



Health and Wellbeing Board

Date: Wednesday, 15 June 2022

Time: 2.00 p.m.

Venue: Wallasey Town Hall

Contact Officer: Mike Jones
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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.

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AGENDA

1. 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.

2. APOLOGIES FOR ABSENCE

3. MINUTES (Pages 1 - 6)

To approve the accuracy of the minutes of the meeting held on 23 March 2022.

4. PUBLIC AND MEMBER QUESTIONS

Public Questions

Notice of question to be given in writing or by email by 12 noon, Friday 10 June to the Council's Monitoring Officer (committeeservices@wirral.gov.uk) 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: [Document Data Protection Protocol for Public Speakers at Committees | Wirral Council](#)

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

Statements and Petitions

Statements

Notice of representations to be given in writing or by email by 12 noon, Friday 10 June 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 Committee. The person presenting the petition will be allowed to address the meeting briefly (not exceeding one 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. 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.

- 5. ENVIRONMENT & CLIMATE EMERGENCY AND HEALTH (Pages 7 - 14)**
- 6. HEALTHWATCH WIRRAL UPDATE JUNE 2022 (Pages 15 - 24)**
- 7. TACKLING HEALTH INEQUALITIES THROUGH REGENERATION (Pages 25 - 32)**
- 8. SOCIAL VALUE (Pages 33 - 44)**

9. DEVELOPING A HEALTH AND WELLBEING STRATEGY (Pages 45 - 56)

Please note that Appendix 2 may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact Jennifer Smedley at jennifersmedley@wirral.gov.uk, if you would like this document in an accessible format.

10. COMMUNITY, VOLUNTARY AND FAITH SECTOR UPDATE (Pages 57 - 90)

11. WORK PROGRAMME (Pages 91 - 96)

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Agenda Item 3

HEALTH AND WELLBEING BOARD

Wednesday, 23 March 2022

Present:

Councillor Yvonne Nolan	Chair
Councillor Phil Gilchrist	Wirral Council
Graham Hodkinson	Director of Care and Health
Simone White	Director of Children, Families and Education
Julie Webster	Director of Public Health
Simon Banks	Chief Executive, NHS Wirral Clinical Commissioning Group
Mark Thomas	Merseyside Fire and Rescue Service
David Hammond (in place of Karen Howell)	Wirral Community Health and Care NHS Foundation Trust
Mike Gibbs (in place of Janelle Holmes)	Wirral University Teaching Hospital NHS Foundation Trust
Sue Higginson	Wirral Met College
Tony Bennett (in place of Michael Brown)	Wirral Community Health and Care NHS Foundation Trust
Anushta Sivananthan (in place of Tim Welch)	Cheshire and Wirral Partnership NHS Foundation Trust

65 WELCOME AND INTRODUCTION

The Chair welcomed members of the Board to the meeting.

66 DECLARATIONS OF INTERESTS

Members were asked to consider whether they had any disclosable pecuniary interests and/or any other relevant interest in connection with any item(s) on this agenda and, if so, to declare them and state what they were.

No declarations were made.

67 APOLOGIES FOR ABSENCE

Apologies for absence were received from Paul Satoor, Councillor Janette Williamson, Councillor Tom Anderson, Councillor Wendy Clements, Louise Healey, Janelle Holmes, Dr Paula Cowan, Sir David Henshaw, Liz Bishop, Mike Maier, Karen Howell, Karen Prior, Michael Brown, Tim Welch and Alan Evans.

68 MINUTES

Resolved – That the accuracy of the minutes of the meeting held on 9 February 2022 agreed.

69 **PUBLIC AND MEMBER QUESTIONS**

The Chair reported that no public questions, statements or petitions had been submitted.

70 **TOWNS FUND PROJECT DEVELOPMENT**

The Deputy Director of Strategy for Wirral Community Health and Care NHS Foundation Trust introduced a report which provided an update on the development of the Wellbeing and Opportunity Centre project and the Education Engagement Network project, both of which were part of the Towns Fund.

The Board received an update on the Wellbeing and Opportunity Centre project branded as 'Joy' and outlined the vision for a home for public and community organisations in a welcoming environment, located at the Treasury Annex site in Birkenhead. The engagement process was outlined to the Board, with residents and service users helping to shape what was needed, which would then be followed by a design phase before going back out for consultation to ensure the design met the expectations of residents before the submission of the full business case by June 2022.

The Principal of Wirral Met College provided a further update on the Education to Employment project, which followed a 'hub and spoke' model in conjunction with various partner organisations such as Birkenhead Library, the Probation Service, Forum Housing and the Care Leavers' Centre. The intention was that the model would assist in pathways to employment and create a space that allowed support to be designed to cater to an individual's needs based on their varying circumstances. It was intended that the hub would be located next to the wellbeing building.

The Board recognised the genuine co-production that had taken place as part of the projects and welcomed the collaborative working that had been undertaken to progress them to their current stage.

On a motion by Councillor Yvonne Nolan, seconded by Simon Banks, it was –

Resolved – That

- (1) **the development of the Wellbeing and Opportunity Centre project and the Education Engagement Network projects and their potential for positive impact on the health and wellbeing of Wirral residents and the quality of integrated service delivery be noted.**
- (2) **A further update on the projects be provided a meeting of the Health and Wellbeing Board in Autumn 2022.**

71 **ICS UPDATE**

The Assistant Director for Strategy and Partnerships introduced the report of the Director of Care and Health which provided an update on the development of the Integrated Care System and the consequential changes to NHS Wirral Clinical Commissioning Group (CCG), as well as detailing the terms of reference of the

recently established Wirral Place Based Partnership and the Joint Strategic Commissioning Board.

The Chief Officer for Wirral NHS Clinical Commissioning Group reported that he was due to take up the role of Place Director for Wirral following the formal establishment of the Integrated Care System on 1 July 2022 and reported to the Board the priorities for the Integrated Care Board including the transformation of the Wirral system following the pandemic and the development of partnerships and collaboration within the borough.

The Board acknowledged the role the Place Director could play in working alongside various areas of the borough including Children's Services and Educational Facilities to improve health outcomes.

Resolved – That

- (1) the establishment of the Wirral Place Based Partnership Board and the Joint Strategic Commissioning Board Sub-Committee be noted.**
- (2) the appointment of the Place Director for Wirral be noted.**

72 SECTION 75 POOLED FUND

The Chief Finance Officer, NHS Wirral Clinical Commissioning Group (CCG) introduced the report which detailed the funding arrangements within the Section 75 Pooled Budget and sought to assure members that design principles were intended to enable the delivery of improved health and care outcomes for the Wirral population.

It was reported that the Wirral Pooled Budget was the largest in Cheshire and Merseyside at £240m, made up of £163m of CCG funding and £77m Local Authority funding and of which £56m was committed to the Better Care Fund. Attention was brought to the fact that the budget had almost doubled from the previous year, reflecting the trust between the CCG and the Council and the ambition to deliver on integrated care.

Assurances were sought on whether the fund would transfer into the Integrated Care System, where it was outlined that the 2022-23 fund still had to go through the CCG's governance process for approval and would then be transferred to the Integrated Care Board on 1 July 2022.

Resolved – That the increase in the Pooled Fund from £127.2m in 2020/21 to £239.9m in 2021/22 be noted and endorsed.

73 WIRRAL PHARMACEUTICAL NEEDS ASSESSMENT (PNA) 2022 – 2025

The Director of Public Health introduced a report which provided the draft Pharmaceutical Needs Assessment (PNA) for 2022 – 2025 and sought approval for its mandatory public consultation between April and June 2022. The timeline for the PNA's publication was outlined with the final version to be submitted to the Board in September 2022 prior to its publication. It was reported that the previous PNA concluded that Wirral compared favourably against the national average and that

given the regeneration of the borough, there was a need to ensure there was sufficient pharmacy provision to support the new housing.

Resolved – That

- (1) **the draft Wirral Pharmaceutical Needs Assessment (2022 to 2025) be approved for its required mandatory public consultation between April and June 2022.**
- (2) **the Director of Public Health be requested to produce a final report for the board in September 2022 prior to the mandatory publication of the Pharmaceutical Needs Assessment on or before 30th September 2022.**

74 DEVELOPING HEALTH AND WELLBEING STRATEGY

The Director of Public Health introduced a report which provided the Board an update on the work to develop a Health and Wellbeing Strategy for Wirral and an update on the activity of the working group established to produce the local Health and Wellbeing Strategy.

It was reported that the Working Group had met on 7 March 2022 and considered the priorities and recommendations identified in the Public Health Annual Report 2021 and the interim Marmot Communities report, and then developed early recommendations which were detailed within the report. The Board was informed of the consultation and engagement that had taken place with the wider population and specific interest groups as part of the work which would be circulated to members following the meeting.

The Board welcomed the level of co-production in developing a Health and Wellbeing Strategy and the impact it was hoped it would have in breaking the cycle of inequality.

Resolved – That the continued development of Wirral’s Health and Wellbeing Strategy, based on the recommendations of the Public Health Annual Report 2021, be noted and supported.

75 WORK PROGRAMME

The Head of Legal Services introduced the report of the Director of Law and Governance which provided the Board with its current work programme and gave opportunity to propose additional items for consideration at future meetings.

It was proposed that items from Wirral Community Health and Care NHS Foundation Trust on Social Value and the Trust's 5 Year Strategy be added to the work programme, as well as an item from Cheshire and Wirral Partnership on the Community Health Transformation Service.

On a motion moved by Councillor Yvonne Nolan, seconded by Councillor Phil Gilchrist, it was –

Resolved – That the work programme be agreed, with the inclusion of additional items on Social Value, Wirral Community Health and Care NHS

**Foundation Trust 5 Year Strategy and Cheshire and Wirral Partnership
Community Health Transformation Service.**

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COMMITTEE: HEALTH & WELLBEING BOARD

Date: 15 June 2022

REPORT TITLE:	ENVIRONMENT & CLIMATE EMERGENCY AND HEALTH
REPORT OF:	DIRECTOR OF PUBLIC HEALTH DIRECTOR OF NEIGHBOURHOOD SERVICES

REPORT SUMMARY

Climate change is the single biggest health threat facing humanity and harms to health are already evident. To limit the impacts of climate change in Wirral, and to contribute to global efforts, the longstanding Climate Change Partnership for Wirral ‘Cool Wirral’ has set climate change target for Wirral to be ‘net carbon neutral’ by 2041, to be delivered through the Cool2 Climate Strategy for Wirral. As a key partner of Cool Wirral, Wirral Council has set its own ambitious climate target of being net carbon neutral by 2030. This is the Council’s locally determined contribution to Cool2 and Wirral’s net carbon neutral target of 2041.

In July 2019 the Council declared a declared an Environment and Climate Emergency and made the commitment to being net carbon neutral by 2030, by approving the Council’s Environment and Climate Emergency Policy in March 2021.

The impact of climate change on the health of the population is an important issue for the Board. This report outlines the work to date, and seeks support, to address climate change through the collective contribution of the organisations and sectors represented on the Health & Wellbeing Board.

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

RECOMMENDATIONS

The Health and Wellbeing Board is recommended to:

- Commit to taking action to address the causes of the environment and climate emergency.
- Request that representatives of the Health and Wellbeing Board support and participate in the delivery of the Cool2 Wirral Climate Strategy and develop appropriate joint working arrangements and action plans to address the environment and climate emergency.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 The consequences of climate change represent a significant threat to the health of the population. This paper provides a summary of Wirral's commitments on climate change and activities underway to achieve them.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No other options are presented.

3.0 BACKGROUND INFORMATION

- 3.1 The evidence base for climate change is substantial. The Intergovernmental Panel on Climate Change (IPCC) has concluded that to avert catastrophic health impacts and prevent millions of climate change-related deaths, the world must limit temperature rise to 1.5°C. Past emissions have already made a certain level of global temperature rise and other changes to the climate inevitable. Global heating of even 1.5°C is not considered safe, however; every additional tenth of a degree of warming will take a serious toll on people's lives and health. The IPCC modelling found that, with a rise of 1.5°C, there would be risks to health, livelihoods, food security, water supply, human security and economic growth. A rise to 2°C would be even more catastrophic.
- 3.2 As well as the threat to the planet climate change presents a major threat to health and is already leading to death and illness from increasingly frequent extreme weather events, such as heatwaves, storms and floods, the disruption of food systems, increases in zoonoses and food, water and vector borne diseases, and mental health issues. Furthermore, climate change is undermining many of the social determinants for good health, such as livelihoods, equality and access to health care and social support structures. These climate-sensitive health risks are disproportionately felt by the most vulnerable, disadvantaged and those with underlying health conditions.
- 3.3 The World Health Organisation suggests that in the short to medium term, the health impacts of climate change will be determined mainly by the vulnerability of populations, their resilience to the current rate of climate change and the extent and pace of adaptation. In the longer term, the effects will increasingly depend on the extent to which transformational action is taken now to reduce emissions and avoid the breaching of dangerous temperature thresholds and potential irreversible tipping points.

