



# CHESHIRE EAST HEALTH AND WELLBEING BOARD

#### Reports Cover Sheet

Title of Report:	All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029
Report Reference Number	HWB69
Date of meeting:	21st January 2025
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Health & Wellbeing Board Lead:	Helen Charlesworth-May

#### **Executive Summary**

Is this report for:	Information	Discussion X	Decision	
Why is the report being brought to the board?	To raise awareness of the Board of this new Cheshire and Merseyside Health and Care Partnership Plan, its relationship to the local Cheshire East strategic approach set out in the Cheshire East Joint Local Health and Wellbeing Strategy 2023-2028 and the 'Blueprint 2030' and the commitments that have been signed up to by the Partnership.			
Please detail which, if any, of the Health & Wellbeing Strategic Outcomes this report relates to?	<ol> <li>Cheshire East is a place that supports good health and wellbeing for everyone</li> <li>Cur children and young people experience good physical and emotional health and wellbeing </li> </ol>			
	<ol> <li>The mental health and wellbeing of people living and working in Cheshire East is improved </li> </ol>			
		e and age well, remaining inde dignity in their chosen place 🗆	-	
Please detail which, if	Equality and Fairness 🗆			
any, of the Health &	Accessibility 🗆			
Wellbeing Principles this	Integration 🗖			
report relates to?	Quality 🗖			
	Sustainability			
	Safeguarding			
	All of the above X			

Key Actions for the Health & Wellbeing Board to address. Please state recommendations for	<ol> <li>That the Cheshire East Health and Wellbeing Board note the content of 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029' and the alignment with the Cheshire East Health and Wellbeing Strategy and the 'Blueprint 2030'.</li> </ol>		
action.	<ol> <li>That the Board endeavour to work closely with the Cheshire and Merseyside Health and Care Partnership over the next four years to facilitate achieving our local objectives and contributing to the delivery of the Partnership's Plan.</li> </ol>		
	<ol> <li>That further work be undertaken to understand the implications of a 1% year on year increase in the Cheshire East Place budget going towards the social determinants of health and the promotion of good health (including clarity of definition and baseline).</li> </ol>		
Has the report been	N/A		
considered at any other			
committee meeting of			
the Council/meeting of			
the CCG			
board/stakeholders?			
Has public, service user,	N/A		
patient			
feedback/consultation			
informed the			
recommendations of			
this report? If recommendations are	There will be a clear alignment between regional and local approaches to reducing		
adopted, how will	There will be a clear alignment between regional and local approaches to reducing		
residents benefit?	inequalities and improving health and wellbeing. Over five years population health outcomes will improve and inequalities will be reduced.		
Detail benefits and	outcomes win improve and mequalities win be reduced.		
reasons why they will			
benefit.			

## 1 Report Summary

- 1.1 Operating as a statutory committee since November 2023, the Cheshire and Merseyside Health and Care Partnership (HCP) provides a forum for leaders from Local Authorities, the NHS and other key partners to come together and take collective action. Cheshire East is a member of the Partnership.
- 1.2 The HCP has agreed to target its efforts on implementing the recommendations set out in <u>All Together Fairer: Health equity and the social determinants of health in Cheshire and</u> <u>Merseyside - IHE</u> based on ground-breaking research conducted by Professor Sir Michael Marmot. This report sets out the case for reducing health inequalities and as a 'Marmot Community' the Partnership is committed to improving the health and wellbeing of the population.
- 1.3 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029' sets out at a high level how the Partnership will address the challenges set out by Sir Michael Marmot and the approach to implementing his recommendations. The Partnership Plan is attached as Appendix One.
- 1.4 In drafting the Partnership Plan, consideration was given to the nine Cheshire and Merseyside Health and Wellbeing Strategies. The Partnership Plan aligns well with the

strategic outcomes of the Cheshire East Health and Wellbeing Strategy 2023-2028 and the aspirations of the 'Blueprint 2030', in particular in relation to the emphasis on prevention and the social determinants of health.

1.5 There will be implications for the Cheshire East Place as a partner, in contributing to the delivery of the Partnership Plan. These are outlined below.

