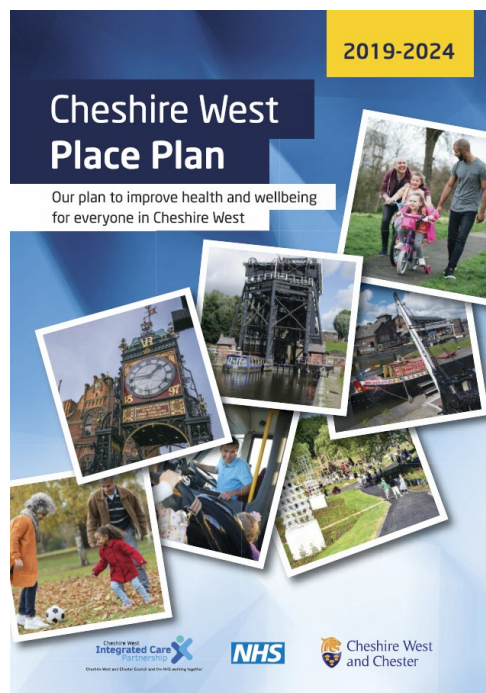


Cheshire West and Chester Place Plan 2019-2024

Refreshed Spring 2022

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Foreword

In 2019, the first Cheshire West Place Plan was launched; it was an exciting moment when we were able to present our vision for the next five years to improve the health and wellbeing of residents living in our borough. The Plan, which is also the borough's Health and Wellbeing Strategy, set out an ambition to achieve excellence and sustainability in the future with key leaders coming together to develop it.

Our vision was:

'To reduce inequality, increase years of healthy life and promote improved mental and physical health and wellbeing for everyone in Cheshire West'

When the plan was developed, nobody anticipated the COVID-19 pandemic, the global impact of which has affected local people in all aspects of our lives, with tragic consequences for many. Despite the challenges the pandemic brought, and continues to bring, communities across the borough have come together in a way that could not have been predicted and has demonstrated residents' resilience, capacity for care, and compassion. COVID-19 has arguably been one of the biggest challenges in generations for businesses, the NHS, the Community Sector¹, the Council, and our residents - and the legacies of COVID will challenge us for years to come.

The impact of COVID-19, and major changes taking place in health and care services as well as in wider society means now is the time to refresh the Place Plan. In essence, our vision remains the same as in the previous version and the Place Plan remains the Health and Wellbeing Strategy for the borough. The refreshed Plan continues to build on the rich diversity of people, communities and assets that make Cheshire West such a great place. Together we can maximise the quality of life and opportunity for all our residents.

The Plan requires us to be brave and work in ways that are different to how we have worked in the past. We are committed to working more closely with communities and partners to deliver high quality, efficient and effective public services through new and improved ways of working. Local services will become more integrated, building on the strengths, assets and expertise of individuals and communities, letting you, our residents, teach us. Only by doing this together can we develop and make things better. As we move forward, we will continue our efforts to make Cheshire West the best place to grow up, live, work, and enjoy life to the full.

¹The Community Sector is also known as the Voluntary Sector or the Voluntary, Community, Faith and Social Enterprise Sector. In Cheshire West the preferred term is the Community Sector, and this term will be used throughout the document.

Summary of the Place Plan

Our vision

To reduce inequality, increase years of healthy life and promote improved mental and physical health and wellbeing for everyone in Cheshire West.

Our values

- Shared accountability
- Promoting engagement and involvement
- Mental health and wellbeing is valued equally with physical health
- We are inclusive and value diversity
- Honest and open to feedback
- Evidence-based

Our priorities

- Addressing climate change
- Reducing inequalities
- Improving public mental health and wellbeing
- Promoting wellbeing and self-care
- Prevention and early detection
- Integrating our health and care services
- Making it easier to navigate health, social care, and community-based services
- Anticipating the future needs of our population
- Keeping people safe
- Ensuring we make the best use of our people and financial resources – spending the ‘Cheshire pound’ wisely and well, whilst improving service quality

Key areas for action

- Addressing the climate emergency
- Reducing inequalities
- Healthy lifestyles and preventing ill-health
- Best start in life
- Education and learning
- Housing
- Employment
- Creating an age-friendly place
- Preventing social isolation and loneliness
- Health and care services

Introduction

For most, Cheshire West is a great place to grow up, live, work and play. Many of our villages, towns and neighbourhoods are amongst the most attractive and dynamic communities in the country. We have a thriving economy and cultural sector, and our parks and green spaces are second to none. Compared to England, quality of life is generally good for many people across the borough, with lower levels of deprivation, higher incomes and generally, good health. However, there are pockets of significant disadvantage, where residents experience poorer living conditions, educational attainment, economic prospects, and more years of poor health.

Against this background, our population is set to increase by about 10% by 2035, (to 367,000). Numbers of children will increase by 8% and most of this increase will have happened by 2027. By 2035, there will be 3,000 more children aged 11-15. Ellesmere Port will see the largest increase in children. Older age groups will see the biggest increase, with the number of residents aged 65 plus expected to increase by 46%, and the numbers of people aged 85 and over forecast to more than double. This presents real opportunities for the borough, but also some challenges.

We have all been affected by the impacts of COVID-19 and our more disadvantaged communities have had a disproportionate experience of the pandemic. COVID-19 is the most significant public health emergency for a century; something that we had not experienced or had to respond to before. Sadly, some of our residents have died, and others have lost loved ones. Many of our citizens now face new or increased challenges with their physical health, mental health, and financial security. The impact of Long COVID is yet to be fully understood. The effects of COVID-19 will be felt for years to come.

The NHS and social care, together with the crucial support given by volunteers, has been at the forefront of the COVID-19 response. As we move out of the acute phase of the pandemic, the health and care sectors are planning for the future, recognising the ongoing need to restore services, meet new care demands and reduce the care backlogs that are a direct consequence of the pandemic. Underpinning these plans are the Health and Care Bill which gained Royal Assent on 28 April 2022 and the NHS Planning Guidance 2022/23. Both are key to the planning and delivery of services going forward, leading to further integration of the NHS and social care, so that care becomes less fragmented, and people are looked after in the right place for their needs.

The challenges we face locally are set within a broader, global context. Previous improvements in our well-being, economic prosperity, and lifestyles have taken place largely through an increase in consumption, leading to growing environmental problems. Breaking the link between increased carbon emissions and other environmental impacts and improved human well-being is the fundamental challenge of sustainable development across the world. This necessitates urgent action both globally and locally to reduce greenhouse emissions and adapt to our changing environment.

The way forward must therefore be ambitious, placing sustainable development, recovery from COVID-19, tackling inequalities and improving population health at the very heart of our Place Plan.

Our approach to population health in Cheshire West

A **population health** approach aims to improve the health of an entire population, in a defined area, whilst reducing health inequalities. In addition to delivering appropriate and high-quality health and care services, it also includes actions to reduce the occurrence of ill health and seeks to influence the wider determinants of health. This requires partners to work closely with individuals, communities, and wider partner agencies.

Our approach to population health in Cheshire West is based on the King's Fund four pillars of population health:

- Pillar 1: The wider determinants of health
- Pillar 2: The places and communities we live in
- Pillar 3: Our health behaviours and lifestyles
- Pillar 4: An integrated health and care system



Our approach to population health is supported by **population health management**, bringing together health, care and wider data, intelligence, and analytics to identify groups within the population to prioritise for support. This helps partners providing health, social care, and wider support to share knowledge, learn from it and then work together to provide care more effectively.

Locally, in Cheshire West, we are using data to identify people who are at higher risk of their health deteriorating, so that local services can better support individuals. For example, we compare and investigate correlations between acute activity and wider determinants on a geographical basis. This is then mapped against a broad range of nationally published indicators and compared to latest acute activity data to produce data packs at a Care Community level (see Pillar 4 for a description of our Care Communities).

The areas with a high prevalence of particular conditions are then identified not only at a Care Community level, but across the whole of Cheshire West. One such condition is cardiovascular disease.

