

**REPORT TO:** Executive Board

**DATE:** 18<sup>th</sup> April 2024

**REPORTING OFFICER:** Executive Director, Adults Directorate

**PORTFOLIO:** Adult Social Care

**SUBJECT:** Health Inequalities Scrutiny Review Report and Recommendations

**WARD(S)** Borough Wide

## 1.0 PURPOSE OF THE REPORT

1.1 This report provides a summary of the evidence provided as part of the scrutiny review of health inequalities in Halton, conclusions of the Scrutiny Group members and recommendations to the Board. The Health Policy and Performance Board agreed area of scrutiny for 2024 is also outlined.

## 2.0 RECOMMENDATION: That

- 1) The report and recommendations be noted
- 2) The Board note the scrutiny topic for 2024

## 3.0 SUPPORTING INFORMATION

3.1 The Health Inequalities topic was approved by the Health Policy and Performance Board in June 2023. Between July and December, a scrutiny group met monthly to receive evidence from several contributors. (Details of the membership and contributors can be found in **appendix 1**). The report/recommendations were agreed by Members at the February 2024 Health Policy and Performance Board.

3.2 The scope of the scrutiny review is detailed below:

*Health Policy and Performance Board will look at **health inequalities** across Halton and **approaches to reduce them**. The scrutiny review will consider:*

- *The current epidemiological distribution of health inequalities*
- *Recent trends*
- *The impact of external forces such as the cost-of-living crisis and COVID-19*
- *Approaches that are being used to address health inequalities through contracts, partnership working and direct provision of services.*

*\*Whilst health inequalities may span the life course, this scrutiny topic review will be concerned with health inequalities from an ADULTS' perspective.*

3.3 The scrutiny review process provided Members the opportunity to gain an understanding of:

- How health inequality is **defined**
- How health inequalities are **measured** through key indicators of public health/health inequality, and where Halton is in relation to regional/national averages
- What the **drivers** of health inequality are
- What the **outcomes** of health inequality are
- Consider the current **good practice, pressures, and emerging issues** in Halton, including **barriers and enablers** to access to specific provisions, service **user experience and outcomes** and the impact of some specific **wider determinants of health**.

3.3 Each evidence area generated several service specific recommendations, however, there were common themes across all areas. In considering the evidence presented, Members propose the following recommendations for action;

3.4

	Thematic area	Recommendation
1	Partnership	Continue to build on relationships with key partners to develop approaches to engage with hard-to-reach cohorts through increasing awareness of the determinants of health inequality, reducing stigma associated with seeking help and developing effective pathways to support - Joining the dots between different agencies working with the different determinants of health inequality and helping people navigate effectively.
2	Communication	Community engagement and profile raising of the breadth of support available should be a priority. Individual service specific plans should be developed to ensure that a universal support offer is communicated. The plan should link existing local and national support for each determinant of health, considering how the most vulnerable and hard to reach cohorts can be informed of support through targeted, multi-channel approaches.
3	Lobbying /involvement in national action	On local issues identified in this report that may require a central solution, such as utilising unclaimed benefits, issues relating to housing and homelessness – Halton Borough Council and its key partners should actively engage in national lobbying and consultations. Members should be kept informed of key issues.
4	Risk Mitigation	Where risks are identified within service specific risk mitigation plans should be put in place – for example where funding models or changes in key partner business models are anticipated to have an impact on what/how services are delivered.
5	Service Specific Action Health Inequality Plan	Throughout this process, and outlined in this report, recommendations have been made that relate to each specific evidence area. These should be considered by service managers as part of business planning, service development and risk management.
6	Funding	Funding of commissioned services that support the

		determinants of health inequalities should be reviewed and reported to HPPB, to better understand the impact of short vs long term funding.
7	Social Prescribers	A request for a presentation on the activities of the ICB commissioned social connectors service to the HPPB so that the Board may better understand the role they play and impact on addressing health inequality in Halton.

## Scrutiny topic for 2024

- 3.5 Several areas were proposed for scrutiny during 2024/2025, with the Health Policy and Performance Board agreeing on the topic area below, for which a topic brief will be developed and presented to Health Policy and performance Board in due course.

*A focus on Community (non-GP) NHS services - This could include one or more of: Northwest Ambulance Service, Learning Disability and Autism, Mental Health, Community Nursing, Podiatry, Urgent Care Centres, Community Therapy, changes to the Musculoskeletal services.*

## 4.0 POLICY IMPLICATIONS

- 4.1 The recommendations outlined in the report should be considered in service development, commissioning and continuous improvement work within each service area.

## 5.0 FINANCIAL IMPLICATIONS

- 5.1 Some of the issues raised within the report, and recommendations, require a central government response (Homelessness and Discretionary Grant allocations).
- 5.2 Any emerging financial/resource implications associated with the recommendations will be analysed as part of established service development, commissioning and continuous improvement protocols.

## 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

### 6.1 Children & Young People in Halton

Whilst the scope of this scrutiny review focused on Adults, the impact of health inequalities starts from birth and across the whole life cycle.

### 6.2 Employment, Learning & Skills in Halton

As highlighted in the report, employment, learning and skills are a key determinant of health inequality in Halton.

### 6.3 A Healthy Halton

Action on health inequalities in Halton is being coordinated by Public Health but extends further than just health interventions. As outlined in the report, social and lifestyle drivers are key determinants of health

inequalities.

**6.4 A Safer Halton**

Social and lifestyle factors are key determinants of health inequalities.

**6.5 Halton's Urban Renewal**

Community assets and the physical environment can facilitate good health and wellbeing, access to health, education, employment and social opportunities.

**7.0 RISK ANALYSIS**

7.1 Failure to take action to address the wider determinants of health could further result in a widening of the health inequalities gap in Halton.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None identified.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None identified