#### 2 Recommendations

- 2.1 That the Cheshire East Health and Wellbeing Board note the content of 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029' and the alignment with the Cheshire East Health and Wellbeing Strategy and the Blueprint 2030.
- 2.2 That the Board endeavour to work closely with the Cheshire and Merseyside Health and Care Partnership over the next four years to facilitate achieving our local objectives.
- 2.3 That further work be undertaken to understand the implications of a 1% year on year increase in the budget going towards the social determinants of health and the promotion of good health (including clarity of definition and baseline).
- 2.4 That the Board note that the forthcoming discussions and in due course decisions regarding the recent Devolution White Paper, will influence the direction of travel of the Partnership Plan.

#### 3 Reasons for Recommendations

3.1 To ensure the Cheshire East Health and Wellbeing Board are aware of the Cheshire and Merseyside Health and Care Partnership's Plan, its alignment with the Health and Wellbeing Strategy and the 'Blueprint 2030' and the work that will be required to understand and delver upon the commitments made within the Plan.

#### 4 Impact on Health and Wellbeing Strategic Outcomes:

- 4.1 Cheshire East is a place that supports good health and wellbeing for everyone.
- 4.2 Our children and young people experience good physical and emotional health and wellbeing
- 4.3 The mental health and wellbeing of people living and working in Cheshire East is improved
- 4.4 That more people live and age well, remaining independent; and that their lives end with peace and dignity in their chosen place.
- 4.6 The 'headline ambitions' of 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029' align well with the Joint Local Health and wellbeing strategic outcomes, in particular the emphasis upon prevention and the social determinants of health and wellbeing and the ambition to put more resource into reducing inequalities and improving population outcomes at a neighbourhood (Care Community) level; continuing

to focus upon helping to alleviate poverty and a focus on health equity in all policies and service provision.

### 5 Background and Options

- 5.1 Following the publication of 'All Together Fairer: Health Equity and the Social Determinants of Health' in 2022, the Cheshire and Merseyside Health and Care Partnership and all nine local authority Health and Wellbeing Boards committed to the recommendations in the report, and to work together as a 'Marmot Community'.
- 5.2 The HCP has followed up on this commitment with its newly published 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029'
- 5.3 The HCP is committed to listening to people and communities to harness the knowledge and lived experience of those who use and depend on the local health and care system and to provide an opportunity to improve outcomes and develop better, more effective services removing barriers where they exist. There are specific aims in relation to Carers with a commitment to work in partnership with carers and carer support organisations to develop and implement a Carers Strategic Framework.
- 5.4 Similarly the Plan outlines the key role our communities and the Voluntary, Community, Faith and Social Enterprise (VCFSE) sector plays in contributing to the delivery of a population-based model of care in Cheshire and Merseyside. The Partnership supports these overarching principles when working with our partners, communities and the VCFSE:

• Embedding our communities/partners/VCFSE as key players in our processes of planning, service delivery and re-design, co-designing outcomes to maximise the knowledge, data and expertise to deliver evidence-based solutions.

• Commitment to supporting the VCFSE sector investment, both financially and organisationally and with shared plans - enabling the VCFSE to have the capacity to engage as equal partners.

• Build on existing infrastructure and VCFSE assets through Place-Based Partnership Infrastructure, VS6 (Liverpool City Region) and Cheshire and Warrington Infrastructure Partnership (CWIP).

5.5 The vision of the Partnership is:

We want everyone in Cheshire and Merseyside to have a great start in life and get the support they need to stay healthy and live healthier for longer.

5.6 The mission is:

'We will prevent ill health and tackle health inequalities and improve the lives of poorest the fastest. We believe we can do this best by working in partnership.'