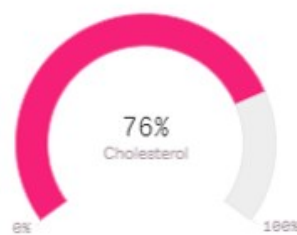
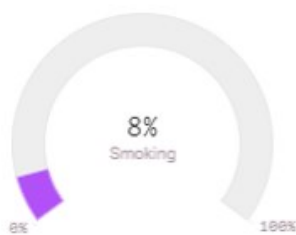
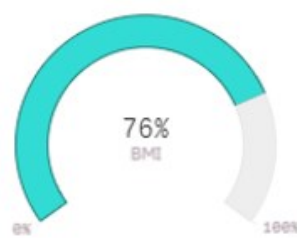
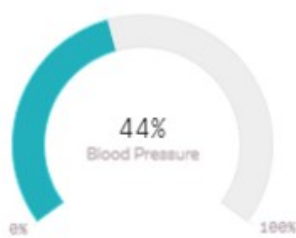
Prevalence of cardiovascular conditions in Cheshire West is relatively high at around 18% of the population. This relates to members of the population who are recorded as having at least one of the following cardiovascular conditions: Atrial Fibrillation (AF), Angina, Congenital Heart Disease (CHD), heart failure or hypertension.

Total patients with cardiovascular conditions

67,598

18.5% of Cheshire West population

The numbers of people that smoke, have high cholesterol and high BMI remain relatively static, however, there has been an increase in the proportion identified as having a high blood pressure reading in recent months.



The population health and population health management approaches enable us to work more closely with partners beyond the health and care system, identifying how to work together to strengthen ill-health prevention; simplify how people can access services; and attempt to solve the interlinked wider social problems that prevent health outcomes improvement.

Pillar 1: The wider determinants of health

The origins of our health and wellbeing are not health services, but the social and economic conditions we are born into and in which we live our lives. These determinants are known as the wider determinants, or the social determinants of health. They are a diverse range of environmental, social, and economic factors, including climate change, the built and natural environment; housing; income; education; employment; and access to leisure opportunities. These factors are the most important foundation for health and determine the extent to which people have the physical, social, and personal resources to deal with life. They also influence our health behaviours such as whether we smoke or get enough exercise. Health inequalities will continue if social inequalities remain.

Tackling the climate emergency

Climate change has been identified as the greatest threat to global public health this century and fundamentally impacts on the social and environmental determinants of health – clean air, safe drinking water, sufficient food, and secure shelter. We are experiencing climate change at a rate that is completely unprecedented and it is likely to accelerate further. The effects of climate change on public health are largely negative, with hotter, drier summers and more droughts, and wetter winters with more severe storms, leading to flooding. Hotter summers mean more sunlight and ultra-violet exposure at dangerous levels; dehydration; deaths from summer pollution and also deaths from heat exposure, particularly those who are most frail. Wetter weather, especially flooding, is linked with mental ill-health. More intense storms and floods, more frequent heatwaves and the spread of infectious diseases from climate change threaten to undermine years of health gains.

The 2022 United Nations (UN) report *Climate change: a threat to human wellbeing and health of the planet* states that to avoid mounting loss of life, biodiversity, and infrastructure, ambitious, accelerated action is required to adapt to climate change at the same time as making rapid, deep cuts in greenhouse gas emissions. The report also stresses that the importance of having infrastructure and buildings that are prepared for extreme weather cannot be overstated.

In Cheshire West we are committed to mitigating the effects of and adapting to climate change. We are working collaboratively across the Council, the NHS and wider partners through a newly established Sustainability Network and a range of Taskforce Groups. The Cheshire West Sustainability Network is bringing together the range of complex actions set out in the Council's *Climate Emergency Response Plan* (2021) and the NHS actions from the *Greener NHS Programme*. Local NHS Hospital and Community Trusts developed Green Plans in January 2022 and these feed into an overarching Green Plan for the Cheshire and Merseyside Integrated Care System, published in March 2022.

We will:

- Continue to prioritise climate change as an emergency, strengthening the engagement with relevant groups and strategies, alongside a wider programme.
- Prioritise climate change by including it in each organisation's strategic objectives, staff induction, personal objectives, and all business reports.
- Implement integrated and sustainable transport options including access to NHS services.
- Lead the community forest tree planting programme – Trees for Climate.
- Support the award-winning Natural Health Service.
- Maximise green social prescribing schemes.
- Promote active travel and the use of public transport rather than cars
- Develop an Electric Vehicle (EV) infrastructure strategy, alongside delivering EV infrastructure within the borough.
- Make good use of public communications and campaigns through monthly bulletins and social media.
- Ensure new procurements of NHS and Council services are climate change sensitive.
- Make the borough carbon neutral as soon as possible before 2045.
- Cheshire West and Chester Council to achieve carbon neutrality by 2030.
- Maximise 'modern workforce' principles and reduce travel for staff
- For emissions controlled directly by the NHS (the NHS Carbon Footprint), achieve 80% reduction by 2028 to 2032 and reach net zero by 2040.
- For emissions that the NHS can influence (the NHS Carbon Footprint Plus), achieve 80% reduction by 2036 to 2039 and reach net zero by 2045.
- Work with housing associations to retrofit homes, including private homes to reduce fuel poverty and greenhouse gas emissions.
- Work with businesses and the chamber of commerce to prioritise the health and wellbeing of citizens and environmental sustainability in economic recovery/growth policies.
- Enforce existing smokeless fuel standards.

Health inequalities

The main cause of health inequality is social inequality, that is the variation across the population in income, employment, education, and access to health care. In England, health inequalities were already worsening before the COVID-19 pandemic. The report *Health Equity in England: The Marmot Review 10 Years On (2020)* showed that life expectancy in England had stalled and the impacts of austerity policies had damaged health and increased health inequalities. The 2021 report *Build Back Fairer: The COVID-19 Marmot Review* demonstrated that these inequalities had worsened the impact of the COVID-19 pandemic for those on the lowest incomes and would widen health inequalities in the longer term as a result of widening inequalities in key wider determinants of health.

Despite the deteriorating national and regional context, there is still scope for local areas to make a real difference. For example, in 2021, the Cheshire and Merseyside Champs Public Health Collaborative and the Population Health Board of the Integrated Care System commissioned the Institute of Health Equity (IHE), to support work to reduce health inequalities in Cheshire and Merseyside. The aim of the programme is to take action on the social (wider) determinants of health and to build back fairer from COVID-19. The final report, *All together Fairer: health equity and the social determinants of health in Cheshire and Merseyside* will be launched on 26 May 2022 and will include a wide range of recommendations and actions for us to consider. This provides added focus

and priority to existing work on health inequalities in the sub-region and will help develop new momentum and recommendations for effective action in the context of the COVID-19 pandemic. Cheshire West is part of the Cheshire and Merseyside Marmot community and is fully committed to taking action on the recommendations outlined in the report.

The development of the Integrated Care System (ICS) in Cheshire and Merseyside (see Pillar 4 below) with its nine Places (on Local Authority footprints) presents a real opportunity to forge an action-based, accountable system which will generate greater health equity in the region based on partnerships with other sectors. The ICS is also supporting the reduction of health inequalities through the national Core20PLUS5 programme. CORE20 refers to the most deprived 20% of the national population. PLUS refers to the population groups in Cheshire and Merseyside that experience poorer than average health access, experience and/or outcomes who may not be captured in the CORE 20 alone and would benefit from a tailored healthcare approach. For example, certain ethnic minority communities, rural communities, people experiencing drug or alcohol dependence, or Gypsy, Roma Traveller Communities. 5 refers to five key clinical areas of health inequalities:

- Maternity
- Severe mental illness
- Chronic respiratory disease
- Early cancer diagnosis
- Hypertension case finding

The CORE20PLUS5 Programme is:

- Developing a list of high impact actions in partnership with local systems which will provide a practical menu of options for engaging with the defined communities.
- Driven by quality improvement methodologies to ensure measurable and sustained improvement.
- Working closely with Local Authorities, communities, and the Community Sector in tackling health inequalities.