4.0 AN ENVIRONMENT & CLIMATE EMERGENCY

- 4.1 Wirral's first climate change strategy, *Cool 2014-19*, set out actions to achieve positive climate change outcomes. The strategy, led and co-ordinated through the Cool Wirral Partnership, laid the foundations to tackle the climate crisis in Wirral. Between 2005 and 2017 CO₂ emissions in Wirral have fallen by an average of 3.9% per year (Wirral Intelligence Service, 2020), however the ongoing threat is substantial. In recognition Wirral Council declared an Environment and Climate Emergency in July 2019 and the Cool Strategy was updated and relaunched as 'Cool2' in February 2020, setting the following ambitious goals for Wirral the place going forward:
- To stay within a local emissions' 'budget' of 7.7 million tonnes of CO₂ between 2020-2100 and to reach 'net zero' pollution as early as possible before 2041.
 - To ensure a climate resilient Wirral adapts to cope with existing change and further unavoidable disruption this century. (*Cool 2: A strategy for Wirral in the face of the global climate emergency*)
- 4.3 Wirral Council is now delivering a ten-year Climate Emergency Action Plan 2020-2030 to make the Council and its provision net carbon neutral by 2030. The Environment and Climate Emergency Policy and Action Plan will be used as tools to transform the way the Council operates, engages with residents, and works with partners. The Action Plan will therefore focus on the Council's functions, from service provision, decision making and procurement, to energy consumption, transport, and ways of working. The policy and action plan will contribute to the *Cool 2* strategy and targets for Wirral as a place, however, their focus will be on transforming the Council's operation to demonstrate commitment and leadership for the climate emergency response.
- 4.4 As well as the collective effort of Wirral Partners supporting the Cool2 Strategy, the NHS became the world's first health service to commit to reaching carbon net zero, in response to the profound and growing threat to health posed by climate change. With around 4% of the country's carbon emissions, and over 7% of the economy, the NHS has an essential role to play in meeting the net zero targets. The *Delivering a Net Zero Health Service* (2020) report sets out a clear ambition and two evidence based targets:
- The NHS Carbon Footprint: for the directly controlled emissions, net zero by 2040.
 - The NHS Carbon Footprint Plus: for emissions the NHS influences, net zero by 2045.

5.0 FINANCIAL IMPLICATIONS

- 5.1 There are no direct financial implications arising from this report. However, alleviating the impact of climate change on health organisations will need

investment in mitigation measures. Not taking or delaying action is not cost neutral as the costs of responding to adverse climate change impacts, such as extreme weather events, are significantly greater.

6.0 LEGAL IMPLICATIONS

- 6.1 There are no legal implications arising from this report.

7.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 7.1 Resources will be required by all partner organisations to adapt to, mitigate and tackle the climate emergency as well as the ensuing impacts of it such as increasing demands for health care, emergency planning and preparedness etc.

8.0 RELEVANT RISKS

- 8.1 The climate crisis presents considerable and varied risks to the place and residents. The work outlined within this report describes the efforts to mitigate these risks.

9.0 ENGAGEMENT/CONSULTATION

- 9.1 No public engagement or consultation has been undertaken in relation to this report. However, the schemes of work referenced within the report engage with all relevant stakeholders.

10.0 EQUALITY IMPLICATIONS

- 10.1 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.
- 10.2 The Equality Impact Review relevant to the work programmes referenced within this paper is attached via link below: [Equality Impact Assessments | www.wirral.gov.uk](http://www.wirral.gov.uk)

11.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 11.1 The content and recommendations contained within this report are expected to:

- Reduce emissions of CO2
- Reduce emissions of Greenhouse Gasses
- Demonstrate that Wirral Council plans to deliver on its commitments
- Contribute to the Climate Emergency Action Plan
- Contribute towards attainment of Wirral Cool2 Strategic Plans
- Ensure a more adaptive and resilient service that can respond to a changing climate

12.0 COMMUNITY WEALTH IMPLICATIONS

- 12.1** Addressing health inequalities is a key objective of the Health and Wellbeing Board and the impact of climate change is also affecting some communities more than others. The Wirral Plan intends to address these differences and community wealth building is part of efforts to do so. Opportunities to do this through the action outlined in this report are integral to the work programmes described.

REPORT AUTHOR: Name **Mike Cockburn**
Title Assistant Director – Parks & Environment (Int)
email: mikecockburn@wirral.gov.uk

APPENDICES - none

BACKGROUND PAPERS

Intergovernmental Panel on Climate Change 2018: Summary for Policymakers.
[Summary for Policymakers of IPCC Special Report on Global Warming of 1.5°C approved by governments — IPCC](#)

World Health Organisation (2022) [Fast Facts on Climate Change and Health \(who.int\)](#)

Cool Wirral Partnership (2013) Cool: Wirral Climate Change Strategy 2014 - 2019
[Wirral Climate Change Strategy 2014-2019.pdf](#)

Wirral Intelligence Service (2020) Climate Change. [Climate Change \(wirralintelligenceservice.org\)](#)

Cool Wirral Partnership (2019) Cool 2: A strategy for Wirral in the face of the global climate emergency [Cool 2 climate change strategy for Wirral | www.wirral.gov.uk](#)

NHS England (2020) Delivering a Net Zero National Health Service [delivering-a-net-zero-national-health-service.pdf \(england.nhs.uk\)](#)

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Full Council Environment and Climate Emergency Declaration	July 2019
Cabinet Launch of Wirral's Tree, Woodland, and Hedgerow Strategy	June 2020
Environment, Climate Emergency, and Transport Committee Environment & Climate Emergency Policy	March 2021

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COMMITTEE: HEALTH & WELLBEING BOARD

Date: 15 June 2022

REPORT TITLE:	HEALTHWATCH WIRRAL UPDATE JUNE 2022
REPORT OF:	CHIEF EXECUTIVE OFFICER, HEALTHWATCH

REPORT SUMMARY

The purpose of the report is to share with the Health and Wellbeing Board the emerging trends and themes gathered from public views and personal experiences relating to health and care. The information collected, to form this update, is sourced from the people who have contacted Healthwatch via email, phone or by using the Feedback Centre, or during community engagement work.

RECOMMENDATION

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 The quarterly report submitted to Health and Wellbeing Board is compiled from the users and front line deliverers of service. It is imperative that we learn from them and take them on the journey as change evolves.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 Other options included reporting into the Health and Wellbeing Board on less regular basis, however it is felt that quarterly reports provide contemporary information for the Board.

3.0 BACKGROUND INFORMATION

- 3.1 Healthwatch Wirral exist to ensure the views of local people on health and social care services are heard. Every voice counts and we reach deep into our communities through our outreach work. We have good knowledge of our Borough and strong relationships with all partners including LA, NHS and 3 rd sector and have the flexibility within our remit to be unbiased, open and honest.

- 3.2 The report provides a summary of the feedback provided to Healthwatch Wirral on local health and care services. The report was requested on a quarterly basis as part of the work programming for the Health and Wellbeing Board.

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 Health and Wellbeing Board is charged to work with HealthWatch in Wirral to ensure appropriate engagement and involvement within existing patient and service user involvement groups takes place.

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 Health and Wellbeing Board is keen to work with its partners to improve health outcomes for local people. The feedback provided within the report provides an insight into how people feel about local health and care services

and failure to consider the feedback would increase the risks of not being able to improve health outcomes.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 A key source of the feedback used to collate the information within the report was from Healthwatch's Community Engagement work.

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 purposes only and the content will be supplied by a partner agency. The Health and Wellbeing Board is committed to ensure that the work it does has equality at its heart and does not discriminate against anyone. Any associated actions may need an Equality Impact Assessment.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 There are no direct environment or climate implications as result of this report. However, Wirral Council and its Committees will consider the Climate Emergency Declaration within all the work it does and will continue to incorporate this into their work programme and hold all partnerships to account.

REPORT AUTHOR: Name: Jenny Baines and Mike Shakeshaft on behalf of Karen Prior, for Healthwatch Wirral.

Title Karen Prior, CEO Healthwatch Wirral
email: karen.prior@healthwatchwirral.co.uk

APPENDICES

BACKGROUND PAPERS

SUBJECT HISTORY (last 3 years)

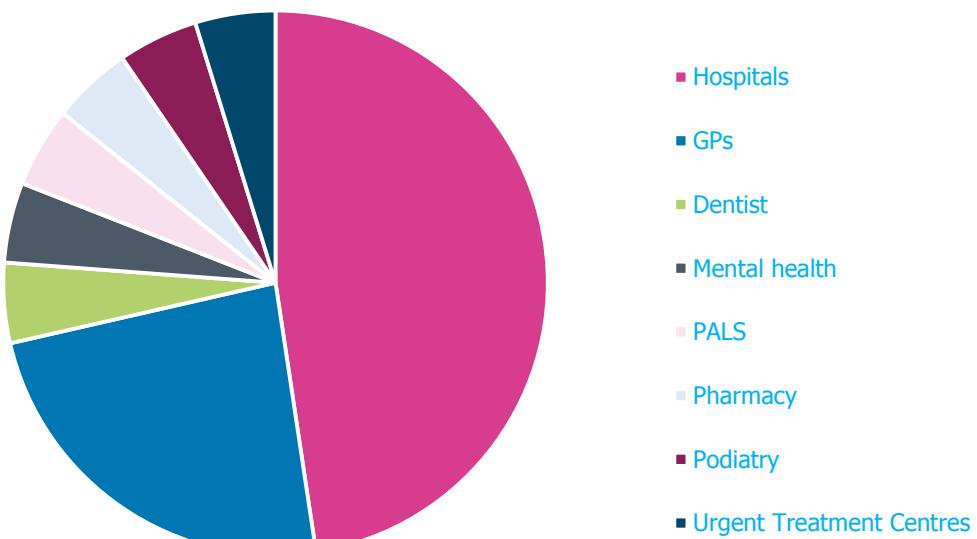
Council Meeting	Date

Feedback Centre - June 2022 Quarterly Report data (exported 24th May)

This report covers feedback received during the period Mar-May 2022.

The information below may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact karen.prior@healthwatchwirral.co.uk if you would like this document in an accessible format.

Services reviewed through the Feedback Centre



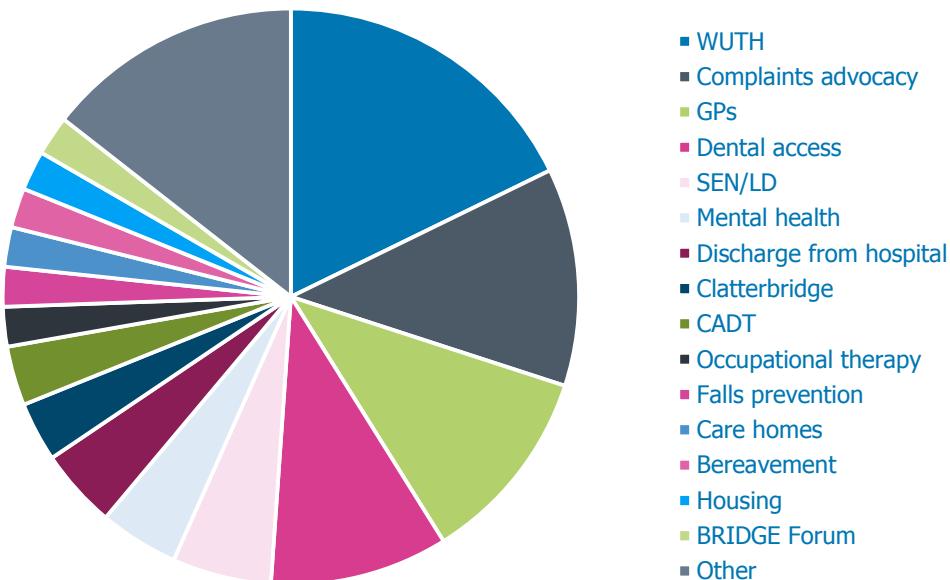
- 48% of all online feedback relates to **hospitals** (up from 9% in Feb) - the majority relates to **WUTH**, but feedback was also received about **Clatterbridge** and **Wirral Women's and Children's Hospital**
- 24% of all online feedback was about **GPs** (down from 43% in Feb) - this is the first quarter where GPs have **not** been the most common topic
- We received limited online feedback on other services including **dentists**, **mental health**, **PALS**, **pharmacies**, **podiatry** and **Urgent Treatment**

Single point of contact

The single point of contact encompasses issues that are relayed to Healthwatch Wirral via phone or email that have not gone directly to the Healthwatch Wirral Feedback Centre. Some calls cover more than one theme (e.g. WUTH and discharge.)



