group have continued to be involved in the further development and delivery of Health and Wellbeing Strategy through participation in the Council's Working Groups and with CVF Sector stakeholders.

4.0 FINANCIAL IMPLICATIONS

4.1 In due course funding will be required for the above programmes.

5.0 LEGAL IMPLICATIONS

5.1 Any future transfer of land for development of green open space will require agreement on a structured approach.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no direct resource implications arising from this covering report.

7.0 RELEVANT RISKS

7.1 There are no direct risks associated with this report.

8.0 ENGAGEMENT/CONSULTATION

8.1 The establishment of the pilot Community Hubs, agreed with local elected members and the Health and Wellbeing Board should be able to act as a base to facilitate further extensive partnership and stakeholder working prior to and then during to engagement through consultation with communities.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no direct environment and climate implications associated with this covering report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 There are no direct community wealth implications associated with this covering report.

REPORT AUTHOR:

Kevin Sutton

APPENDICES

Appendix 2 Updated report of CVF Reference Group

Appendix 3 Relevant updated publications

Appendix 4 Recent Papers received and reviewed by the CVF Reference Group Update to the HWBB

BACKGROUND PAPERS

Report to Health and Wellbeing Board 29 September 2021

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Banant to Haalth and Wallhain a Banah	soth Contourle on 2004
Report to Health and Wellbeing Board	29 th September, 2021
Report to Health and Wellbeing Board	15 th December, 2021
Report to Health and Wellbeing Board	9 th February, 2022
Report to Health and Wellbeing Board	29 th September, 2022

Report to Health and Wellbeing Board	21 st December, 2022
Report to Health and Wellbeing Board	23 rd March, 2023
Report to Health and Wellbeing Board	20 th July, 2023
Report to ricatin and Weilbeing Board	20 July, 2023



<u>Appendix 2 – Community, Voluntary and Faith Reference Group Update</u>

<u>Building Community Infrastructure to improve the health and well being of</u> Communities and Residents on Wirral

Context

Every resident is unique, as also is the environment and the community in which they live.

All individuals, their families, and their communities from time to time need help, some most of the time and some only rarely.

This help is provided through government and its agencies at national, regional, and local level. It is however, increasingly recognised that help from within the community, if structured and readily available, is of considerable value.

It is also known that help within the community, because of its proximity. knowledge and sensitivity, can forestall a worsening of the need and a much speedier response to it. This help can be fully developed through Community Hubs and Family Hubs.

The health of a community, but not of individuals within a community is often determined by the average life expectancy and average healthy life expectancy of its residents.

An unacceptable and growing difference in these measures is found between 'well off' communities and deprived communities. To address this difference government has committed to a levelling up programme and has brought forward a new Health and Care Bill with the specific aim of reducing health inequalities, see below.

In Wirral there are a several deprived communities where the level of life expectancy and healthy life expectancy is unacceptably low.

What is Local Community Infrastructure?

Current systems to deal with Individual, family and community needs, and the effectiveness of structures to ensure collective need is met, were put to the severest test by the Covid pandemic.

In response to the virus communities and their residents using their local knowledge, came together and looked after each other with the support of the health sector, government at all levels, the CVSE sector, and many other partners.

It is widely accepted that local knowledge minimised the impact of the virus and continues to do so.

The virus has also shone a strong light on the lack of knowledge at the most local level held by local authorities and health providers, a deficit which, unless addressed, is likely to continue to limit the effective delivery of services to those most in need in more normal circumstances with the impact of the virus minimised.

The Health and Care Bill introduced in July 2022 legislates for communities and their residents and the CVSE sector to fully participate in the design of new systems addressing the limitations of current systems identified by the pandemic. NHS guidance documents also fully emphasise this requirement and more specifically NHS guidance B1762 Working in Partnership with People and communities published on 4th August.

A precis of B1762, prepared by Community Voice and previously put forward to the Health and Wellbeing Board by the CVF Reference Group, illustrates the case very strongly, almost mandatory, for people and communities to be involved in the full extent of change programmes being developed by ICP's, ICB's the NHS and key partners. Programmes and plans developed in partnership to harness the local knowledge through the provision of simple and effective systems to address need quickly and effectively and through which communities and residents can make their strongest contribution, leads to a discussion of how best this may be developed and brought forward at the local level.

The term Local Infrastructure attempts to describe in general terms what needs to be considered alongside the key elements and features associated with successful approaches adopted in England. It is a collective term for the agreed system approach taken by each community and its residents working in partnership and in codesign in deciding what is appropriate for them.

Creating asset based community foundations can contribute towards cultivating relationships of mutual understanding, trust, continuous building of relationships and support between partners and stakeholders

The challenge of codesign from the community and resident perspective

Implicit in the Health and Care Bill 2022 is the assumption that communities 'know who they are' and are ready to rise to the challenge of contributing to the codesign of a 'place-based' new approach to improving health and wellbeing and which can help address local need.

