

# Telford & Wrekin Inequalities Plan 2021 - 2023

Health & Wellbeing Board 30<sup>th</sup> September 2021

Protect  
Care and Invest  
to create a  
better borough



Telford & Wrekin  
COUNCIL

# Introduction

In 2021 there is compelling evidence of the need to reduce health inequalities. [Build Back Fairer: the COVID-19 Marmot Review](#) built on previous national reviews of health inequalities emphasising that the **social, environmental and economic inequality** in our communities that damages health and wellbeing had got worse in the 20 years before the pandemic.

All organisations and communities have faced an unparalleled challenge in responding to COVID-19. However certain communities and groups with longstanding health inequalities have been disproportionately affected. There are **avoidable, and unfair differences in health between different groups of people**, such as people from deprived areas and those from Black, Asian and minority ethnic (BAME) backgrounds.

The [Black Lives Matter](#) backdrop and the [Commission on Race and Ethnic Disparities](#) findings necessitate urgent action across many areas, including tackling health inequalities.

The [Equality Act 2010](#) protected characteristics are clear context for health inequalities faced by some people, such as those with learning and physical disabilities.

The [Health and Care Bill](#) expects reducing health inequalities to be a mainstream activity in health and social care partnership integration.

Certain local health inequalities are already well known and can be tackled quickly. But we also need an approach to systematically identify inequalities which are currently less clear and then implement actions to **narrow the gap**.

This **inequalities plan for Telford & Wrekin** is the start of an ambitious way forward for tackling inequalities. The framework is based on the broad [Marmot](#) themes, recognising that the wider determinants of health impact on our local inequalities. A **targeted, community-centered, intelligence-led partnership approach** will be critical to our success.

# Health & Wellbeing Strategy Context

## Our Priorities

- Telford & Wrekin Integrated Place Partnership (TWIPP) priorities:
  - Building community capacity and resilience
  - Prevention and healthy lifestyles
  - **Integrated response to health inequalities**
  - Integrated advice, information and access to support
  - Integrated care and support pathways
- **Drive progress on tackling health inequalities**
- Improve emotional and mental wellbeing
- Ensure people's health is protected as much as possible from infectious diseases and other threats

[Telford Wrekin Health Wellbeing Strategy Reset 20.21 22.23](#)

Delivering the Council Plan priorities - [Protect, Care and Invest](#)



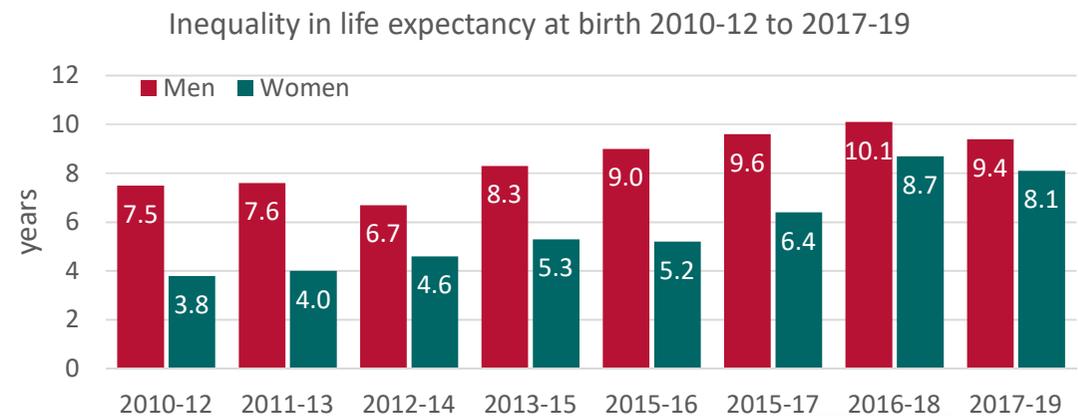
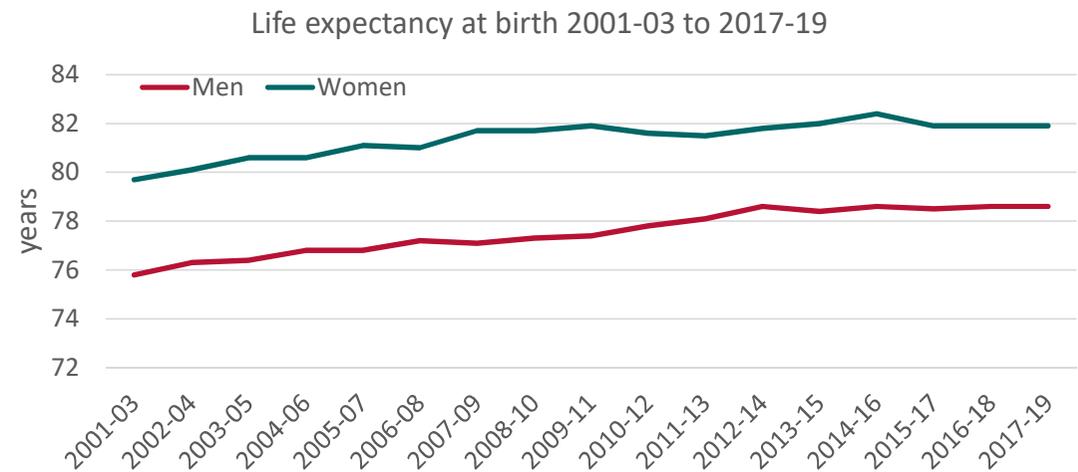
[population health framework](#)

