

WIRRAL COUNCIL

HEALTH AND WELL BEING OVERVIEW AND SCRUTINY COMMITTEE:
8 SEPTEMBER 2009

REPORT OF THE JOINT DIRECTOR OF PUBLIC HEALTH, WIRRAL

HEALTH INEQUALITIES PLAN

Executive Summary

The Wirral Health Inequalities Plan (The Plan) has been approved by Cabinet, Wirral Strategic Partnership and NHS Wirral Professional Executive Committee. It was first drafted at the end of March, following a National Support Team for Health Inequalities visit to Wirral in January 2009. From October, quarterly monitoring reports will be produced. In the interim, a presentation has been prepared for the Committee to demonstrate the interim progress that has been made to date (April - August 2009).

1 Background

- 1.1 Wirral has well documented inequalities, between affluent and more deprived areas of Wirral and between some specific population groups. An overarching measure of inequality is the difference in life expectancy between Wirral and the rest of England. This is reflected in a national indicator to reduce this gap by 10% by 2010. An additional local indicator has been set by NHS Wirral, to reduce the difference in all age all cause mortality (deaths) between the whole of Wirral and the most deprived areas by 2013.
- 1.2 Supported by a Healthy Communities Peer Review by I&DeA (April 2008) and the Department of Health National Support Team for Health Inequalities (January 2009) evidence of the high impact activities required to achieve reduced health inequalities was produced. This was collated together into a Health Inequalities Plan (March 2009). The Plan was endorsed by Cabinet and the Local Strategic Partnership (LSP) Executive in July 2009 and is now being implemented and monitored. Quarterly monitoring reports will be produced for the Health and Well-being Partnership Co-ordination Group, the group with lead governance responsibility, from October 2009.

2 Interim progress

- 2.1 A presentation has been prepared for the Health and Well-being Overview and Scrutiny Committee on the progress that has been made on implementing the Health Inequalities Plan between April and August 2009. This is shown under the headings of each of the five Strategic Objectives. This includes progress on implementing actions that will impact on health inequalities in the short (2011), medium (2013) and long term (2025).

3 Financial Implications

There are no financial implications identified within this report or within the presentation.

4 Staffing Implications

There are no staffing implications identified within this report or within the presentation. However, the presentation does recognise the work of staff in partner agencies to implement the plan.

5 Equal Opportunities Implications

The Plan aims to reduce inequalities by tackling the issues and barriers that lead to some people experiencing poorer health and well-being outcomes.

6 Community Safety Implications

There are no community safety implications identified within this report or within the presentation. However, the presentation does recognise good progress made by the Community Safety Partnership to reduce road traffic incidents that contribute to reduced life expectancy.

7 Local Agenda 21 Implications

There are no Local Agenda 21 implications identified within this report or within the presentation.

8 Planning Implications

There are no planning implications identified within this report or within the presentation.

9 Anti Poverty Implications

The presentation outlines early progress that is being made to support people that are on incapacity benefit or at risk of losing employment.

10 Social Inclusion Implications

The presentation outlines early progress that has been made to engage communities and individuals and support them to improve their own health.

11 Local Member Support Implications

The presentation demonstrates that The Plan prioritises service improvements and support for people with poor health and well-being. This

is leading to improvements being targeted to groups and geographical areas rather than equally applied throughout Wirral.

12 Health Implications

This presentation demonstrates that early progress is being made against all the five Strategic Objectives that will lead to improved health and well-being and reduced health inequalities.

13 Background Papers

The Health Inequalities Plan has previously been circulated.

14 Recommendations

The presentation will outline the progress that is being made to deliver the Strategic Objectives in The Plan. It is recommended that:

- (1) The Committee note the progress that has been made since April 2009 to implement The Plan
- (2) The Committee ask for further reports to be made available once the formal quarterly reports are produced from October 2009.

Marie Armitage
Joint Director of Public Health, Wirral

Sue Drew
Deputy Joint Director of Public Health, Wirral
Tel 0151 651 3914
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