North Tyneside Council Report to Audit Committee Date: November 2022

Title: Health Inequalities Corporate Risk

Report from Service

Public Health/Corporate Strategy

Area:

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Executive

Wards affected: ALL

PART 1

1.1 **Executive Summary:**

The health inequalities that existed prior to the COVID-19 pandemic have subsequently been amplified and more recently it is also widely acknowledged that the current rise in the cost of living is likely to have a disproportionate impact on some of our communities in North Tyneside.

If appropriate measures are not put in place, residents living with existing disadvantage may continue to suffer from poorer health outcomes and are also more likely to die at a younger age than residents living in more affluent areas of the borough. The high burden of disease in some of our communities generates higher use of health and social care services and leads to higher unemployment and lower productivity. There is therefore both a moral and economic imperative to tackle health inequalities so that all our residents have an equal chance to live long, healthy and happy lives.

A corporate risk attached in appendix 1 has been agreed. The key mitigation for this risk is delivering the Joint Health and Wellbeing 'Equally Well' Strategy which aims to tackle health inequalities and is North Tyneside's high level strategic plan for improving the health and wellbeing of our population. Progress against the ambitions of the strategy is monitored at each Health and Wellbeing Board meeting. This report sets out the details of the controls in place to mitigate the risk to the Authority.

1.2 Recommendation(s):

It is recommended that the Audit Committee note the contents of this report and endorse the approach taken to tackle health inequalities.

Council Plan and Policy Framework 1.3

This report relates to all the five key themes in the Our North Tyneside plan as addressing the causes of health inequalities will help create a North Tyneside that is thriving, family-friendly, caring, secure and green.

1.4 Information:

1.4.1 Background

Health inequalities are the unfair and avoidable differences in health across the population and between different groups within society.

These unfair differences are:

- Not random, or by chance, but largely socially determined and
- Not inevitable

The issue of health inequalities is not new, but the moral imperative for addressing them was reinforced by the COVID-19 pandemic, which exposed and widened the pre-existing inequalities. In addition, the current rise in the cost of living is amplifying inequalities across communities.

1.5. Mitigations

1.5.1. **The Joint Health and Wellbeing 'Equally Well' Strategy** to tackle health inequalities is North Tyneside's high level strategic plan for improving the health and wellbeing of our population.

The overall vision for <u>Equally Well</u>: A <u>Healthier</u>, <u>Fairer Future for North Tyneside</u> (2021-2024) is to 'Reduce inequalities in North Tyneside by breaking the link between people's circumstances and their opportunities for a healthy, thriving and fulfilled life'.

The Health and Wellbeing Board agreed to focus on the areas that have the biggest impact on people's health and wellbeing:

- The wider determinants of health
- Our health behaviours and lifestyles
- An integrated health and care system
- The places and communities we live in, and with

The approach within this strategy and implementation plan is based on the up-to-date evidence of how best to effectively reduce inequalities and is informed by the considerable work led by Sir Michael Marmot and the Institute of Health Equity.

As outlined in the Strategy, in the past, there has been a tendency to focus primarily on single drivers of health rather than considering the complex interdependencies.

Therefore, partners have committed to taking a population health approach which means fundamentally changing the way we work and coming together as a whole system to tackle specific challenges.

Across the system we will consider critical stages, transitions, and settings where effective place-based action is required, using a combination of 'civic level', 'service based' and community interventions

The implementation plan is based on the up-to-date evidence of how best to effectively reduce inequalities. Senior Leaders across organisations in North Tyneside have developed the implementation plan in partnership for each of the strategy priorities as outlined below.

- 1. Give every child the best start in life
- 2. Enable all children, young people, and adults to maximise their capabilities and have control over their lives
- 3. Create fair employment and good work for all
- 4. Ensure a healthy standard of living for all
- 5. The places and communities we live in and with
- 6. Our lifestyles and health behaviours
- 7. An integrated health and care system

It is acknowledged that tackling health inequalities requires a long-term commitment and solely relying on changes in data such as life expectancy will take longer than the life of this strategy.

The multi-agency implementation plan outlines actions and expected outcomes in Year 1, in addition to presenting the expected longer-term outcomes over the strategy's four-year duration. Key performance indicators to measure progress are also highlighted for each priority.

The governance structure outlined in Table 1 will give the Health and Wellbeing Board assurance that each key impact area is being considered by a multi-agency partnership. Key indicators have been selected to measure progress, assess trends and monitor progress to reducing inequalities.

At each Health and Wellbeing Board throughout the year two themes will report back progress against actions, key activity, performance indictors and trends.

1.5.2. Shared priorities across the system

North Tyneside Council along with partners across the NHS have a set of shared priorities which inform planning and investment. The priorities of the Health and Wellbeing Board partner organisations reflect the refreshed JSNA and the new Health & Wellbeing Strategy.