Two fundamental points for consideration would seem to arise at the outset, have the boundaries of the community been established and accepted and has the willingness of community and residents, to play a key role in improving health and wellbeing, through representation also been established.

For the purposes of local government, here in Wirral and in most local authorities, place is divided into wards. Within each ward individuals are elected to be the ward's representatives in local government. In Wirral this is currently three per ward. The number is subject to review.

The ward boundaries established for local government are, by and large, acceptable for local government and should represent a start point for discussions about 'place' in the context of a codesigned programme relating to improvements in health and wellbeing. There is also potential for these boundaries to be reviewed.

Subsets of community do exist within wards and their identity needs to be understood and considered.

To be able to play a key role communities and residents will, within each place, need to find a way to ensure health and wellbeing need, for individual residents, for families, for groups of residents and even for the whole community, is recognised, understood, appreciated, and then addressed.

Next Steps: Bringing all the key components together in an extensive working partnership across the Wirral.

The national debate as to how to engage and overcome unacceptable health inequalities and their equally unacceptable and sinister effects on 'left behind' groups and members of society, is reaching maturity, for which the reader is referred to the precises of recent papers in this update.

The challenge to address health inequalities must be led by communities working in partnership with all service providers, and in turn led by those elected to serve and represent them through the local council. All service providers have a hugely significant role in the working partnerships, especially the service providers whose role is to keep residents safe and well.

The apparent confusion between neighbourhoods and community can be concluded simply because it is not either/or as they both have their importance and place. For example, neighbourhood working is easily the best approach for health services and should develop at pace. However, community, at the heart of levelling up has primacy. Community must be able to work alongside all service providers in an extensive redesign, where appropriate, informing that redesign in the local circumstance and interest.

A characteristic of 'left-behind' communities is the lack of infrastructure needed for them to be able to reverse a decline in health inequalities. They need help from all of us if the scourge of inequalities is to be overcome through internally generated design and restructuring.

Family hubs and community hubs within these 'left behind' communities enabling the residents to meet and discuss their specific needs and aspirations are essential components for their transformation recognising that all 'self-defined' communities are unique.

Direct funding, to help the transformation is of vital importance, as evidenced here by the impact on Eastham ward. In many cases need can be identified from within the community, as has often been the case with and going forward after Covid.

This is highlighted in the development and delivery of the Cost of Living funding grant secured in Eastham in late 2022 to deliver a community led "Warmer Hubs" project with partners working together in a "bottom up" approach to benefit the health and wellbeing of the residents and community in Eastham.

The failure to gain traction in Leasowe, with best endeavours, is possibly due to a lack of direct funding and the caution of the community without a clear commitment to community led 'levelling up'.

In this update a community-led redesign of services to address children's disabilities working in partnership with children's services is given prominence.

Updates are provided on community hubs, family hubs a report on children's disabilities and green and open spaces.

Report on a possible extended approach to meeting the needs of disabled children.

CVF-RG colleagues are seeking to work in partnership to find and optimise designs and processes for supporting families with disabled children. We all want the same thing, better outcomes.

A working partnership, not yet fully developed, has been agreed in principle with Children's Services.

Ostensibly a good system is in place Iin Wirral for responding to children with disabilities but there is much room for improvement on an individual level.

The Joseph Rowntree organisation uses the term '**minus trust**' to characterise the principal barrier to meeting the challenges of levelling up and in the context of children's disability CVF-RG suggests how this can be minimised. Evidence of the potential success of a new approach can be found at Ferries Family Hub.

The recently established family hubs within the children's centres is a key development.

What is being proposed here is that family hubs and community hubs are established in each community as a necessary component of a new structure which enables community to participate and lead where appropriate.

Families, recognising their child's disabilities, are then able to turn for help to the 'local' family hub and or community hub, where trust will be at its strongest.

The local hubs can then, with the permission of the family, register the child as disabled and "hold their hands", and help them navigate the complexities of securing the appropriate support for the child working primarily with children's services.

A lot of further thought needs to be given to this approach which is essentially community-led.

Updates from CVF-RG members

Family Hubs Update

Wirral has made significant progress in developing family hubs and has officially launched its first Family Hub pilot in Seacombe. There has been a strong effort to include voluntary sector professionals in the development of the hubs with an emphasis on working together to support local families and children, the aim being to develop into the full Annex F offer required by the Department for Education (DfE). CVF organisations were invited and attended the launch. The Family Hubs transformation team is currently managed by Jo Simpson – Interim Operations Manager – Early Childhood Services who is working hard to bring about the multi-agency on-boarding with the help of the National Centre for Family Hubs (The Anna Freud Centre). Wirral is also involved in network meetings with 10 other local authorities. Discussions are beginning to take place in Wirral to include both statutory and CVFSE organisations to engrain good practice and to roll out an effective Family Hub offer to the families of Wirral. Development of Family Hubs is also being linked with Maternity Hubs, the Wirral Health and Wellbeing Strategy and 1001 days work already established. An identified potential challenge will be how and what data can be shared.