Themes from the single point of contact



During this quarter, **WUTH** is the most common reason for contacting Healthwatch Wirral (18% of calls, up from 8% in Feb), followed by:

- **complaints advocacy** (12% of calls, consistent with 11% in Feb)
- **GPs** (11%, up from 5% in Feb)
- **dental access** (10%, up from 6% in Feb)

We have received calls on a wider variety of topics than last quarter, including **CADT, Occupational Therapy, Falls prevention, Care homes and Bereavement support**. We have also received multiple calls about concerns people have that are not covered directly under Healthwatch Wirral's remit but are connected to health and social care, such as **housing, benefits and the energy crisis**.

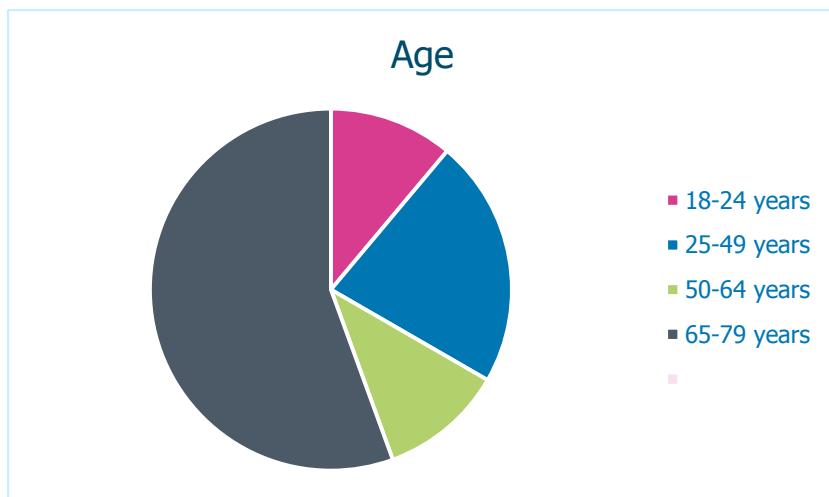
The 'other' category covers issues raised by a single contact, which include:

- Prescriptions
- COVID-19 tests
- COVID-19 vaccination
- Continuing Health Care
- Benefits
- Patient transport
- Energy crisis
- Carers and carer support

Demographics

- 43% of all respondents answered one or more monitoring questions - this is down from 71% in Feb but consistent with 40% in Oct

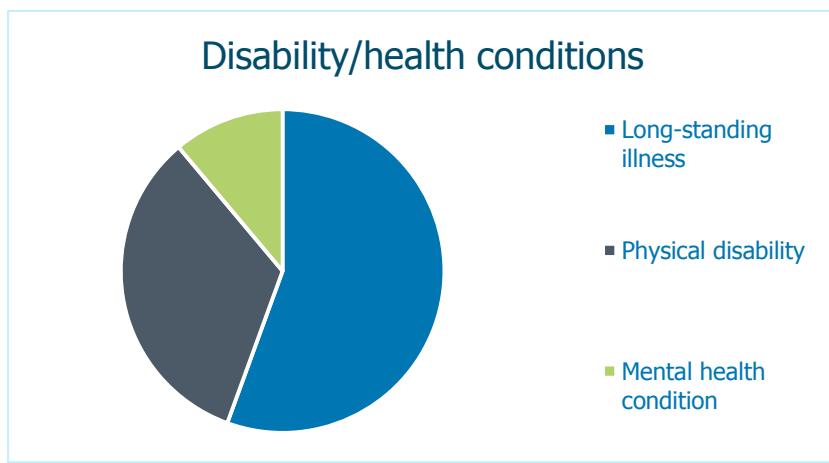
- Of those who answered the monitoring questions:
 - 78% female, 11% male, 11% prefer not to say
 - All from a White British background aside from 2 prefer not to say
 - 63% heterosexual, 37% prefer not to say
 - 57% Christian, 14% Jewish, 29% prefer not to say



questions was under 18 or over 80.

- 44% identified themselves as carers (up from 30% in Feb)

The majority of online feedback came from (or related to the experiences of) people aged **65-79 years old** (56%) followed by **25-49 years old** (22%). During this time period nobody who answered the monitoring



29% of all respondents identified themselves as having a disability or long-term health condition. People can choose multiple responses to this question: the most common answer was a combination of long-standing illness and physical disability.

Overall themes

Overall themes remain largely consistent with our last quarterly report.

- **Access to appointments** remains a topic of concern for many people who contact Healthwatch Wirral, especially for GPs and dental care.
 - We continue to receive multiple calls from those who cannot access a dentist, including difficulties accessing emergency dentistry.
 - The main theme around GP access this quarter continues to be long waiting times on the phone or being unable to contact a GP at all

- **Communication** is another consistent theme of feedback, raised primarily in relation to **GPs and hospitals**. Communication issues include:
 - Lack of follow-up after being told someone will call back
 - Lack of communication within the service or across services, including referrals
 - Patients not being told about a diagnosis, or receiving a serious diagnosis (heart attack) without any support
- **Praise for staff** when people do access care - we have received some negative feedback around experiences with staff this quarter, but **all positive feedback** has focused on **good experiences with staff**

Wirral University Teaching Hospital

WUTH was the service that received the most online reviews this quarter.

Positive themes:

- Very positive experience at Children's A&E - doctor was reassuring for parent and child

Negative themes:

- Long waiting times, including in AMU
- Poor response to misdiagnosis/diagnosis not communicated to patient
- Lack of follow-up care
- No seating at A&E
- Poor communication between services
- Inpatient with cancer left without access to pain medication (NB: caller was referred to PE team at WUTH)

Clatterbridge Hospital

Healthwatch Wirral recently visited a number of sites at Clatterbridge, including Outpatients and Discharge to Assess wards, in response to public feedback.

Positive themes:

- Quick, professional and friendly staff at diagnostics

Negative themes:

- Poor staff response to an access request

Wirral Women's and Children's Hospital

Positive themes:

- Caring and professional staff during inpatient gynae treatment

GPs

We have received fewer reviews of GPs this quarter; difficulty contacting GPs and lack of access to appointments remain the main themes around GP access.

Positive themes:

- Positive experience with phlebotomist

Negative themes:

- Long waiting times on phone or unable to get through at all
- Difficulties getting an appointment
- Rude staff, including reception staff
- Problems accessing routine care including cervical smear test and blood pressure monitoring

Dentists

We have heard from very few people regarding their actual experience with a dentist; the overwhelming theme has been lack of access to an NHS dentist, including difficulties accessing emergency dental treatment.

Positive themes:

- Unpleasant experience made bearable by good dentist

Negative themes:

- Received a fine after not being charged for dental work

Mental health

Negative themes:

- Bad experience with CWP crisis line, found call handler unsympathetic

Pharmacy

Positive themes:

- Proactive staff, helped when GP couldn't

GP PALS

Negative themes:

- Didn't receive any help, would not recommend

Podiatry

Negative themes:

- Very painful experience

Urgent Treatment Centre

Positive themes:

- Very glad to be seen despite wait - would have taken much longer to get a GP appointment

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COMMITTEE: HEALTH & WELLBEING BOARD

Date: June 2022

REPORT TITLE:	TACKLING HEALTH INEQUALITIES THROUGH REGENERATION
REPORT OF:	DIRECTOR OF PLACE & REGENERATION

REPORT SUMMARY

The Covid-19 pandemic has shown us that people's health and the economy can not be viewed independently. Both are a necessary foundation of a resilient, thriving and prosperous society. Wirral is at a major turning point in its economic history with a unique and unprecedented opportunity for change. Over the last two years the Council has continued to work with partners to develop a transformational regeneration programme on the Left Bank of the River Mersey that is of national significance. Our strategic vision represents the most transformational proposals for Wirral since the 1947 Town Plan and presents a significant opportunity to change the lives of our most vulnerable communities by working together to address health, economic and social inequality.

Wirral's programme of economic development and regeneration is therefore a critical part of our collective effort to improve outcomes for local people and to tackle health, economic and social inequalities. This is reflected in both the Wirral Plan 2021 - 2026 and the Public Health Annual Report 2021. Given the significant contribution this work makes to improving the health of the population and the opportunities that currently exist this paper provides the Board with an overview of this work highlighting specific cross cutting activities.

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

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to:

- Note the programme of work and its contribution to improving health in Wirral.
- Consider aligning the following elements of the Economic Strategy for Wirral with the emerging Health and Wellbeing Board Strategy: the role of anchor institutions, health related worklessness programmes, safe and active travel, health impact assessment and healthy housing.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 There is a well-established and symbiotic relationship between the economy and health therefore the economic strategy and regeneration programme have a major impact on the work of the Health and Wellbeing Board.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No other options are presented.

3.0 BACKGROUND INFORMATION

- 3.1 The health of the population is shaped by the social, economic, commercial and environmental conditions in which people live. Economic development and regeneration are therefore a key part of improving health and reducing inequalities. This is especially pertinent given the current economic challenges facing businesses and families.
- 3.2 The Wirral Plan 2021 - 2026 sets out the ambition to have a prosperous, inclusive economy, helping businesses to thrive and creating jobs and opportunities for all. This objective is delivered through the Economic Strategy for Wirral which sets out the economic vision for the borough, as well as several significant regeneration projects, which will help us to achieve our economic goals.

4.0 TACKLING HEALTH INEQUALITIES

- 4.1 Health inequalities are growing in the UK and since 2010, life expectancy improvements have slowed, and people can expect to spend more of their lives in poor health. This is reflected in data for Wirral. People born in certain parts of Wirral can unfortunately expect to live shorter lives than those born in other areas. Rather than any biological difference, this is due to preventable and avoidable factors based on the wide range of issues that impact on health over a lifetime.
- 4.2 Health inequalities are not however inevitable, and the gaps in good health are therefore not fixed. Creating fair and quality employment and opportunities for all, putting health equity and wellbeing at the heart of local economic planning and strategy, and developing healthy and sustainable places and communities are some of the best interventions to minimise the gap in health between people.

5.0 ECONOMIC DEVELOPMENT & REGENERATION

- 5.1 Wirral is at an important point in its economic history. Places throughout the UK are being challenged to come forward with ambitious plans for economic renewal as part of the government's Levelling Up agenda.

- 5.2 The Council and its partners have embarked on a transformational regeneration programme along the ‘Left Bank’ of the River Mersey stretching from New Brighton to Bromborough, with a particular focus on the creation of a sustainable, waterfront urban garden community in Birkenhead, underpinned by the Birkenhead 2040 Framework and Local Plan.
- 5.3 This presents a unique opportunity to use our significant regeneration programme and emerging government backed initiatives to build on our growing sector strengths, support accessible opportunities for our residents, and lever new investment to the area.
- 5.4 The Economic Strategy for Wirral 2021 - 2026 provides the opportunity to make sure Wirral is fully aligned with this new policy backdrop and to provide a fresh articulation of Wirral’s economic and social objectives. This strategy is intended to provide a high-level framework for Wirral over a five-year period. It will guide our local decisions on projects and programmes and inform our detailed yearly action plans, all underpinned by regular performance review and evaluation of progress.
- 5.5 Redressing the economic differences within the borough is a key principle of the Strategy as set out in the vision to create “*vibrant places, where communities and businesses thrive and people choose to live, work and visit. A rebalanced borough that stands out for its achievements on fairness, reducing inequalities and building local wealth. A borough that is celebrated for delivering new and big ideas, working jointly with others and for prioritising environmental sustainability*”’. This ambition to ‘narrow the gap’ between our communities economically complements efforts to reduce health inequalities and to achieve sustainable health improvement in our communities tackling the root causes of poor health.

6.0 Creating fair and quality employment and opportunities for all

- 6.1 Being in good employment protects health, while unemployment, particularly long- term unemployment, contributes significantly to poor health. Good employment opportunities are therefore fundamental to improving health outcomes. As well as being vital to individual health, an economically active population enables sustainable economically prosperous communities.
- 6.2 Unemployment and health related worklessness have presented longstanding challenges within the borough. The pandemic has amplified these challenges resulting in a fall in employment and increased health related inactivity. The Public Health Annual Report 2020/2021 recognises these challenges and recommends that “*Employment support services and skills development programmes are available, accessible and sustainable to ensure income maximisation and support those most susceptible to job loss and job insecurity*”.

6.3 Local employment services, including Community Connectors and Reach Out delivered by Involve North West, continue to respond to supporting local people and their families. The experiences and outcomes of people using these services was presented to the Health and Wellbeing Board in November 2021. In an increasingly challenging economic environment and following the immediate impacts of the pandemic these services, alongside social protection measures, will provide critical support to local people and ultimately contribute to improving immediate and longer-term health outcomes focusing on communities with high levels of poor health and unemployment.

7.0 Putting health equity and wellbeing at the heart of local economic planning

- 7.1 The levels of inequality across Wirral are unacceptable and too many people are experiencing multiple deprivation. Many residents, particularly in the east of the borough, experience a range of physical and mental health issues, and are often detached from the labour market or employed in fragile jobs that offer them too little security and little prospect for progression. Creating an inclusive economy is a key principle of the Economic Strategy for Wirral and part of how the economic, and health, gap will be narrowed within Wirral.
- 7.2 The Health and Wellbeing Board, and the partner organisations that constitute it, can play a key role in delivering these ambitions. All our anchor institutions – in both the public and private sectors – can better orientate their purchasing to ensure that residents and businesses benefit to a greater extent and that providers are delivering genuine local social value through contract delivery.
- 7.3 Stimulating the local labour market, offering good quality employment and creating opportunities for entry, skills and career development are also ways in which our anchor institutions can contribute to improving outcomes for local people and reducing economic and health inequalities.

