

# **WIRRAL CABINET**

## **HEALTH INEQUALITIES PLAN**

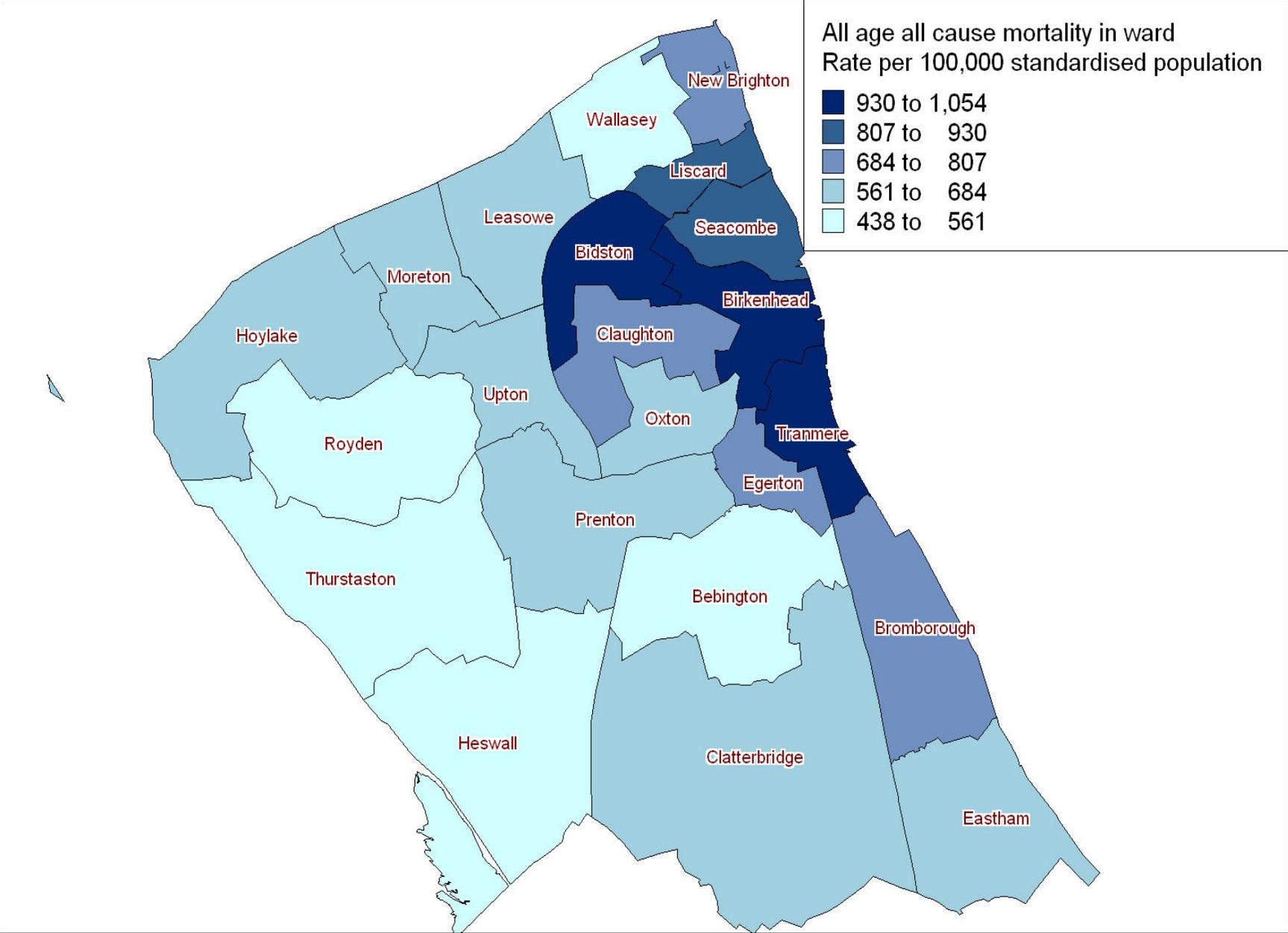
**Marie Armitage  
Joint Director of Public Health**