An invitation to express interest for settings to become Family Hubs was initiated by Wirral Council and 28 applications were submitted in addition to Children's Centres. These included 9 Primary Schools. 15 Voluntary Sector organisations, 1 Special school and 3 Early Years settings. Some settings have received information to say they will become a Family Hub delivering the full offer or a Satellite Hub. These locations are yet to be made public.

The organisations that put in expressions of interest are awaiting information on the next steps.

As part of the CVF Reference Group's work programme on Family Hubs members have been liaising and partnering with Council Officers around how we can improve the services offered and provided to children with disabilities and their families. Members of the reference group have put forward 4 case studies for consideration by Council officers in Children's Services and other relevant partners and service providers. The recommendation being that the health and well-being board supports the setting up of a workshop to consider and develop how better services and systems could be provided.

Members of the CVF Reference Group also attended a partnership meeting with the Wirral Family Hubs team to discuss Family Hubs and SEND. Wirral Parent and Carer Partnership were in attendance acting on behalf of local parents. 'Keeping SEND in mind' is part of the Start for Life Programme and Family Hub transformation.

The voice of children and families is key to providing an offer that families will want to use. In October the National Centre for Family Hubs Conference had a strong focus on relational practice and Annex F refers to 'Connecting to' families.

Article 12 of the United Nations Convention states children 'have a right to be listened to'. Peer support is also a foundational practice for Family Hubs, creating communities and spaces where children/ parents listen and support each other.

The community sector is the vital link between services and families, having the necessary trust and relationships to facilitate positive change. Currently the children of Wirral are crying out to be listened to with waiting lists for CAMHS being overwhelmed and the subsequent introduction of Care Navigators seeking safe places for children and families to be heard.

Pastoral workers in schools who are allocated listeners for children are often busy teaching and listening is secondary. Wirral needs an army of safe listeners, strategically placed within communities and in online spaces such as Kooth working with experts in communication such as Speech and Language Therapists teaching us how to listen and use communication tools and techniques. Parents who are experiencing stress or who are in poverty often do not have the capacity to listen carefully to children due to having to source basic necessities or to attend meetings etc. Often there is no family support surrounding a family i.e., grandparents, aunts or uncles. Parents need to be on their phone to navigate daily life and complex systems of support. Listening is not the whole responsibility of services but of every member of our society.

We often focus on 'Stranger Danger', can we harness the 'Kindness of Strangers' in safe ways to listen to Wirral's most desperate children. UNICEF are currently running a 'Child Friendly City Initiative' where every child has the right to grow up in an environment where they feel safe and secure, have access to basic services and clean air and water, can play, learn and grow where their voice is heard and matters. The Community Voluntary and Faith Sector, Community and Family Hubs can be a vehicle to make this systemic and cultural change happen.

Briefing Paper - Green and Open Spaces Group - CVF - Reference Group

The CVF-RG proposal for the establishment of a local environmental Green Space Infrastructure plan to improve the quality of and access to local green spaces in Wirral, was approved at the Wirral Health and Wellbeing Board in February 2022. A multiagency Green Spaces Group has been formed to progress the aim of developing a framework of infrastructure and support that will enable residents' groups across Wirral to develop community garden initiatives in under-utilised green spaces, for the enhancement of their health and wellbeing.

Access to green spaces is important for health and wellbeing. A longitudinal study from Scotland found that children living in homes with gardens had better social, emotional and behavioural scores (Richardson, 2017). Residential green space during one's childhood has also been found to lead to a lower risk of psychiatric disorder in adolescence and childhood (Engemann et al., 2019). On average, one in eight British households has no garden (ONS, 2020), whilst many Wirral wards do not have a minimum standard of green space (Green Space Index 2022).

The recent Public Health England report (2020) identifies 'new evidence and actions to help local areas consider how good-quality greenspace can support the delivery of health, social, environmental and economic priorities, at a relatively low cost.' The wellbeing value associated with frequent use of local parks and green spaces has been valued at £34.2 billion per year, whilst saving the NHS £111m per year (Fields in Trust, 2018).

The new or enhanced community gardens will provide a range of green social prescribing interventions which can improve mental health outcomes; reduce health inequalities and reduce demand on the health and social care system. These may include gardening, walking, creative health and wellbeing activities that can help prevent or address social isolation, mental and physical health issues and food poverty. The success of this will depend on excellent referral pathway structures, collaborating with local GP's surgeries and PCN's.