This ambitious programme of work will run alongside wider efforts to reduce health inequalities. Local work on health inequalities is important. Whilst Cheshire West is generally thought of as an affluent borough, the overall picture masks stark gaps between areas of prosperity and deprivation. The median (average) local household income is £28,525 per year but 15% of local households have an annual income of less than £15,000. Some 24,670 local people live in neighbourhoods ranked in the most deprived 10 per cent in England and 9,003 local children lived in low-income houses during 2019/20. Whilst female life expectancy in the borough continues to rise, for men it has started to fall. The inequality in both male and female life expectancy at birth has shrunk. Male life expectancy across the borough varies by up to 9.8 years for men and 7.8 years for women.

To address inequalities, investment should be targeted to where need is greatest, an approach known as proportionate universalism. Long term investment in a life course approach can limit ill health and the accumulation of risk throughout life. Altering policies, environments, and social norms to reduce inequalities will benefit all our residents, as well as future generations. Therefore, this approach can provide high returns for health and contribute to social and economic development. A holistic approach to investment is required, focusing on preventing health risks and reducing their cumulative effect throughout life and across generations to mitigate the economic burden of health costs.

We will:

- Agree which recommendations in the *All Together Fairer* Marmot Report are priorities for Cheshire West and include them in our action plan and outcomes monitoring framework.
- Increase community engagement to build trust, understand needs and incorporate lived experience into appropriate planning and service delivery, brokered by the Community Sector and Poverty Truth Advisory Board, with a focus on underrepresented groups including Romany Gypsy, Traveller and Boating communities. This includes better representation in our nine Care Communities (see Pillar 4: An integrated health and care system).
- Build on the West Cheshire Anchor Network to maximise social value² opportunities and community wealth building.
- Address food poverty via increased access to healthy, affordable, and culturally appropriate food – shifting from food banks/emergency provision to social supermarkets integrated with welfare advice and service signposting, rooted in dignity and fairness.
- Adopt a proportionate universalism approach, where universal policies and interventions are developed to be more intense where need is higher.
- Adopt Cheshire and Merseyside’s Marmot indicators into local organisations including NHS, Cheshire West and Chester Council, businesses, and the Community Sector during 2022-23
- Work in partnership with the Integrated Care System to support the CORE20PLUS5 programme locally
- Integrate wider determinants of health in all policies and in all work commissioned. All Council and local NHS strategies and decisions to be assessed for wider determinants of health impacts.
- Ensure our local poverty and other strategies includes commitment to reducing digital exclusion.
- Work in partnership with local communities to assess digital exclusion priorities.
- Assess the budget for addressing the social determinants of health in the NHS and local authorities in 2022/23.
- Work with Community Sector to include their contributions to addressing the social determinants of health.
- Extend the anchor organisation approach within the NHS, and to all other stakeholders e.g., public services, academic institutions, police.
- Implement and enforce a 15% social value weighting³ mandatory in all NHS procurement.

² Social value can be defined as the wider benefit gained by a local community from the delivery of public contracts. Social value can be split into three areas.

- Economic (e.g., employment or apprenticeship/training opportunities)
- Social (e.g., activities that promote cohesive communities such as volunteering or flexible working policies)
- Environmental (e.g., efforts in reducing carbon emissions)

³ Tenders for public sector contracts are generally evaluated on price, quality, and social value. Social value weighting is the percentage of the overall score allocated to the social value element of the evaluation.

Pillar 2: The places and communities we live in

The wider determinants of health are evident in the places and communities we live in, impacting our lives significantly. The quality of the built and natural environment, including neighbourhood design, accessible spaces, housing, the food environment, green spaces, transport, and air quality affect our health and our health behaviours. In addition, there is strong evidence for the positive impact social relationships and community networks have, especially on mental health and wellbeing. These factors are shaped significantly by the development and implementation of environmental planning and design decisions, both nationally and locally.

Environmental disadvantages are not evenly spread. The more disadvantaged a community, the more likely it is to lack good quality open and accessible spaces, easy walking and cycling routes and well-located services. These communities are also more likely to experience environmental burdens such as pollution and crime. We recognise the key role the Community Safety Partnership plays and we want to tackle hate crime and promote tolerance across the borough.

All these factors contribute to clear inequalities in society.

We will:

- Strengthen our joint approach to planning and developing localities to promote good health for all residents of Cheshire West.
- Use clear strategies and principles of healthy design – with businesses, the built environment, and public services - to improve the health and wellbeing of our residents and tackle health inequalities.
- Strengthen infrastructure developments such as cycleways and public transport networks that support healthy lifestyles for all our residents.
- Ensure that our social prescribers have a holistic view of the people they are supporting, e.g., that debt might be an issue as well as a person's symptoms of ill-health, and that they are equipped to respond appropriately.
- Improve access to those who have a social prescribing role.
- Support community-led opportunities to increase physical activity through e.g. school settings such as Smile for a Mile, free access to parks and green spaces and active travel.
- Tackle discrimination and racism and their outcomes.
- Identify methods to involve residents in the development of health inequalities assessments and remedies at place level, e.g., through the creation of a community engagement panel.
- Work with residents and local stakeholders to understand 'true' regional poverty and local financial pressures including the reality of all care costs, in-work poverty, debt burden, tax credit/welfare reforms, benefits, and housing costs (e.g., Poverty Truth Commission).
- Support the Community Sector to act on the wider determinants of health.
- Develop place-based partnerships to strengthen approaches to community policing (e.g., public, and mental health, police, children's services, DWP) and develop a public health approach to violent crime.
- Work with residents and partners (e.g., businesses, NHS) to improve quality of existing green spaces in areas of higher deprivation.
- Localise region-wide actions to create health promoting environments (e.g., unhealthy advertising, planning decisions).
- Work in partnership to regenerate areas.
- Work alongside local communities to better include their needs when reviving local high streets.

- Extend incentives to encourage people back to public transport.

Best start in life

Giving every child the best start in life is crucial to reducing health inequalities across the life course. The best start in life begins with a loving and secure relationship with parents, carers, and family. This underpins a child's brain and language development, their ability to learn, their emotional wellbeing, and their capacity to form and maintain positive relationships with others.

Achieving the best start for children also means reducing childhood poverty, providing access to affordable housing, good education, jobs and sustainable transport. This is key to reducing inequalities. We want to create a safe environment that ensures children and young people have the best foundations, are ready to start school, and can thrive and develop skills enabling them to achieve their full potential.

A focus on early years will help improve our breastfeeding rates, support a reduction in childhood excess weight and maintain the uptake of childhood immunisation. It will also help reduce the risk and the impact of adverse childhood experiences, enabling the people of Cheshire West to have longer happier lives.

In addition, improving children and young people's mental wellbeing will have a positive effect on their cognitive development, learning, physical and mental health, and social and economic prospects in adulthood.

We want to join up further early help services based on a clear understanding of local needs, including emerging national challenges such as child exploitation. Risks to positive emotional health and wellbeing must also be addressed, including parental substance misuse, the impact of parental conflict and domestic violence. Mental health services need to be available and accessible.

We will:

- Increase breast feeding rates.
- Increase the numbers of children who are a healthy weight.
- Ensure Our New Ways of Working practice model underpins all our priorities for children and young people.
- Increase the timeliness of health assessments for children in our care living outside of the borough.
- Increase the percentage of children in our care who have timely dental checks.
- Support our young carers.
- Enable and support families to provide the best care and support they can to their children and when this is not possible, support families to being committed to acting as responsible and responsive corporate parents to children in our care and to care leavers.
- Act locally to reduce child poverty.
- Intervene at the earliest stage possible to prevent problems for children, young people and their families escalating.
- Strengthen our trauma informed approach to supporting children and families
- Make sure that the crucial role of the Community Sector is maximised.
- Review inequitable outcomes in early years and bring the system together to ensure equitable early intervention, involving all partners (e.g., education, social care - children's services, communities and Community Sector, children's boards, public services, NHS, Local Authority).

- Assess early years provision and parental support and provide further support for early years settings in more deprived areas and in collaboration with communities in these areas and / or for example, families with disabilities, or with English as a second language.
- Assess how the Adverse Childhood Experience agenda links to the early years approach and ensure families voices are included in this agenda.

