

Report to:	Health and Wellbeing Board	Date of Meeting:	Wednesday 14 September 2022
Subject:	Cities Inequalities Project		
Report of:	Director of Public Health	Wards Affected:	(All Wards);
Portfolio:	Health and Wellbeing		
Is this a Key Decision:	N	Included in Forward Plan:	No
Exempt / Confidential Report:	N		

Summary:

The report provides an overview of the Health Foundation-funded Cities Health Inequalities Project and describes the next steps for consideration of the Liverpool City region engaging with this model going forward.

Recommendation(s):

- (1) The Board are asked to note the contents of the report
- (2) The Board are asked to provide approval to progress discussion and bring further information back to a future meeting.

Reasons for the Recommendation(s):

This is a potentially a significant piece of work for the Liverpool City Region that will make a contribution of the delivery of the Sefton Health and Wellbeing Strategy.

Alternative Options Considered and Rejected: (including any Risk Implications)

Not applicable

What will it cost and how will it be financed?

(A) Revenue Costs

The contents of the report have no impact on additional revenue costs.

(B) Capital Costs

The contents of the report have no impact on additional capital costs.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):	
Legal Implications:	
Equality Implications: There are no equality implications.	
Climate Emergency Implications:	
The recommendations within this report will	
Have a positive impact	N
Have a neutral impact	Y
Have a negative impact	N
The Author has undertaken the Climate Emergency training for report authors	Y
The contents of the report have a neutral impact at this time however subsequent actions may lead to a positive impact in due course.	

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Report contents outlines potential approach to address inequalities for vulnerable residents
Facilitate confident and resilient communities: Report outlines potential approach that would positively impact on confident and resilient communities.
Commission, broker and provide core services: The potential approach outlined will positively impact on the way services are commissioned, brokered and the provision of core services
Place – leadership and influencer: Report outlines potential approach that would positively impact on Place.
Drivers of change and reform: The report outlines a potential approach that will contribute to strategic change and reform.
Facilitate sustainable economic prosperity: Although no direct impact in the contents of the report the positive impact on this core purpose may be part of an eventual outcome.
Greater income for social investment: Although no direct impact in the contents of the report the positive impact on this core purpose may be part of an eventual outcome.
Cleaner Greener; Although no direct impact in the contents of the report the positive impact on this core purpose may be part of an eventual outcome.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.6932/22) and the Chief Legal and Democratic Officer (LD.5132/22....) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Not applicable

Implementation Date for the Decision

Immediately following the Board meeting.

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Appendices:

There are no appendices to this report

Background Papers:

Further reading can be found here; <https://www.health.org.uk/funding-and-partnerships/projects/the-cities-health-inequalities-project>

1. Introduction

- 1.1 The Cities Health Inequalities Project was a 3-year Health Foundation-funded project to explore opportunities for devolved English regions to tackle health inequalities. Its steering group included senior leaders from the Greater London Authority, Greater Manchester Health and Social Care Partnership, West Midlands Combined Authority, and the Association of Directors of Public Health.
- 1.2 The Project funded by the Health Foundation and run by Greater London Authority, Greater Manchester Combined Authority and West Midlands Combined Authority. Was active from February 2019 to April 2022.
- 1.3 The UK is home to stark and growing health inequalities. The COVID-19 pandemic has put these inequalities into sharp focus, impacting our most disadvantaged communities hardest. The drive to address these inequalities at regional level is stronger than ever.
- 1.4 Over 40% of the population in England live in cities with a directly elected mayor with a political mandate for regional system leadership. Mayoral combined authorities are in a unique position to take brave and bold action to shape and

drive health inequalities policy at a regional level through their responsibilities for the underlying causes of ill health.

- 1.5 The 3-year project concluded in April 2022, having borne witness to the impacts of the COVID-19 pandemic and the rising awareness of health inequalities and opportunities presented to regional authorities and mayors in shaping regional action.

The project aimed to accelerate this action by providing a means to reflect, share and learn how to approach the population health challenges consistent across cities and metro regions.