The community gardens will provide opportunities for growing, , social interaction, volunteering, training and employment, and collective food production. They can support residents through the demonstration of healthy cooking with home grown or surplus produce, vital during the current cost-of-living crisis. The development of a joined-up co-operative food strategy across the borough (linking with the Liverpool Food Growers Network) can increase local urban food production for the benefit of local residents, and reduce food waste.

Additionally, this proposal for improving access to green spaces can sustain improvements in nature connectedness that can help address global calls for a new relationship with nature required for a sustainable future (Richardson, 2019). This will support Wirral Council's commitment to action following the declaration of Environment and Climate Emergency in July 2019, achieving biodiversity net gain and contributing to the UN SDG's.

One of the most significant issues for local communities, particularly those without resources or a track record, is the acquisition of land for community engagement and activities. The Green Spaces Group has recently agreed to create a Community Land Trust to help overcome those barriers, providing a legal entity for the acquisition and protection of green space assets from Council, Health, Church, housing associations, etc. for the benefit of local communities.

Within the framework of the Wirral Green Spaces CLT, the aim would be to empower local residents' groups to take ownership of local community garden greenspaces, though more established CVF organisations may be appointed as interim stewards. They will be supported by the CLT through the services of member organisations who can offer assistance with community engagement; horticultural advice, practice and training; in addition to support with organisational management and fundraising.

Grow-Wellbeing CIC is lead member for environmental issues in the CVF-RG, and has brought together a diverse range of public and CVF sector organisations and elected members, who can contribute to a partnership approach to transform urban community greenspaces for health and wellbeing. The founder has recently been elected to represent the CVFSE sector on the Wirral Place Strategy and Transformation Group.

Grow-Wellbeing CIC aims to support healthy communities through nature connection via Forest School, community gardening and nature wellbeing activities. Since its inception, Grow-Wellbeing has collaborated with partners in health, education, social care, environment and the CVF sector in Wirral, Merseyside and Cheshire. It has created employment opportunities, including traineeships for young people, and is an accredited provider of Forest School Leader Training. Grow-Wellbeing is well placed to assist the coordination of the development of the Wirral Green Spaces CLT, collaborating with partners and empowering communities.

The CVF Reference Group are aware that the Council has recently awarded a contract through the United Kingdom Shared Prosperity Fund (UKSPF) administered through the

Liverpool City Region. This contract includes over £86k to deliver "green grants" in line with UKSPF priorities.

The priorities are:-

- 1. Greening of local communities and neighbourhoods
- 2. Providing opportunities for local residents especially young people and families to become more involved in their communities
- Focus on local /community based projects to support a greening of local neighbourhoods
- 4. Adding and enhancing our natural green and blue infrastructure
- 5. Projects related to food security(food growing, communal composting and reduction of food waste)

Appendix 3 - Recent Papers received and reviewed by the CVF Reference Group Update to the HWBB

- Building healthier communities: the role of the NHS as an anchor institution.
 The Health Foundation. 2019.
- Community Calling: People want more influence. New Local Aug 2022.
- Repairing our society; A social justice manifesto for a thriving Britain, July 2022.
- Working in Partnership with People and Communities, NHS England, Statutory Guidance, B1762, July 2022.
- Next steps for integrating primary care: Fuller Stocktake report, May 2022
- Principles in practice; lessons and examples from the Keep it Local Network, Locality, August 2022.
- Families and inequalities, Institute of Fiscal Studies Deaton Review, June 2022.
- The Community paradigm, New Local, March 2021.
- A Community Powered NHS, New local, August 2022
- The Community Hub Handbook, Locality, January 2020.
- A policy Toolkit, Recovery and Renewal on the Kent High Street; Localis, 2022.
- The impact of community anchor organisations on the wider determinants of health, Locality, Power to Change and VCSE Health and Wellbeing Alliance, March 2022
- Creating health and wealth by stealth, community anchor organisations, prevention services, and the wider determinants of health, Locality, Power to Change and VCSE Health and Wellbeing Alliance, January 2023.
- Space to thrive. The role of community spaces in supporting the mental health and wellbeing of children and young people, Locality, Power to Change and VCSE Health and Wellbeing Alliance, March 2023.
- Going further together. The role of VCSE organisations in neighbourhood health ecosystems, Locality, Power to Change and VCSE Health and Wellbeing Alliance, June 2023.
- Community Ownership Fund prospectus, Policy paper, Department for Levelling Up, Housing & Communities, Ministry of Housing, Communities & Local Government, 25 May 2023.
- Designing out the Most Severe Forms of Hardship in Local Areas, A learning report. New Local and Joseph Roundtree Foundation, 2023.
- Actions to Support Partnership, addressing barriers to working with the VCSE sector in integrated care systems, The Kings Fund, April 2023
- We've assembled a rebel alliance, but their ideas should be mainstream, New Local, June 2023.
- "Soft light, not the spotlight": How to make a community-powered leader. New Local, June 2023

