

Cheshire and Merseyside, NW England: All Together Fairer implementation programme

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About Cheshire and Merseyside

21.7%

England average

vs

28.1%

Cheshire and Merseyside

The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation in England and uses the following indicators as part of its scoring.



? What impact does this have on our people?

Deprivation is a substantial cause of Digital Exclusion

26% of our children (0-15 years) live in poverty

35% of our population are deprived

Reduced quality of life and disability-free years

Increased mental health problems in adults and children

Deaths due to:

- Heart disease
- Cancer
- Respiratory conditions
- Alcohol and drugs

are higher than the England average

Reduced life expectancy

People in the most deprived areas of Cheshire and Merseyside can live 15 years less than those in wealthier areas. Even within Wirral there is a difference in life expectancy at birth of 11-years (women) and 13.8 years (men) between the most and least deprived.

In 2022 ...

- All Together Fairer officially launched May 2022 with a **keynote address** from Sir Michael Marmot and exclusive coverage in **BBC Newsnight**
- We knew we were **doing something different;**
 - All Together Fairer deliberately and specifically focuses on the social determinants of health - the social, economic and environmental conditions in which people are born, grow, live, work and age
 - Shifting to a social determinants of health approach means taking action on the drivers of ill health as well as treating ill health when it is presented in healthcare settings recognising that it is almost impossible to live healthily when in poverty

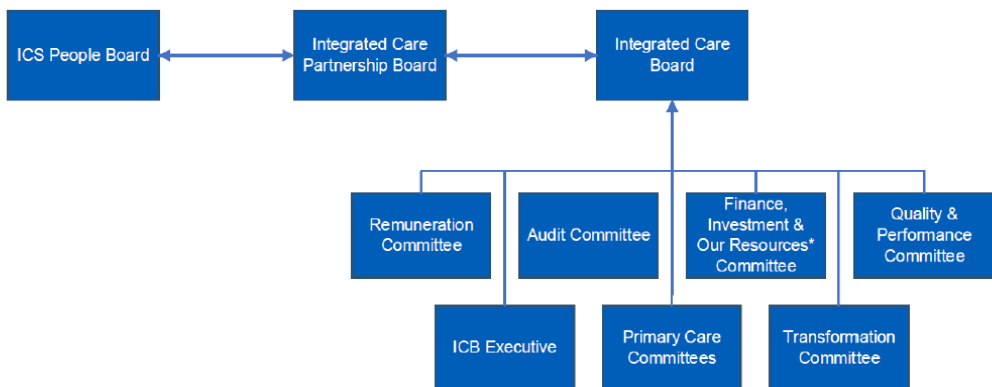


Implementation

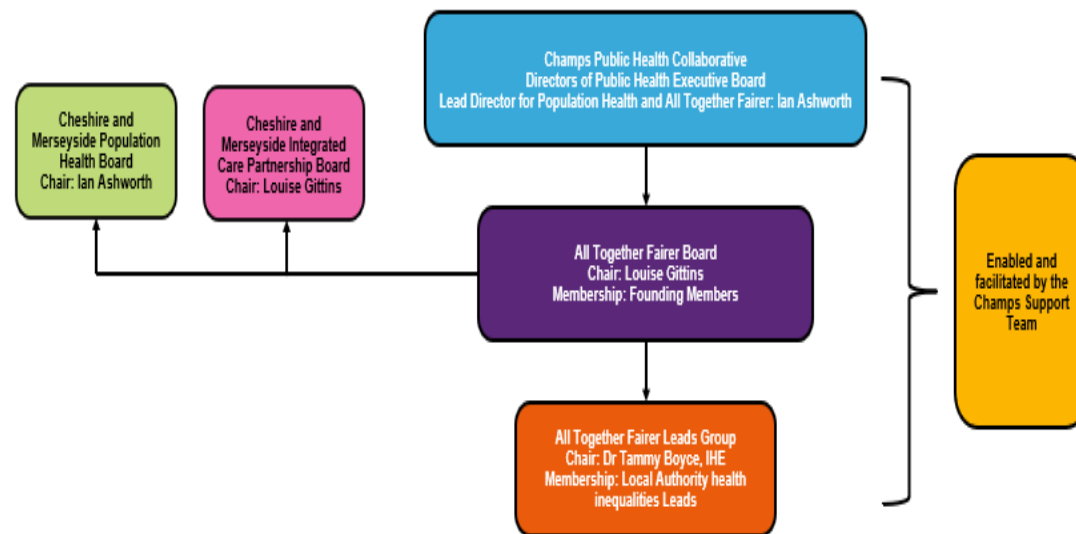
- The IHE All Together Fairer Report is **extensive and comprehensive**. It is **ground-breaking** in setting the agenda on health inequalities for Cheshire and Merseyside.
- A key point in all the IHE reports is that **action is required across all the recommended areas**. There is no one thing that will reduce inequality in health; health equity in all policies is the key.
- Important we make this extensive programme feel doable and not impossible, accessible and not overwhelming and **enabling of action**.

Pillar One – Governance and Accountability

ICS Governance Schematic



* Our resources reflects the importance of the ICB's people, its workforce, to the ICB



- **Partnerships** – Commitment from Cheshire and Merseyside ICS and ICP to embed principles and priorities into strategies, buy-in from Local Authorities
- **Accountability** - Beacon Indicator Set - 22 Indicators to monitor progress in the long term on social determinants of health

Pillar Two – Leadership at all levels

- Building our skilled and energised workforce across all sectors (not just public health) by developing and delivering a **Development Programme on Social Determinants of Health**
 - Key features will be: online platform, engaging workshops, dedicated summer school and curated resources
- All Together Fairer Leads – group developing into a network
- Building on our **communications strategy** to increase engagement within our system and shout from the rooftop about our successes

Pillar Three – Ways of Working

- **Children and Young People** – working with Barnardos and Institute of Health Equity to design a Children and Young People’s Health Equity Framework.
- **Anchors** – revisiting the public health drive behind the programme, linking to other CM initiatives, building on the work with the NHS and beyond to develop the anchor programme scale.
- **NHS Prevention Pledge** – eight Trusts have adopted the Prevention Pledge at an intermediate level with a further nine working towards the adoption of the pledge.
- **Fair Employment Charters**
- **GP-led Deep End initiative**
- **New strategies** –Sefton Child Poverty Strategy, Liverpool Housing and Health programme, Halton Wider determinants programme and more.

Pillar Four – Resources, Financing and Capabilities

- Challenging ...
 - Public sector budgets are under pressure.
 - Much is being done with less.
 - Even in this context there is a willingness to fund this activity
- Capabilities
 - Capability is high and being developed
 - Capacity?
 - System wide leadership is key

Concluding points

- Focus in Cheshire and Merseyside is on the social determinants of health.
 - This is a demonstration of what can be done without full national government backing.
 - Leadership is across the system, complex, has a history ... and there is a will to be collaborative and ambitious.
 - Seeking equity in all policies. We are looking for equity in education, employment, access to green space etc in the knowledge that achieving equity there will bring equity in health.
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- Is it enough?