8.0 Developing healthy and sustainable places and communities

- 8.1 It is estimated 75% of people's health depends on the space and the environment in which they live. The place where we spend most of our time therefore has a huge influence on how healthy we are and the homes and communities in which we live can either improve health or worsen it.
- 8.2 Planning and infrastructure always has an impact on health. A new Local Plan is being prepared to shape the future of the Borough between 2021 and 2037. The Local Plan Submission Draft sets out a vision for how Wirral will change as a place over the next 15 years. At the heart of the Local Plan is the regeneration of the 'Left Bank' of the River Mersey and Birkenhead in particular. The proposals set out in the Submission Draft will transform Birkenhead over the next 10 to 15 years addressing several decades of decline and the existing social and economic deprivation. The comprehensive regeneration programme presents opportunities to improve health and

wellbeing through the design of places and new homes and access to services through co-location.

- 8.3 Wirral is one of few Councils that have used Health Impact Assessment as part of its Local Plan development to understand health impacts to maximise positive effects and implement measures to mitigate negative ones. We are using this approach to build Health Impact Assessment into our regeneration programme building in health as well as high quality urban design and sustainability. Furthermore, within the new Local Plan, Health Impact Assessment will be required for development of 10 or more houses, and development likely to have significant impact on health and wellbeing. To consider how we will assess and respond to Health Impact Assessment we have recently partnered with URBACT Health Cities programme to support us to do this. Anchor partners can also utilise this methodology to ensure infrastructure develops in a way that benefits health.
- 8.4 A warm and safe home is essential for good health. Poor housing conditions, overcrowding, temporary accommodation, fuel poverty, homelessness and insecurity are a risk to health. Affordable, quality housing is not only, therefore, a basic need but a major contributor to an individual's wellbeing. Some of the most vulnerable groups in our community are however among those most likely to live in poor housing. Housing, and its impact on health, is a broad and complex area covering a wide range of issues.
- 8.5 As well as the Local Plan and Left Bank regeneration programme, which intends to deliver a significant uplift in housing and rebalance the borough's housing stock, there are several initiatives that the Council, with its Partners, is using to improve existing housing in Wirral specifically targeted at improving health, reducing the gap in inequalities, and providing improved outcomes for wellbeing along with inclusive economy. These include selective licensing, healthy homes, landlord accreditation, empty properties, adaptations within the home, targeted retrofit programmes and home energy conservation. Improvements to existing stock alongside wider regeneration activity for new supply is crucial. This is recognised along with the inclusive economy agenda not just being about creating jobs it is about bridging the gap on inequalities and ensuring that everyone is able to reach their potential in life. Having a home that is affordable and of a good quality is fundamental to achieve in life chances, without this there are so many barriers which widen the inequality health gap.
- 8.6 Being able to travel for work, amenities and social connectivity promotes good health and a prosperous economy. In recognition the Economic Strategy for Wirral highlights a safe and effective sustainable transport network as crucial, to improve quality of place, to contribute towards zero carbon, and to remove barriers to residents and businesses accessing work and training. Furthermore, the easiest way to increase physical activity is to build cycling and walking into our daily routines. There is a large disparity in car ownership within Wirral, with 2011 census data showing that in the most deprived ward

55% of households do not have access to a car compared to just 10% in the least deprived ward. Research shows that in households without access to a car, 50% of all trips are taken through walking, compared to 23% of trips for those in households with access to a car. These disparities result in the residents of deprived communities feeling the impacts of others' travel more despite travelling less, as drivers from surrounding areas travel through their areas and neighbourhoods. This is evidenced through Wirral's road collision statistics which show that the majority of road traffic collisions are occurring in areas with the lowest levels of car ownership. Health and Wellbeing Board Partners can support this by looking at opportunities to enable active travel and to make services accessible in local communities.

9.0 FINANCIAL IMPLICATIONS

- 9.1 There are no direct financial implications arising from this report.

10.0 LEGAL IMPLICATIONS

- 10.1 There are no legal implications arising from this report.

11.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 11.1 This report and work referenced within it has been developed by Place and Regeneration and Public Health teams working collaboratively.

12.0 RELEVANT RISKS

- 12.1 The challenging economic climate presents some short- and long-term risk to delivering outcome improvement and has the potential to increase economic and health inequalities in the short and long term. Flexible approaches and focusing on long term strategy goals will help to mitigate some of the associated risks.
- 12.2 Some of the services described within this report are currently commissioned for a specified period using grants and or other short-term funding. They are not therefore secured for the longer term, which places a great risk on services for unemployed residents in the borough.

13.0 ENGAGEMENT/CONSULTATION

- 10.1 No public engagement or consultation has been undertaken in relation to this report. However, the schemes of work referenced within the report engage with all relevant stakeholders.

14.0 EQUALITY IMPLICATIONS

- 14.1 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.
- 14.1 The Equality Impact Review relevant to the work programmes referenced within this paper is attached via link below: [Equality Impact Assessments | www.wirral.gov.uk](#)

15.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 15.1 The implications of the content and recommendations contained within this report have been considered within the programmes included with this report.

16.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 This report describes the reciprocal relationship between the economy and health. The Economic Strategy for Wirral Community makes a key contribution to reducing disparities in health.

REPORT AUTHOR: **Rachael Musgrave**

Assistant Director: Consultant in Public Health
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APPENDICES

BACKGROUND PAPERS

Wirral Plan 2021 – 2026 <https://www.wirralintelligenceservice.org/media/3552/wirral-plan-2026.pdf>

Economic Strategy for Wirral 2021 - 2026
<https://www.wirralintelligenceservice.org/strategies-and-plans/wirral-economic-strategy/>

Annual Report of the Director of Public Health for Wirral 2020 - 2021
<https://www.wirralintelligenceservice.org/local-inequalities/2021-public-health-annual-report/>

Institute of Health Equity (2010) Fair Society, Healthy Lives' (The Marmot Review)
<https://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

The Health Foundation (2022) Addressing the leading risk factors for ill health
<https://www.health.org.uk/publications/reports/addressing-the-leading-risk-factors-for-ill-health>

Wirral Intelligence Service (2021) Wirral JSNA. Economy, Business and Skills
<https://www.wirralintelligenceservice.org/this-is-wirral/economy-business-and-skills/>

HM Government (2021) Build Back Better: our plan for growth
<https://www.gov.uk/government/publications/build-back-better-our-plan-for-growth>

Health Equity Institute (2020) Health Equity in England: The Marmot Review 10 Years On <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on>

HM Government (2019) Public Health England. Health Matters: Health and Work.
<https://www.gov.uk/government/publications/health-matters-health-and-work/health-matters-health-and-work#how-phe-can-support-you>

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Economy, Regeneration & Development Committee Economic Strategy for Wirral 2021 – 2026	November 2021
Health & Wellbeing Board Annual Report of the Director of Public Health 2020	September 2021
Policy & Resources Committee Wirral Local Plan 2021 – 2037 Submission Draft	March 2022
Health & Wellbeing Board Health & Employment	November 2021
Adult Care and Health Overview & Scrutiny Committee Public Health & Housing	February 2020



**Social Value
Health and Wellbeing Board
WEDNESDAY 15 JUNE 2022**

REPORT TITLE:	SOCIAL VALUE
REPORT OF:	DAVID HAMMOND, DEPUTY DIRECTOR OF STRATEGY WIRRAL COMMUNITY HEALTH & CARE NHS FOUNDATION TRUST

REPORT SUMMARY

This report provides members of the Health & Wellbeing Board with an overview of Wirral Community Health & Care NHS Foundation Trust's developing approach to increasing the social value it delivers, alongside providing its core services.

The Wirral Plan 2021 - 2026 covers the following five themes:

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

Increasing social value will have a beneficial effect across all of these themes and is consistent with the themes of Wirral's Community Wealth Building strategy (2020-2025), particularly the pillars of workforce and procurement.

The effects of this approach will be Wirral-wide and affect all wards.

It is not a key decision.

RECOMMENDATION/S

That the Health & Wellbeing Board note the development of the approach to social value being developed by WCHC and its connections to other local and national approaches.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 Greater focus on social value, alongside core service delivery, will help create the environment in which people can live healthier lives. T

2.0 OTHER OPTIONS CONSIDERED

- 2.1 WCHC's approach to social value will continue to evolve as it matures.

3.0 BACKGROUND INFORMATION

- 3.1 The Cheshire & Merseyside Integrated Care System set an expectation in 2021 that all NHS organisations within the ICS footprint set out their approach to increasing social value by applying for the ICS-specific Social Value Business Charter Mark.
- 3.2 WCHC has gone further by becoming the first NHS organisation to obtain the Level 1 Quality Mark for Social Value.
- 3.3 Social value measures have been applied in local authority contracts for many years and are reflected in a number of WCHC's contracts.
- 3.4 There is a clear expectation that social value is now also reflected in contracts let by NHS organisations.
- 3.5 The NHS' Net Zero commitments are consistent with the Cool 2 climate change strategy for Wirral and WCHC has published a Green Plan, along with other NHS organisations across Cheshire & Merseyside.
- 3.6 There is significant opportunity to ensure alignment of social value approaches across partners, including local authorities, in which social value is already an area of focus, e.g. Wirral's Community Wealth Building Strategy (2020-25).
- 3.7 WCHC's steps in developing an approach to increasing social value, including working with partner organisations, are outlined in the accompanying presentation.

4.0 FINANCIAL IMPLICATIONS

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

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 No significant immediate resource implications, though see paragraph 10.1 with regard to changes made and planned to WCHC estate with regard to energy efficiency.

7.0 RELEVANT RISKS

- 7.1 No significant relevant risks.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 WCHC undertook internal engagement with its workforce in the process of setting its social value pledges and key value indicators.

9.0 EQUALITY IMPLICATIONS

- 9.1 The process of focusing on increasing social value has the potential to improve inequalities (both for people with protected characteristics and health inequalities more broadly).

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 As part of its social value programme, WCHC's Green Plan supports the wider NHS commitment to a net zero greenhouse gas target by 2040. WCHC has committed to a year on year reduction of energy use in its estates by 2.5%. It has installed solar PV at two of its sites, including a 100KWh array at St Catherine's Health Centre. This, with LED lighting and other energy saving measures, means SCHC has the potential to generate up to 40% of the electricity used on site.

11.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 WCHC's social value approach is aligned to the Community Wealth Building themes of Workforce and Procurement.

Workforce: Residents of Wirral are employed in secure, well paid jobs with progression opportunities and good terms and conditions

Procurement: Procurement practices of Wirral anchor institutions are used to build the wealth of local communities

REPORT AUTHOR: David Hammond, Deputy Director of Strategy
Wirral Community Health & Care NHS Foundation Trust
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APPENDICES

Appendix 1 – Presentation

BACKGROUND PAPERS

Applying net zero and social value in the procurement of NHS goods and services –
March 22

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

Our Social Value journey

Page 37

Health & Wellbeing Board

15 June 2022

Social value

- WCHC's social value journey so far
 - Chartermark
 - Quality Mark Level 1
- Contractual social value metrics for some services
- Green Plan
- Social value <-> Community Wealth Building



Social Value and Anchor Institutions

Anchor Institutions are organisations rooted in their local communities.

Usually the largest local employers, purchasers and providers of services; ‘place-based’ entities that control large amounts of local resources.

How they work, above and beyond the services they provide, can bring greater ‘**social value**’ in supporting communities, economically, socially and environmentally.

What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:



Purchasing more locally and for social benefit
In England alone, the NHS spends £27bn every year on goods and services.



Using buildings and spaces to support communities
The NHS occupies 8,253 sites across England on 6,500 hectares of land.



Working more closely with local partners
The NHS can learn from others, spread good ideas and model civic responsibility.



Reducing its environmental impact
The NHS is responsible for 40% of the public sector's carbon footprint.



Widening access to quality work
The NHS is the UK's biggest employer, with 1.6 million staff.

As an anchor institution, the NHS influences the health and wellbeing of communities simply by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider factors that make us healthy.

The Health Foundation

References available at www.health.org.uk/anchor-institutions
© 2019 The Health Foundation.