Education and learning

Children's education and skills development are important for their own wellbeing and for that of Cheshire West as a whole. Good quality early childhood education has lasting positive effects on health and other outcomes and these outcomes are particularly strong for those from disadvantaged backgrounds. Learning ensures that children develop the knowledge and understanding, skills, capabilities, and attributes that they need for mental, emotional, social, and physical wellbeing now and in the future. Educational qualifications affect a person's ability to get a job, which in turn influences income, housing, and other material resources.

In Cheshire West, we know that children and young people facing disadvantage do less well in school than their peers. They are at risk of becoming adults living in poverty unless they catch up with their peers. Those who grow up in poverty are less likely to be able to afford educational activities and resources; have parents who are more stressed and less well placed to help them with schoolwork; are more likely to leave school early and without qualifications; and are less likely to have positive aspirations for their future.

Support and services available should include early help and prevention services; special educational needs and disability services; support for children and families; and support for school's settings and post-16 providers.

It's not just children's education that matters – an approach to learning that covers adulthood is also needed. Improving skill levels and qualifications can have a positive economic impact – it has been estimated that the lifetime returns on investment of level 1 courses for those aged 19-24 is £21.60 for every £1 invested.

Education in adulthood can have a positive impact on the health and wellbeing of participants and often, their families and the wider community. Adult learning can improve confidence and social connectedness, health behaviour, skills, and employment opportunities, each of which affects health and wellbeing. Non-formal and informal learning for older people can decrease social isolation, whereas family learning for parents and children can help to tackle the intergenerational transfer of disadvantage.

Many adults face specific barriers to participating, such as time and financial constraints. This must be addressed if learning is to benefit all. To increase the likelihood of positive outcomes, many individuals will need support to manage the transition to adult learning.

We will:

- Enhance our school readiness programmes with a particular focus on closing the gap between our most vulnerable children and their peers.
- Reduce the educational attainment gap between disadvantaged and vulnerable children and their peers.
- Help children and young people to build their aspirations.

- Support students from all backgrounds into further and higher education, employment, and training.
- Support our schools and colleges to be inclusive and support our SEND population to engage in more mainstream education.
- Take a lifelong approach to learning.
- Make sure that access to adult learning is available to all but targeted and tailored to those with most need.
- Design programmes that recognise 'softer' outcomes such as improvements in self-confidence, as well as academic and vocational progression.
- Work with employers to support workplace learning.
- Encourage employers to increase the number of apprenticeships they offer and ensure that these are reaching those most in need.
- Be role model employers ourselves.
- Better communicate available youth services and reduce inequalities in access to these youth services, including transport costs.
- Assess provision of career guidance and aspiration approaches in primary, secondary schools and FE colleges at each place.
- Work with the University of Chester to ensure the academic courses they provide align with the needs of the borough
- Local Enterprise Partnership and Chamber of Commerce to work with businesses to support links with schools for training, recruitment and offering mentorships and for provision of youth services.
- Work with young people to hear their views about what is needed in Cheshire West.

Healthy homes

Housing conditions influence our mental and physical wellbeing. For adults, inadequate or insecure housing causes or contributes to many preventable conditions, including respiratory, nervous system and heart diseases, falls and anxiety and depression. Children are particularly affected by poor quality or insecure housing. They are more likely to be stressed, anxious and depressed, have poorer physical health and do less well at school. Fuel poverty and homelessness have important consequences for health.

Around 10% of excess winter deaths are caused by fuel poverty. The number of homeless people is rising. People who are homeless are more likely to experience physical and mental health problems.

High-quality housing can support health and care services locally in delivering better population health. A well-housed population helps to reduce and delay demand for NHS services and allows patients to go home from hospital when they are clinically fit to do so. In the short term, housing can support local areas in enabling timely discharge from hospital. Longer-term strategic use of public sector and other partners' estates could potentially free up land to provide affordable housing. For people with mental health problems, good-quality supported housing can support independent living in the community. Technology can help people remain independent in their own homes for longer.

We will:

- Work with the Local Enterprise Partnership, council planners and wider partners such as Housing Associations to ensure there is a range of good quality, affordable housing available that matches demand and meets our residents' needs.

- Work to provide affordable housing and social housing to offset deficiencies in universal credit payments not meeting private sector rents, with a focus on one-bedroom properties for single people.
- Work across the borough to prevent, reduce and address homelessness.
- Work with landlords, both social and private, to do more to prevent people from losing their home.
- Work to ensure sustainable, high quality and low carbon housing/energy supplies are available thereby reducing fuel poverty.
- Maximise the use of technology and telecare as appropriate to support individuals' needs.
- Review private rented sector regulation actions in the Levelling Up white paper [Levelling Up the United Kingdom - GOV.UK \(www.gov.uk\)](https://www.gov.uk/levelling-up-the-united-kingdom)
- Support national advocacy to strengthen local powers and capacity within enforcing authorities across planning and housing.
- Support the development of an affordable housing definition in Cheshire and Merseyside and link to 'true' regional poverty.
- Create a platform where housing and residents can communicate about how housing is impacting on health and wellbeing.

A healthy place to work

We know that work is good for health and unemployment is bad for it. Good quality work is beneficial for our health and wellbeing and protects against social exclusion through the provision of income, social interaction, identity, and purpose. Good quality work also needs to be sustainable and offer a minimum level of quality, including a decent living wage, opportunities for in-work development, flexibility to enable a balanced work and family life, and protection from adverse working conditions that can damage health.

On the other hand, unemployment is associated with increased sickness and early death including:

- Limiting long-term illness
- Heart disease and associated conditions
- Health-harming behaviours
- Poor mental health
- Suicide

Just as unemployment can be a risk factor for various health conditions, disability and/or long-term health conditions (such as poor mental health and musculoskeletal conditions), can also be the cause of unemployment.

Work and health are central to people's lives. In Cheshire West, the top conditions for which people claim benefits due to inability to work are mental health and behavioural disorders and musculoskeletal problems. This equates to approximately 6,000 people, however there are many more people struggling to work or hold down jobs due to ill-health.

Helping people obtain or retain work and be happy and productive in the workplace is a crucial part of the success and wellbeing of every community and employer. Our ambition is to enable all residents to take advantage of local opportunities for prosperity.

We will support residents in Cheshire West to meet their full potential by collectively addressing and removing health-related barriers to work. This will require collaboration between partners from across the private, public and Community Sector at both sub-regional and local levels.

We will:

- Strengthen engagement with the business sector to support economic development to address poverty and health through delivery of the Inclusive Economy Strategy.
- Strengthen the use of social value within local procurement, capital investments and planning to maximise local training, employment, and contracting opportunities.
- Grow employability through increased training, work placement and apprenticeship opportunities and provision of welfare support via the Skills and Work Teams, Princes Trust, Citizen's Advice and Cheshire West Voluntary Action to improve skills, confidence, mental wellbeing and employment of local people.
- Remove significant barriers to employment and financial independence through our local support programmes, including for those with severe mental health issues.
- Collaborate with partners from across the private, public and Community Sectors to create pathways to good jobs and jobs that are more flexible to accommodate individuals' needs.
- Work with the Community Sector to promote volunteering to support people into employment.
- Promote a local living wage and support progress to higher paid work.
- Support people to become more financially resilient.
- Enable people to be well in work by working with employers to support employees mental and physical well-being.
- Support employers to be age-, carer- and disability-friendly.
- Maximise opportunities to better use the skills and knowledge of our older residents.
- Use our cultural and natural assets for the benefit of our workforce.
- Make the case to businesses that they have underdeveloped impacts on health and health inequalities and should strengthen their social impacts.
- Include health in businesses environmental, social and governance strategies.
- Businesses, public sector, and Community Sector to actively communicate and publish how meeting equality duties in recruitment and employment including pay, progression, and terms.
- Assess local workplaces and their capacity to produce and implement policies to recruit and retain people with a disability or long-term condition.
- Establish criteria for healthy workplace standards for public and private sectors, as part of a Cheshire and Merseyside Fair Employment Charter, to include:
 - Wages to meet the minimum income for healthy living
 - Provision of in work benefits including sick pay, holiday and maternity/paternity pay
 - Provision of advice and support e.g., debt and financial management, housing support at work
 - Provision of education and training on the job
 - Strengthen equitable recruitment practices including provision of apprenticeships and in work training, recruitment from local communities and those underrepresented in the workforce.
- Embed widescale social value requirements in the local economic partnerships.

