



Report To:	Inverclyde Alliance Board	Date: 5 October 2015
Report By:	Brian Moore Lead Officer, Inequalities Outcome Delivery Group	Report No:
Contact Officer:	Andrina Hunter, Health Improvement, Inequalities & Personalisation Manager	Contact No: 76125
Subject:	Inequalities Outcome Delivery Plan	

1.0 PURPOSE

- 1.1 The purpose of this report is to present to the Alliance Board for approval the new draft outcome delivery plan for the Inequalities Outcome Delivery Group (formerly Health Inequalities).

2.0 SUMMARY

- 2.1 As the Alliance Board is aware, the Health Inequalities Outcome Delivery Group (SOA5) have been working on developing a new outcome delivery plan and approached Health Scotland to ask for support in carrying out this work.
- 2.2 An initial draft Plan is attached in Appendix 1. The Plan is still being developed to include outcomes around mental health and wellbeing and older people. This work is ongoing with colleagues from the HSCP and Health Scotland.
- 2.3 To inform partnership understanding of health inequalities, Health Scotland has delivered presentations on the fundamental causes of health inequalities to the Inverclyde Alliance Programme Board and the Inverclyde Alliance Board.
- 2.4 Taking on board the key messages from these presentations, the Health Inequalities group has agreed that it should be renamed the Inequalities Outcome Delivery Group. This reflects that the group will focus on the wider causes of inequality which, in turn, create health inequalities.
- 2.5 The group has recognised that it cannot take this work forward in isolation. Consequently, it is currently working with the other outcome delivery groups to scrutinise their plans through an 'inequalities lens'. The Inequalities group also wishes to ensure that all outcome delivery plans include at least one robust inequalities action, supported by appropriate performance measures. The presentation on the fundamental causes of health inequalities has been delivered to a number of outcome delivery groups with the remainder scheduled over the coming months.
- 2.6 Once each outcome delivery group has developed its inequality action, these will be pulled across to the Inequalities Outcome Delivery Plan and performance monitored. Membership of the Inequalities Group is currently being refreshed to reflect the new remit of the group.
- 2.7 Health Scotland will continue to support the Inequalities Group, particularly around the development of work to inform decisions on disinvestment and investment from a health inequalities and preventative spend perspective. This is to inform decision making by looking at different ways to invest resources which will provide a bigger impact than is currently being achieved. A workshop on

this will be delivered to the Alliance and Programme Boards in the near future.

3.0 RECOMMENDATIONS

It is recommended that the Alliance Board:

- a. Approve the renaming of the Health Inequalities Outcome Delivery Group to Inequalities Outcome Delivery Group;
- b. Approve the draft Inequalities Outcome Delivery Plan and note that work is ongoing to develop an outcome for older people and mental health and wellbeing;
- c. Agree that the partnership working with Health Scotland continues, focusing on areas of investment that will have the greatest impact on inequalities.
- d. Note that the Alliance and Programme Boards will be invited to participate in a workshop, facilitated by Health Scotland, to explore this issue further.

Brian Moore
Lead Officer, Inequalities Outcome Delivery Group

4.0 BACKGROUND

- 4.1 The Health Inequalities Outcome Delivery Group recognised that their outcome delivery plan needed to be refreshed to ensure that the plan remained fit for purpose. The group has been working with Health Scotland over several months to develop a new plan that would have a stronger focus on tackling health inequalities through looking at new ways of working.
- 4.2 Health Scotland has delivered presentations on the fundamental causes of health inequalities to the Health Inequalities Outcome Delivery Group, the Inverclyde Alliance Programme Board and the Inverclyde Alliance Board. These presentations stressed that health inequalities are not inevitable, but they are largely socially determined and can be addressed by amongst other things, intensive support for disadvantaged population groups and starting young. Health Scotland stressed that interventions that are reliant on people opting in, information based campaigns and messages designed for the whole population are least likely to be effective in addressing health inequalities.
- 4.3 Health Scotland has also reviewed all our outcome delivery plans and provided feedback on how these could be strengthened from an inequalities perspective.

5.0 INEQUALITIES OUTCOME DELIVERY PLAN

- 5.1 Taking on board the key messages from these presentations, the Health Inequalities group has agreed that it should be renamed the Inequalities Outcome Delivery Group. This reflects that the group will focus on the wider causes of inequality which, in turn, create health inequalities. The draft Outcome Delivery Plan attached reflects this shift in focus.
- 5.2 Membership of the group is currently being refreshed and when finalised will include a representative from each of the six outcome delivery groups.
- 5.3 A presentation on the fundamental causes of health inequalities has been delivered to the Environment, Alcohol Misuse and Best Start in Life Outcome Delivery Groups and will also be delivered to the remaining outcome delivery groups.
- 5.4 The Inequalities group has recognised that it cannot take this work forward in isolation. Consequently, it is currently working with the other outcome delivery groups to scrutinise their plans through an 'inequalities lens'. Each Outcome Delivery Group has been asked to ensure that their outcome delivery plan contains at least one action which has an inequalities focus, with associated measures and indicators. The inequalities actions within all the outcome delivery plans will also be included in the Inequalities Outcome Delivery Plan and will be reviewed within that structure.
- 5.5 Work is ongoing to develop outcomes for older people and mental health and wellbeing. This is being developed in consultation with partners across the Health and Social Care Partnership and Health Scotland.
- 5.6 Health Scotland will continue to support the Inequalities Group, particularly around the development of work to inform decisions on disinvestment and investment from a health inequalities and preventative spend perspective. This is to inform decision making by looking at different ways to invest resources which will provide a bigger impact than is currently being achieved. Health Scotland will facilitate a workshop on this for both the Alliance and Programme Boards in the near future.