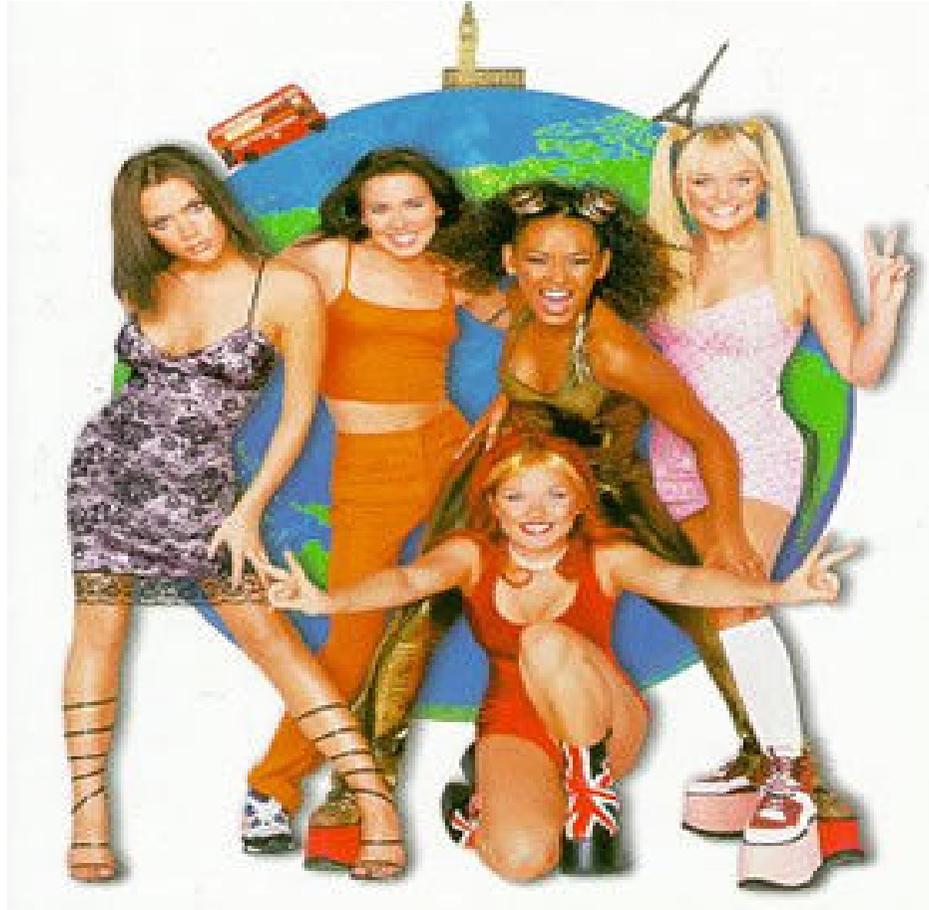
**23 JULY 2009**

# **Outline of presentation**

- **The challenge for Wirral**
- **The Health Inequalities Plan**
- **Investment and actions to achieve the targets and close the gap**
- **Feedback on our plans from Department of Health National Support Team**

AAACM (All age all cause mortality) Rates in Wirral Census Wards, 2005-07 (3 years pooled)