Creating an age-friendly place

Good health is the foundation of ageing well. Getting older is not a process of inevitable decline and many people stay fit and well long into their later years. Age brings with it a host of opportunities and advantages, but it can also be a time of illness, dependence, and loneliness.

We want older people in Cheshire West to enjoy their later years, and live life to the full. We are signed up to the World Health Organization's Global Network of Age-Friendly Communities, signifying our commitment to learning from and sharing best practice with other areas and we will relaunch our Age-friendly Network in June 2022. We recognise that older people are a very diverse group, covering a wide range of ages, ethnicities, social and economic backgrounds, and life experiences. As such, they will experience life in many different ways. Some may work past retirement age, many may have caring responsibilities for a parent, partner and/or grandchildren; a number will do voluntary work or mentoring in the workplace; and some may take up new educational and leisure opportunities. Older people will have at least as diverse a range of lifestyles as the adult population of working age. We want our older population to live well, be independent and continue to contribute to and be active members of their community.

We will:

- Develop an Age-friendly action plan for the period 2022-25 that will align with and support the Place Plan. Cheshire West's Age-friendly Steering Group will lead this piece of work.
- Develop a monitoring and evaluation plan to measure the impact and outcomes of the actions implemented (some of which will be reflected in the Place Plan outcomes).

Preventing social isolation and loneliness

Anyone can experience social isolation and loneliness. Groups particularly at risk include:

- 16- to 24-year-olds
- People with one or more long-term conditions
- People who are disabled
- People who need support for their mental health
- People who are unemployed
- People who are subjected to domestic abuse
- Carers
- Those with complex social needs which affect their wellbeing
- Older people 65 years and over

The health impact of loneliness is equivalent to smoking 15 cigarettes a day. The Community Sector plays a key role in supporting our residents' wellbeing, signposting, and providing services, for example befriending schemes and projects such as 'Men in Sheds'. A strategic approach is needed to ensure that we tackle social isolation and loneliness across Cheshire West and that our interventions are successful.

The aim of social prescribing is to connect individuals with non-clinical or social needs to opportunities for social interaction, support, learning and healthy living. This will relieve some of the pressure on health services, but more importantly, it will improve the quality of life and wellbeing for our residents.

We will:

- Use the assets available in our community, mobilising individuals, associations, and organisations to work together to improve health outcomes for all.
- Continue our programme of work to reduce the number of suicides in the borough.
- Implement a coordinated approach to social prescribing across the borough.
- Provide individuals, associations and organisations with information and support to help address social isolation.
- Support our Community Sector with their wide-ranging wellbeing work.
- Develop a common approach to measuring the impact of social prescribing on the individual.
- Train a number of people to become social prescribing link workers in primary care who will work with social prescribers in the community.
- Monitor and evaluate the impact and outcomes of our approach to social prescribing.
- Work with partners to create a well-publicised network of opportunities and support for residents of all ages to alleviate social isolation.
- Promote green social prescribing schemes.

Pillar 3: Our health behaviours and lifestyles

Health behaviours are closely related to the wider determinants of health. In Cheshire West we know there are higher rates of smoking, obesity, and harm from alcohol in lower socioeconomic groups and among those living in our more deprived areas. This close association between health behaviours and the wider determinants is the reason we must focus more broadly than health care alone in our efforts to improve health.

Although the Place Plan stresses the wider determinants and a good start in life, this does not mean that health behaviours are unimportant. Current lifestyles present a serious threat to population health, particularly for more disadvantaged groups as noted above.

What helps to improve health?

- Stopping smoking
- Drinking alcohol sensibly
- Increasing physical activity
- Eating healthy food

We will:

- Promote healthy behaviours in children, young people, and adults to prevent them developing harmful habits.
- Provide services (including debt management and substance misuse services) to those most at risk from these behaviours to help them move towards healthier lifestyles.
- Help all people keep themselves well and independent in their homes for longer.
- Promote free or low-cost wellbeing opportunities in the borough, for example Brio Leisure, including the health services they provide, Mersey Forest, arts, leisure, and cultural events.
- Work on a structured strategy and action plan across the health and care system to improve mental health and wellbeing for all ages.

- Implement 'Making Every Contact Count' where every contact with a service (not just a health service or professional) is an opportunity for a conversation about ways to live a healthier life.
- Maintain and promote the Cheshire West *Live Well* website so that residents can:
 - Find information, advice, and services easily
 - Make informed choices
 - Take personal responsibility for their health and wellbeing.

Pillar 4: An integrated health and care system

Cheshire West 'Place' is one of nine places within the Cheshire and Merseyside Integrated Care System (ICS). The ICS's purpose is to ensure that the people of Cheshire and Merseyside become healthier and continue to have access to safe, good quality and sustainable services. The ICS also has a key role to play in reducing health inequalities, through the CORE20PLUS5 programme but also more broadly, for example, through its sustainability and Green Plans.

The ICS will be established as a statutory body on 1st July 2022. It will include a new NHS body called NHS Cheshire and Merseyside Integrated Care Board (ICB) and a statutory Integrated Care Partnership (ICP) called NHS Cheshire and Merseyside Health and Care Partnership.

The Cheshire and Merseyside ICB will be responsible for the day to day running of the NHS in Cheshire and Merseyside, including planning, and buying healthcare services and taking over the functions of the Clinical Commissioning Groups, which will be abolished when the ICS gains legal status. The ICB will arrange for some of its functions to be delivered and decisions about NHS funding to be made in its nine Places, through Place-Based Partnerships. The ICB will be accountable for NHS resources deployed at Place.

The Integrated Care Partnership (known as Cheshire and Merseyside Health and Care Partnership) will provide a forum for NHS leaders and local authorities to come together as equal partners alongside other stakeholders from across Cheshire and Merseyside. The Cheshire and Merseyside Health and Care Partnership will generate an integrated care strategy to improve health and care outcomes.

Health and Wellbeing Boards (based on a Place/Local Authority footprint) will continue to develop the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy. Unlike other Places in Cheshire and Merseyside, for Cheshire West, this Place Plan is the Health and Wellbeing Strategy.

Like other Places, the Cheshire West health and care system is tackling increasingly complex health issues experienced by our population. The system was not designed for people with multiple conditions using multiple services. The complexity of people's health issues today means services need to be designed and integrated around an individual's needs rather than around separate organisations. We also recognise the key role of the Community Sector in delivering health and care services. We want to work with people locally to jointly shape services, improve the quality of care, decrease health inequalities, and make sure that services are financially sustainable for the future.

Partners across the borough, including the NHS, Local Authority, the Community Sector and Healthwatch are working to integrate care, with a focus on prevention, supported self-care and delivering personalised care closer to home. In this way, local people will benefit from services which are easier to access, better organised, more joined up and, most importantly, targeted to their needs. The aims of a more integrated approach are to:

- Improve population health
- Improve healthy life expectancy
- Reduce health inequalities
- Transform the experience and quality of care
- Ensure the sustainable delivery of health and social care

Our nine Care Communities are key to the success of this work. Care Communities are about the local community, bringing together organisations that aim to transform, develop, and deliver community health and social care services. They include the local GP network (known as the Primary Care Network), and the wider primary care team, including Community Mental Health Teams, District Nurses, Occupational Therapy, Community Physiotherapy, Midwives, Dentists, Opticians, Pharmacists, and other community specialists. There is also representation from local people themselves.

Our Care Communities take into account the whole community. This includes others who have a significant role such as Social Care, Public Health, Education, Town Planners, Local Employers, Third Sector, Local Sports Groups, Parish Councils and of course the Communities themselves. The Care Communities arrange care and provide innovative health solutions in partnership with the local community that suit the needs of a whole population and takes the views of all these stakeholders into account.