- 5.7 As referenced above, 'All Together Fairer: the Cheshire and Merseyside Health and Care Partnership Plan 2024-2029' sets out at a high level how the Partnership will address the challenges set out by Sir Michael Marmot and the approach to implementing his recommendations. These recommendations have been summarised into three principles within the Partnership's Plan:
  - i. Shifting investment to Prevention and Equity.
  - ii. Anti-Poverty Work.
  - iii. Social Justice, Health and Equity in All We Do.
- 5.8 The content of the Health and Care Partnership Plan is supported by a detailed Delivery Plan (see <u>all-together-fairer-plan-in-word.pdf</u> for the current year's delivery plan) with progress measured via "Beacon Indicators". This plan has also helped to influence the contents of the nine individual Place Partnership Delivery Plans.
- 5.9 There is a summary of the priority programmes of work being run across Cheshire and Merseyside and a series of headline ambitions in relation to:
  - Children and young people
  - Physical activity and healthy weight
  - Housing and health
  - All Together smokefree
  - Work
  - Social value
- 5.10 The Plan also identifies the priorities under each of the principles as set out in the diagram below:

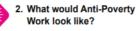
# Rethinking our focus for 2024-29 Our three principles



1. What would Shifting Investment to Prevention and Equity look like?

We will:

- Increase the budget going towards the social determinants of health and the promotion of good health by 1% every year over the next 5 years.
- Develop and implement an allocation strategy that supports the best use of resources to reduce inequalities and improve population outcomes at a neighbourhood level.
- Ensure that the resourcing and delivery of services is universal at scale, and at an intensity proportionate to need.



#### We will:

- 1. Organise and promote activity that alleviates the immediate impacts of poverty.
- Organise and promote activity that supports people to access the benefits to which they are entitled.
- Promote activity that increases access to sustainable employment or work-related opportunities.
- Tackle in-work poverty by requiring the implementation of the Real Living Wage and fair employment practices across Health and Care Partnership Organisations and their contracted services.



3. What would Social Justice, Health and Equity in All We Do look like?

 Demonstrate <u>Social Justice</u>, health and equity in all policies and service provision.

"Equity is the absence of unfair and/or avoidable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other dimensions of inequality. Health is a fundamental human right. Health equity is achieved when everyone can attain their full potential for health and well-being", World Health Organisation

For example:

- In our planning policies altering physical surroundings, urban layouts, building design and renewal, housing quality, affordability and density, parks and recreation facilities, roads, paths and transport and the provision of other amenities, such as seating and toilets
- Work to support transport arrangements to increase equity in the ability to access services e.g. taking mobile services to communities.
- 5.11 The Plan incorporates case studies from the nine Places (including Cheshire East).
- 5.12 The Health and Care Partnership considered all nine Cheshire and Merseyside Joint Local Health and Wellbeing Strategies in the drafting of the Partnership Plan and this has ensured a good alignment with our Cheshire East Strategy outcomes. In addition, the

priorities outlined in the diagram above will help to underpin some of the aspirations of the Cheshire East 'Blueprint 2030', in particular in relation to the themes of 'Healthy Households' and 'Healthy Neighbourhoods', with the focus upon prevention, the social determinants of health, tackling poverty and building social justice, health and equity into policies and service provision across the Cheshire and Merseyside system.

- 5.13 The Health and Wellbeing Board should be aware of the high-level Health and Care Partnership Plan and how within Cheshire East we can contribute to the Partnership's achievement of its vision and mission and the implications of this (for example shifting resource into the social determinants of health to support prevention and the promotion of good health) locally. The Board should also be mindful of our relationship with the Partnership and how we hold it to account for the delivery of the Plan. It will be important that the Board also maintains a close working relationship with the Partnership.
- 5.14 Further work will need to be undertaken within the Cheshire East Place partners to look into the actions required to deliver the aspirations of the Partnership's Plan locally (for example increasing the budget going towards the social determinants of health and the promotion of good health by 1% every year over the next five years). Ensuring clarity of definition and a baseline will be the first task, and this will be raised at the Place Strategic Planning and Transformation meeting to agree a means by which to do this.
- 5.15 It should be noted that the recently published Devolution White Paper proposes that Strategic Authorities will have a bespoke duty in relation to health improvement and health inequalities. This will ensure that the Strategic Authorities have regard to the need to improve health, and the need to reduce health inequalities, in the exercise of their functions, and give them a clear stake in improving local health outcomes. This will complement the existing health improvement duty held by upper-tier Local Authorities. In due course this may impact upon how the Partnership's Plan is delivered.

#### 6 Access to Information

6.1 The background papers relating to this report can be inspected by contacting the report writer: Name: Guy Kilminster

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