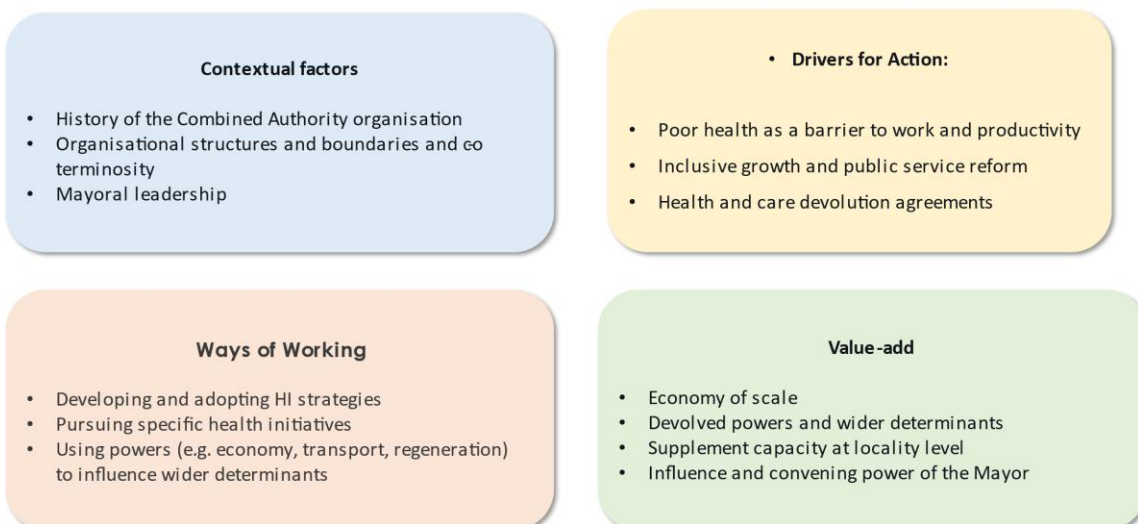
To achieve this, the project aimed to:

- Improve understanding of regional priorities, contexts, challenges and approaches to tackling health inequalities, identifying the levers of change, power and influence at our disposal
- engage all cities/combined authorities in seeking best practice and sharing knowledge
- create a mandate for action by identifying policy that works, shaping how health inequalities are framed and utilising the opportunities of devolution
- facilitate conversations, develop ideas, build relationships, collate evidence and link partners to build consensus on taking action
- champion improvements to accelerate activity in tackling health inequalities through developing guidance, toolkits, networking, expertise and support.

2. Impact Report

- 2.1 The impact report released following the conclusion of the project provides learning to accelerate action on Health Inequalities in Mayoral and City Regions. Figure one below provides a high level of overview:

What did we learn?



2.2 The report offers important reflections on shared challenges and opportunities for learning in the areas of:

Data and Intelligence - Ensuring a strategic, as well as reactive, intelligence function. Using data to create a mandate for action at city level. Quantifying the impact of HI policies at City level

Building the Political Mandate - How to build the political mandate and engaging with citizens.

Balancing, collaborating, conveying and leading - Navigating multiple roles, adding value to work at local level.

Prioritisation - Existing and emerging opportunities to influence wider determinants as part of recovery

Using existing non health powers - Influence wider determinants through cross-directorate collaboration and influence Health in all policies

3. Key Strategic links

The work has key strategic links to the Levelling up White Paper ([Levelling Up the United Kingdom - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/white-papers/levelling-up-the-united-kingdom)), Health Disparities White Paper, Trailblazing Devolution deals ([Devolution deals | Local Government Association](https://www.local.gov.uk/devolution-deals)) and UK Shared Prosperity Fund ([UK Shared Prosperity Fund: prospectus - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/white-papers/uk-shared-prosperity-fund))

4. Appreciative Enquiry

The report proposed that any new region that was to engage should utilise an appreciative enquiry model to explore prioritisation and models for using levers

and value-add of combined authority action. This would involve identifying needs and prioritising actions through consideration of the role of the combined authority within the regional population health system, Strategic capacity to identify entry points, and consider the Public Health intelligence system.

The next theme would be to identify and using levers for change. This would mean considering capitalising on devolved powers and functions, the role of political leadership and 'soft power' and financial resources.

The final theme would be to identify the value added of action at a regional level. This means supporting collaboration and partnerships across the region, how can regional work support action at a locality level, and engaging residents and building the public mandate.

5. The Next Steps for the Liverpool City Region

The Health Inequalities Project ended in June 2022. The policy team are exploring a new bid to expand and build on the learning from this project with greater engagement between and within regions and politically. The new project aims to expand, to include a wider range of combined authority sponsors. This project bid for entry into phase 4 is being led by Matt Ashton, Director of Public Health at Liverpool City Council. This will be discussed at the next CHAMPS Director of Public Health network meeting which will shape the next steps in more detail.

6. Conclusion

The Board are asked to note the contents and provide approval to progress discussion and bring further information back to a future meeting.