## Our Outcomes

- Improve overall healthy life expectancy in men and women by at least one year by 2023
- Halt the increasing inequalities gap in healthy life expectancy, and continue to narrow the gap
- Narrow the inequalities gap in life expectancy for people with serious mental health problems

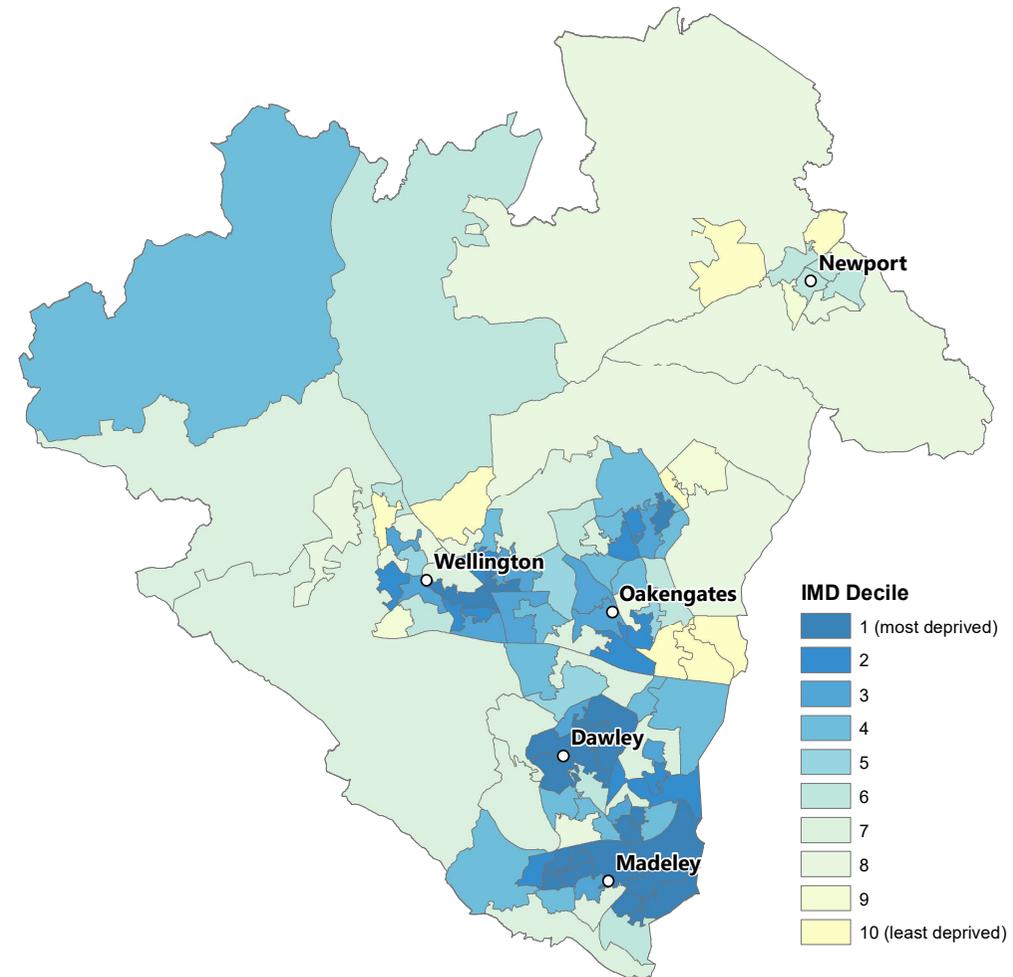
## Local Inequalities Picture – outcomes

- Life expectancy worse than England average pre-pandemic
- Life expectancy rates had stalled only increasing by 0.8 years in men and 0.3 years in women (2010 to 2019)
- Inequalities gap in life expectancy has grown
  - men 9.4 years (from 7.5 years)
  - women 8.1 years (from 3.8 years)
- Healthy life expectancy worse than England average
  - males fallen to 58.2 years
  - females increased to 62.6 years
- people in more deprived areas spend more of their shorter lives in ill health
- Life expectancy much poorer for people with mental health problems and learning disabilities



