

Marmot workshop Cheshire East

09:30-11:30 26th November 2021

Key points for each question (see appendix for verbatim nearpod contributions)

What additions/exclusions should be made to the list of indicators?

- Opening up the social value local employment and local procurement indicators to other Anchor Institutions, such as local authority as well as the NHS
- Reduction in long term unemployed and reduction in disability benefits achieving work
- Indicator on strength of the voluntary sector, currently NCVO data available but more data could be gathered within Cheshire and Merseyside
- Possibly an indicator related to the quality of places such as those used by the Thriving Places Index
- Access to green spaces, data collected for COVID but may not continue this needs to be checked

What are the key local priorities related to health inequalities in Cheshire East?

- Good jobs but also enough entry level work for those without skills but importantly the capacity to build from the entry level positions
- Availability and affordability of housing, one of the housing issues in Cheshire East is individuals being able to get into the private renter sector
- Housing solutions for those with complex needs
- Allocation of social housing which is close to people's own communities or with decent transport links
- Fuel poverty in both urban and rural areas. Lots of older housing in Cheshire East and no gas supply in certain areas
- Rural poverty for homeowners. Households which are asset rich, cash poor, often older people
- Ensuring a strong voice for the community and particularly ethnic minority communities.
- Building good and better relationships with the voluntary sector
- Building trust in communities and gaining understanding of underrepresented groups, education is key
- Better representation in PPGs (Patient Participation Groups) and at the broader level
- Maintaining a sense of proportional universalism when looking at the wider sub-regional requirements, not targeting the most deprived areas and allowing currently thriving areas to fall behind

What actions are working to reduce health inequalities in Cheshire East? What should we be doing more of?

- Social value work which is enabling communities to help themselves in ways in which they may have not been able to do before.
- The tartan rug is, whilst not perfect, a good piece of work and a very helpful starting point to understanding Cheshire East, but better local and hyper-local data would be beneficial
- Building connections across sectors, business and industry, voluntary and community, social enterprise, and public sector. The Cheshire East social action partnership working well here. Keeping these partnerships going for the long term.
- The Portage home visiting scheme from the pre-school learning alliance was cheap and effective in preparing under-5s for school
- Increasing lifeskills of children and young people in schools and inspiring career aspirations of young people
- Learning good and best practice from the successes of other areas
- Dealing with key root issues to stop the same children and families repeatedly returning to services
- Where things work well it tends to be on the initiative of one or two interested individuals who drive things forward, the challenge is finding those people to work in underserved areas
- Finding and supporting the underserved communities
- Move away from short term interventions to long term sustained approaches such as the increasing equalities commission which will publish a 5 to 10-year plan, in Crewe in the summer of next year. However, with this targeted approach it is important that the green squares on the tartan rug remain green and do not fall behind

Nearpod Contributions

What additions/exclusions should be made to the list of indicators?

- LAs can provide a wealth of Social Value data
- Important to acknowledge that although as a whole Place Cheshire East may be performing well, there are communities facing significant inequalities in our urban and rural areas. That is where our focus needs to be.
- Indicators of place quality - access to greenspace (<https://www.fieldsintrust.org/green-space-index>), housing quality, overcrowding etc. Some ideas and examples here: https://www.thrivingplacesindex.org/docs/TPI_2021_Indicator_List.pdf

What are the key local priorities related to health inequalities in Cheshire East?

- ensuring that our BAME/Minority community is understood in relation to inequalities and what their experiences of services are and how we can improve this