6.0 IMPLICATIONS

- 6.1 Legal: None
- Finance: None
- Personnel: None

Equality and Diversity: None

Repopulation: None

Inequalities: The Inequalities Outcome Delivery Group will seek to strengthen both the focus and the improvement work of the Alliance in addressing inequalities. The new outcome delivery plan reflects the shift in thinking from health inequalities to addressing the fundamental causes of inequality.

7.0 CONSULTATIONS

7.1 None

8.0 LIST OF BACKGROUND PAPERS

8.1 None

Appendix 1: Inequalities Outcome Delivery Action Plan (1st Draft)

Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress
Following workshops with Health Scotland, the Health Inequalities ODG requires review and become more focused on fundamental causes of inequalities.	Have an Inequalities Outcome Delivery Group which is focussed on supporting the SOA related groups to understand and deliver inequalities focus.	Change focus from health Inequalities to Inequalities. Review and update membership of group and ensure representation from all SOA ODG.	Agreement from SOA Programme Board to new focus/name change. Membership of group reviewed with members drawn from across SOA ODGs. All members understand their role in relation to the wider SOA and Inequalities	SOA Programme Board ODG's Brian Moore (Chair) Andrina Hunter	Invite from Chair of IODG being sent to all other SOA ODGs explaining change in focus and seeking representation for next meeting-date TBC late September.
Inverclyde SOA and associated action plans are not inequalities focused. Whilst they are deliver appropriate actions, there are not related direct actions, outcomes and measures that show impact on tackling inequalities. Opportunities have been presented in the imminent refresh of the ODP for Environment, Successful Communities and Repopulation to embed inequalities actions in the plans	All SOA ODPs have an inequalities focus and each plan has at least one action, outcome and associated measures that are inequalities focused	Inequalities focussed sessions will be delivered initially to the Environment; Successful Communities and Repopulation ODGs Support will be given to each ODG to help develop one outcome, action and measure to have an inequalities focus. The Inequalities ODG will scrutinise all plans and measures Review membership of each ODP from an inequalities perspective	Each ODG will have session delivered on inequalities All ODG members will have greater understanding of inequalities. Each ODG plan will have a specific outcome, action and associated measures which are inequalities focussed.	Andrina Hunter Inequalities ODG members Health Scotland	Sessions delivered to SOA7 Environment with Health Scotland colleagues; to SOA5 Alcohol and discussion with SOA2 re reviewing plan. Further presentations to be scheduled with other groups as meeting schedules dictate. Once presentations delivered and each group aware of responsibilities re Inequalities outcomes these will feature as key component of this plan.

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Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress
We need to consider future resource spend related to tackling inequalities	All new plans incorporate systematic decision making regarding the impact of investment or disinvestment on (health) inequalities	<p>The development of work to inform decisions on disinvestment and investment from a health inequalities and preventative spend perspective. HS will provide the economic evaluation expertise to combine with the local expertise on need/context/feasibility etc provided by the CPP partners to inform decisions.</p> <p>Introductory workshop where different investment opportunities are discussed</p> <p>Build capacity across partners related to health economics and decision making</p> <p>Agree criteria for what would constitute a good area to test for investment /disinvestment</p> <p>Convene a working group / workshops consisting of officers with expertise to interpret evidence discussed at first</p>	<p>Partners have better understanding of economics. A robust evidence base is developed.</p> <p>Changes in way decisions regarding funding are made.</p> <p>Profiles of numbers of people going through services</p> <p>Evidence of Shifting of resources</p>	SOA partners Health Scotland	Workshop planning discussion underway

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		meeting and implications of options on table			
	People in Inverclyde express greater feeling of wellbeing.	Support the implementation of the mental well-being components of the Scottish Government Mental Health Strategy (2012 – 2015) in order to sustain and improve the mental health and wellbeing of the people of Inverclyde. ? does Dementia friendly strategy fit in here?	Increase reported wellbeing measures through Citizens Panel; Health and Wellbeing survey etc.	SOA Partners NHS Health Scotland	Meeting scheduled to expand this outcome with support from Health Scotland.
Life expectancy increased slightly however healthy life expectancy across Inverclyde could be increased.	Require a focus on supporting older people				