- Adult social care and the NHS: two sides of the same coin, NHS Confederation, September 2023.
- Power, participation, and transformative change how funders can help,
 Joseph Rowntree Foundation, August 2023
- How funders can facilitate community-led transformation, blog, Local Trust, September 2023
- Empowered, connected, and respected, Primary Care Network, September 2023.
- A neighbourhood strategy for national renewal. APPG, Left Behind Communities, October 2023.
- Policy paper: Health and social care integration: joining up care for people, places and populations. Department of Social Care, February 2022.

Appendix 4 - Precis of recent key documents of the involvement of people and places of the redesign of local services relating to health and wellbeing as measured by health inequalities.

- 1. Policy paper. Health and social care integration: joining up care for people, places, and populations, Update 11 February 2022.
- **2.** Power. Participation and transformative change how funders can help. Joseph Rowntree Foundation, August 2023
- **3.** Final report of the APPG for 'left behind' neighbourhoods' inquiry into levelling up. October 2023
- **4.** Empowered, connected, and respected: a vision for general practice at scale and primary care networks, exploring what is needed to develop a robust, resilient, and thriving future for primary care. NHS Confed September 2023.
- 5. How funders can facilitate community-led transformation. Local Trust, September 2023.
- 6. Adult social care and the NHS: two sides of the same coin. NHS Confederation 2023.

1. Policy paper.

Whilst this document is directed at the need for a significant design of the local NHS structures it is made clear that full consideration needs to be given, as the title indicates, to the designs impact on local communities.

Precis

Precis: Department of Health & social Care, Policy Paper updated 11 February 2022

Health and social care integration: joining up care for people, places, and populations.

This is a 60-page document, with a foreword by the Secretary of State for Levelling Up, Housing and Communities and the Health Secretary.

It comprises of six sections,

- 1. Introduction
- 2. Shared outcomes
- 3. Leadership, accountability and finance
- 4. Digital and data
- 5. The health and care workforce and carers
- 6. Conclusion- impact on people and next steps,

preceded by an **Executive Summary**.

The **foreword**, quite naturally, refers to the learning from the pandemic, the aims of the policy and reference to the new approach.

'So, as we recover and level up, it is right that we draw on our experience of the pandemic to bridge the gaps between health and social care, between health outcomes in different places and within society, that are holding us back'.

'Our white paper aims to achieve by bringing together the NHS and local government to jointly deliver for communities'.

'It sets out a new approach with citizens and outcomes at its heart'.

'It is the start, not the end, of a new wave of reform which will both put power and opportunity in the hands of citizens and communities and build a society that is sustainable and just'.

The Executive summary is just short of 6 pages, it is presented under seven headings,

Joined up care: better for people and better for staff.

Shared outcomes which prioritise people and populations.

Ensuring strong leadership and accountability.

Finance and integration

Digital and data: maximising transparency and personal choice.

Delivering integration through our work force and carers.

What this means for people and communities.

The following key statements are abstracted from the **Executive Summary** as being of relevance to citizens and communities.

'While progress has been made. our system remains fragmented and too often fails to deliver joined up services that meet people's needs'.

'People too often feel like they have to force services to work together rather than experiencing joined-up health, public health social care and other services'.

'Working with local places and ICS's, we will remove unnecessary barriers so places will be empowered to do what is best for their citizens. They will be supported to be transparent and accountable for the delivery on the outcomes which matter to communities, and variations in performance between areas will be addressed'.

Further key statements are abstracted from three of the six sections beginning with section 1.

Section 1: Introduction: delivering more integrated services for the 21st century. 7 pages with 6 case studies.

1.1 'When health and care organisations have a shared mission, work with their local citizens, and pool their ideas, energy and resources to serve the public, the result is often the delivery of outstanding quality and tailored, joined up care, which improves the experience and outcomes for individuals and populations'.

Section 2: Shared outcomes. 6 pages.

Summary: 'Some outcomes and goals are appropriately set nationally, but we also need to make space for local leaders to agree shared outcomes that meet the particular needs of their communities'.

2.18 'Places, working with local people and communities, will then identify and agree their local outcome priorities with reference to the broad framework'.

Section 3: Leadership, accountability, and finance. 9.5 pages.

Developing effective leadership for integration.

Section 3. 'We believe effective local leaders for health and care should.

- Bring their partners together around a common agenda with decisive action in the interest of local people, even when it runs counter to organisational interests'.
- Listen to the voices of people who draw or may need to draw- on services when designing and improving those services and I defining which outcomes matter to individuals and populations'.