We will:

- Develop and publish a more detailed action plan, to sit under this Place Plan, with joint leadership from health and care, based on local data, intelligence and by taking resident views into account.
- Continue to develop our approach to population health management, using data and analytics to prevent ill-health, address health inequalities, and identify those residents who are at higher risk of their health deteriorating, enabling us to deliver preventive interventions.
- Pursue environmental sustainability and health equity together.
- Continue to develop and formalise integrated ways of working across the Local Authority, NHS and other providers in Cheshire West.
- Share Local Authority and NHS prevention budgets and greater NHS percentage investment in upstream, prevention of ill-health, with annual monitoring of spend.
- Join up care pathways across the Council, the NHS, and the Community Sector.
- Redesign local services as necessary.
- Develop closer relationships with the residents in our communities.
- Support the development of our nine Care Communities
- Strengthen involvement of the Community Sector in care community delivery, supported by increased and longer-term funding, to build community resilience.
- Tackle the backlog of elective care, reduce long waits and improve performance against cancer waiting times standards – all resulting from the COVID-19 pandemic.
- Continue to deliver the NHS COVID-19 vaccination programme and meeting the needs of patients with COVID-19.
- Improve the responsiveness of urgent and emergency care and build community care capacity– keeping patients safe and offering the right care, at the right time, in the right setting.
- Improve timely access to primary care.

- Improve mental health services and services for people with a learning disability and/or autistic people – maintaining continued growth in mental health investment to transform and expand community health services and improve access.
- Exploit the potential of digital technologies to transform the delivery of care and patient outcomes – achieving a core level of digitisation in every service.

The Health and Care workforce

Our joint health and care workforce is one of our biggest Place assets. Pre COVID-19, across Cheshire West, and indeed the whole country, workforce shortages were the biggest challenge facing health and care services. This posed a threat to the delivery and quality of care as these shortages took a significant toll on the health and wellbeing of staff.

COVID-19 both highlighted and exacerbated demands on the local health and care workforce. COVID-19 changed the face of NHS and social care, generating rapid transformation at a time of immense pressure and personal and professional challenge. In responding to the pandemic, we saw the commitment, professionalism and compassion of our health and care staff shine through. It is important to recognise their sacrifices and achievements and acknowledge the emotional toll the pandemic has had on them. In Cheshire West we will build on the lessons learned during the pandemic, helping our health and care workforce stay well, taking steps to support staff and improve employment practices and culture.

We want to make sure our health and care workforce supports a strong, safe, and sustainable health and care system that is fit for the future.

We will:

- Support the transition of our health and care workforce to become a wellbeing workforce, enhancing their role in prevention.
- Invest in the workforce, with more people, new ways of working and by strengthening the compassionate and inclusive culture needed to deliver outstanding care.
- Align our health and care workforce strategies to support our approach to joined up care for individuals.
- Address any local inequities in recruitment, pay and career progression by gender, ethnicity, and occupation.
- Grow and develop our local health and care workforce, regardless of which organisation they work for.
- Attract, recruit, and retain people within Cheshire – keeping our Cheshire workforce in Cheshire.
- Offer focused training and recruitment to domiciliary care careers to address workforce shortages.
- Maximise the potential of staff through better use of existing skills, enhancing those skills, and redesigning roles, including use of the Apprentice Levy.
- Develop staff so that they are equipped with the necessary digital skills to make the most of new technologies.
- Offer development opportunities for staff to progress in their career.
- Strengthen partnership working with the University of Chester to increase local training and employment opportunities to address healthcare workforce shortages, build healthcare resilience and maintain quality, especially in rural areas. This includes medical, nursing and health visiting places and work placements.

Conclusion

The past two years have been extremely challenging for all and the role of individuals, families, communities, and the public, private and Community Sectors has been critical. Residents of Cheshire West can be proud of the vital role they have played in keeping themselves, their families, and their communities safe. Despite the challenges of COVID-19, the plans, actions, and priorities of the Place Plan have helped shape our response to the pandemic and we have continued to drive forward our priority areas and actions.

As we go into 2023/24, we will undertake a comprehensive stocktake and rewrite of this Place Plan, setting out and addressing the challenges and changes needed in the wake of the pandemic. The Plan will focus on health and social inequalities Cheshire West, which will have been exacerbated by COVID-19 as well as wider societal conditions, and what we intend to do to address them. We will have a clear outcomes framework to support our approach to population health overseen by the Health and Wellbeing Board; this will allow you the public, to hold us to account in reducing health inequalities in our borough. We will ensure that planning and decision making remains local in 'Our Place' and that the residents of our borough remain at the heart of our plans.

How you can get involved

Individuals and communities are at the heart of everything we do, and your views and perspectives are instrumental in shaping our Place Plan. This refreshed Plan has been informed by a wide range of consultations and engagement activities with you over the last 2 years. These are listed in Appendix 1.

As a system, we are committed to ongoing conversations with our communities through our Care Communities Steering Groups, building on our commitment to the 'Play Your Part' campaign and the recommendations of the consultations. Through our Care Community Steering Groups, we will be asking communities to agree their own local priorities and identify how they can work together alongside local organisations, including the public and Community Sector. We will also be asking our residents and Care Communities to get involved in the rewrite of this Plan, scheduled for publication in 2024.

In the meantime, you can continue to play your part by:

- Looking after our place and the wider environment – reduce, reuse, recycle.
- Learning to live safely with COVID-19
 - Get vaccinated
 - Let the fresh air in – open doors and windows
 - Practice the basics of good hygiene (hand washing; covering nose and mouth when you sneeze, or cough clean your surroundings)
 - Know when to consider wearing a face covering or face mask.
- Being supportive parents, guardians, and carers, encouraging children to be the best and the happiest they can be.
- Taking advantage of training and job opportunities, set high aspirations for yourself and your family.
- Getting involved or volunteering in your local community.
- Keeping an eye out for your neighbours, especially older people in your neighbourhood and help them to be independent at home for as long as possible.
- Looking after your own health and wellbeing by attending free health checks, screening, immunisations and seeking advice about ways to make healthier choices, for example

through using the Cheshire West Live Well website

<https://www.livewell.cheshirewestandchester.gov.uk>

- Being a good role model – don't smoke, drink alcohol sensibly and eat healthily
- Seeking support if you are feeling anxious, stressed or lacking in confidence: look after your mental wellbeing at least as much as your physical wellbeing [Tips for everyday living - Mind](#)
- Keeping as active as you can, whatever your stage in life – try walking, cycling or just getting outdoors.
- Thinking about which service you need for your healthcare issue – there is lots of information on your GP practice website or at <https://www.nhs.uk>
- Only using Accident and Emergency for emergencies and ringing NHS 111 for non-emergencies.
- Have your say and tell us how we are doing.

Monitoring and evaluating the Place Plan

In our last Place Plan, we set out some measures of success, the most important measures being how we impact on people's lives and wellbeing for the better. Other measures include financial responsibility and balance for our budgets, good quality rating from regulators such as the Care Quality Commission (CQC) and meeting NHS performance targets. The original Place Plan outcomes have been reviewed and updated and the outcomes for this revised Place Plan are set out below. They have been cross-referenced with, and are aligned with, the outcomes in the *All Together Fairer* report.

Place Plan Outcomes

Climate change	Reduce household waste (kg of waste collected per household that could not be used, reduced or recycled)
	Increase recycling levels (percentage of waste sent for reuse, recycling or composting)
	Complete the borough's LED streetlight programme
	Reduce greenhouse gas emissions from Council and NHS activities
	Increase the number of publicly available electric vehicle charging devices across the borough
	Increase the number of trees planted by the Mersey Forest
	Reduce the number of business travel miles claimed by Council staff
	Develop, implement, and evaluate an Electric Vehicle (EV) infrastructure strategy, alongside delivering EV infrastructure within the borough
	Increase the number of local NHS organisations with a board approved sustainable development plan
	Decrease the fraction of mortality attributable to particulate air pollution
Health/inequalities	Increase healthy life expectancy at birth
	Reduce the number of children in absolute low-income families (under 16s)
	Reduce the numbers of children in relative low-income families (under 16s)
	Decrease smoking rates in residents in routine and manual occupations
	Increase the number of public sector contracts that include a minimum 15% weighting allocated to Social Value
Best Start	Increase breastfeeding rates
	Reduce the number of 4-5 and 10-11-year-olds who are overweight or obese
	Increase continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups (NHS CORE20PLUS5 priority)

