

# FOR PUBLICATION

# DERBYSHIRE COUNTY COUNCIL

# CABINET

## 11 January 2024

### **Report of the Director - Public Health**

#### Public Health Localities Approach 2024 - 2029 (Cabinet Member for Health and Communities)

### 1. Divisions Affected

1.1 Countywide.

#### 2. Key Decision

2.1 This is a key decision because the decision is likely to result in the Council incurring expenditure which is significant having regard to the budget for the service or function concerned and is likely to be significant in terms of its effect on communities living in an area comprising two or more electoral areas in the County.

#### 3. Purpose

- 3.1 Cabinet is asked to:
  - a. Approve the continuation of the Public Health Localities Approach across the County for five years from 01 April 2024 to 31 March 2029.
  - b. Approve the allocation of £0.659m from the Public Health ringfenced grant to the Health and Wellbeing Partnerships for the period 01 April 2024 to 31 March 2025 in the proportions set out in Table 2 in the financial considerations section of Appendix 1 of this paper.

- c. Approve that authority is delegated to the Cabinet Member for Health and Communities to approve annual funding amounts from the Public Health ring-fenced grant for the period April 2025 – March 2029 to the Health and Wellbeing Partnerships as required, up to a maximum of £0.115m.
- d. Approve the grant funding of the countywide Raising Aspirations Programme, coordinated through the Public Health Localities Team, for one further academic year 2024-25, investing £0.115m funded through the Public Health Grant and delivered on Derbyshire County Council's (DCC) behalf by the Bolsover Partnership. This will enable a longer-term review of the service and re-commissioning to take place in 2024-25 financial year.

# 4. Information and Analysis

## Background

- 4.1 The Public Health Localities Approach has been a mechanism for delivery of key priorities for Derbyshire Public Health since 2007 at a local place level. The Public Health Localities Approach provides a Public Health presence in local communities across the County and builds and maintains local partnerships around health and wellbeing outcomes and actions. Local Health and Wellbeing Partnerships (HWP) deliver a broad range of place based projects and programmes, aimed at improving health outcomes through addressing local health priorities and reducing health disparities.
- 4.2 The Public Health Localities Approach consists of eight HWPs, each based on a district or borough council footprint, which are coordinated and facilitated by the Council's Public Health team. Membership of each HWP varies from place to place, reflecting local differences between communities. Core membership includes:
  - elected members from county, district, borough, parish or town councils
  - representatives from Adult Social Care and Health and Children's Services
  - district and borough council staff
  - NHS commissioners and providers
  - Police
  - Fire and Rescue Service
  - voluntary sector organisations

- representatives from local communities.
- 4.3 The HWPs work to improve the health of local communities through:
  - agreeing local health and wellbeing priorities
  - working with partners to allocate funds for local projects to promote healthy behaviours
  - addressing the wider determinants of health, such as housing, employment and skills, and financial inclusion.
- 4.4 HWPs provide a key mechanism for ensuring the delivery of Derbyshire's Health and Wellbeing Strategy at local community level. The Derbyshire Joint Local Health and Wellbeing Strategy objectives align with systemwide ambitions to enable residents in Derbyshire to:
  - Start Well
  - Live Well and Stay Well
  - Age Well and Die Well

The longer-term population health outcomes that the HWPs seek to contribute to include:

- Increasing healthy life expectancy
- Increasing life expectancy
- Reducing inequalities in healthy life expectancy and life expectancy
- 4.5 An annual update on the contribution of the HWPs to the delivery of the Joint Local Health and Wellbeing Strategy priorities will be presented to Derbyshire Health and Wellbeing Board.
- 4.6 Each HWP goes through an annual cycle of planning and uses Public Health data and local insights to agree key priorities for implementation. Appendix 2 shows the current priorities for each HWP and highlights the value of determining priorities at a local level, to meet the differing needs of each geographic area.
- 4.7 Derbyshire Public Health recognises the importance of working at a local community level to improve health outcomes for the Derbyshire population. The Localities Approach allows Public Health to work with all levels of local government, the community and voluntary sector, community representatives and other partners to support people at local level. The Localities Approach also allows integration of Public Health commissioned and provided county-wide services, including Local Authority Public Health mandated services, through use of local insight and alignment with HWP funded programmes. This approach brings opportunities for additional funding and increased capacity via HWP

partners. It also creates opportunities for the local partnerships to apply for external funds together.