There are no further key statements in the last three sections, although the depth of this work is to be greatly applauded.

CV: 26.10.2023

2. <u>Precis: Power, participation and transformation change – how funders can help, Joseph</u> Rowntree Foundation, August 2023

This is an 18-page document in nine sections.

Key Learning

Background/context

The approach we took and what we learned.

What worked well: what we would do again.

Challenges and what we learned: it's all about power,

Impact definition and measurement matters.

Conclusion: system change is in our hands.

Acknowledgements.

The document is for funders and reports on five years work looking into how funders can *achieve* improved outcomes.

Funding grassroots movements, transformative change and working with people furthest from power are currently in vogue in the funding world. This report documents learning from JRF's work alongside organisations led by people in poverty over the past five years, on what funders can do to build power and support transformative change at a grassroots level.

Sarah Campbell, Head of participation.

Key Learning

A short paragraph under key learning identified four points for funders.

Background/context.

In a further short paragraph reference is made to three areas in which learning could be drawn whilst recognising that previous work lacked an understanding of what was needed in practice.

The approach we took and what emerged.

This is one of the key components of the document and is covered in three pages.

Key statements are,

'At the time the programme started, there was very little work in JRF which sought to share power with marginalised communities'.

'We sought to be experimental uncovering blind spots as we discovered-in relationship with our partners-what was needed to take a bottom-up approach'.

'Power sharing and partnership was the entry point'.

'Mutual learning was a core part of the approach-acknowledging that we had as much to learn from partners as they do from us and that we need to know our own capacity building to do this work well'.

Six values of the work were cited,

Voice amplification.

Continual learning.

Deeper understanding of income.

Converge of voices.

Trust based relationships.

Enabling conditions

What worked well: what we would do again.

This section comprises 6 separate headings, covered in 2.5 pages.

Trust Building

Shifting Power

Organisation and staff transformation

Funding for learning

Finance Fiduciary close to the marginalised groups

Diversifying/more equitable funding practice

Notable statements are,

'Trust is at the heart of any collaborate working and is the most important aspect to get right, however, it is hard won'.

'We found a way to provide resources that enabled initiatives led by/close to marginalised groups that did not yet have a legal entity to be birthed and incubated'.

Challenges and what we learned: it's all about power.

This section is covered in two heading and in 3.5 pages.

Navigating power dynamics, and

What it takes to build power.

In this section there are several key statements, as follows.

'The intention of the grassroots mobilisation work was to sit under and support the work of groups affected by injustice. This is challenging when you hold a position of power: being a funder and having a brand creates a barrier to building trust'.

'The high level of mistrust is also because people's experiences of institutions in their daily lies have often been ones where power and control have been exerted with negative consequences; this leaves scars that never entirely disappear'.

'Our key learning was that any relationship starts from minus trust,

'Democratic engagement and participation is poor in the UK, and most acutely poor for marginalised groups'.

'People who have bee dealt a poor hand in life often are prevented from having much agency and control over their daily lives, having to survive in systems that seek to control and do to and for you rather than ones that enable autonomy'.

'Trust in our political system is low – and this is for the average citizen, it is even more the case for marginalised communities'.

Four bullet points are provided aimed at nurturing power.

- Building community
- Sharing
- Creating space for analysis
- Inspiring hope

Impact definition and measurement matters

This is the longest section at 5 pages under four headings.

Defining impact with systems change lens.

Implicit forms of impact.

Impact definition that encompasses power building

Shifting funder mindsets

It is a research section mentioning several sources of information which CV will follow up.

Conclusion

This is reported in full due to its brevity and succinctness.

It is within our power to take a lot of the actions needed to shift things, but taking action is probably one of the hardest things to do. Shifting mental modes, inverting usual approaches and ways of working, and redefining what we perceive as impact and what we value, are all big asksbut the work we have done over the past five years shows that it can be done. There is still a long way to go, and inevitably the slow buy urgent work of transformative change never feels fast enough. The key is embedding what we've learned in future work, remembering what Kania et al have told us.

'Foundations involved in system change can increase their odds for success by <u>focusing on less</u> <u>explicit but more powerful</u> conditions for change, whilst also turning the <u>lens on themselves'</u>.

3. <u>Precis: A neighbourhood strategy for national renewal; Final report of the APPG for 'left behind' neighbourhoods' inquiry into levelling up. October 2023</u>

This document from the All-Party Parliamentary Group was researched by Local Trust, OCSI and Reform. It comprises 80 pages in 10 sections.

Within the definition of 'left behind' (c.f. below) Wirral has three areas considered to be in this category in this report. The MP for Birkenhead participated in the inquiry.

'Left behind' neighbourhoods are those local authority wards that experience the 'dual disadvantage of high levels of deprivation and socio-economic challenges [and are] lacking in the community and civic assets, infrastructure and investment required to mitigate these challenges' (OCSI,2019).

