Health Inequalities Partnership Board- ANNEX C

Key drivers for the partnership will include:

- The Health and Wellbeing Strategy, particularly the priority 'Reducing Health Inequalities'
- The Fairness Commission final report and recommendations
- Public Health Outcomes Framework
- Joint Strategic Needs Assessment the local evidence base

The Partnership will contribute to the following two overarching objectives:

- 1. An increase in healthy life expectancy
- 2. A reduction in the difference in life-expectancy at birth from the most to the least deprived

The Partnership will be made up of two groups:

- 1. Health Inequalities Monitoring group
- 2. Public Health Working Groups

Health Inequalities Monitoring Group

The aims of the group are to:

- Monitor the impact on health inequalities that projects and organisations are making on health inequalities.
- To bring together expertise and knowledge on health inequalities to identify best practice, successes, gaps, to challenge and improve the status-quo, so we can develop a robust health inequalities strategy for York.

A range of individuals will be invited by the City of York to become a member of the monitoring group. They will, as individuals, bring together their professional backgrounds, knowledge and expertise of health inequalities.

Public Health Working Groups

The working groups will deliver the relevant priorities from the Health and Wellbeing Strategy and tasks as directed by the Health Inequalities Monitoring Group. A working group will be established for each of the following four themes:

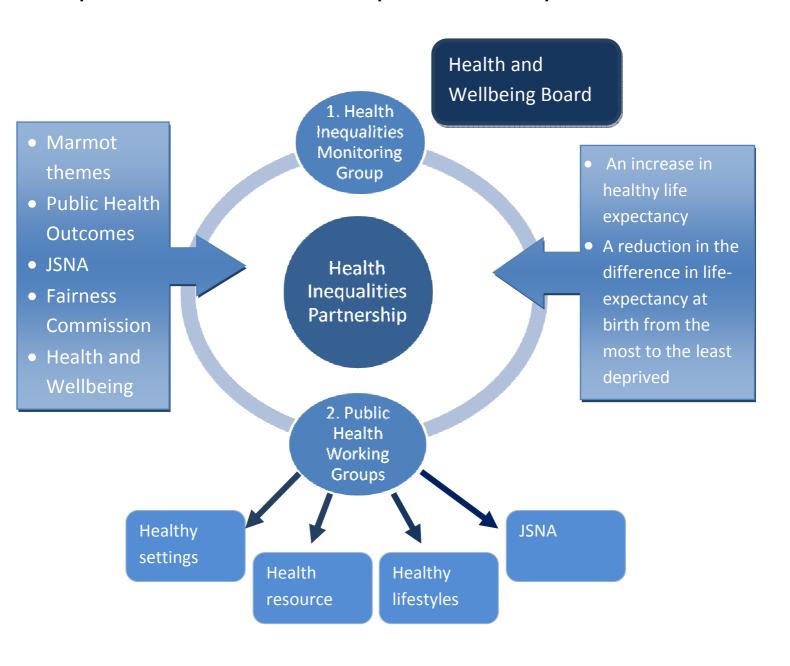
- Healthy Lifestyles Smoking, alcohol and risky behaviours
- Health resources The people, such as volunteers, health champions and health trainers, or those giving advice to peers. The intellectual and physical assets we have available to deploy.
- Healthy settings Schools, pharmacies, hospitals and other workplace and public settings, working towards a healthy culture and ethos.

• The JSNA – Ensuring we have an up to date robust evidence base to direct our strategies and work.

Membership of working groups:

Two or three officers will be nominated to lead each themed work stream and will meet with colleagues or partners monthly. The working groups will link closely with the monitoring group who will report to the Health and Wellbeing Board. The monitoring group will have a more strategic approach to health inequalities, whereas the working groups will have a commissioning or operational focus. However, it is key that the two groups must work together to sufficiently monitor progress and deliver our strategic objectives.

Proposed structure of the Health Inequalities Partnership



Actions for the Health Inequalities Partnership

The following actions for the Health Inequalities Partnership have been taken from the Health and Wellbeing Strategy. These actions are the responsibility of the Health Inequalities Partnership to deliver between 2013 and 2016.