### **Common priorities across HWPs**

- 4.8 Financial inclusion continues to be a focus across the County due to the strains placed on household finances over the last two years as a consequence of the Covid-19 pandemic and subsequent cost of living pressures. Every HWP has established a Financial Inclusion Group (FIG) involving local partners, which works alongside the Council's Welfare Rights Service and the Derbyshire Discretionary Fund, along with a variety of external partners. In Erewash, the FIG involves nine partners, who distributed leaflets to 53,000 households, giving advice on where support could be accessed. In Chesterfield and North East Derbyshire, 20 partners were involved in the FIG, with over 90,000 households receiving leaflets in this area. In the first two quarters of 2020 more than 18,857 people were seen by ten of the partners in the FIG in Chesterfield and North East Derbyshire. This activity illustrates the demand for financial support and the intelligence that can be gathered through the HWPs about the key pressures felt by communities.
- 4.9 **Social isolation** is recognised to be a risk factor for a range of poor health outcomes. The number of people experiencing social isolation and loneliness increased significantly in Derbyshire and across the country during the Covid-19 pandemic. HWPs have focused on improving social connectedness over the past two years and this will continue to be a priority into 2024-25. To date, most of the HWPs focus has been on supporting the local infrastructure that helps people to connect with each other and supporting people who are digitally excluded to become more digitally confident.
- 4.10 **Place based working** is also a key priority for Joined Up Care Derbyshire Integrated Care System (ICS) which brings together health, social care and system partners to deliver improvements in health and care across Derbyshire, of which Derbyshire County Council is a key partner. The ICSs focus on place brings opportunities to work together with health, local authority and community partners in a new and innovative way at a local level. The Localities Approach aligns well and compliments the ICS approach. The Localities Approach is well placed to support and enable changes that will bring health and care closer, to deliver integrated support with people and communities at the centre and reflecting local priorities.

4.11 The HWPs also work alongside and complement the Council's Thriving Communities approach by offering a county-wide offer, with a focus on communities with additional needs.

#### Supporting the Covid-19 response and recovery

- 4.12 The Covid-19 pandemic has had a significant impact on communities across Derbyshire. Covid-19 recovery remains a key priority for the Localities Approach, particularly in terms of tackling social isolation and financial exclusion, both of which have grown since the Covid-19 pandemic.
- 4.13 During the Covid-19 pandemic, the Localities Approach provided a mechanism that enabled a rapid community response to the crisis, enabling the swift mobilisation of support to some of Derbyshire's most vulnerable residents. Community response was a key priority for Public Health. Other Council departments and external organisations were able to benefit from the existence of established local networks and to utilise the strengths and insights of different partners involved in the HWPs.
- 4.14 Due to the long-established partnerships within the Localities Approach, Covid-19 forums and a range of community messaging services were swiftly established, across the County at the beginning of the pandemic to enable the coordination of food and medicines distribution at a local level. The scale of the community response to Covid-19 was significant and local coordination of activities was vital to reach those in need of support.
- 4.15 The Localities Approach established the Covid-19 Community Champions Network at the height of the pandemic, with the network continuing through into the recovery phase, funded through the Contain Outbreak Management Fund (COMF). These local networks enabled delivery of Covid-19 and vaccination messaging directly to different local communities and to tailor communication and engagement accordingly, whilst at the same time listening to the concerns being raised by those communities. For example, the South Derbyshire Covid-19 Community Champions Network directly reached 47,000 local people through social media and other communication channels.
- 4.16 NHS partners recognised the Localities Approach was a valuable source of local insight, which helped inform the roll-out of the Covid-19 vaccination programme. Locality partners ensured that delivery of the programme met the needs of different communities, including providing information on vaccine hesitancy in local communities. The Localities Approach continues to support work to increase uptake of Covid-19 and other vaccine programmes. In particular, by continuing to support the

vaccine inequalities workstream to increase uptake in those communities with lower coverage.

