

Manchester Health and Wellbeing Board Report for Information

Report to: Manchester Health and Wellbeing Board – 1 November 2023

Subject: Fairer Health for All

Report of: Director of Population Health, NHS Greater Manchester
Integrated Care
Director of Public Health, Manchester City Council

Summary

This paper outlines the opportunities for the Manchester Locality, through the Health and Wellbeing Board, to input and shape priorities for co-ordinated action on health inequalities across Greater Manchester. Consideration will also be given to the proposed principles, targets and metrics in the Greater Manchester Fairer Health for All Framework. It is important to note that Manchester already has the well-developed Making Manchester Fairer Action Plan (2023-2027) and the Director of Public Health, Deputy Director of Public Health and the GM Director of Population Health will continue to work collaboratively to ensure plans are aligned and clear.

Recommendations

The Board is asked to review and comment on the Fairer Health for All Framework Engagement Draft and engagement questions outlined in section 2.2 of the report.

Manchester Strategy outcomes	Summary of how this report aligns to the OMS/Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	<ul style="list-style-type: none"> • Fairer Health for All aims to maximise the role of the NHS and social care as anchor institutions to create a greener, fairer, healthier and more prosperous GM • Fairer Health for All, alongside Making Manchester Fairer, will also focus on targeted prevention through delivery of upstream models of care
A highly skilled city: world class and home grown talent sustaining the city's economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

Our Manchester Outcomes Framework

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Background documents (available for public inspection): None

1.0 BACKGROUND

What is Fairer Health for All?

- 1.1. More than a mantra or a rally cry, Fairer Health for All (FHFA) is a system-wide commitment and framework for reducing health inequality and tackling inequalities across the wider, social, and commercial determinants of health, leading to a greener, fairer, more prosperous city-region.
- 1.2. The Fairer Health for All framework is a blueprint that sets out a collaborative approach priority action across the system, aimed at advancing equity, inclusion, and sustainability whilst delivering health and care services that better meet the needs of the communities we serve.
- 1.3. FHFA has been co-produced through extensive locality and community participation and engagement over the past fifteen months, which has taken place alongside the development of NHS Greater Manchester's Integrated Care Partnership strategy and our Five Year Joint Forward Plan. It prioritises coordinated action to deliver against the six strategy missions and a roadmap for how we will:
 - Work together to fulfil statutory NHS responsibilities such as unlocking social and economic potential and delivering against Core20Plus5 inequalities targets.
 - Enhance and embed prevention, equality, and sustainability into everything we do as a health and care system.
 - Tackle the discrimination, injustice and prejudice that lead to health and care inequalities.
 - Create more opportunities for people to lead healthy lives wherever they live, work and play in our city-region.
- 1.4. The full engagement draft of the [Fairer Health for All framework](#) outlines core principles and priorities, aligned to two new tools central to workforce development, leadership and strategic intelligence that can be adapted to local contexts. A copy of the framework is attached as **Appendix 1**.

2.0 ENGAGEMENT

- 2.1. The framework sets out the process of engagement to date as well as initial outputs of work. Its purpose is to provide as much opportunity as possible for the final version to be informed and shaped by our colleagues from the VCFSE sector and our service users, partner agencies, practitioners, staff and leaders from across all ten localities, in the way it has been co-produced over the fifteen months to date.
- 2.2. Greater Manchester colleagues are engaging directly with all localities to provide a space for feedback on the following 4 key lines of enquiry:

- a) What are your thoughts on the key goals, targets, and metrics we have identified in chapter 9? Are there any headline ambitions or key metrics that are missing or that require different emphasis?
- b) Have we correctly identified the priorities – are there any that are missing or require a different emphasis
- c) If we collectively implement the proposals set out in the framework, how will this make a positive difference to your experience of achieving Fairer Health for All either as a provider, service user or delivery partner? What could be added to framework to improve on this?
- d) Do you have any other views on the framework?