Education and Learning	Maintain the low numbers of 16–17-year-olds not in education, employment or training (NEET) or whose activity is not known
	Maintain or improve the Average Attainment 8 score
A Healthy Place to Live	Reduce the number of people who are killed or seriously injured on the roads
	Increase the proportion of adults in contact with secondary mental health services living independently
Healthy Homes	Reduce the number of households that experience fuel poverty (low-income high-cost methodology)
	Reduce the number of rough sleepers
	Reduce the number of adults in contact with secondary mental health services who live in stable and appropriate accommodation
Lifestyle Behaviours and preventing Ill-health	Reduce the number of adults who smoke
	Reduce the number of adults who are overweight or obese
	Increase the number of adults that are physically active
	Reduce the levels of depression in adults
	Reduce the number of suicides
Preventing Social Isolation and Loneliness	Increase the numbers of adults who report good wellbeing
	Decrease loneliness
	Increase the proportion of adult social care users who have as much social contact as they would like
A Healthy Place to Work	Increase the percentage of people aged 16-64 in employment
	Increase in proportion of adults in contact with secondary mental health services in employment
	Reduce the gap in employment rate between those with a learning disability and the overall employment rate
	Gap in the employment rate between those with a long-term health condition and the overall employment rate
Creating an Age-friendly Place	Improve health related quality of life for older people
	Reduce the numbers of older people who fall and need to be admitted to hospital
Health and Care Services	Reduce the number of alcohol related admissions to hospital
	Decrease the number of respiratory-related hospital admissions (NHS CORE20PLUS5 Priority)
	Increase the number of people who successfully complete alcohol and drug treatment
	Increase annual health checks for those living with SMI (NHS CORE20PLUS5 Priority)
	Increase the proportion of people who get their cancer diagnosed early (NHS CORE20PLUS5 Priority)
	Increase the number of people who have their hypertension detected and treated appropriately (NHS CORE20PLUS5 Priority)
Health and Care Workforce	Increased levels of staff retention

Appendix 1: Summary of consultations and engagement activities that have informed the refreshed Place Plan

Joint Council and NHS consultations and engagement

All Age Carers Strategy

- A twelve-week consultation on a strategy to improve the lives of carers ran from 27 July 2020 to 18 October 2020: [All Age Carers Strategy 2020 - 2025 Consultation | Participate Now \(cheshirewestandchester.gov.uk\)](https://cheshirewestandchester.gov.uk/all-age-carers-strategy-2020-2025-consultation-participate-now)

Climate Emergency Response Plan:

- A broad variety of engagement including a public evidence session (Jan 2020), Climate Summit (Feb 2020), online consultation (18th Nov 2019 - 6th Jan 2020) and an array of meetings with key stakeholders.
- More information on the Council's dedicated web page: [The Climate Emergency \(cheshirewestandchester.gov.uk\)](https://cheshirewestandchester.gov.uk/the-climate-emergency)
- Full Climate Emergency response Plan (includes consultation summary): [climate-emergency-response-plan \(cheshirewestandchester.gov.uk\)](https://cheshirewestandchester.gov.uk/climate-emergency-response-plan)

Children's Speech and Language Therapy Services

- Several engagement activities (workshops and surveys) were jointly undertaken in October 2021 to gain views from a variety of groups including parents/carers, professionals, staff to gain views about the current service in order to develop the service specification for future service provision.

Community led care and carers consultation

- An eight-week consultation ran from 26 April until 9 June 2022 encouraging residents and carers who access support in their communities to share their views on current services and what they'd like to see in the future. The views collected will inform and improve community support services for residents and carers across Cheshire West.
https://participatenow.cheshirewestandchester.gov.uk/community-led-care-and-carers-consultation?tool=news_feed

Council consultations and engagement

COVID-19:

- Community engagement during the pandemic, enabling residents to share stories, activities and wellbeing tips: [Inspire Cheshire West | Participate Now \(cheshirewestandchester.gov.uk\)](https://cheshirewestandchester.gov.uk/inspire-cheshire-west-participate-now)

A Fairer Future Strategy

- A range of dedicated engagement activities took place between 21st October 2021 and 10th February 2022.
- Engagement highlighted the impact of poor health and disability on poverty, and similarly, the impact of poverty on health and wellbeing, partially how poverty can cause anxiety and

mental health issues. There was also an emphasis on addressing the root causes of poverty, and an acknowledgement that the Marmot work is particularly important in this respect.

- Cabinet papers and strategy: [Agenda for Cabinet on Wednesday, 16th March, 2022, 10.00 am - Cheshire West & Cheshire Council \(cheshirewestandchester.gov.uk\)](#)
- Consultation: details and final consultation report - [A Fairer Future | Participate Now \(cheshirewestandchester.gov.uk\)](#)

Inclusive Economy Prospectus

- Stakeholder engagement undertaken in Autumn 2021, with an online engagement exercise in Nov 2021: [Building a thriving local economy that works for everyone | Participate Now \(cheshirewestandchester.gov.uk\)](#)
- Health and wellbeing is one of four cross-cutting themes in the prospectus.

Local Plan:

- Consultation on whether we need to change elements of the Plan. It was split into themes and included an 'online conversation on health' - what the Local Plan could do to enhance health and wellbeing. Consultation ran 23 June and 15 September 2021: [Local Plan | Participate Now \(cheshirewestandchester.gov.uk\)](#).

Land Action Plan:

- Online consultation between Nov and Dec 2021 [Land Action Plan | Participate Now \(cheshirewestandchester.gov.uk\)](#)
- The plan focuses on land use, adaption and climate repair, a key theme of the borough's [Climate Emergency Response Plan](#)([External link](#)). Setting out a vision for land in west Cheshire, the plan includes 68 actions that will help to restore and protect nature, which will both help tackle the climate crisis and provide many benefits for our communities.
- Plan covers a range of themes including food security and inequality.

NHS consultation and engagement

Cheshire Chat

- Cheshire Chat was used to bring the NHS Cheshire Clinical Commissioning Group (CCG) together with the local residents of Cheshire to better understand how the work the CCG did impacted on the community. The CCG used this feedback to embed the voice of local people and communities into the commissioning cycle. [Cheshire Chat - Cheshire CCG](#)

The sessions covered the following topics:

- Primary Care
- Cancer
- Mental Health
- Care Homes
- Community Services and
- Winter Campaign

Insight and Intelligence Reports

- NHS Cheshire CCG has produced an Insight and Intelligence Report on a trimester basis. This report collates patient feedback from this wide range of sources which is then subsequently shared with Clinical Leads, commissioning and programme teams. Working with these teams we spend time understanding how the information is used as commissioning intelligence, shaping the way in which we work and ensuring that our residents voice is at the centre of our commissioning. [Insight and Intelligence Report - Cheshire CCG](#)
- The report aims to help the reader understand and use the experience of a wide variety of patients, reflecting the diversity of the local population, to influence every stage of the commissioning cycle. This initiative was delivered through a partnership approach with users of services and stakeholders.

Self Care Champions

- Organisations, schools, community groups and individuals can all reap the rewards of a healthier workforce, so NHS Cheshire Commissioning Group (CCG) have reached out to their local communities to help them achieve a wider scope in their engagement and spreading the benefits of Self Care. [Self Care Awards - Cheshire CCG](#)

Relocation of Community Services from Boughton Health Centre

- CWP and CoCH are planning to relocate these services to alternative venues in Chester, as close as possible to the current Boughton Health Centre site. In the main these are the Lache Health Centre and the Fountains Health Building. Following this period of engagement and taking on board feedback received, CWP and CoCH will now progress the short-distance relocation of community services from Boughton Medical Centre to their new bases. <https://www.cheshireccg.nhs.uk/media/2549/february-2022-engagement-summary.pdf>

Cheshire West PPG Network

- Most local GP practices have Patient Participation Groups (PPGs). A PPG is a group of patients interested in health and healthcare issues, who want to get involved with and support the running of their local GP Practice and wider Primary Care Network. Most PPGs include members of practice staff and meet at regular intervals to decide ways of making a positive contribution to the services and facilities offered by the practice, to improve the community's health and to make sure patient experience is as good as it can be.
- NHS Cheshire CCG co-ordinates a West Cheshire PPG Chairs forum to allow further engagement of place specific GP practices and their patient representatives in our work.