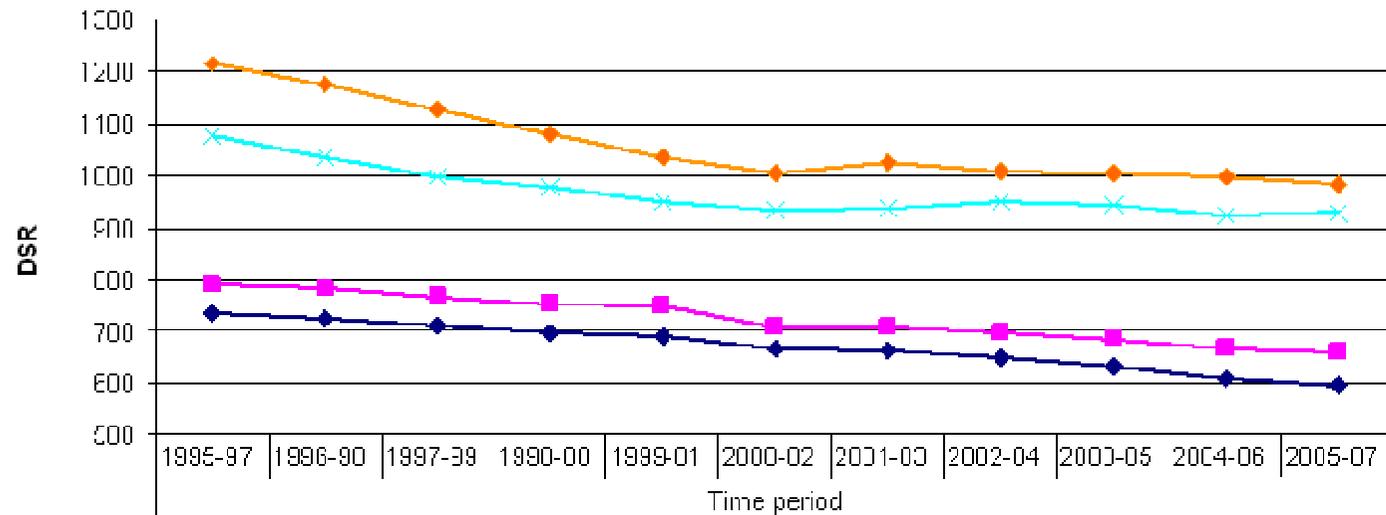
**Death rates in Wirral are currently in line  
with England from 1994**