ID	Action	Target date	Lead	Progress/ update
Tar	Target resource where it is needed most			
1	Steer investment in health improvement programmes that offer bespoke interventions that demonstrate an improved health outcomes.	Yr 2/3	Public Health – PEJ and LW	Further scoping is required
	kle deprivation and address complex issues			
2	Champion a joint approach to addressing complex, interlinked issues that a number of families experience in our city, through our work with troubled families.	ongoing	YorOK	Troubled Families Programme is being led by Linda Murphy.
3	Adopt a joint approach to community development in deprived areas of York, where communities define their own issues and how they can address them.	Yr 2/3	Public Health – PEJ and LW	Further scoping required
4	All organisations on the Health & Wellbeing Board will commit to exploring the implementation of the Living Wage, and encourage others in the city to do so.			Recommendations from the Fairness Commission final report were supported at the HWB meeting on 5 th Dec. York CVS have already implemented it, York Hospital and CYC have pledged to.
5	Organisations on the Health and Wellbeing Board commit to running supported employment programmes within their organisations and if successful, encourage other organisations or businesses to follow.		Public Health – HS	HS to liaise with skills and adult education officers and Future Prospects to further define this action.

Imp	Improve access to services and support community-based initiatives			
6	Encourage investment in community based programmes which increase residents' income and/or reduce their expenditure, such as debt, benefits or employment advice. We support the recommendations in the Financial Inclusion Strategy and acknowledge that this work is continuing.	PEJ poverty lead for CYC working with Financial Inclusion Strategy Group		
7	Explore and identify opportunities where we can take a range of services to residents who would benefit most from this. This includes: a. The use of the Community Stadium as a hub for health and wellbeing and a base for outreach services, ensuring we reach people who experience lower health outcomes. b. The use of existing buildings within communities to join up, co-locate or extend services to increase flexibility and accessibility, for example, extending the range of support available from GP surgeries or using pharmacies to provide basic health checks and signposting.	An action for the Health Resource working group	Rachael Kumar, Public Health has done some initial work identifying links between the health and wellbeing strategy and the community stadium.	
8 Pro	Recruit, train and support health and wellbeing champions from within those communities experiencing poorer health outcomes. They will signpost and provide health and wellbeing information. We will learn from recent research on this subject area in York and put these findings into practice. We acknowledge the role of 'HealthWatchers' who are already working in some areas of the city.	An action for the Health Resource working group (links to HealthWatch)		
9	Undertake targeted work to investigate and address health	An action for		

	behaviours and lifestyles in York, focused on smoking, alcohol use and obesity.		the Healthy Lifestyles working group, supported by Public Health Team	
10	 Establish an effective York model for tobacco control (it is currently across both York and North Yorkshire). This includes establishing a York Tobacco Alliance and implementing the NICE guidance 'Quitting smoking in pregnancy and following childbirth'. 	Yr 1	Helen Christmas (with Amanda Gains)	Health needs assessment has been completed. Links to environmental health and children's centres.
11	We will undertake joint campaigns across all partners and use our understanding of communities and individuals to target communication. We will adopt innovative approaches which actively engage more people in health and wellbeing issues.	May 2013	Alex Drinkhall	To be discussed in more detail at team meetings in April/ May.

In addition to the actions and priorities above, the Health Inequalities Partnership may also wish to carry out additional programmes of work or research.

Performance measures:

The Mental Health and Learning Disabilities Partnership Board will report to health and wellbeing board on the following measures, taken from the draft scorecard within the Health and Wellbeing Strategy.

Performance measure	Baseline	Lead Body
Healthy life expectancy	TBC	Health Inequalities Partnership
The difference in life-expectancy at birth from the	TBC	Health Inequalities Partnership
most to the least deprived		
Smoking prevalence	TBC	Health Inequalities Partnership
Self reported wellbeing	TBC	Health Inequalities Partnership

In addition to the performance measures above the Health Inequalities Partnership may also wish to include outcomes, measures indicators from the following frameworks:

- Public Health Outcomes Framework
- Adult Social Care Outcomes Framework
- NHS Outcomes Framework

Relationships to other partnerships and working groups:

