



# Northumberland

## County Council

### HEALTH & WELLBEING BOARD

9 MARCH 2023

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#### Health Inequalities funding allocation across the North East and North Cumbria Integrated Care Board

Report of Cabinet Member: Cllr Wendy Pattison - Adult Health and Wellbeing

Lead Officer: Gill O'Neill - Executive Director of Public Health, Inequalities and Stronger Communities

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#### **Purpose of report**

NHS North East and North Cumbria (NENC) Integrated Care Board (ICB) has been allocated £13.604m in 2022/23 to support targeted reductions in health inequalities. This paper provides a brief overview of the programmes approved by the ICB Executive and highlights how this will benefit residents in Northumberland.

The ICB Executive committed to a three-year plan in order to mainstream existing work, maximise opportunities to scale activity in partnership with the Local Authorities (LAs) and VCSE, as well as support the corporate aims of the ICB. The proposals were supported by the NENC Health Inequalities Advisory Group (and associated sub-groups), the Directors of Public Health and Chairs of the NENC Population Health and Prevention Board.

#### **Recommendations**

The Board is recommended to:

- Comment on the agreed proposals in relation to the allocation of the Health Inequalities funding across the NENC
- Comment on the funding allocation for Northumberland County Council and activity that will benefit Northumberland residents.

#### **Link to Corporate Plan**

This report is directly relevant to the overarching theme of the NCC Corporate Plan 2021-2024, 'tackling inequalities within our communities, supporting our residents to be healthier and happier'. It also supports the 'Living' priority to 'care for our residents, supporting the most vulnerable in our society as well as encouraging active citizens'.

## Key issues

- NHS North East and North Cumbria (NENC) Integrated Care Board (ICB) has been allocated £13.604m in 2022/23 to support targeted reductions in health inequalities.
- The ICB Executive committed to a three-year plan in order to mainstream existing work, maximise opportunities to scale activity in partnership with the Local Authorities (LAs) and VCSE, as well as support the corporate aims of the ICB.
- There are 11 areas of spending activity based on need and evidence-based interventions that can work to address the Core 20 plus 5 priorities<sup>1</sup>. Some funding is dedicated NENC wide whilst others are deemed more applicable at a local level and as such have been distributed based on a % of allocation by weighted population size and inequalities index proportion. The ICB wide funding is to be directed at:
  - A dedicated health inequalities team to sit within the ICS.
  - Developing a health inequalities academy to improve skills and knowledge.
  - Embedding the waiting well programme.
  - Supporting people with multiple and complex health and social care needs.
  - Developing the Deep End practice network.
  - Healthy communities and social prescribing.
  - Poverty proofing clinical pathways.
  - Mitigating against 'digital' exclusion and promoting health literacy.
  - Jointly funding the regional tobacco control office – Fresh.
  - Ensuring there is an Alcohol Care Team (ACT) working 24/7 in every Acute NHS Trust across NENC.
  - Providing Tier 3 weight management services to approx. 1000 patients that meet the agreed minimum standards targeting patients living in the 20% most deprived areas within NENC.

## Background

Nationally £200 million has been made available through 2022/23 ICB allocations, targeted towards areas with the greatest health inequalities. It is intended to support the implementation of the Core20PLUS5 approach outlined in the Priorities and Operational Planning Guidance [NHS England » 2022/23 priorities and operational planning guidance](#).

The ICB Executive have approved the following programmes:

- Recruitment of a small core **health inequalities team** to ensure health and healthcare inequalities are embedded throughout the Integrated Care System (ICS). The team will ensure the ICS is data and evidence informed, share practice across NENC and lead a NENC Anchor Institutions Network across the public sector organisations including those within Northumberland.

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<sup>1</sup> <https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/core20plus5/>