## The value of partnership working

- 4.17 A review was undertaken in July 2023 to assess the value of the Localities Approach to partners from different sectors and backgrounds. The findings of the review highlighted the wide variety of ways in which the HWPs created value for local partnerships, the complex and varied work of the eight HWPs, achieved through working with hundreds of partners across Derbyshire and how they were an essential part of Derbyshire's health and wellbeing infrastructure.
- 4.18 The review found that the Localities Approach added immense value to all partners involved, aided local decision making on community health and wellbeing, and was highly valued by Derbyshire partners involved. The devolved ways of working with local town, district, and borough councils, as well as community and voluntary groups also fitted with the Integrated Care System. HWPs are highly integrated with the NHS Place Alliance and neighbourhood based working approach, allowing implementation of joint programmes of work, co-ordinating engagement and operationalising joint working locally. The review highlighted the impact of HWPs in delivering the Derbyshire Joint Local Health and Wellbeing Strategy and Public Health priorities at a local level.
- 4.19 The review highlighted actions to strengthen the Localities Approach, such as consistent evaluation of funded projects to assess impact on population health outcomes and health inequalities, HWPs to further adopt a co-production approach and embrace opportunities for collaboration and learning across HWPs.
- 4.20 The Localities Approach will continue to work through HWPs to improve the health and wellbeing of Derbyshire residents, supporting discharge of the Council's statutory Public Health duties and providing insight to support commissioning and delivery of mandated and essential services.
- 4.21 In September 2024, the community champions and social connectedness Localities Approach projects will end as COMF funding expires. These projects ran through the pandemic and have been significant in establishing and maintaining community Covid-19 messaging services, a two-way community forum, use of community insights in the most appropriate placement of community vaccine clinics and take up of vaccines, and a range of interventions to reduce social isolation across

Derbyshire and increase equalities particularly in terms of the pandemic response and recovery. An options review will be undertaken to consider how to utilise the Localities Approach to continue to gather community insight to support the decision-making across Public Health and partner organisations.

- 4.22 An indication of the 2024-2025 health and wellbeing priorities for each HWP can be seen in Appendix 3.
- 4.23 In addition the Localities Approach supports a range of wider Public Health departmental initiatives that are delivered across all areas of Derbyshire, as noted in table 1:

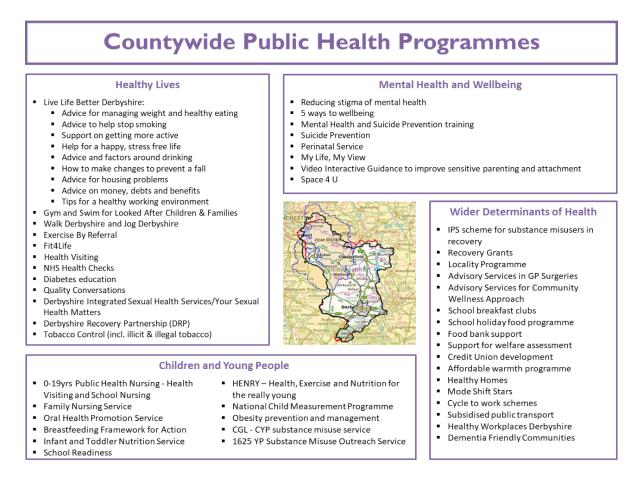


Table 1 Public Health programmes and initiatives supported by the Localities Approach

### **Raising Aspirations Project**

4.24 The Raising Aspirations project was initially developed by the Bolsover Partnership in 2009 and has since been rolled out across Derbyshire. It is a programme of co-ordination and interventions that addresses barriers relating to aspiration and engagement amongst vulnerable groups of young people.