These are neighbourhoods that are ranked in the ten percent most deprived across both the Community Needs Index and the Index of Multiple Deprivation.

The ten sections in the report are,

Executive Summary

Co-Chairs' foreword

'Left behind' neighbourhoods: definition, experience, and opportunity.

Our vision for 'left behind' neighbourhoods.

The policy challenge: why it is difficult to transform 'left behind' neighbourhoods?

Where change is needed most: power, funding, and culture.

Three possible futures: at the turning-point for 'left-behind' neighbourhoods.

Our policy recommendations.

Conclusion.

References

Acknowledgements.

This precis will focus mostly on the Executive summary and the Co-Chairs foreword with comments from the individual sections where it seems appropriate.

Executive Summary

This a powerful exposition of the aims and objectives of the Reference Group in five short pages and should be acted on without delay. It is set out under six headings.

The following quotes provide clarity of purpose and direction.

'We are at a crucial moment for England's 'left behind' neighbourhoods and decisions made in the next few years will define their prospects for decades to come' How can we ensure that communities that have long missed out on their share of services and opportunities are no longer 'left behind'?

To be successful and sustainable levelling up must:

- Be led by local people the experts best placed to know what needs to be done to improve outcomes.
- Reflect local needs and circumstances not follow a national template.
- Entrust decision making including funding to communities, not Whitehall or the town hall.
- Long-term investments create a solid foundation for sustainable growth and regeneration.

The key section of the summary comes under the heading 'What we should do differently? With three headings,

Distribute power from the centre to community.

Transform funding and resources.

Shift culture from control to trust.

followed by a section titled 'We are at a critical point' in which worst case, base-case and best case for neighbourhoods is defined as follows,

Worst case-where neighbourhoods fall further and further behind

Base case-where, despite huge efforts, neighbourhoods are only running to stand still,

Best case- where, with a re-imagined levelling up agenda, with policies co-produced with communities, and powers meaningfully devolved to allow tailored local approaches-which sees 'left behind' neighbourhoods leaping forward.

The document recognises that 'the best case requires the most ambition, imagination, and political will listing nine bullet points, with the three most relevant to RG being.

New processes harness the experience and capacity of local people at every stage of policy development.

Local residents are engaged in making decisions and take ownership of their community's development.

Long- term investments create a solid foundation for sustainable growth and regeneration.

Policy recommendations then follow broken down into three groups, those for central government, for local government and those for community organisations.

The RG points out that this assumes community organisations are in place and their aim is to put them in place through the formation, 'bottom-up', of both community hubs and family hubs where they do not exist.

The recommendations for local government are,

- Stronger collaboration between local government and public bodies
- More effective engagement with communities
- Clearer communication and decision-making
- Prioritisation of capacity building
- Targeted investment in social infrastructure and local initiatives.

And the recommendations for community organisations: operating within 'left behind' neighbourhoods are,

- Fostering a culture of mutual support.
- Encourage knowledge sharing.

The RG also points out that this document clearer draws a distinction between neighbourhoods and communities with communities being the key participants in programmes for change.

The local plan for change through nine neighbourhoods falls short when considering the latest up to date research and this powerful APPG report.

CV 06.11.23



HEALTH AND WELLBEING BOARD

THURSDAY 7 DECEMBER 2023

REPORT TITLE:	HEALTH AND WELLBEING BOARD WORK		
	PROGRAMME		
REPORT OF:	DIRECTOR OF LAW AND GOVERNANCE		

REPORT SUMMARY

The Health and Wellbeing Board, in co-operation with the other Policy and Service Committees, is responsible for proposing and delivering an annual Committee work programme. This work programme should align with the corporate priorities of the Council, in particular the delivery of the key decisions which are within the remit of the Committee. It is envisaged that the work programme will be formed from a combination of key decisions, standing items and requested officer reports. This report provides the Committee with an opportunity to plan and regularly review its work across the municipal year. The work programme for the Health and Wellbeing Committee is attached as Appendix 1 to this report.

Following the adoption of a revised Constitution by Council on 25 May 2022, the Terms of Reference for Committees were updated so that the agenda of any Committee or Sub-Committee shall only include those items of business that require a decision, relate to budget or performance monitoring or which are necessary to discharge their overview and scrutiny function. The Committee is therefore asked to consider whether any items for future consideration on its work programme need to be reviewed to comply with the revised Constitution. It is proposed that issues on the existing work programme that are for information purposes only can be considered via other means, such as briefing notes or workshops.

RECOMMENDATION

The Health and Wellbeing Board is recommended to note the proposed Health and Wellbeing Board work programme for the remainder of the 2023/24 municipal year.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 To ensure Members of the Health and Wellbeing Board have the opportunity to contribute to the delivery of the annual work programme.