**But in the most deprived areas they are in line with 1921  
- well before the NHS existed**

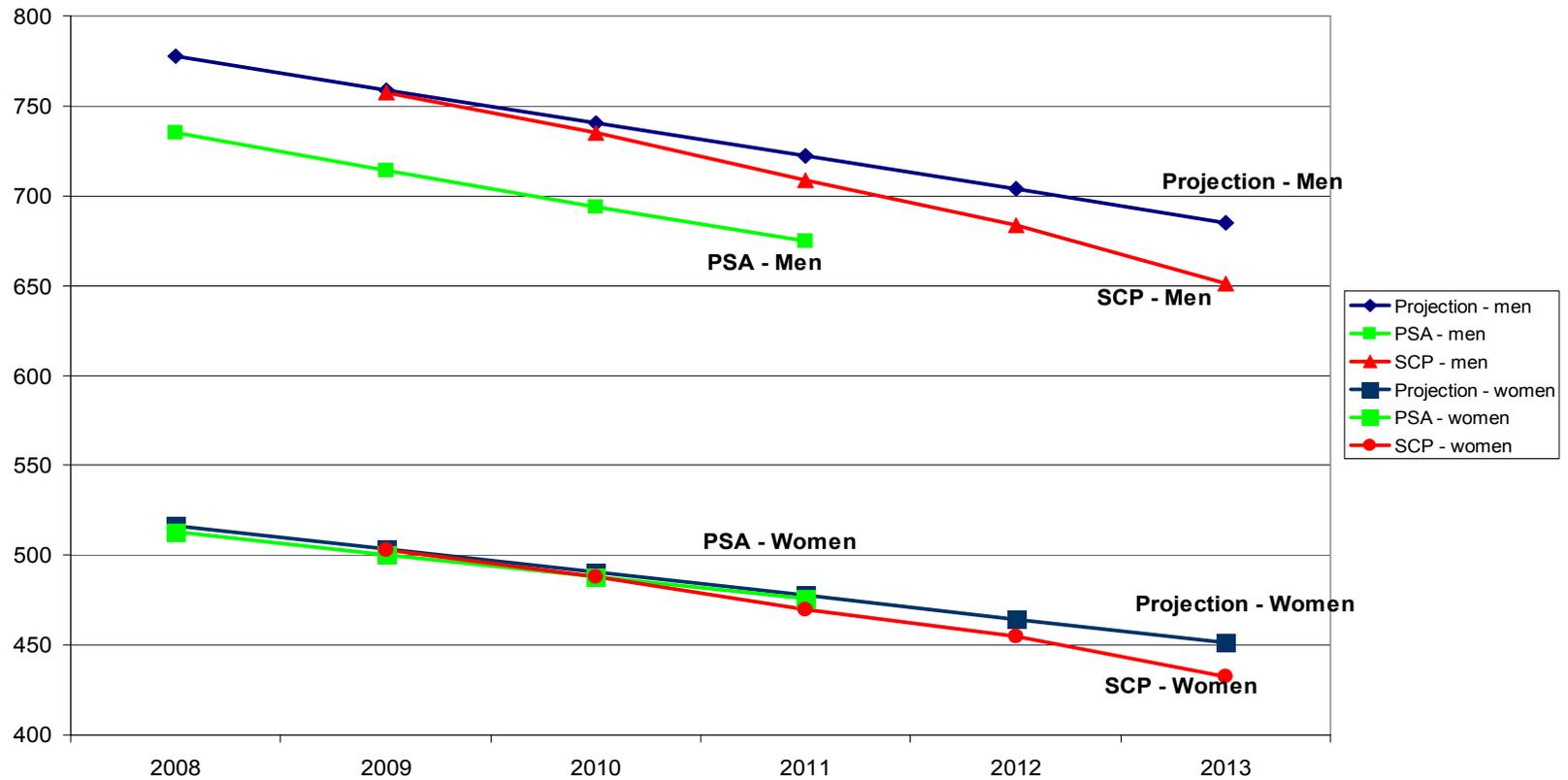
# Trend in AAACM in England, Wirral and 3% and 20% most deprived (1995/97 – 2005/07)

Trend in All age all cause mortality (AAACM) rates in England, Wirral, 20% and 3% most deprived nationally