The new local arrangements in the NHS being delivered by the Integrated Care System and Integrated Care Board also reflect our shared priorities. The chief executive of North East and North Cumbria, ICP, Samantha Allen spent a full day in North Tyneside in October meeting the Mayor and Senior Leaders to fully understand the shared priorities and ambitions for North Tyneside.

All Integrated Care Partnerships (ICPs) are required to publish an Integrated care Strategy by December 2022 and North Tyneside sent our North Tyneside Plan, JSNA and Equally Well Strategy in addition to other key strategies to help inform the draft ICS Strategy.

Table 1: Governance Structure

Governance structure as agreed by the LA, ICB and Trust leads for the key priorities within the health and wellbeing strategy						
Best start in life	Maximising capabilities of children, young people and adults	Fair Employment and good work for all	Ensuring a healthy standard of living for all	The places and communities we live in and with	Our lifestyles and healthy behaviours	An integrated health and care system
Leads:	Leads:	Leads:	Leads:	Leads:	Leads:	Leads:
Wendy Burke, Janet Arris, Jill Harland	Julie Firth Janet Arris/Anne Foreman Ruth Auten	John Sparkes Gary Charlton Ruth Auten/Kate Thomson	Jacqueline Laughton, Gary Charlton, Jill Harland	Sam Dand Gary Charlton Jill Harland	Wendy Burke Gary Charlton Jill Harland	Julie Firth / Eleanor Binks Anya Paradis Ross Wigham TBC
Children and Young People's Partnership	Children and Young People's Partnership	Employabilty Strategy Group	Poverty Partnership	Safer North Tyneside Partnership Wallsend and North Shields Masterplan Climate Change Partnership Culture Partnership	Tobacco Alliance Healthy Weight Alliance Drugs Alliance Alcohol Partnership	NENC Integrated Care Board Place Based arrangement for North Tyneside (details are yet TBC)

1.5.3. Health and Wellbeing Board meetings

The Health and Wellbeing Board meets 6 times a year and is well attended. A refresh of the membership has taken place and is due to be signed off at the Health and Wellbeing Board meeting on the 10 November. The new members include a Business Representative, Regeneration and Education representatives, which will strengthen the Board's approach to tackling inequalities and help mitigate the risk.

1.5.4. Integration of commissioning arrangements.

A joint people-based commissioning function across Adult Social Care, Children, Young People and Learners and Public Health is well established focusing on outcomes-based population commissioning.

Moving forward there is a clear priority to develop stronger joint commissioning frameworks across health and social care to improve community provision with the newly formed ICB and the place based arrangements, which will strengthen North Tyneside's approach to tackling inequalities together.

1.5.5. Community engagement

The Health and Wellbeing Board has a policy on engagement which supports delivery of the Health & Wellbeing Strategy across the whole partnership. Additionally, a representative from Healthwatch and VODA attend the Board which supports consultation and engagement.

This year's State of the Area Event brings together representatives from the council, partners, the private sector, the community and voluntary sector and our residents. This year stakeholders from around North Tyneside will focus on progress in the first year of the Equally Well Strategy and consider additional pressures due to the rising cost of living. This presents a further opportunity to look at our successes and to discuss how to tackle any key challenges identified and further mitigate risk.

1.5 Appendices:

Appendix 1: Health inequalities risk

1.6 Contact officers:

Wendy Burke, Director of Public Health, 0191 643 2104 Jacqueline Laughton, Assistant Chief Executive, 0191 643 5724 Rachel Nicholson, Senior Public Health Manager, 0191 643 8073

1.7 Background information:

The following background papers/information have been used in the compilation of this report and are available at the office of the author:

- Equally Well: A Healthier, Fairer Future for North Tyneside (2021-2024)
- Equally Well Implementation plan (2021 -22)

PART 2 - COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

2.1 Finance and other resources

Any financial implications arising from the delivery of the implementation plan to deliver Equally Well, North Tyneside's Health and Well Being Strategy will be met from existing budgets.

2.2 Legal

The Authority is required to prepare a joint Health and Wellbeing Strategy for the Borough through the Health and Wellbeing Board, under section 116A of the Local Government and Public Involvement in Health Act 2007.

Delivering the Joint Health and Wellbeing Strategy supports the Health and Wellbeing Board's duty under Section 195 of the Health & Social Care Act 2012 to encourage partners to work closely together and in an integrated manner for the purpose of advancing the health and wellbeing of the people in the area.

2.3 Consultation/community engagement

Regular consultation via the Health and Wellbeing Board through partnership reports.

2.4 Human rights

There are no human rights implications directly arising from this report.

2.5 Equalities and diversity

In undertaking the development of the Joint Health and Well Being Strategy and implementation plan, the aim has been to secure compliance with responsibilities under the Equality Act 2010 and the Public Sector Equality Duty under that Act.

2.6 Crime and disorder

There are no crime and disorder implications directly arising from this report.

2.7 Environment and sustainability

The place and environment we live in plays a vital role in both improving and protecting the health and wellbeing of our communities. A key theme in addressing and reducing health inequalities within the Equally Well strategy is to create and develop healthy and sustainable places and communities.