Social Value approach in action

Page 40



Social Value developments

- Cheshire & Merseyside Chartermark for Social Value – all NHS organisations in Cheshire & Merseyside Integrated Care System are encouraged to achieve this
- First NHS trust to gain Social Value Business Quality Mark, Level 1
- Focus at Level 1 is on identifying, tracking and reporting on Key Value Indicators, linked to pledges
- Social Value Group established, aim to link with partner organisations to ensure alignment and sharing



Social Value Quality Mark Level 1 – first four development areas

Page 42

Economic

We will maximise local investment, recognising the social, economic and environmental benefits of buying locally when procuring goods and services

Health and Wellbeing

We will support and empower individuals to improve their own wellbeing and maintain independence and quality of life

Economic**Employment & Volunteering**

We will increase employment and training opportunities for local people, especially from disadvantaged groups

Education & Skills

We will provide outstanding careers, including ensuring that our employees have access to training and development to develop and share skills

Employment & Volunteering**Social & community****Health & Wellbeing****Education & Skills****Crime & justice****Housing****Environmental**

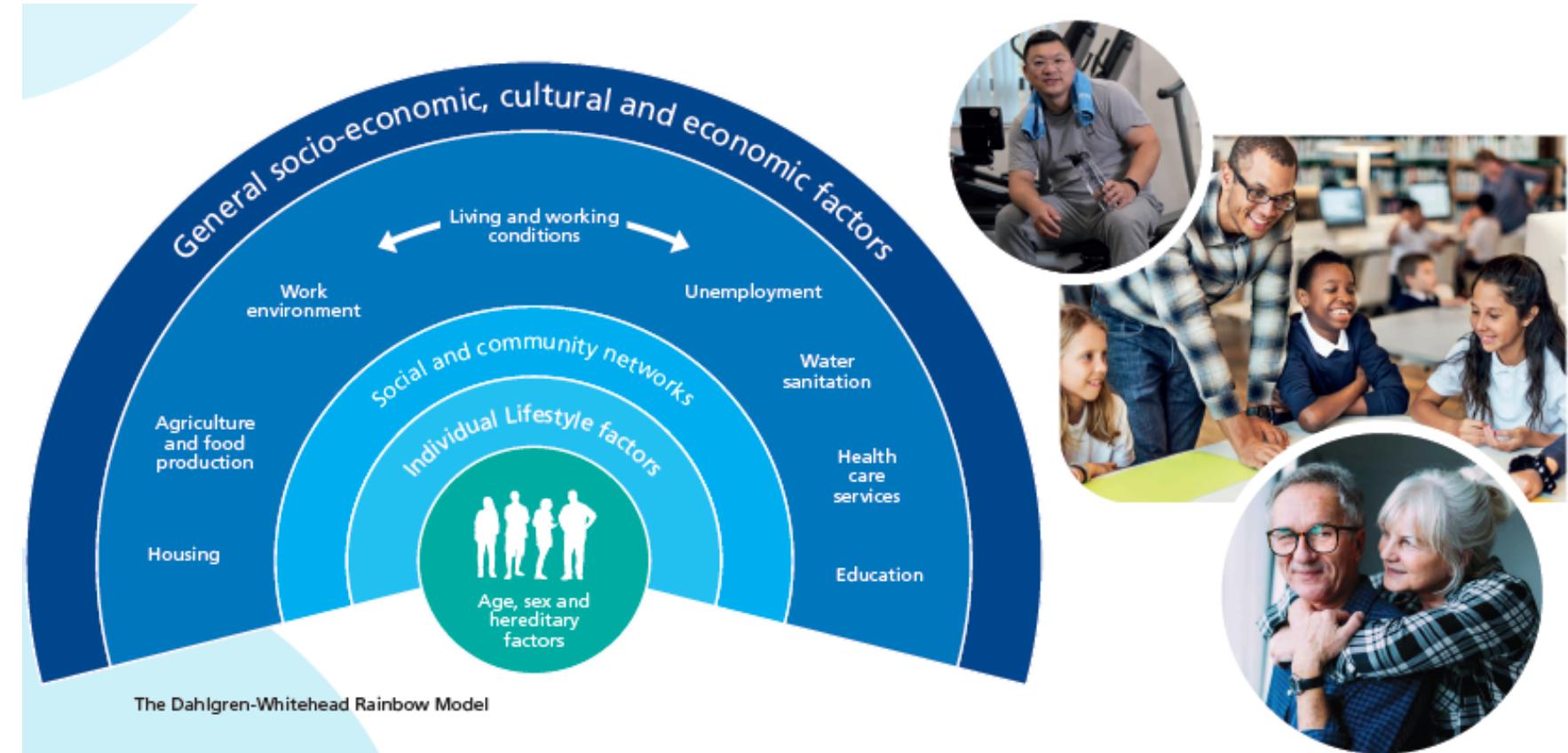
Social Value - alignment and framework

- Cheshire & Merseyside ICS - Social Value Business, **Quality Mark** levels
- Contractual **Social Value TOMs** (Themes, Outcomes and Measures) and local equivalents
- ~~Green Plan~~ – Delivering a ‘Net Zero’ NHS
- **Procurement** (10% min weighting)
- **Community Wealth Building** (Wirral Plan): particular focus on employment and procurement



Final points

- The start of a journey!
- Social value framework and dashboard in development
- Collaboration critical, with both local partners and across the wider NHS





WIRRAL HEALTH AND WELLBEING BOARD

15th June 2022

REPORT TITLE:	DEVELOPING A HEALTH AND WELLBEING STRATEGY
REPORT OF:	DIRECTOR OF PUBLIC HEALTH

REPORT SUMMARY

This report provides the Board with an update on work to develop a Health and Wellbeing Strategy for Wirral and follows on from the Board's decision, at the meeting of 3rd November 2021, to establish a working group to produce a local Health and Wellbeing Strategy.

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

RECOMMENDATION/S

The Health and Wellbeing Board is recommended to note and support the continued development of Wirral's Health and Wellbeing Strategy.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 This report gives an update on the progress of the work taking place to develop the Wirral Health and Wellbeing Strategy. The Strategy will support the Health and Wellbeing Board to fulfil its statutory duties and enable it to hold the wider system to account in order to maximise health outcomes for local people.

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.

3.0 BACKGROUND INFORMATION

- 3.1 The Health and Social Care Act 2012 established Health and Wellbeing Boards and set out their statutory duties. This included the requirement to produce a joint Health and Wellbeing Strategy which describes how the Board, working together with partners, will improve health and wellbeing.
- 3.2 National guidance states that a Health and Wellbeing Strategy should provide a framework for improving health and wellbeing in the area. The Health and Wellbeing Strategy should influence policy, commissioning and services beyond the health and care sector, in order to make a real impact upon the wider determinants of health. The Strategy should enable the Board to address shared local issues collectively, in addition to the work as individual organisations.
- 3.3 Developing a local Health and Wellbeing Strategy will help to set local priorities for joint action, following the identification and assessment of the needs and priorities of the local population, adopting an outcomes-based approach, and considering those issues which matter the most to local people.
- 3.4 A key priority for the Health and Wellbeing Strategy is to enable the Board to hold the system to account on the identified priorities and areas for action, ensuring that plans are delivered, meet local resident needs, and are aligned to a strategic outcomes framework.

4.0 WIRRAL'S HEALTH AND WELLBEING STRATEGY

- 4.1 Wirral's Health and Wellbeing Board agreed in November 2021 for a Working Group to be established with representation from partners to produce a local Health and Wellbeing Strategy. This is the second update to the Health and Wellbeing Board since the Working Group was formed.
- 4.2 The Strategy will take forward the recommendations of the 2021 Public Health Annual Report and will acknowledge the ongoing work of the Marmot Communities Programme across Cheshire and Merseyside Health and Care Partnership.
- 4.3 The Director of Public Health is leading on collaboration and engagement across the Council and with partner organisations as well as community representatives to inform the Strategy. Feedback from the Working Group and individual input has been received from all system leaders which has been used to develop the strategy's principles, priorities and deliverables. Through this collaborative approach, the Working Group is ensuring that the strategy aligns with other relevant plans and strategies, either existing or in development.
- 4.4 To ensure that the voice of Wirral residents and communities is reflected within the strategy, a programme of engagement is under development, overseen by the Working Group. Working with the Health and Wellbeing Board Reference Group, and the Community, Voluntary and Faith Network, as well as other partners and groups, resident input will be obtained via a programme of qualitative insight to inform the strategy's development and measure the impact in communities. Key lines of enquiry are being developed to obtain residents' views on their health and

wellbeing, their aspirations for change and actions they would like to see to help them live healthier lives.

- 4.5 At the last Working Group meeting held on 6 May 2022, the vision and principles for the new Health and Wellbeing Strategy were proposed. There is cross system consensus to focus on the priorities identified in the 2021 Public Health Annual Report, which are built on evidence and insight. In conjunction with the Working Group, initial draft deliverables within each theme for action during the first year of the Strategy have been developed. Appendix 1 sets out the draft vision, principles, priorities, and deliverables.
- 4.6 The Working Group has identified the importance of holding the system to account on the delivery of the Strategy and monitoring its impact over time. A range of quantitative and qualitative measures will support the Health and Wellbeing Board oversight of the strategy deliverables. A set of high-level indicators was shared with the Working Group in May 2022 and work will continue to develop an outcomes framework over the coming period. Appendix 2 illustrates the proposed indicators to support the Health and Wellbeing Board oversight of the strategy deliverables and measuring progress.

5.0 NEXT STEPS

- 5.1 The Working Group will meet regularly to oversee the ongoing development of the Strategy, and individual collaboration will continue throughout this period to ensure all partners are contributing to shape the Strategy.
- 5.2 Updates on the Strategy's development will continue to the Health and Wellbeing Board for consideration, and the draft Strategy will come to the Board for approval. Work continues to progress within the planned timeframe, for completion by Autumn 2022.

6.0 FINANCIAL IMPLICATIONS

- 6.1 There is likely to be a relatively small cost associated with the design and production of the Strategy, these costs will be met from the Public Health grant.

7.0 LEGAL IMPLICATIONS

- 7.1 There are no legal implications directly arising from this report.

8.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 8.1 The work referenced within the report was developed by existing officers and partners. No additional resources are sought.
- 8.2 There is a need for commitment of officer time from partners within the Working Group, to develop and draft the Health and Wellbeing Strategy and engage with their

respective organisations. There also needs to be ongoing commitment to ensure the implementation and monitoring of the Strategy, and keeping the Board regularly updated on progress.

- 8.3 There may be resource implications for partners, services and programmes as a result of the implementation of a Health and Wellbeing Strategy; this will be dependent on the content of the Strategy and the priorities identified.

9.0 RELEVANT RISKS

- 9.1 Any risks related to the development of a Health and Wellbeing Strategy will be identified and managed by the Working Group and reported to the Health and Wellbeing Board.

10.0 ENGAGEMENT/CONSULTATION

- 10.1 No direct public consultation or engagement has been undertaken in relation to this report. A programme of engagement with local people on the development of a new Health and Wellbeing Strategy is in development and will be delivered in partnership with those organisations and members of the working group.

11.0 EQUALITY IMPLICATIONS

- 9.1 There are no direct equality and diversity issues arising directly as a result of this report. However an Equality Impact Assessment will be undertaken on the Health and Wellbeing Strategy to ensure that equality and diversity impacts are considered and addressed.

12.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 12.1 There are no environment and climate implications arising from this report. However the local environment is a key influence on health. Addressing the social determinants of health, the conditions in which people are born, grow, live, work and age can impact on health inequalities.

13.0 COMMUNITY WEALTH IMPLICATIONS

- 13.1 The work of the Marmot Community programme is built upon a number of concepts including community resourcefulness and using this approach to improve health and social and economic outcomes and reduce inequalities between areas.

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APPENDICES

Appendix 1: Health and Wellbeing Strategy – Draft Vision, Principles, Priorities and Deliverables, May 2022

Appendix 2: Health and Wellbeing Strategy – Draft indicators to measure progress

BACKGROUND PAPERS

- Public Health Annual Report 2021: 'Embracing Optimism - Living with Covid-19'

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board Developing a Health and Wellbeing Strategy	23 rd March 2022
Health and Wellbeing Board Marmot Communities Programme Update	9 th February 2022
Health and Wellbeing Board Developing a Wirral Health and Wellbeing Strategy with support from the Marmot Community Programme	3 rd November 2021
Health and Wellbeing Board 2021 Public Health Annual Report: Embracing Optimism – Living with COVID-19	29 th September 2021

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Draft Vision, Principles, Priorities, and Deliverables

(Working Group meeting 6 May 2022)

Vision

Wirral's Health and Wellbeing Board's vision is to enable residents to optimise their health and wellbeing, to live healthier lives in thriving communities, building on strengths and reducing health inequalities.

Principles:

- Work as a single system at place to improve health and care outcomes for people and communities.
- Equity has primacy – services and interventions should be proportionate to need and targeted to the communities, groups and individuals that need them most.
- Listen to, and work with communities, so they are able to take control for their own health and wellbeing and live their lives as healthily and independently as they can.
- Work together to focus collectively on the things that have the biggest impact on health.
- Measure the impact of what we do and be accountable.

Priorities:

Using feedback from engagement activities, the 2021 Public Health Annual Report Recommendations have been reframed to be action oriented, to translate to proposed Priorities for the Health and Wellbeing Strategy.

Appendix 1: Health and Wellbeing Strategy

Page 52

2021 PHAR Recommendations	Health and Wellbeing Strategy Priorities
Prioritise economic regeneration and a strong local economy	Create opportunities to get the best health outcomes from economic policy and regeneration programmes.
Strengthen action to address differences in health outcomes and prevention	Strengthen health and care action to address differences in health outcomes.
Prioritise support for children, young people, and families	Ensure the best start in life for all children and young people.
Safeguard a healthy standard of living for all	Create healthy places for people to live that protect health and promote a good standard of living.
Residents and partners continue to work together	Create a culture of health and wellbeing, listening to residents and working with partners.

Deliverables:

HWS Priorities	Deliverables
Create opportunities to get the best health outcomes from economic policy and regeneration programmes.	<p>Align Wirral's Economic Strategy with the HWB Strategy, focusing on the following actions that maximise benefit:</p> <ul style="list-style-type: none"> • The role of anchor institutions • Health related worklessness programmes • Build Health impact assessment into regeneration schemes
Strengthen health and care action	<ul style="list-style-type: none"> • Tackle health inequalities related to services as business as usual within Wirral Place

Appendix 1: Health and Wellbeing Strategy

HWS Priorities	Deliverables
to address differences in health outcomes.	<ul style="list-style-type: none"> Based Partnership (health and care led) Accelerate preventative programmes - proactively engage those at greatest risk of poor health outcomes (health and care led) Ensure high quality and safe service delivery with strong focus on good infection prevention and control to prevent avoidable harm (health and care led) Maximise roles as anchor institutions (links across priorities) Health and care support and investment to deliver across other priorities e.g. employment, regeneration, housing, climate change (links across priorities)
Ensure the best start in life for all children and young people.	<ul style="list-style-type: none"> Partnership approach to children's early development and to improving School Readiness, with a brave focus on our more deprived communities. Accelerate most impactful elements of the wider 'Breaking the Cycle' programme. Partnership approach to parental support e.g. improving employment opportunities, reducing levels of debt, improving housing conditions for struggling families. Joint commissioning approach to mental health and wellbeing and risk/resilience offer for children/young people. Implement Education White Paper to reduce impact of educational inequalities (linking curriculum/skills development to emerging employment landscape). Integrated, seamless support offers within neighbourhoods wherever practical.
Create healthy places for people to live that protect health and promote a good standard of living.	<ul style="list-style-type: none"> Align Wirral's Local Plan with the Health and Wellbeing Strategy focusing on the following actions that maximise benefit: <ul style="list-style-type: none"> Active travel Build health impact assessment into major regeneration schemes Healthy housing Develop a partnership approach to the cost-of-living crisis. System collaboration to respond to the environmental and climate emergency.
Create a culture of health and wellbeing, listening to residents and	<ul style="list-style-type: none"> Support development of Resilient Communities Programme. Develop and embed Memorandum of Understanding/COMPACT with the Community

Appendix 1: Health and Wellbeing Strategy

HWS Priorities	Deliverables
working with partners.	<p>Voluntary Faith Sector.</p> <ul style="list-style-type: none">• Connect the work of the Community Voluntary Faith Network (formerly known as Humanitarian Cell) and the Health and Wellbeing Reference Group to the strategy priorities to support outcome delivery e.g. cost-of-living crisis.• Deliver a programme of insight with local people linked to the strategy priorities, to measure impact, and influence ongoing action and strategy development.

High level outcomes	Increased healthy life expectancy Reduced differences in life expectancy and healthy life expectancy between communities					
PHAR	Prioritise economic regeneration and a strong local economy	Strengthen action to address differences in health outcomes and prevention	Prioritise support for children, young people, and families	Safeguard a healthy standard of living for all	Residents and partners continue to work together	
Page 55 Marmot	Create fair employment	Strengthen the role and impact of ill health prevention	Give every child the best start in life; Enable all children, young people and adults to maximise their capabilities and have control over their lives	Ensure healthy standard of living for all	Create and develop healthy and sustainable places and communities	
Supporting indicators that help focus our understanding of how well we are doing	Unemployment % Type of employment Proportion of employed in permanent and non-permanent employment	Core20Plus5 Maternity Mental Health Chronic Resp Disease Early Cancer Diagnosis Hypertension case-finding	School readiness Percentage children achieving a good level of development at the end of Early Years Foundation Stage (Reception)	Living wage Percentage of individuals in absolute (after housing costs) low income	Community resilience and cohesion (Programme of work that will measure qualitative insight (linked to metrics))	

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HEALTH AND WELLBEING BOARD

Wednesday, 15 June 2022

REPORT TITLE:	COMMUNITY, VOLUNTARY AND FAITH 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 and an update on the 'Working with the Community, Voluntary and Faith Sector' workstream.

The Reference Group was established as a mechanism to promote the views of the CVF Sector to the Health and Wellbeing Board. Their update is included at Appendix 1.

At the meeting of the Health and Wellbeing Board on 31st March 2021 a proposed approach to working with the community, voluntary and faith sector to improve health and reduce inequalities was presented and endorsed. An update on this work is detailed at Appendix 2.

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 and consider the recommendations from the Community Voluntary and Faith Sector Reference Group and the 'Working with the Community, Voluntary and Faith Sector' document 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 and to receive an update on the work undertake as part of the ‘Working with the Community, Voluntary and Faith Sector’.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 the CVF Sector has considered a range of options in coming to the recommendations they have made.

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.
- 3.3 Furthermore, at the meeting of the Health and Wellbeing Board on 31st March 2021 a proposed approach to working with the community, voluntary and faith sector to improve health and reduce inequalities was presented and endorsed. Further updates were provided to the Board in September and December 2021, including the consideration of the Community, Voluntary & Faith Sector Coming Together Plan.
- 3.4 This report provides an update on that work to the Board.

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 Consultation and engagement has been carried out within the CVF Sector and with

other partners/stakeholders

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 appended to the report may require 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

Appendix 2

BACKGROUND PAPERS

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

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Health and Wellbeing Board	29 September 2021

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Appendix

Next Steps: Building Community Infrastructure to improve the health and well being of Communities and Residents on Wirral

Context

This is a first thoughts document following the favourable outcome from previous reports from the Reference Group to the Health and Wellbeing Board and ongoing plans and partnerships being developed.

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 is bringing forward a new Health and Care Bill in April 2022 with the specific aim of reducing health inequalities.

In Wirral there are 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.

In recognition of the benefit of local knowledge the Health and Care Bill due for introduction in April 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.

The terminology which frames the new legislation is simply ‘working together in full partnership’, initially on codesign of new approaches with a key contribution from communities and their residents but then on appropriate measures and structures within community that enables the new approach to flourish.

Harnessing the local knowledge and providing simple and effective systems, whereby communities and residents can make their strongest contribution to need, 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.

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. Where possible subsets need to be 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

In many cases need can be identified from within the community, as has often been the case with Covid.

Where services need to be involved, then best practice is found in the establishment of link and help organisations, referred to as community hubs and family hubs. The link

organisation is able to provide advice, help to coordinate dialogue and support through efficient signposting, assist with the use of digital systems, and in many other ways.

- Establishment of pilot community link organisations.

It is suggested that a pilot of four communities, one in each constituency, be established, with oversight from the Health and Wellbeing Board.

- A possible phased approach is outlined below.

First phase. Establishing commitment and consensus.

Step 1. Submit for approval to the Health and Wellbeing Board on 9th February the Reference Group's proposal for the establishment of community hubs and family hubs as link organisations within Wirral's communities

Step 2a. Engage with the Leaders of each political party to secure their approval for discussions with Elected Members of each ward and then secure ward EM's support for discussions to begin with each community they represent and the extent to which they wish to participate in the discussions.

Step 2b. Engage with all key partners providing services to determine their approval, support, and level of involvement in and for discussions with communities within each ward.

Step 3. Engage with local organisations, both in the communities and with individuals active in supporting the health and wellbeing of each community.

Step 4. Bring all the interests established above together with the aim of developing a best practice plan appropriate to each community with the specific aim of forming a link organisation.

Step 5. Form a community development team (CDT) from within the community to lead discussions for the community.

Second phase Outline codesign and formation of a community link organisation (CLO).

Step 1. Establish a codesign team with representation from all key partners and stakeholders but with the full involvement of the Community Development Team (CDT)

Step 2. Propose for agreement the aims and objectives of the community link organisation

Step 3. Explore possible options for the siting and development of the community link organisation.

Step 4. Present options and proposal, with preferences, to the community through the CDT for their approval.

Third phase Preparation of a CLO business plan

Step 1. CDT to establish a team for the preparation of the business plan working with the CLO

Step 2. Business team to agree the framework for investment and returns on investment and the associated legal framework.

Step 3. Prepare business plan for submission for approval.

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APPENDIX 2

Update Report: Working with the Community, Voluntary and Faith Sector

June 2022

This report details the outputs from this work programme since the last update to HWB in December 2021 and sets out recommendations for next stages.

The Coming Together sector led strategy, detailed the ‘why’ and ‘what’ is important to Wirral’s CVF Sector; the CVF thematic groups have now progressed on to the ‘how’ we implement the pillars and cross cutting themes within the plan; ensuring open dialogue with the wider CVF sector continues to be maintained.

The CVF Forum, Communities of Practice group (CoP), Sector Leaders Network (SLN) and the Health and Wellbeing Reference group (RG) have acted as the formal communication channels and conduit to the wider CVF to encourage openness around the process and conversations, and to encourage participation and inclusiveness. However, through this work programme engagement has been expanded through other networks and forums as mapping of CVF architecture continues. Membership of these and other engaged groups can be found at the end of the report.

This work programme has been open, inclusive, flexible and sector driven. This is a unique and exciting way of working that has paved the way for how we collaborate in the future.

To enable continued conversations and connectivity, the sector has come together to form a new trusted CVF led coordinating body, Wirral CVS, whom they envisage mobilising the plan. This need was particularly highlighted by smaller organisations who have at times struggled with capacity to engage in regular meetings and therefore have needed a 1-1 approach to enable involvement. Although this is more time consuming, it is in response to the needs of grassroots organisations who are focused on the valuable work they do with and for our communities. Members of the CVF sector have come together to form a development group for this new organisation Wirral CVS. Members of the development group come from the CoP, SLN, RG and Link Forum.

The following outlines the work produced as the sector have moved on to practical implementation:

3.1 Understanding, recognising, and appreciating our diversity through our CVF architecture

This work programme has begun to identify Wirral’s CVF architecture to recognise the role it plays and to support communication and representation. The CVF architecture is the existing networks and forums that should be recognised and utilised to engage on specific topics.

The Humanitarian Cell has now been renamed Wirral's CVF Forum to move it on from solely being a pandemic response and will now act as an overarching forum for public sector colleagues to engage with a wider group of CVF organisations which enables a mechanism for informal representation of community views.

A meeting of 11 Faith leaders in May to discuss the coming together plan and the asks and offers from our Faith colleagues agreed that the strategic voice needed to be strengthened and supported as well as identifying more practical support. This conversation will continue to inform this work programme building on successful collaboration between the faith sector and Wirral Borough Council developed over the last ten years and throughout COVID -19 and provides a direct response to the Governments 'Levelling Up Our Communities - Proposals for a New Social Covenant' report recommendation 10, a new deal with faith communities, by which government supports a greater role for faith groups in meeting social challenges.

3.2 Formal Representation alongside Informal

The representative mechanism has now been agreed and has been tested. The CVF sector wanted a democratic process, as well as a good level of support and mentoring for representatives themselves and robust channels of communication so information can be shared both ways.

So far the mechanism has been used to identify representatives for the Wirral Partnership for Children, Young People and Families and associated subgroups, Wirral Place Development Group, VS6 Equalities Group and the Getting to Good group.

3.3 Building our Collaborative Approach

The Collaboration Thematic Group have reviewed good practice examples from across the country and adopted a collaboration framework from Brighton and Hove as the foundation to build upon. The 6 strands felt relevant to our discussions and covered the areas needed to ensure collaboration is effective; this framework needs to be further coproduced and developed across the Council and other partners.

3.4 Creating the right culture

The collaboration thematic group has informed the collaborative behaviours element of the framework into a new social contract for Wirral.

Social contracts are simply dynamic agreements between state and society detailing how to live together in a way that can support inclusion and tackle inequalities. To address local challenges we must endeavour to create healthy relationships to enable collaboration and coproduction.

Healthy relationships involve honesty, trust, respect and open communication and they can take effort and compromise from all involved. There is no imbalance of power. Partners respect each other's independence, can make decisions or speak up without fear of retribution or retaliation, and share decisions.

Whether we hold a paid or voluntary position in any sector we can be held accountable for our actions and should adopt the behaviours and responsibilities associated with the role.

Often these roles include representing local residents or advocating on behalf of those we work for and with, working to develop better services and deliver local change.