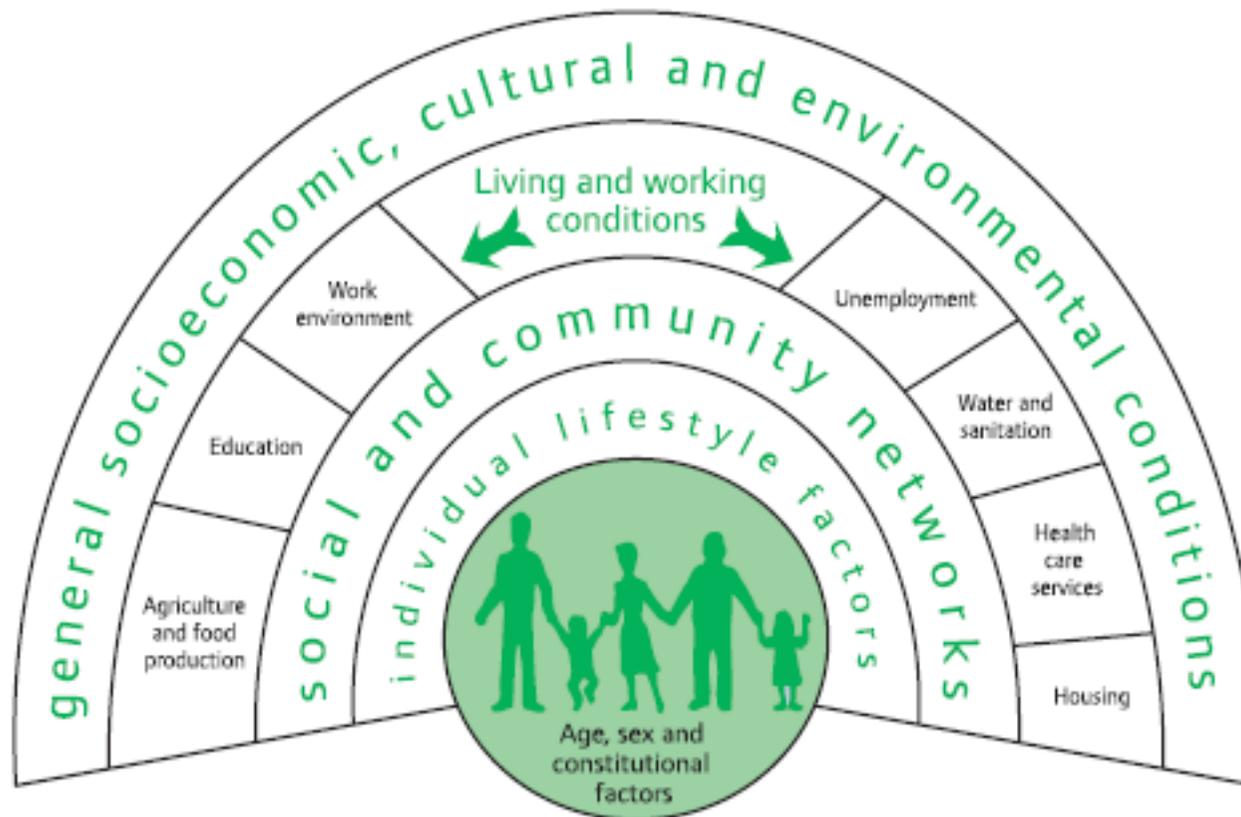
	1995-97	1996-90	1997-99	1998-00	1999-01	2000-02	2001-03	2002-04	2003-05	2004-06	2005-07
England	738	724	712	697	691	665	664	650	633	610	595
Wirral	791	782	765	754	748	708	709	696	685	663	661
3% most Deprived	1214	1173	1126	1080	1034	1004	1026	1007	1004	993	984
20% most deprived	1075	1035	997	970	949	931	936	950	940	922	927

# Impact of the NHS Wirral Strategic Plan on AAACM for Wirral (modelling January 2009)



# **Health Inequalities Plan - 3 timescales for action**

- **December 2011** – to achieve the 2010 life expectancy target for Wirral compared with England. This is measured through 3 year rolled deaths data and takes account of all deaths up to December 2011. Actions within the plan will support achievement of Wirral's Local Area Agreement target and NHS Vital Sign target
- **March 2013** – to support the NHS Wirral Strategic Plan which sets additional targets for improvements in health and well-being for those living in the most disadvantaged areas compared to the rest of Wirral
- **March 2025** – to set in place actions to achieve the medium and longer term aspirations of partners documented in Wirral Sustainable Communities Strategy



**Source: Dahlgren G and Whitehead M, *Policies and strategies to promote social equity in health*, Stockholm: Institute of Future Studies, 1991.**

# **Health Inequalities Plan**

## **3 overarching health outcomes**

- **health outcome 1**

Health in Wirral will improve at a faster rate than for England as a whole between 2009 and 2011. this will ensure that the 2010 life expectancy target for Wirral is achieved.