3.0 FAIRER HEALTH FOR ALL IN ACTION

3.1. The framework has focused initially on supporting the development and scaling of a range of work programmes already underway to:

- Reduce variation in care across major system programmes with a particular focus on CORE20PLUS5 priority areas
- Focus on targeted prevention through delivery of upstream models of care
- Maximise the role of the NHS and social care as anchor institutions to create a greener, fairer, healthier and more prosperous GM
- Comprehensive approaches to prevention and the leading modifiable causes of inequalities in health

3.2. These programmes are entirely consistent with the approach of Making Manchester Fairer.

4.0 FAIRER HEALTH FOR ALL TOOLS

4.1. The Fairer Health for All ‘tools’ are being iteratively developed over the coming 6 months to enable co-ordinated action across Greater Manchester. The ‘tools’ under development are:

- a) Fairer Health for All Academy
- b) Health and Care Intelligence Hub

Culture Change and Leadership

4.2. It is recognised that achieving Fairer Health for All requires a step change in the ambition, measurement, resourcing and workforce proficiency to tackle inequalities. Creating the conditions for diverse leadership, workforce and talent to flourish across our public and VCSE sectors will ensure that there is the insight and ability to deliver to diverse communities’ tackling those unwarranted health disparities resulting from institutional discrimination.

4.3. The [Fairer Health for All Academy](#) facilitates shared learning, innovation and collaborative approaches to prevention and upstream models of care.

Hosting a range of leadership and workforce development tools and resources, the Academy also provides a dedicated space to share lived experience from across the system. The academy will build capacity and capability for distributed leadership to enable health equity, equality, inclusion and sustainability into health and care commissioning, governance, and leadership at every level.

- 4.4. Existing and emerging leadership and workforce development opportunities will be accessible through the Academy, alongside new collaborations later in 23/24. An intentional co-creation process will create spaces for lived experience to be heard across systems and communities and acknowledge and value the diverse leadership and behaviours required to create Fairer Health for All.
- 4.5. It will be important to ensure that the workforce development approach set out for Making Manchester Fairer and the Communities and Power workstream are aligned in a constructive way to the Academy development. The Communities and Power workstream will also be discussed at the Manchester Health and Wellbeing Board on 1 November 2023.

Population Health Management

- 4.6. The Health and Care Intelligence Hub is part of the Fairer Health for All approach to enable adaptive capability for population health management in relation to our people, systems and analysis. Access to the hub can be requested via https://www.gmtableau.nhs.uk/gmportal/new_Request and is open to all VCSE and public sector partners.
- 4.7. Hosting a range of web-based intelligence tools, the hub has been co-designed to consolidate data and insights from public and VCFSE sector partners across the city-region into a single portal, enabling people and partners the opportunity to:
 - Bring data to life, understanding how health inequalities and variations in care change throughout a person's life
 - Focus on 'names not numbers' by capturing the insight and stories of change from different communities
 - Share wisdom and learning about which interventions work and why
 - Understand which communities have fewer opportunities to live healthily and are more likely to develop poor health by exploring the interactions between individual, family, and community factors
 - Ensure resources are targeted where needed, so policies and programmes can super-serve prioritised communities
 - Proactively work with communities to offer more opportunities to stay well and find and treat illnesses early
 - Measure progress, evaluate outcome indicators for different communities across various clinical pathways, and combine service data with community insights to understand reasons for poor access, unmet needs, and hidden harm

- Model the anticipated impact of policies/interventions on different communities, protected characteristics, and environmental sustainability as well as costs vs benefits

4.8. The Public Health Specialist (Health Intelligence) and the Knowledge and Intelligence Team in the Manchester Department of Public Health are already leading and developing this work in Manchester under Making Manchester Fairer. They have excellent working relationships with GM colleagues and will ensure again that there is not duplication of effort around this thematic area.

5.0 RECOMMENDATIONS:

5.1 The Board is asked to Review and comment on the Fairer Health for All Framework Engagement Draft and engagement questions outlined in section 2.2 of the report.