- Development of a **Health Inequalities Academy** to improve skills, knowledge, and training across the NENC workforce on health and healthcare inequalities.
- Embed the **Waiting Well Programme** which uses a population health management approach to supporting patients to prepare well for surgery and improve their surgical outcomes. It will introduce a tiered support package for patients awaiting surgery, targeting those with the longest projected waiting times, as well as those from clinically and socially vulnerable groups.
- Supporting people with **multiple and complex health and healthcare needs** associated with drug, alcohol and mental ill health to access healthcare locally. It will build on the additional funding that Northumberland has received to support people with drug and alcohol issues with housing, employment, treatment and enforcement as part of the national Drugs Strategy. Northumberland will receive £245,239 between 2022/23 to 2024/25 which will fund an in-reach respiratory clinic for our drug and alcohol treatment service, an additional support worker, and (pending further discussion) dental in-reach. The clinics will help address disproportionate levels of smoking, COPD, and poor oral health among drug and alcohol users within the County.
- Developing the **Deep End GP practices network**, serving the most socio-economically deprived populations in the ICS footprint. Deep End is designed to support practices most affected by the 'blanket deprivation' their registered population experience. It is not designed to address all practices that have areas of deprivation within their catchment area. The primary focus is on Workforce, Education, Advocacy and Research (WEAR) for the practices themselves, providing additional capacity and resource, attracting new primary care professionals and developing new ways of working to address need. Initially this will focus upon clinical psychology, review of opioid / gabapentinoid prescriptions, screening & immunisations and social prescribing. Within Northumberland, these practices are in Blyth and conversations are taking place about engagement and involvement in the programme going forward.
- Providing an approach to **Healthy Communities and Social Prescribing** which includes connecting with communities to promote health messages; engaging with various communities to gather local intelligence to inform planning; and enhancing work through the VCSE sector to increase access to healthcare. During the pandemic, significant work was developed jointly between the NHS, LAs, VCSE and faith communities to increase access to vaccination. In 2022/23 Northumberland County Council will receive £32,252.00 (8.06% share of the £400,000 across NENC) to enhance access to vaccination against covid, flu and pneumonia and amongst others. Additionally, an allocation of £19,351.00 (8.06% of the £240,000 share across NENC) will be allocated directly to the VCSE infrastructure organisation in Northumberland to support targeted work at place to build local VCSE capacity in delivering social prescribing activity. Funding will also expand the NENC Core20plus5Connector pilot which takes learning from existing Covid Champions Programmes across the region. Its initial focus has been on developing Cancer champions but will expand to other clinical areas. Local areas will benefit from shared learning and best practice and opportunities and resources to collaborate on common approaches such as standardised champion training.

- **Poverty Proofing Clinical Pathways** by applying a method used in education settings to clinical pathways. The work will ensure the voice of people living in poverty are able to influence the design and delivery of clinical pathways so that they are more culturally appropriate, accessible and targeted at those that need it most.
- **Mitigating against ‘digital’ exclusion and promoting health literacy.** The resource will be used to improve access to equipment, support community hubs, increase digital skills to use the internet/apps/devices, provide support for those with a learning disability and removing language barriers. The digital programme will be supported by a health literacy programme by ensuring information is accessible. It will raise awareness through staff training, develop a health literate toolkit and provide information that people understand, enabling them to make active decisions in their care.
- **Jointly funding the regional tobacco control office – Fresh.** Smoking remains a leading cause of health inequalities and premature mortality across NENC. Smoking continues to cost the region approximately £887m per year, with circa. £190m attributed to health and social care costs. In Northumberland, these calculations equate to approximately £86m per year, almost £25m of which relates to health and social care costs. A joint approach funded by the LAs and NHS will support an evidence-based tobacco control programme to include reducing exposure to second-hand smoke, development and delivery of bespoke media, communications and education campaigns which underpin population wide behaviour change; reducing availability and supply of illicit and legal tobacco; reducing tobacco promotion; tobacco regulation and research. This funding is in addition to all existing LA commissioned or provided tobacco control and smoking cessation, and NHS acute tobacco dependency services. In Northumberland the NHS will match fund the Council contribution of £97,470 p.a. to jointly fund Fresh from April 2023 – March 2025.
- Ensuring there is an **Alcohol Care Team (ACT) working 24/7 in every Acute NHS Trust across NENC.** Alcohol is a significant contributing factor to inequality in life expectancy between the region and the rest of England. The region has the highest rate of alcohol specific admissions and a 20.5% increase in alcohol related deaths since 2012. Three Acute NHS Trusts did not benefit from the national NHSE allocation for ACTs – County Durham and Darlington Foundation Trust, North Cumbria Integrated Care Trust and Northumbria NHS Healthcare Foundation Trust. The implementation of ACT provision at scale across the ICS gives an opportunity to ensure a consistency of approach, ensuring equity of access and provision to a vulnerable population who often suffer from complex needs. Additionally, every ACT across the ICS footprint will be provided with funding for a recovery navigator including Northumbria Health Care Trust.
- Obesity is a leading cause of preventable morbidity and mortality, representing one of the most immediate health challenges for the NHS. A regional obesity analysis highlighted that there are approximately 151,101 patients that would be eligible for Tier 3 and 4 services of which 63% are from the 20% most deprived areas of the ICS. The proposal is to provide **Tier 3 weight management services** to approx.