The outline for the social contract also requires further socialisation and development across sectors. Implementation of such innovation is often a challenge for larger organisations, as is encouraging the ability to respectfully challenge without fear of consequences.

The CVF Sector wish to lead on the development of the coproduction code which will define a shared understanding of what coproduction is and what it looks like when we do it well.

The Social Contract and Collaboration Framework has significant potential to influence and underpin both the Wirral Plan refresh, strategic partnerships review and place development.

3.4 Further developments

The volunteering thematic group has linked with the Healthy Wirral Plan and civic duties workstream to link together opportunities for this agenda. Volunteering is also a key enabler to the Wirral Plan and the CVF sector would be keen to further explore this.

Additionally, the recent award of £1.4m in grants to the CVF Sector from Wirral Council has been extremely well received by the sector and the human learning systems approach will help to continue to shape this aspect of the plan.

All grant recipients have now been engaged in this programme of work as its important that they work collaboratively within the CVF and with the Council to deliver on the grant ambitions and help gather insight and learning.

4.0 Recommendations

Based on the work undertaken the following recommendations have emerged:

1. Acknowledge, recognise and appreciate the CVF architecture

The Health and Wellbeing Board are asked to acknowledge the CVF architecture and support ways in which we can build on existing networks as well as support the development of new networks where we identify gaps.

The overarching CVF Forum will act as the forum for partner organisations to engage with a wide group of CVF organisations to facilitate informal representation and support coproduction opportunities. The Health and Wellbeing Board are asked to endorse this development of the CVF Forum.

2. Create the right conditions and culture for collaboration

The Health and Wellbeing Board are asked to note the development of the Collaboration Framework and new Social Contract and endorse and support further coproduction across the system.

3. Endorse the sector designed representative mechanism for the Community, Voluntary and Faith Sector to influence in a formal way

A new representative mechanism has been created for the CVF to fully and more formally participate in strategic planning in a democratic way. This will sit alongside the CVF Forum that will provide informal representation of community views.

4. Embed this work programme within the Wirral plan refresh and strategic partnerships review

The opportunities for this strategy and associated developments fit well with the plans and ambitions of Wirral Council and the wider system through the Wirral Plan refresh and strategic partnerships review. How the Council and strategic partnership landscape engages and involved the CVF sector will be critical to success. This could be assisted by further coproduction of the collaboration framework and the social contract within that space.

The HWB is asked to ratify that this work programme is incorporated into the Wirral Plan refresh and the strategic partnerships review.

Report by: Wirral's Community, Voluntary and Faith Sectors

Engagement and reach of current work programme (CVF architecture)

1. Communities of Practice Regular Attendance:

- Age UK
- Aj and Friends
- Bare Rooms Gym Birkenhead
- Bee Wirral
- Belvedere
- Bridging the gap
- Building Bridges
- CAB
- Caritas
- Carrbridge Community Centre
- CGL
- Child Bereavement UK
- Christians Against Poverty
- Community Action Wirral
- Cre8ing careers
- Deen Centre
- DWP
- Eastham Centre
- Energy Projects Plus
- Extinction Rebellion

- Feeding Birkenhead
- Ferries Family Groups
- Forum housing
- Foundation Years Trust
- Friends of Birkenhead Park
- Grow Wellbeing
- Healthwatch
- Heseltine Institute
- Households into Work
- Involve Northwest
- Irish Community Care
- Journeymen CIC
- Koala NW
- Leasowe Development Trust
- Magenta Living
- Make CIC
- Make it Happen
- Martin Gallier Project
- Mencap
- Merseyside ECT
- Merseyside Sports
- Moreton Methodist Church
- New Brighteners
- One Wirral
- Open Door Centre
- OPP
- Options for Supported Living
- Our Happy Hub
- Place of Contribution (MIH)
- Positivtree
- Psychological Therapies Unit, Liverpool
- Quirky Café
- Sales Force
- Seetec
- St James Centre
- St Lukes Methodist Church, Hoylake
- Suevivor
- The Reader
- The Spire
- Together all are able
- Tomorrow's Women Wirral
- Transforming Lives Together
- Transition Town West Kirby
- Wake up Wallasey
- WEN

- Wired
- Wirral Change
- Wirral Cultural Diversity Group
- Wirral Dementia Group
- Wirral Evolutions
- Wirral Maternity Voices
- Wirral Methodist Housing
- Wirral Mind
- Wirral Support During Coronavirus
- Wirral Unplugged
- WMO

Sector Leader's Network Membership:

- Aftermath Support
- Age UK Wirral
- Citizens Advice Wirral
- Ferries Families Groups
- Forum Housing
- Grow Wellbeing
- Involve NW
- Koala NW
- Make it Happen
- Mencap Wirral
- North Birkenhead Development Trust
- One Wirral
- Positivitytree
- Safe Families
- Shaftesbury Youth Club
- Health Junction
- The Foundation Years Trust
- The Hive
- WEB Merseyside
- Wired
- Wirral Change
- Wirral Mind
- Wirral Multicultural Organisation

CVF Forum Membership:

- ABL Health
- Age UK
- Building Bridges Wirral
- Capacity Lab
- Caritas
- Carrbridge Centre

- CGL
- Citizens Advice Wirral
- Community Action Wirral
- Community Spirit
- Delamere Centre
- DWP
- Energy Projects Plus
- Equilibrium
- Feeding Birkenhead
- Forum Housing
- Glow Creative Learning
- GROW
- Health Junction
- Heart 4 Refugees
- Involve Northwest
- Irish Community Care
- Johnson Foundation
- Journeymen CIC
- Koala
- LJMU
- Magenta
- Make it Happen
- Merseyside CT
- Merseyside Police
- NBDT
- Neo
- Older People's Parliament
- One Wirral CIC
- one-economy
- Prima Group
- Rapid Response NW
- Salvation Army
- Salvation Army Rock Ferry
- St Hilary Wallasey
- SVP
- The Reader Org
- Tranmere Rovers
- Unity Housing
- WEB Merseyside
- WIRED

Link Forum Membership:

- Action for Children
- ADDvanced Solutions Community Network
- ADHD Foundation

- AJ and Friends
- Autism Together
- Bank, The (Village Youth Project)
- Barnardo's
- Beacon Counselling Trust
- Beanstalk
- BEE Wirral
- Birkenhead Youth Club
- Bridging the Wallasey Gap
- Brook Wirral
- Building Bridges Wirral
- Caritas
- Carr Bridge Community Centre
- Catch22
- Child Bereavement UK
- Citizens Advice Wirral
- Community Action Wirral
- Crea8ing Careers/Community
- Fed Up Wallasey
- Ferries Family Groups
- Forum Housing
- Foundation Years Trust
- Gautby Road Play & Community Centre
- Grow Wellbeing CIC
- Healthwatch Wirral
- Hive Youth Zone, The
- Hope for New Brighton CIC
- HYPE Merseyside
- Involve Northwest
- Kings Church
- Koala North West
- Life Youth Hub
- Love, Jasmine
- MACS
- Magenta Living
- Make It Happen Birkenhead
- Martin Gallier Project, The
- Maternity Action
- Merseyside Youth Organisation
- Neo Community
- Next Chapter
- North Birkenhead Development Trust
- NSPCC
- O.P.A.L. Centre
- Open Door Charity

- Options for Supported Living
- Paul Lavelle Foundation, The
- Positivtree, The
- Prima Group
- RASA Merseyside
- Reader, The
- Resilient NW CIC
- Right to Succeed
- Safe Families
- Sensory Shack, The
- Shaftesbury Youth Club
- Shiny Stone CIC
- Spider Project, The
- St John's Church, Meols
- St Vincent de Paul Society
- St Vincent de Paul Society
- Stick n Step
- Tomorrows Women Wirral
- Urban Saints
- WEB Merseyside
- Welcome Centre, The
- WIRED
- Wirral Change
- Wirral Communities of Practice
- Wirral Deen Centre
- Wirral Development Trust
- Wirral Foodbank
- Wirral Hospice St John's
- Wirral Mencap
- Wirral Multicultural Organisation
- Wirral Women and Children's Aid
- Wirral Youth for Christ
- Youth Federation

Mental Health Alliance Meetings:

- Aftermath Support
- Alzheimers Society
- Citizens Advice Wirral
- Cre8ing Careers
- Ferries Family Groups
- Healthwatch Wirral
- Insight Healthcare
- Involve NW
- JourneyMEN
- Koala NW

- Next Chapter CIC
- Poppy Factory
- RASA Merseyside
- Rethink Mental Illness
- The Martin Gallier Project
- Together All Are Able
- Tomorrow's Women
- WIRED
- Wirral Change
- Wirral Council
- Wirral Deen Centre
- Wirral Maternity Voices
- Wirral Mencap
- Wirral Mind
- Wirral Multicultural Organisation
- Wirral Older People's Parliament
- Healthwatch Wirral
- Rethink

Health and Wellbeing Reference Group:

- Delamere Community Centre
- Forum Housing
- Ferries Family Groups
- Grow
- Community Voice
- Age UK
- Wirral Mind
- Wired
- Involve Northwest
- Citizens Advice Wirral

CVF Grant Recipients:

- NYAS (National Youth Advocacy Service)
- Forum Housing Association
- Community Capacity Builders CIC
- 1125 CIC
- Youth Federation for Cheshire, Halton, Warrington and Wirral
- Utopia Project CIC
- Knowsley Youth Mutual Ltd
- The Belvidere Centre
- Charlotte's Brightside
- Autisans Ltd
- Shaftesbury Youth Club
- Wirral Deen Centre

- Holy Apostles and Martyrs Parish
- Activity for All CIC
- Church @ The Cross Birkenhead
- Tam O'Shanter Cottage Urban Farm
- Heart of Egremont Community Centre
- Bebington District Scout Council
- Wirral Development Trust
- Liscard Community Links
- Tranmere Rovers in the Community
- Ferries Families Group LTD
- The Little Centre Beechwood Ltd
- Carrbridge Centre Ltd
- Wirral Environmental Network with Wirral Unplugged, Wirral Wildlife, Liverpool University, Wirral EcoSchools and Friends of Parks Groups
- The Open Door Charity
- The Meeting Place
- The Parochial Church Council of the Ecclesiastical Parish of Christ Church Higher Bebington
- Jubilee Church Wirral
- Unity Supported Housing Ltd
- Men Too
- Raw 'n' Real C.I.C
- Koala NW
- Crea8ing Community
- Caritas Shrewsbury
- Wirral Older People's Parliament
- King's Church Wirral
- St Paul's Church PCC, Tranmere
- Venture Boxing and Fitness Club
- New Brighton Community Centre
- Merseyside Community Training Ltd
- Make it Happen Birkenhead limited
- Our Happy Hub
- WEB Merseyside
- North Birkenhead Development Trust
- Transforming Lives Together
- Two Brothers Gym CIO
- Movement and Bloom CIC
- The Neuromuscular Centre (NMC)
- Hoylake Flower Club
- The Callister Trust

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Health and Wellbeing Board Update

June 2022

Chris Shaw, Chair, Communities of Practice
Karen Livesey, CVF Facilitator

CVF Architecture

Wirral CVS will play a key role in supporting and further developing existing VCSFE architecture as well as supporting the creation of new networks and groups as appropriate.

By architecture we mean the structures that provide opportunities for networking, sharing best practice, developing relationships and collaborations, peer support and collective voice.

The networks and forums will cover, place (neighbourhoods or other geography), people (thematic groups such as Mental Health or Children and Young People) and practice (role based groups such as CoP and Sector leaders network).