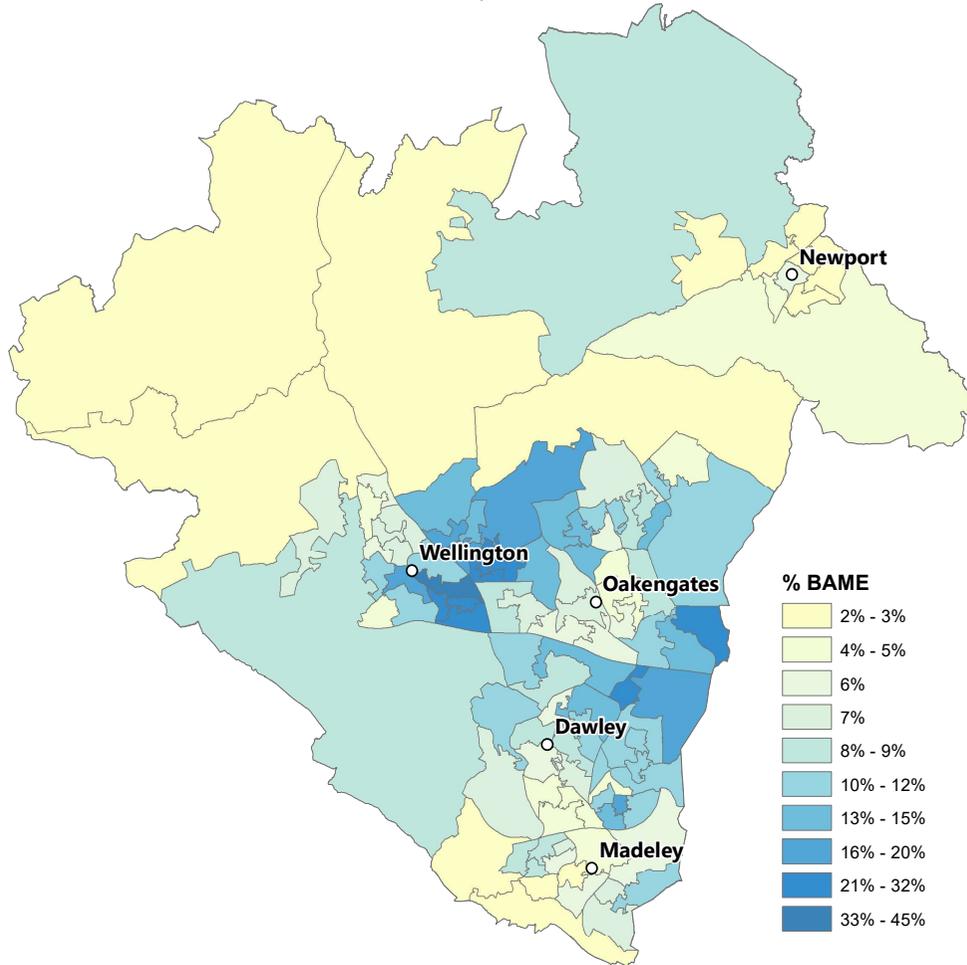
## Local Inequalities Picture - deprivation

- 16% of the borough's population (28,900 people) live in areas ranked in the 10% most deprived in England
- Gap between most and least deprived parts of the borough is increasing
- 15 of the borough's 108 LSOAs in the 10% most deprived in England in 2015 - by 2019 this had increased to 18
- 6 LSOAs in the 10% least deprived in 2015 - by 2019 increased to 8