- 4.25 Public Health grant fund the Bolsover Partnership, who subsequently contract the delivery of the programme via Derbyshire Education Business Partnership (DEBP), who provide the programme in 16 schools across Derbyshire. Delivery includes the Key Stage 3 Shine programme which is designed to support young people who have been identified as lacking in confidence or who did not have the levels of resilience needed to manage with the challenges they were facing. DEBP provide quarterly activity data and other monitoring information, including provision of case studies, to the Raising Aspirations Steering Group, and each HWP.
- 4.26 A formal evaluation of the project is underway with the results due in early 2024. The outcome of the evaluation will inform longer-term commissioning intentions from the start of the 2025-26 academic year, and this paper asks for approval for funding to grant fund the existing Raising Aspirations Programme for one further academic year starting September 2024 for 12 months.

## 5 Consultation

- 5.1 No formal consultation is required. Through the HWPs, the Localities Approach co-produces plans and identifies projects for funding with partners and communities.
- 5.2 The recent review of the HWPs demonstrate the value of this approach to partner organisations.

# 6 Alternative Options Considered

6.1 Do nothing – The Localities Approach has been established for 15 years. The do-nothing option would result in the removal of the programme and associated activity from the communities of Derbyshire and reduces the Council's ability to stand up community response quickly in future outbreaks and pandemics.

If the programme did come to an end, there is a reputational risk due to the high number of partners involved across the County, and loss of additional funding, resources, and capacity that town, district and borough councils, community and voluntary groups bring to the partnership. The needs of local communities are best determined at the local level and the loss of this mechanism, and its associated partnerships would be detrimental to the ability of Public Health to deliver effective locally designed interventions. The Public Health Localities Approach is working in a backdrop of an ICS that is driving towards a place based approach which HWP are well placed to influence and support.

6.2 The Localities Approach is the key mechanism through which Public Health connects with and understands local communities and uses community insight to shape the local health offer areas across the HWPs. Commissioning health initiatives in isolation would remove the direct link between Public Health, local partners, and local communities. It would also make the ability to flex and respond quickly to changing needs (e.g., the Covid-19 pandemic) much more difficult to implement.

## 7 Implications

7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## 8 Background Papers

8.1 None

### 9 Appendices

- a. Appendix 1 Implications
- b. Appendix 2 Current HWP agreed priorities and activities
- c. Appendix 3 Indicative HWP priorities 2024-2025

### 10 Recommendation(s)

- 10.1 That Cabinet:
  - a) Approve the continuation of the Public Health Localities Approach across the County for five years from 01 April 2024 to 31 March 2029.
  - b) Approve the allocation of £0.659m from the Public Health ring-fenced grant to the Health and Wellbeing Partnerships for the period 01 April 2024 to 31 March 2025 in the proportions set out in Table 2 in the financial considerations section of Appendix 1 of this paper.
  - c) Approve that authority is delegated to the Cabinet Member for Health and Communities to approve annual funding amounts from the Public

Health Grant for the period April 2025 - March 2029 to the Health and Wellbeing Partnerships as required up to a maximum of £0.115m.

 d) Approve the grant funding of the countywide Raising Aspirations Programme, coordinated through the Public Health localities team, for one further academic year 2024-25, investing £0.115m funded through the Public Health Grant and commissioned on Derbyshire County Council's (DCC) behalf by the Bolsover Partnership.

#### 11 Reasons for Recommendation(s)

- 11.1 To enable the Localities Approach to continue to improve the health and wellbeing of Derbyshire residents, reducing inequalities in a placebased approach, and to support discharge of the Council's Public Health statutory duties.
- 11.2 To enable continued engagement and support to vulnerable people across Derbyshire.
- 11.3 To support the communities of Derbyshire in the recovery from Covid-19, integrating with the Thriving Communities Approach and the Integrated Care System.
- 11.4 To enable a timely response to support communities to recover from the longer-term impact of the Covid-19 pandemic with efficient and effective decision-making. Furthermore, this puts the Council in a stronger position to be ready to respond to future outbreaks and pandemics, and to stand up future community response, messaging or support services quickly across Derbyshire.
- 11.5 To commit to continuous improvement of the Localities Approach working with our partners across Derbyshire.