COVID-19 Vaccination programme

- Cheshire West Integrated Care Partnership hosted a specific webinar to arm local communities with the facts about the vaccine. Throughout the webinar representatives from across different communities shared their thoughts and knowledge, answered questions and helped residents to make an informed decision about whether to get the vaccine when it was their turn. [What the COVID-19 Vaccine means for you, your family and your community – hear from the experts - Cheshire CCG](#)

Care Community engagement session

- Cheshire West Integrated Care Partnership wants to work to reduce inequalities, increase years of healthy life and promote mental and physical health and wellbeing for everyone in Cheshire West as highlighted by the Five More Healthy Years document. Support needs to be provided where and when people want it and this can be done by looking at what matters to people locally.
https://participatenow.cheshirewestandchester.gov.uk/community-led-care-and-carers-consultation?tool=news_feed

Proposed transfer of service provision for medical investigations for permanent hearing loss in newborn babies

- An online engagement event was held in April 2021 with Parents, families and carers – those with an interest in children’s hearing loss services to outline the proposed changes to the service, to understand the experiences of the attendees and to discuss the potential impact this would have on people once the service changes were implemented.

Review of Diabetes provision across Cheshire

- A number of face-to-face engagement events were held across Cheshire in Jan / Feb 2020 for those residents with both Type 1 and Type 2 Diabetes to gain an understanding of current patient experience across Cheshire and to discuss / scope any potential improvements that could be made to the existing models of care.

Wider partnership consultation and engagement

West Cheshire Children and Young People’s Plan 2020-2024

- The West Cheshire Children and Young People’s Plan is the single overarching strategic plan for all services which directly support children and young people in the Borough. It shows how the local authority and all relevant partners will work collaboratively and in partnership to improve outcomes and the wellbeing of every child, young person and family in Cheshire West and Chester.

Healthwatch consultation and engagement (key documents only)

Healthwatch Cheshire Pride Report - July 2020

- Healthwatch Cheshire's report based upon the feedback of health and care services given to us by the LGBTQ+ community at Pride events across Cheshire in 2019.
<https://healthwatchcwac.org.uk/wp-content/uploads/2020/07/Healthwatch-Cheshire-Pride-Report-July-2020.pdf>

Mental Health and Wellbeing During the Coronavirus (COVID-19) Pandemic - July 2020

- Healthwatch Cheshire asked Cheshire residents to complete a survey to tell us about their views and experiences during the Coronavirus (COVID-19) pandemic so we can understand what is working well and what could be improved, as well as considering people's mental health and wellbeing during the pandemic. <https://healthwatchcwac.org.uk/wp->

[content/uploads/2020/07/Healthwatch-Cheshire-Coronavirus-Survey-Mental-Health-and-Wellbeing-report-FINAL.pdf](https://healthwatchcwac.org.uk/wp-content/uploads/2020/07/Healthwatch-Cheshire-Coronavirus-Survey-Mental-Health-and-Wellbeing-report-FINAL.pdf)

Public Views on Health and Care During the Coronavirus (COVID-19) Pandemic - August 2020

- Healthwatch Cheshire asked Cheshire residents to complete a survey to tell us about their views and experiences during the Coronavirus (COVID-19) pandemic so we can understand what is working well and what could be improved, as well as considering people's mental health and wellbeing during the pandemic. <https://healthwatchcwac.org.uk/wp-content/uploads/2020/09/Healthwatch-Cheshire-Coronavirus-Survey-Health-and-Care-report-FINAL.pdf>

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in the Care Communities of Cheshire West and Chester May - October 2020

- This report details the findings from the Healthwatch Cheshire Health and Wellbeing During Coronavirus survey, focusing on the 830 responses from people in Cheshire West and Chester, and breaks down the information to a local level. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/03/Cheshire-West-Care-Communities-Public-Views-on-Health-and-Care-during-the-Coronavirus-COVID-19-Pandemic-May-Oct-2020.pdf>

Dental Queries Received by Healthwatch Cheshire During the COVID-19 Pandemic

- Since June 2020, Healthwatch Cheshire (HWC) has received increasing numbers of calls asking for details of local dental practices taking on new NHS patients. This is being experienced across Cheshire. The main issues raised by people in regards to dentistry are summarised in this report. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/04/Dental-Issues-Healthwatch-Cheshire-February-2021.pdf>

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in the Care Communities of Cheshire West and Chester October 2020 - March 2021

- This follow-up report based on the Healthwatch Cheshire Health and Wellbeing During Coronavirus survey, covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/06/All-Cheshire-West-Care-Communities-Oct-2020-Mar-2021-FINAL.pdf>

Citizens Focus Panel - GP and Pharmacy Access - December 2020

- The Citizens Focus Panel is designed to enable us to get feedback on particular topics from a set group of Cheshire residents on a regular basis. This report details their feedback on GP and Pharmacy Access. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/01/Citizens-Panel-Infosheet-December-2020-GP-Pharmacy-Access.pdf>

Integration Index – Joined-Up Care Spring/Summer 2021

- Healthwatch Cheshire have been asked by Healthwatch England and NHS England to create a methodology to be used as part of the development of the Integration Index. The

Integration Index will measure how well services are providing joined-up care. In this report, we compare what people have told us about their experience to the policies of the health and care system, which outline the experience people should expect.

<https://healthwatchcwac.org.uk/wp-content/uploads/2021/11/Draft-LD-Integration-Index-Report.pdf>

Supporting Boaters to Access Primary Care and COVID-19 Vaccinations March - May 2021

- Building on three years' experience of working with partners, during March to May 2021 Healthwatch Cheshire worked in partnership with the Waterways Chaplaincy to raise awareness of a new GP Access Card and arrange for Boaters to receive them, as well as discuss the COVID-19 vaccine with the Boating Community.

<https://healthwatchcwac.org.uk/wp-content/uploads/2021/07/Supporting-the-Boating-Community-Final-Report-May-2021.pdf>

Residents' and Friends and Relatives' Experiences of Care Homes during the Coronavirus (COVID-19) Pandemic - November 2020 - March 2021

- To maintain our connection and to enable us to continue gathering opinions across Cheshire, Healthwatch Cheshire developed two questionnaires to gain the views of those living in care homes, and care homes with nursing, and their experiences of care during the COVID-19 pandemic, and also of their friends and relatives. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/07/Healthwatch-Cheshire-Care-Home-Survey-Report-July-2021.pdf>

Views of 18–30-year-olds on COVID-19 vaccinations - June-July 2021

- Healthwatch Cheshire have been keen to find out the opinions and experiences on the COVID-19 vaccination for people living in the Cheshire area aged between 18-30 years old. This enables us to feedback people's views and perceptions to those organising the COVID-19 vaccination process, in order to influence the messaging used in encouraging people to take up their vaccine. <https://healthwatchcwac.org.uk/wp-content/uploads/2021/08/Views-of-18-30-year-olds-on-COVID-19-vaccinations-Healthwatch-Cheshire-July-2021.pdf>

Healthwatch Across Cheshire - September - November 2021 - Cheshire West and Chester Care Communities

- As restrictions and guidance loosened in mid to late 2021, Healthwatch Cheshire launched a set programme of activity - Healthwatch Across Cheshire - to get out into communities once again and talk to people face-to-face about these topics in all areas of Cheshire, from Malpas to Poynton and Neston to Nantwich. <https://healthwatchcwac.org.uk/wp-content/uploads/2022/02/Healthwatch-Across-Cheshire-Report-Sep-Nov-2021-CWaC-Care-Communities-1.pdf>

Citizens Focus Panel - Mental Health - January 2022

- Healthwatch Cheshire want to gain insight into the effects of the pandemic on people's mental health following on from our previous survey "Your Health and Wellbeing During Coronavirus (COVID-19)" where we asked people about their mental health, support, and concerns. <https://healthwatchcwac.org.uk/wp-content/uploads/2022/03/Healthwatch-Cheshire-Citizens-Focus-Panel-Mental-Health-January-2022.pdf>