1000 patients that meet the agreed minimum standards targeting patients living in the 20% most deprived areas within NENC.

The table below outlines the Programmes and Interventions that have been developed to date and funding coming directly into Northumberland:

<b>Programme</b>	<b>Intervention</b>	<b>Allocated to</b>	<b>22/23</b>	<b>23/24</b>	<b>24/25</b>	<b>Total</b>
Supporting people with <b>multiple and complex health and healthcare needs</b> associated with drug, alcohol and mental ill health to access healthcare locally.	In-reach Respiratory Health MDT One-Stop Clinic delivered to drug and alcohol users within treatment and recovery service in Northumberland.	ICB	N/A	£62,454	£74,275	<b>£136,725</b>
	Additional physical health staff resource within treatment service to support delivery of in-reach respiratory clinic and wider healthcare service.	NCC	£4,489	£37,500	£37,500	<b>£79,489</b>
	Dental in-reach by a dental hygienist/therapist delivered to drug and alcohol users accessing treatment and recovery services within Northumberland.*	ICB		£14,513	£14,512	<b>£29,025</b>
<b>Healthy Communities &amp; Social Prescribing</b>	Targeted support for vaccination by midwife at baby scans, Family Hubs in more deprived areas, antenatal clinics at midwifery-led units and for high-risk pregnant women. (This will be in addition to £25,000 committed from	NCC		£24,999		<b>£24,999</b>

	Public Health reserve.)					
	Targeted work to understand facilitators & barriers to vaccination in school-age children in more deprived and rural areas.	ICB		£7,253		<b>£7,253</b>
	Targeted work at place to build local VCSE capacity in delivering social prescribing activity.	VCSE	£4,837	£19,351		<b>£24,188</b>
<b>Joint fund the regional tobacco control office – Fresh</b>	Using a joint approach to fund Fresh to support an evidence-based tobacco control.	ICB		£97,470	£97,470	<b>£194,940</b>

\*Dental in-reach project still to be confirmed. If not possible, we will explore funding for respiratory in-reach for other settings such as homeless hostels.

## Implications

<b>Policy</b>	This report aligns with the Corporate Plan 2021- 2024 Joint Health and Wellbeing Strategy and the Northumberland Inequalities Plan
<b>Finance and value for money</b>	Regionally an evidence-based budget prioritisation exercise was undertaken to determine how best to allocate the resource across NENC. The funding has been distributed across the local authorities based on a % share of funding on health inequalities index and weighted population
<b>Legal</b>	If there are any procurement processes as part of the funding then the Council’s legal services team will be duly engaged with.  Under the Local Authorities (Functions and Responsibilities) (England) Regulations 2000 and sections 192–199 of the Health and Social Care Act 2012 the matters within this report are non-executive functions within the remit and functions of the Health and Wellbeing Board
<b>Procurement</b>	The majority of the funding will be managed by the ICB. However, should there be any procurement implications for the Council, all procurement regulations will be followed.

<b>Human Resources</b>	There are no human resource implications
<b>Property</b>	There are no property implications
<b>Equalities</b> (Impact Assessment attached) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	The whole premise of this report is based on tackling inequalities and the funding has been distributed based on an inequalities framework
<b>Risk Assessment</b>	Regionally this programme has been approved by the ICB and the proportions of money being allocated into Northumberland will fall into each designated organisation's for risk management
<b>Crime &amp; Disorder</b>	Some of these initiatives will directly or indirectly contribute to the reduction of crime
<b>Customer Consideration</b>	The impact of the funding coming into Northumberland will be for targeted improvements across the population
<b>Carbon reduction</b>	Not applicable
<b>Health and Wellbeing</b>	The dedicated areas for spend will all be focused on improving the health and wellbeing of our population and reducing inequalities
<b>Wards</b>	There will be targeted work undertaken based on the 4 domains of inequality and as such some wards will have more dedicated resource than others eg Blyth area which is engaged with the Deep End programme,

**Background papers:**

**Report sign off.**

***Authors must ensure that officers and members have agreed the content of the report:***

	Full Name of Officer
Monitoring Officer/Legal	Suki Binjal
Executive Director of Finance & S151 Officer	Jan Willis
Relevant Executive Director	Gill O'Neill
Chief Executive	Rick O'Farrell
Portfolio Holder(s)	Wendy Pattison

## **Author and Contact Details**

Gill O'Neill FFPH

Executive Director of Public Health, Inequalities and Stronger Communities

Email: [gill.oneill@northumberland.gov.uk](mailto:gill.oneill@northumberland.gov.uk)