CVF Architecture

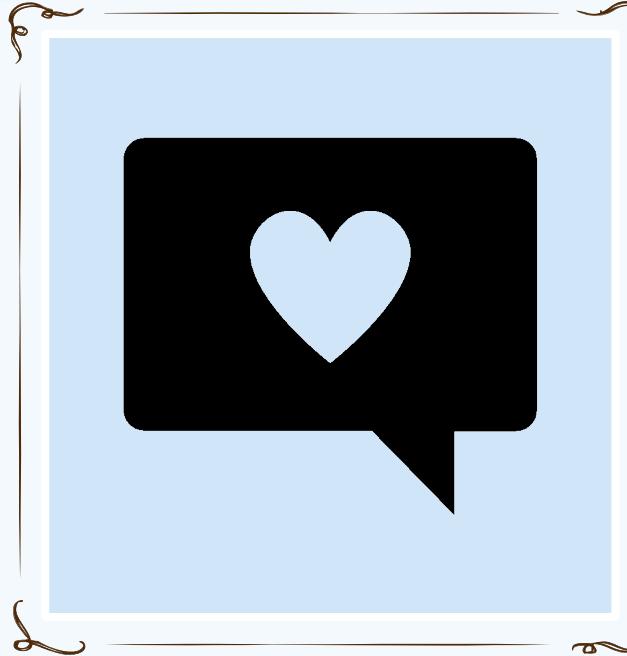
CVF Forum (previously H Cell, open Forum for partners to engage with CVF Sector)

Communities of Place	Communities of People	Communities of Practice
<p>Primary Care Networks</p> <p>Friends of Parks</p> <p>Tenants and Resident Associations</p> <p>Eastham Community Forum</p>	<p>Link Forum – is a forum for voluntary, community and faith sector organisations working with children, young people and families in Wirral, providing an opportunity to share practice, discuss trends and encourage partnership working. It acts as a conduit for information from, and consultation with national and local statutory agencies to the voluntary, community and faith sector in regard to issues around children, young people and families.</p> <p>Health and Wellbeing Reference Group – to act as a conduit for information to flow to and from the Health and Wellbeing Board</p> <p>Mental Health Alliance – Still in formation</p> <p>Faith Forum – Speaking to Wirral Churches Together Forum as this may need to be a separate addition</p> <p>Wirral Sports Forum – meeting subgroup</p> <p>Wirral Environmental Network</p> <p>Wirral Older People's Parliament</p>	<p>Sector Leaders Network (SLN) – this is a network of senior leaders from provider organisations that acts as a information exchange and peer support group. WCVS will support this network through admin support and support to the Chair as well as feeding in key information to help draft responses.</p> <p>Communities of Practice (CoP) – is a group for Asset Based Community Development (ABCD) practitioners and gives people the opportunity to share their story and work and create links to build upon. It would continue to be chaired by a member/s of the group, supported by WCVS to either provide administrative duties or fund existing arrangements</p> <p>Bridge Forum – is to give monthly updates and share regular information about Wirral Health & Social Care services, giving a voice to all sectors. A place that is shared with Community, Health & Social Care representatives.</p>

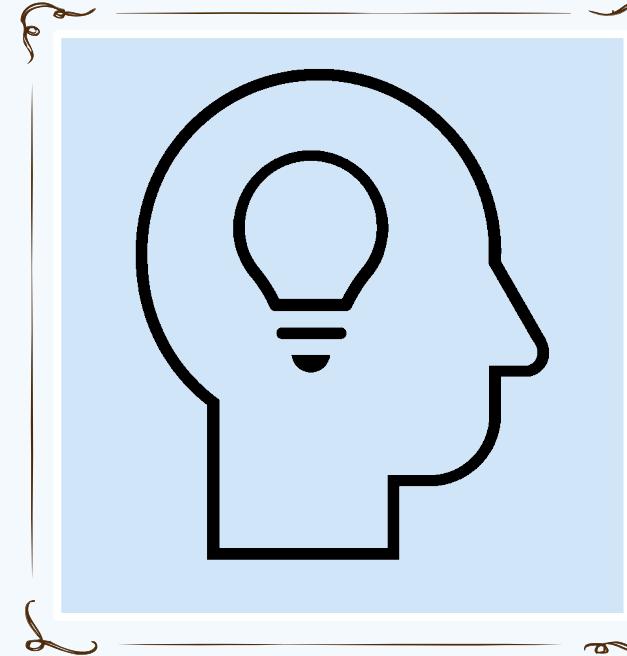
Representative Mechanism

- Formal – when a regular seat needs to be held
- Democratic
- Robust two way communication
- Encouraging diverse and inclusive representation
- Digital platform
- Insight and influence

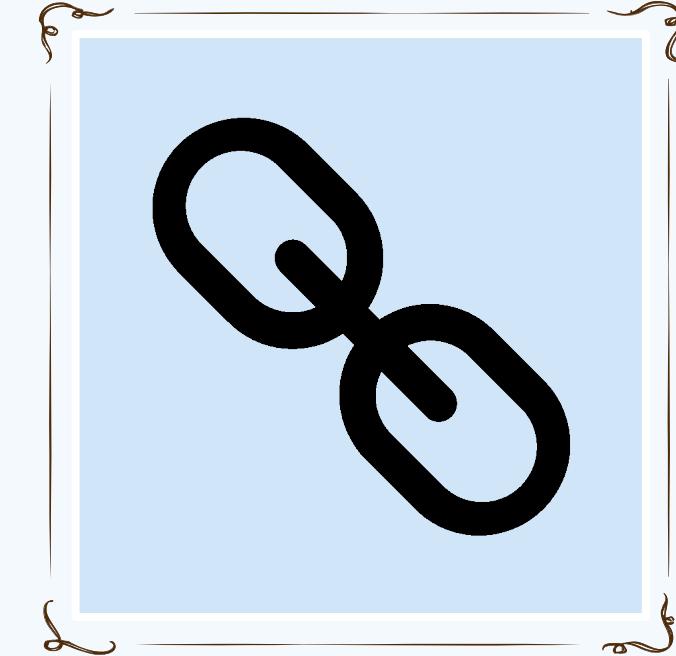
Why is collaboration between sectors important?



Collaboration identifies the needs of communities more effectively and achieves better outcomes for local people



Collaboration makes the most of our skills and resources and creates opportunities for people and organisations to learn and grow



Collaboration provides more joined up services for communities

What does collaboration mean to us?

People and organisations working together on a shared purpose and by using co-creation, reducing perceived barriers to communities achieving their potential

Building trust and openness and strengthening leadership and accountability, through acting with integrity in an inclusive way

Explaining our 'co's.....

Collaboration is working together to utilise our strengths and skills to support the best possible future for our residents. When we collaborate we:

- Co-design; which defines a problem and then defines a solution together;
- co-produce; which is the attempt to implement the proposed solution together;
- co-create; which is the process by which people do both together

Wirral's Collaboration Framework

WHY	<ul style="list-style-type: none">• Collaboration identifies the needs of communities more effectively and achieves better outcomes for local people• Collaboration makes the most of our skills and resources and creates opportunities for people and organisations to learn and grow• Collaboration provides more joined up services for communities
WHAT	<ul style="list-style-type: none">• People and organisations working together on a shared purpose using co-creation to reduce perceived barriers to communities achieving their potential• Building trust and openness and strengthening leadership and accountable, through acting with integrity in an inclusive way

6 Strands of Collaboration

Collaborative Communities	Collaborative Systems	Collaborative Services & Organisations	Collaborative Places	Collaborative Behaviours	Collaborative Commissioning
Public and Private sectors working with communities to develop their skills and strengths, resilience and the ability to provide their own activities and support networks. Asset based community development programme	A system where residents, organisations and staff can access and share information, refer and signpost. They are designed around identified assets and the needs of communities. Livewell to be enhanced to become a collaborative platform	Organisations that coproduce services, share resources and funding to develop joint outcomes and integrated delivery. Where they share risk and are more creative, diverse and inclusive as a result. Protocols for collaboration	Collaborative places have communities, public sector and businesses working together to ensure good access to services, nice environments and open spaces and a strong VCFSE sector shaped by the needs of communities. Neighbourhood plan to include champions, devolved budgets, seed funding and buildings, space and technology	Collaborative behaviours include respecting and listening to people's views and opinions and remembering our common purposes. Being open and honest builds trust and we must strive to resolve conflict. A local agreement	Involving all stakeholders in open dialogue to enable creativity, social value and better outcomes. Sharing decision making and accountability and when things don't go to plan, learn and work through together. Commissioning organisations to support the development of collaborative commissioning arrangements

A New Local Social Contract for Wirral

MEASURING SUCCESS	Measures for each strand Annual relationships poll
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A Local Social Contract for Wirral

Together we are stronger

What is a social contract?

- Social contracts are simply **dynamic agreements** between state and society detailing **how to live together** in a way that can support inclusion and tackle inequalities. To address local challenges we must endeavour to create **healthy relationships to enable collaboration and coproduction**.
- Healthy relationships involve **honesty, trust, respect and open communication** and they can take effort and compromise from all involved. There is **no imbalance of power**. Partners respect each other's independence, can **make decisions or speak up without fear of retribution or retaliation**, and share decisions.
- Whether we hold a paid or voluntary position in any sector we can be held **accountable** for our actions and should **adopt the behaviours and responsibilities associated with the role**. Often these roles include representing local residents or advocating on behalf of those we work for and with, **working to develop better services and deliver local change**.

Common Purpose:

We will work together to secure the best possible future for our residents

Stakeholders: Public, VCFSE and Private Sector employees, volunteers, Councillors, communities and people with lived experience

Healthy Behaviours

I will act in an open and honest way	I will treat all persons fairly and with respect	I will share and learn with and from peers	I will support colleagues and value everyone's contribution	I will be open minded, positive and work to find new solutions	I will be open to different conversations around risk and responsibility
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Healthy Conduct

#1 Sharing experience, skills and resources code	#2 Funding and commissioning Code	#3 Coproduction Code	#4 A regenerative approach/ Inclusion Code	#5 Social Value Code	#6 Social Cohesion Code
<ul style="list-style-type: none"> To ensure the CVF Sector is appropriately represented across all key governance boards / forums Commit to engaging communities so people with lived experience help design local policy Work together to maximise investment in the borough through opportunities to combine experience, skills and resources Learn from the past and use this to shape the future 	<ul style="list-style-type: none"> Social, environmental and economic value to be part of the design process Well managed and transparent application and tendering processes that are simply and proportionate to the value Assess the impact on beneficiaries before reducing/ending funding Commit to multi-year funding where appropriate 	<ul style="list-style-type: none"> Commit to facilitating and ensuring that the voices of under-represented and disadvantaged groups are heard in the co-production of priorities and the co-design of services Provide enough time, support and opportunities for communities to be involved in coproduction activities To promote and respond to consultations where appropriate 	<ul style="list-style-type: none"> We will enable people with lived experience to be truly involved in design, development and delivery of services Give CVF organisations the opportunity to deliver public services Encourage employee volunteering schemes Implement adoption of the 'Keep it Local' principles 	<ul style="list-style-type: none"> Co-produce local priorities with stakeholders and agree consistent ways of measuring the social value of those priorities Support CVF organisations to measure social value in a consistent way To respect and uphold the independence of the CVF Sector 	<ul style="list-style-type: none"> Encouraging participation in local decision making through good communication, access and working with communities Work in ways that bring communities of place, people and practice together, recognise their social capital and support their development To consult early, widely and with meaningful engagement or be open when this is challenging Recognise and respect differences



Thank you



HEALTH AND WELLBEING BOARD

WEDNESDAY 15 JUNE 2022

REPORT TITLE:	HEALTH AND WELLBEING 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:

- (1) note and comment on the proposed Health and Wellbeing Board note the work programme for the remainder of the 2022/23 municipal year.
- (2) review its items for future consideration on the work programme in light of the revised Constitution.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 To ensure Members of the Adult Social Care and Health Committee 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 Committee.

3.0 BACKGROUND INFORMATION

3.1 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

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 Committee'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.

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 Work Programme

15 June 22

Report	Lead Officer
Climate Change, Fuel poverty and winter resilience	Rachael Musgrave/ Mike Cockburn
Healthwatch	Karen Prior
Tackling Health Inequalities through Regeneration	Rachael Musgrave/ Alan Evans
Social Value	Tony Bennett/ David Hammond
Developing a HWB Strategy	Julie Webster
CVF Update	Kevin Sutton/Karen Livesey/Peter Wright
Work programme	Vicky Simpson

27 July

Report	Lead Officer
Sports & Physical Activity Strategy update	Nicki Butterworth
JOY' follow up report (Towns Fund)	David Hammond/ Lee Pennington
WCHC NHS FT – Our 5 year strategy. Shaping our future.	Tony Bennett
SEND Update with invitation to stakeholders such as parent, carers and schools	James Backhouse
Children's mental health and wellbeing	Simone White/
ICS Update	Simon Banks

2 November

Report	Lead Officer
HWB strategy update	Julie Webster
Community Safety Initiatives	Mark Camborne/ Julie Webster with input from Martin Earl
Implementation of the Public Health Annual Report	Julie Webster
ICS Update	Simon Banks

FUTURE ITEMS TO BE SCHEDULED

Item	Lead Officer	Proposed Timescale
CWP Mental Health Transformation Programme	Suzanne Edwards	Possibly June
Suicide Prevention	Gary Rickwood & Elspeth Anwar	Poss Adults, then HWB
SEND Update with invitation to stakeholders such as parent, carers and schools	James Backhouse	July 22
Effect of Covid 19 on Social Development in Children	James Backhouse	November 22
Health and Wellbeing Strategy	Julie Webster	November 22
CHAMPS	Julie Webster	November 22
Community Safety Initiatives	Mark Camborne/Julie Webster	September 22
Implementation of the Public Health Annual Report	Rachael Musgrave	September 22

STANDING ITEMS AND MONITORING REPORTS

Item	Reporting Frequency	Lead Officer
Healthwatch	Quarterly	Karen Prior
ICS Update		

WORK PROGRAMME ACTIVITIES OUTSIDE COMMITTEE

Report	Lead Officer	Timescale
Community, Voluntary and Faith Sector Working Group	Nikki Jones/Rachael Musgrave	Ongoing
Community, Voluntary and Faith Sector Reference Group		Ongoing