- Re indicators and how the role of the CVS is recognised - in a previous commissioning organisation, we set ourselves the goal of increasing our spend with local voluntary sector groups.
- Tackling poor mental health
- Ensuring that there is a strong voice of the community in discussions. This is being looked at through the Increasing Equalities commission.
- Correlation between health inequalities and lower physical activity levels. Increase those levels - access to parks, greenspaces, promotion of physical activity at school and at home, advice in early years about benefits of physical activity.
- Focussing on the geographic areas where the concentrations of health inequalities are high and working across organisations and with partners to take a holistic approach to making a difference in those areas.
- There are a number of priorities that have been included within our Social Value Framework (including spend with the VCFSE sector)
- A governance infrastructure for more specific and localised areas, even to ward level. Very difficult to implement solutions and interventions in a borough wide forum. Co-ordination of support, information and knowledge to help the community engage
- In terms of VCFSEs its also about strategically engaging the sector which is close to communities and understands local needs to influence policy, strategy and service design - and underpinning this developing VCFSE sustainability/ quality/ impact
- Reducing gap in attainment facing children accessing free school meals.
- Addressing lifestyle behaviours such as physical inactivity excess weight and smoking
- Across a Cheshire & Merseyside ICS, how when tackling inequalities in health, will we guarantee an important focus on the Cheshire East Place?
- Using the data and insight to inform comms and behavioural change tactics. What's the public role in reducing HIs? Community resourcefulness is key.
- Building social capital by increasing the scope/scale of the voluntary sector and volunteering
- NHS funding into YP Mental health is quite high at the moment, which is really positive
- There is an increasing amount of investment in VCFSE organisations. For children and young people in particular in mental health. The local Integrated Care Partnership also has representation here at board level from the Social Action Partnership.
- We have a strong Community Development team in Cheshire East (which is a strength/asset) Our Connected Communities strategy has identified a number of local priorities
- Cheshire East Connected Communities Strategy
<https://www.cheshireeast.gov.uk/council-and-democracy/council-information/consultations/connected-communities-strategy-engagement.aspx>

What actions are working to reduce health inequalities in Cheshire East? What should we be doing more of?

- Our 'Increasing Equality Commission' is co-ordinating work, initially focussed on Crewe, establishing base line data, experiences of residents, key issues locally, opportunities to make a difference, joining up infrastructure projects, interventions.
- We have been working hard over the past 2 years+ to embed and maximise social value in Cheshire East. This has grown into developing CEC as an Anchor. This has been a massive journey, but we still have a long way to go.
- The Commission will be publishing a Strategy next year.
- Each Care Community is focussing on the prevalent health issues in their area and great work going on across the Partnership across each of the priority workstreams and enablers.
- We do have a community JSNA that is building some community data to support the JSNA
- We are building connections across sectors (Social Value) via our Social Value Award and Cheshire East Social Action Partnership
- We are just starting a piece of work looking at healthy ageing and reducing inequalities in rural areas.
- Our Place Five Year Plan and Joint Health and Wellbeing Strategy both have reducing inequalities as central to our ambitions. So there is strategic recognition of the challenges faced and need to address these in partnership.
- With links that exist between physical inactivity & inequalities we are working with the HCP to develop a whole systems approach to PA. This has and will include further engagement and consultation with many CE based orgs to make it relevant to place
- Have an integrated lifestyle service "One You Cheshire East" which actively works to increase healthy lifestyle behaviours - this specifically targets areas of deprivation
- The Green spaces project is really exciting and should make a big difference
- The work of our People Helping People programme through the Covid pandemic has delivered community interventions to support our vulnerable communities. This has brought communities together and presents an opportunity to create resilience
- Need to do more awareness raising of how to consider potential impacts on health inequalities (good and bad) of all plans, developments, service changes etc

What isn't working? Do we need to stop doing anything?

- A real focus on the first 1001 days across all partners (if not already in place)?
- We tend to lose focus and not sustain initiatives (time limited projects or short-term funding), moving on to other things. As has been said a long term commitment is needed to really make the necessary difference.
- We are getting understandably sidetracked by structures and future form rather than function and delivery of making a difference to people's lives

- Optimism is good but must be backed by robust evaluation methodology. How do we measure what is 'good', what is 'working well' what HAS worked well'.

Attendee list (retrieved from Teams chat/internet so may not be 100% accurate)

Full Name
Christopher Allman
Tom Appleby
Paul Bayley
Tammy Boyce
Shelley Brough
Cllr Carol Bulman
Owen Callaghan
Caroline Whitney
Karen Carsberg
Cllr Janet Clowes
Anna Collins
Cllr Sam Corcoran
Nik Darwin
Derice Richards
Katy Ellison
David Holden
Colin Jacklin
Rebecca Jackson
John Adlen
Muktadir Khan
Guy Kilminster
Louise Barry
Jo McCullagh
Cllr Arthur Moran
Paul Colman
Stephen F. Peters
Amanda Ridge
Roger Elliott
Katherine Sheerin
James Sumner
Nichola Thompson
Jayne Traverse
Andrew Turner
Matt Tyrer
Scarlet Willis
Sheila Wood
Deborah Woodcock
Sheila Woolstencroft