#### 12. Is it necessary to waive the call-in period?

12.1 No

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#### **Implications**

#### 1 Financial

- 1.1 A one-year 2024-25 academic school year investment of £0.115m for the Raising Aspirations Programme.
- 1.2 A one-year investment from the Public Health ring-fenced grant for 01 April 2024 to 31 March 2025 £0.659m, to be allocated to the eight organisations working on behalf of Health and Wellbeing Partnerships as per table 2 below. This allocation includes £0.010m per annum, to facilitate a Health & Wellbeing Community Small Grants scheme in each Locality. The allocations have been determined using a fair-share formula; a weighted calculation, considering population size, health outcomes, and key determinants of health, to achieve an equitable distribution of resources across the County.
- 1.3 A five year forward commitment to support the Localities Approach, future annual funding amounts from the Public Health Grant to be agreed annually by the Director of Public Health and Cabinet Member for Health and Communities.
- 1.4 All HWPs will be required to use their financial allocations to deliver the Public Health priorities set out in their partnership action plan. Local partnership action plans are agreed annually by each locality HWP. Governance arrangements will ensure that the investment is used to complement and not duplicate other work of the Council, including other Public Health programmes.
- 1.5 Performance of the Localities Approach is accountable to the Localities Leadership Group, the Public Health Performance and Governance Group, and regular reporting into the Derbyshire Health and Wellbeing Board.
- 1.6 Currently all Localities Approach funds are transferred to local partners who hold the funds locally on behalf of the HWPs. All partnerships have terms of reference in place and local governance arrangements to ensure that pieces of work are fairly commissioned and that monitoring and evaluation is in place.

| Health and<br>Wellbeing<br>Partnership | Partnership<br>fund | Small<br>Grants | Overall Total                      | Receiving<br>Organisation<br>on behalf of<br>the HWP |
|--|---------------------|-----------------|------------------------------------|--|
| Amber Valley                           | £89,685.51          | £10,000         | £99,685.51                         | Amber Valley<br>CVS                                  |
| Bolsover                               | £78,097.35          | £10,000         | £88,097.35                         | Bolsover<br>District<br>Council                      |
| Chesterfield                           | £104,176.25         | £10,000         | £114,176.25                        | Chesterfield<br>Borough<br>Council                   |
| Derbyshire<br>Dales                    | £35,615.53          | £10,000         | £45,615.53                         | Derbyshire<br>Dales District<br>Council              |
| Erewash                                | £89,012.69          | £10,000         | £99,012.69                         | Erewash CVS  |
| High Peak                              | £58,245.47          | £10,000         | £68,245.47                         | High Peak<br>Borough<br>Council                      |
| North East<br>Derbyshire               | £69,501.46          | £10,000         | £79,501.46                         | North East<br>Derbyshire<br>District<br>Council      |
| South<br>Derbyshire                    | £54,382.18          | £10,000         | £64,382.18                         | South<br>Derbyshire<br>District<br>Council           |
|  |                     |                 | TOTAL PER<br>ANNUM:<br>£658,716.44 |  |

Table 2: Proposed Health and Wellbeing Partnership Funding for 2024-25

# 2 Legal

- 2.1 The Council has power to provide grants under the general power of competence set out in section 1 of the Localism Act 2011.
- 2.2 The Council's Financial Regulations state that grants to external organisations in excess of £0.100m require Cabinet authorisation while grants up to £0.100m (such as all but one of the payments proposed in this report) are to be approved by Cabinet Members.

- 2.3 The Constitution permits any body or person with decision-making powers to delegate any of those functions such as to a Cabinet Member or to any officer of the Council.
- 2.4 The Council's standard grant agreement shall be used to set out the terms and conditions for which the grant is made. This includes conditions for clawback of funding in certain circumstances and states that the Council is not liable for any employment liabilities.

## 3 Human Resources

3.1 The funding will enable local providers to deliver projects and services. Derbyshire County Council accepts no employment or future redundancy liability, with all employment and related matters to be managed by the providers.

## 4 Equalities Impact

4.1 The Localities Approach is focused on reducing inequality and therefore is considering equality impact as an ongoing function.

## 4 Corporate objectives and priorities for change

5.1 Delivers against the Derbyshire County Council Plan outcome of resilient, healthy and safe communities.