

HEALTH AND WELLBEING BOARD

7TH DECEMBER 2023

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

REPORT SUMMARY

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

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

RECOMMENDATION/S

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

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION

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

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

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

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

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

1.2.2 Key Links to Priority 2

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

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

1.2.3 Key Links to Priority 3

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

1.2.4 Key Links to Priority 4

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

1.2.5 Key Links to Priority 5

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

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

2.0 OTHER OPTIONS CONSIDERED

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

3.0 BACKGROUND INFORMATION

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

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

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

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

4.0 FINANCIAL IMPLICATIONS

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

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

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

7.0 RELEVANT RISKS

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

8.0 ENGAGEMENT/CONSULTATION

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

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

9.0 EQUALITY IMPLICATIONS

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

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

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

11.0 COMMUNITY WEALTH IMPLICATIONS

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

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APPENDICES

Appendix 1 Wirral Neighbourhood Map Appendix 2 Tartan Rug

BACKGROUND PAPERS

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

TERMS OF REFERENCE

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

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

(f) To consider and take advantage of opportunities to more closely integrate health and social care services in commissioning and provision.

SUBJECT HISTORY (last 3 years)

Council Meeting	Date