2.0 OTHER OPTIONS CONSIDERED

2.1 A number of workplan formats were explored, with the current framework open to amendment to match the requirements of the Board.

3.0 BACKGROUND INFORMATION

- 3.1 The work programme should align with the priorities of the Council and its partners. The programme will be informed by:
 - The Council Plan
 - The Council's transformation programme
 - The Council's Forward Plan
 - Service performance information
 - Risk management information
 - Public or service user feedback
 - Referrals from Council

Terms of Reference

3.2 The principal role of the Health and Wellbeing Board is to discharge functions pursuant to sections 195 and 196 of the Health and Social Care Act 2012.

The Health and Wellbeing Board will not be responsible for directly commissioning services, but will provide oversight, strategic direction and coordination of the following activities:

- (a) To develop a shared understanding of the needs of the local community through the development of an agreed Joint Strategic Needs Assessment
- (b) To seek to meet those needs through leading on the ongoing development of a Health & Wellbeing Strategy
- (c) To provide a local governance structure for local planning and accountability of health and wellbeing related outcomes
- (d) To work with HealthWatch in Wirral to ensure appropriate engagement and involvement within existing patient and service user involvement groups takes place

- (e) To drive a collaborative approach to commissioning of improved health and care services which improve the health and wellbeing of local people
- (f) To consider and take advantage of opportunities to more closely integrate health and social care services in commissioning and provision
- (g) To review the financial and organisational implications of joint and integrated working across health and social care services, ensuring that performance and quality standards of health and social care services are met, and represent value for money across the whole system
- (h) To establish a key forum for local democratic accountability relating to commissioning against agreed health outcomes
- (i) To develop and update the Pharmaceutical Needs Assessment (PNA)
- (j) To ensure the Better Care Fund plan is monitored regarding its progress and performance and ensure the health and social care partners effectively plan regarding the implications of this work.

4.0 FINANCIAL IMPLICATIONS

4.1 This report is for information and planning purposes only, therefore there are no direct financial implication arising. However, there may be financial implications arising as a result of work programme items.

5.0 LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from this report. However, there may be legal implications arising as a result of work programme items.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no direct implications to Staffing, ICT or Assets.

7.0 RELEVANT RISKS

7.1 The Board's ability to undertake its responsibility to provide strategic direction to the operation of the Council, make decisions on policies, co-ordinate spend, and maintain a strategic overview of outcomes, performance, risk management and budgets may be compromised if it does not have the opportunity to plan and regularly review its work across the municipal year.

8.0 ENGAGEMENT/CONSULTATION

8.1 Not applicable.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact

Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

9.2 This report is for information to Members and there are no direct equality implications.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 This report is for information to Members and there are no direct environment and climate implications.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 This report is for information to Members and there are no direct community wealth implications.

REPORT AUTHOR: Mike Jones

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APPENDICES

Appendix 1: Health and Wellbeing Board Work Programme

BACKGROUND PAPERS

Wirral Council Constitution Forward Plan The Council's transformation programme

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

HEALTH AND WELLBEING BOARD

AGENDA WORK PROGRAMME 2023-24

Next Meeting: 14 March 2023

Report Title	Report Author
Thematic report on the implementation of the Health and Wellbeing Strategy (including annual delivery plans from partners for work linked to Health and Wellbeing Strategy)	Dave Bradburn
WPBPB performance reporting on delivery of the Place Plan	Simon Banks
Place Based plans/ BCF Plan monitoring and dashboard	Graham Hodkinson
JSNA – updates including an annual report	Graham Hodkinson
Membership	Vicki Shaw
Work Programme	Mike Jones

OTHER MEETINGS

18 July 2024

FUTURE ITEMS

Standing items	Timescale	Lead officer
Thematic reports on the implementation of the Health and Wellbeing Strategy (inc annual delivery plans from partners for work linked to Health and Wellbeing Strategy)	Each meeting	Dave Bradburn
WPBPB performance reporting on delivery of the Place Plan		Simon Banks
Other items	Timescale	Lead Officer
All Together Fairer – update on actions (what worked and what didn't)		Ian Ashworth and Alan Higgins
Healthwatch	Annual or as and when	Kirsteen Sheppard
Wirral CVS		

Item	Format	Timescale	Lead Officer	Progress
Membership	Workshop	30 November 2023	Mike Jones	

Agenda Annex

Health and Wellbeing Board - Terms of Reference

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- (h) To establish a key forum for local democratic accountability relating to commissioning against agreed health outcomes
- (i) To develop and update the Pharmaceutical Needs Assessment (PNA)
- (j) To ensure the Better Care Fund plan is monitored regarding its progress and performance and ensure the health and social care partners effectively plan regarding the implications of this work.