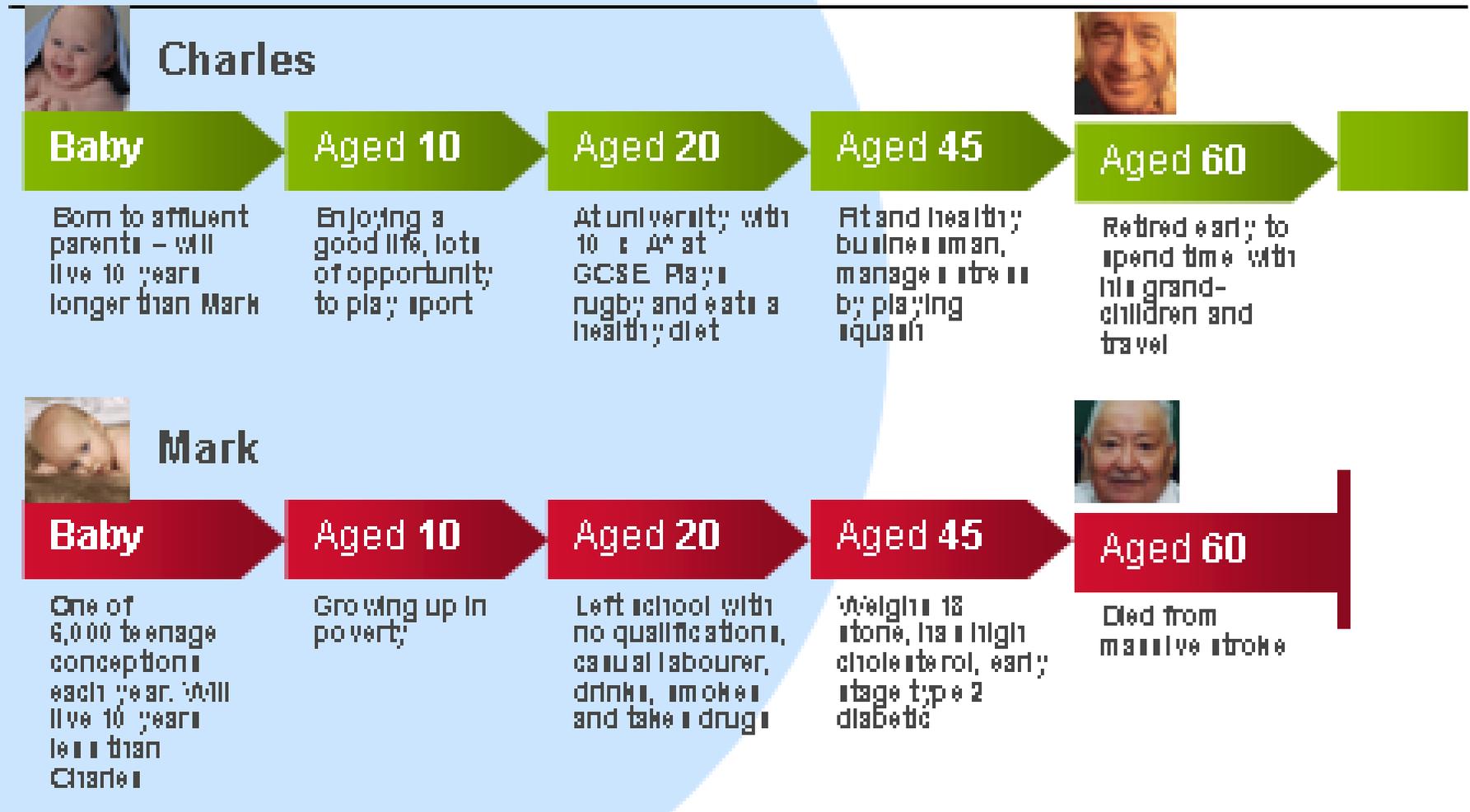
- **health outcome 2**

The health of people living in the most deprived areas of Wirral will improve at a faster rate than for the rest of Wirral between 2009 and 2013.

- **health outcome 3**

Wirral will improve its index of multiple deprivation position in comparison to other Local Authority Districts by 2020.

