

Appendix 2

Building Back Fairer in Cheshire and Merseyside: Interim Actions for Consideration

1 A Social Determinants of Health Approach

2022-2027

- Ensure social determinants (Marmot 6) are at the heart of interventions and policies in Cheshire and Merseyside including in the healthcare system
- Develop and extend proportionate universal approaches – interventions to reduce inequalities are universal, but with a scale and an intensity that is proportionate to the level of disadvantage. Adopting a proportionate universalist approach in Cheshire and Merseyside requires actions that do not focus only on the most disadvantaged. To reduce the health gradient requires actions across the population, with additional efforts and actions in the most deprived communities.
- Cheshire and Merseyside Clinical Networks to work in harmony with the ICS and Population Health Board to coordinate prevention activity across the system to improve population health, supported by dedicated resources and a Health Inequalities Team.

2 Improving Inequalities Leadership

2022-23

- Immediate opportunities for leaders to request action, map service provision, identify actions to address the social determinants of health including:
 - Food insecurity – who are the service providers locally? How can primary and secondary care best refer to these services? How can these services be more preventative and not based on emergency provision?
 - Environments and social cohesion
 - Fuel poverty - who are the service providers locally? How can primary and secondary care best refer to these services and support people to keep warm especially in the face of escalating fuel costs?
- Develop a deliberate and specific action plan, with a timeline, to address health inequalities in the Population Health Board's plan to ensure that inequalities will not just feature but be addressed.
- ICS – a Consultant in Public Health Medicine and supporting team to work in partnership with the medical director and nursing director and the DsPH to lead on health inequalities.
- Health inequalities should be integrated within all HCP strategies to support a system-wide approach, coordinated by a health inequalities committee.
- Begin conversations with non-NHS partners on how they can adopt Cheshire and Merseyside's Marmot indicators in their own organisations (e.g. Local authorities, businesses, VCF sector).
- Develop a network of chief executives, in the NHS and beyond, who are committed to reducing inequalities.
- Work with leaders throughout the NHS to adopt equity principles and actions, public health cannot do this alone.
- Ensure the Prevention Pledge and Making Every Contact Count incorporate equity and the social determinants of health, embed this in ICP contracts and plans.

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2023-2027

- **Embedding practice.** Consistently share local best practice to reduce inequalities and update regularly. Work with ICPs to facilitate the roll-out for local best practice, enable ICPs to know where best practice is happening and how they can adopt.
- Collect and monitor social determinants data from patients in primary and secondary care, use data to influence services offered and how delivered
- Integrate health equity in all policies in all work commissioned
- Learn from Health and Wellbeing Boards and what has/not worked to address inequalities since they were established. What has enabled partnership working, what are the barriers

3 Strengthening Partnerships for Health Equity

2023-2027

- Identify leaders and organisations addressing the social determinants of health, such as education, employment and housing and work together to create short and long term strategies to improve the social determinants of health

4 Working with Communities

2022/23

- Involve people with lived experience in the development of health inequalities assessments and remedies at every level, e.g., through the creation of community engagement panels aligned to each ICP.

2023-2027

- Co-create solutions and involve communities in decisions about priorities and actions

5 Developing Anchors and Social Value Organisations

2022/23

- Extend anchor organization approach within NHS and to all other stakeholders including businesses
- Extend anchor approaches to include investing in local communities
- Implement and enforce a 15 percent social value weighting mandatory in all NHS procurement

2023-27

- Anchor Institutions at Place to work collectively as an Anchor System to build community wealth, local training, and employment opportunities.

6 Developing Shared Local Indicators

2022/23

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- Develop, alongside partners, a health inequality indicator set, based on the social determinants of health which is shared by all stakeholders.
- Communicate annual indicator outcomes to local places, public

2023-2027

- Review and renew health inequality indicators every five years

7 Role of Local Government

2022/23

- Identify how Councillors on Health and Wellbeing Boards can better communicate the social determinants of health to other councillors.
- Appoint public health consultant within LCRCA and register LCRCA as a training location to provide future opportunities for public health registrars . Equally, a public health consultant should be appointed to lead the health inequalities programme for Cheshire with links to Local Economic Partnership.

2023-2027

- Develop working groups for the social determinants of health with Chief Executive leadership
- Developed social determinants of health indicators across local authorities and NHS providers.
- Strengthen partnerships across local system with health care, local economic plans, and strategies.

8 Strengthening the Role of Business in Reducing Health Inequalities

2022/23

- ICP to make contact with local large and SMEs to make the case for health equity and the social determinants of health.

2023-2027

- Work with local businesses to extend social value policies and focus on principles to reduce health inequalities.
- Take actions to be a better employer by the end of the 2022/23 financial year and embed Anchor values into financial plans from 2023/24.
- Communicate actions taken to local communities.

9 Implement Health Equity in All Policies

2022/23

- Health equity assessment of Green Plan to reach Net Zero

2023-2027

- Develop and implement Health Equity in all Policies across all stakeholders and partners

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- All local government, NHS strategies and decisions in the HCP, ICP, HWB and PCNs assessed for health equity impacts.

10 Strengthening Community Resourcefulness

2022-2027

- HCP lead the development of concepts of community resourcefulness and bring the whole system together to build *community resourcefulness*.