# Inequalities Begin from Birth



# Health Inequalities Plan actions grouped under 5 Strategic Priorities

- ***Strategic Priority 1:*** Address the underlying determinants of health
- ***Strategic priority 2:*** Improve access to high quality public services for people with poor health and well-being
- ***Strategic Priority 3:*** Engage communities and individuals, supporting them to improve their health through the health and well-being choices they make
- ***Strategic Priority 4:*** Improve opportunities for children, young people and families
- ***Strategic priority 5:*** Improve and share data and intelligence on health and well-being

# **Health Inequalities National Support Team (HINST) 21<sup>st</sup> MAY 2009**

- *“...congratulated partners in Wirral for their good progress and impressive overall approach to tackling health inequalities.”*
  
- *“Health Inequalities Action Plan .... incorporates all the recommendations made by the HINST in their visit in January 2009.”*

# Closing the Gap

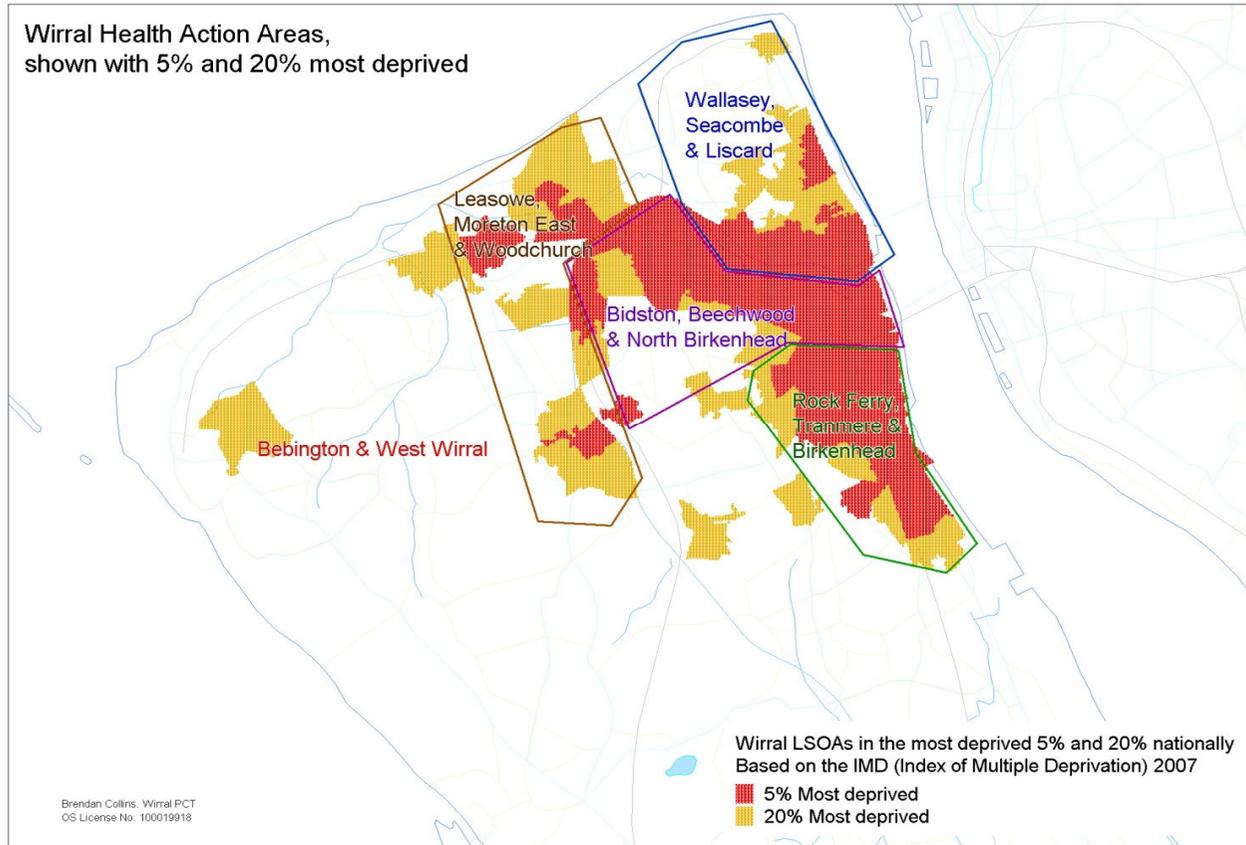
## Wirral and England

- Whilst life expectancy (measured by All Age All Cause Mortality) is increasing in Wirral it is not increasing at the same rate as England as a whole
- When the HINST visited in January 2009 the latest data showed that Wirral was not on track to meet the 2011 life expectancy target
- However in May 2009 the HINST endorsed the Health Inequalities Plan and concluded :  
*“Wirral is very close to succeeding in meeting their local target in closing the gap in life expectancy at birth between the spearhead areas and the rest of England (2010 target). A further concerted effort should help to close the remaining gap”*

# **The ‘concerted effort’ includes:**

- Health Action Area programme
- Ambitious alcohol treatment programme
- Cardio – vascular disease (CVD) screening programme
- Combat excess winter deaths – ‘healthy homes’

# Health Action Areas



# Health Action Areas

Focus on the areas of greatest health needs with additional resources to supplement universal provision in order to 'level up' health outcomes

- Neighbourhood based team of health & wellbeing advisors and health trainers working alongside primary care and community staff
- Systematic 'case finding' outreach work to identify those at risk but not in touch with services
- Person/family centred 'one stop shop' approach to alcohol, obesity, tobacco, screening, worklessness, mental wellbeing
- £200k annual budget for 'micro commissioning' of programme of local activities identified by local people taking place 'on the doorstep'
- 'Health Challenge Wirral'

# Alcohol treatment programme

- £2M Investment in a comprehensive pathway from population wide prevention to acute services for liver disease
- Alcohol intervention highlighted through modeling as having most impact to close the gap within Wirral for men (also contributes to CVD and cancer)
- Builds on success of 'excellent' rated drugs treatment programme
- Feedback from NST:  
*"Good progress – alcohol admissions reducing and current performance is better than the planned trajectory."*



The what? alcohol campaign commenced in March 2009. The target audience is adult drinkers, especially those drinking at hazardous and harmful levels.

The campaign objectives are:

- To enable people to access help and advice about alcohol
- To improve knowledge about alcohol related risks
- To promote behaviour change
- The campaign components include a credit card leaflet; alcohol unit calculators and self-help booklets. Outdoor media include posters, bus advertising; bank ATMs; 'LIFE Channel' videos in GP practices and health centres; and a what? branded taxi.
- The impact of the materials will also be enhanced by the promotion of the website, community events and local broadcast media coverage.

# CVD screening programme

- CVD highlighted through modeling as having most impact in the short term to reaching the 2011 target
- Promotion through tape-measures to every household
- Tripled investment in systematic screening of over 40s for risk of premature deaths and advice and treatment programme
- 'Hard to reach' supported by additional Health Advocates within in Health Action Areas
  
- Feedback from NST:  
*"NHS Wirral has developed an ambitious programme on CVD including a CVD Local Enhanced Service (LES) with an incentivised exponential scale to increase registration."*

# What's the problem?

- Diabetes, heart attack, stroke, some cancers
- Low self-esteem and depression
- Arthritis
- Gallstones
- Gout
- Limited job opportunities
- Poor quality of life
- Low aspirations



# Combating excess winter deaths

- Partnership work to identify people at risk due to cold and damp housing
- Healthy homes initiative to provide heating, insulation etc
- Links to flu vaccination scheme

Feedback from NST:

- *“Partners in Wirral are well placed to undertake a systematic approach to reducing seasonal excess deaths.”*

# Monitoring performance

- Life expectancy (measured by All Age All Cause Mortality) is a key indicator for:
  - Wirral Council Corporate Plan
  - NHS Wirral
  - Local Area Agreement (LAA)
- It is closely monitored on a monthly and quarterly basis and verified annually
- The individual programmes which contribute to AAACM (alcohol, health inequalities, smoking, CVD, COPD, cancer and mental health) each have a project plan and evaluation framework. They are closely monitored by NHS Wirral and where appropriate by the LSP Executive.