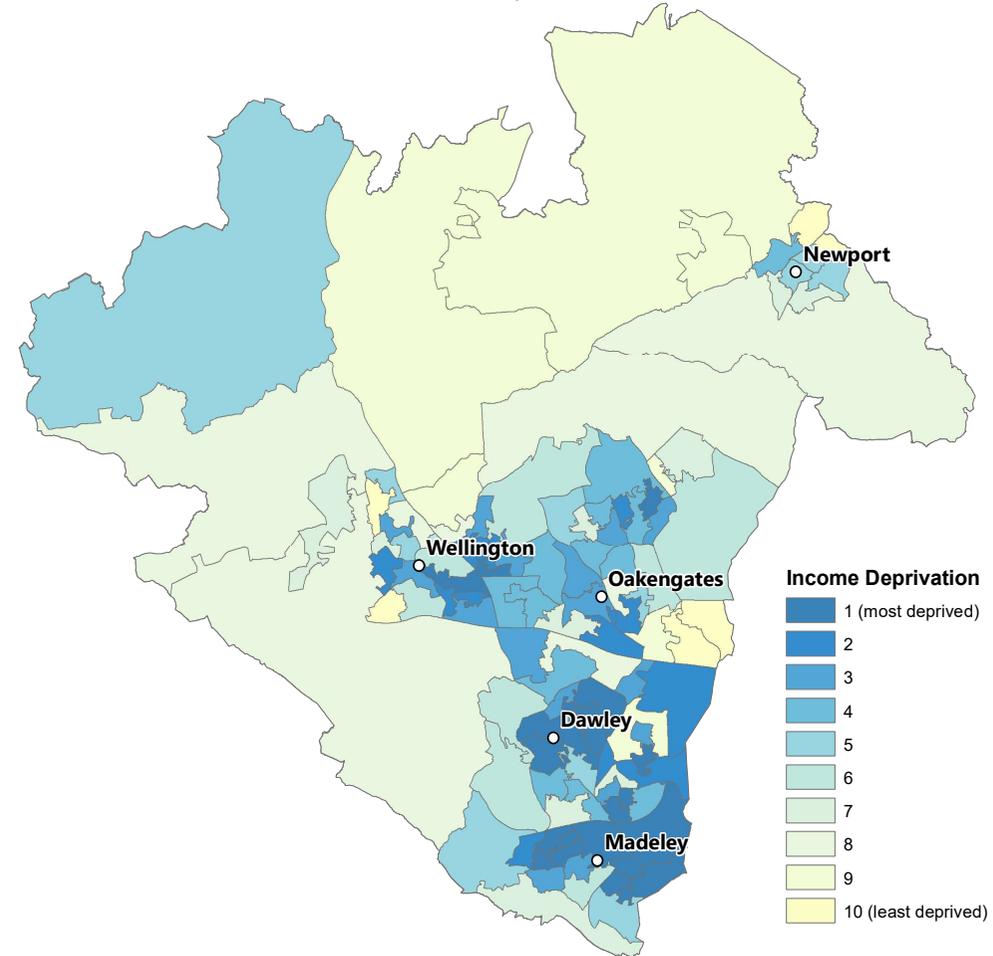
# Local Inequalities Picture – Black & Minority Ethnic Communities

Our Black & Minority Ethnic Communities



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2021 Ordnance Survey 100019694

Income Deprivation



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# Telford & Wrekin Inequalities Plan Overview

## Health & Wellbeing Strategy commitments

Focus on wider social determinants as most important influences on health recognised [Marmot reviews](#) accelerating, targeted collaborative local action to reduce increasing health inequalities, by:

- Tackling the “wider determinants of health” – healthy homes, jobs, employment, income and education
- Giving every child the best start in life – to influence a range of outcomes throughout people’s lives
- Improving the lives of the most vulnerable, people with complex needs, and those at risk of abuse, neglect or exploitation

## Themes

### Best Start in Life

**Economic opportunity**  
work, income, welfare, poverty, debt

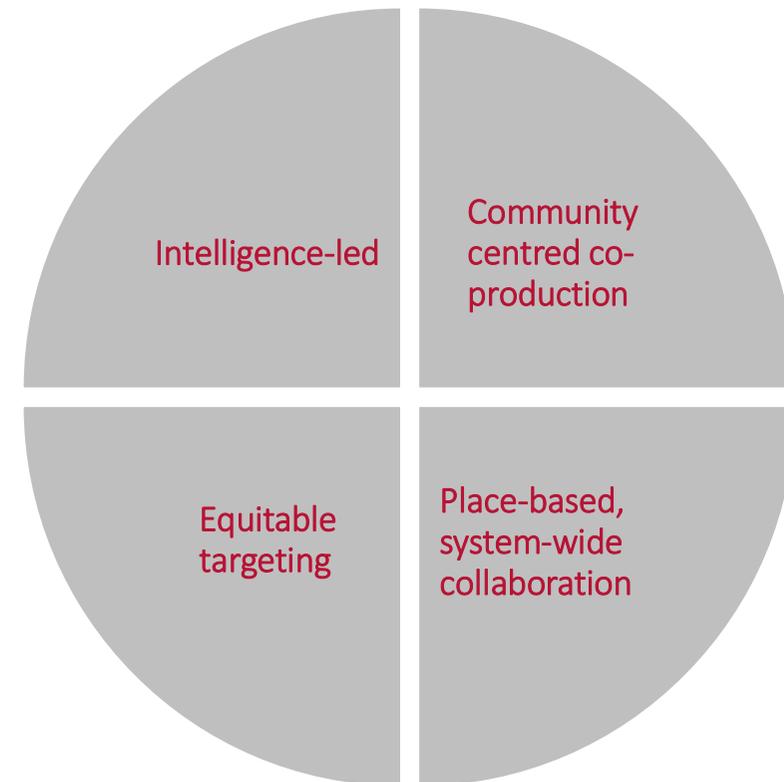
### Community and Place

### Public Health and Prevention

### Health & Social Care Integration

### COVID-19 Impact

## How we will systematically narrow the gap



Delivering the Council Plan priorities - [Protect, Care and Invest](#)

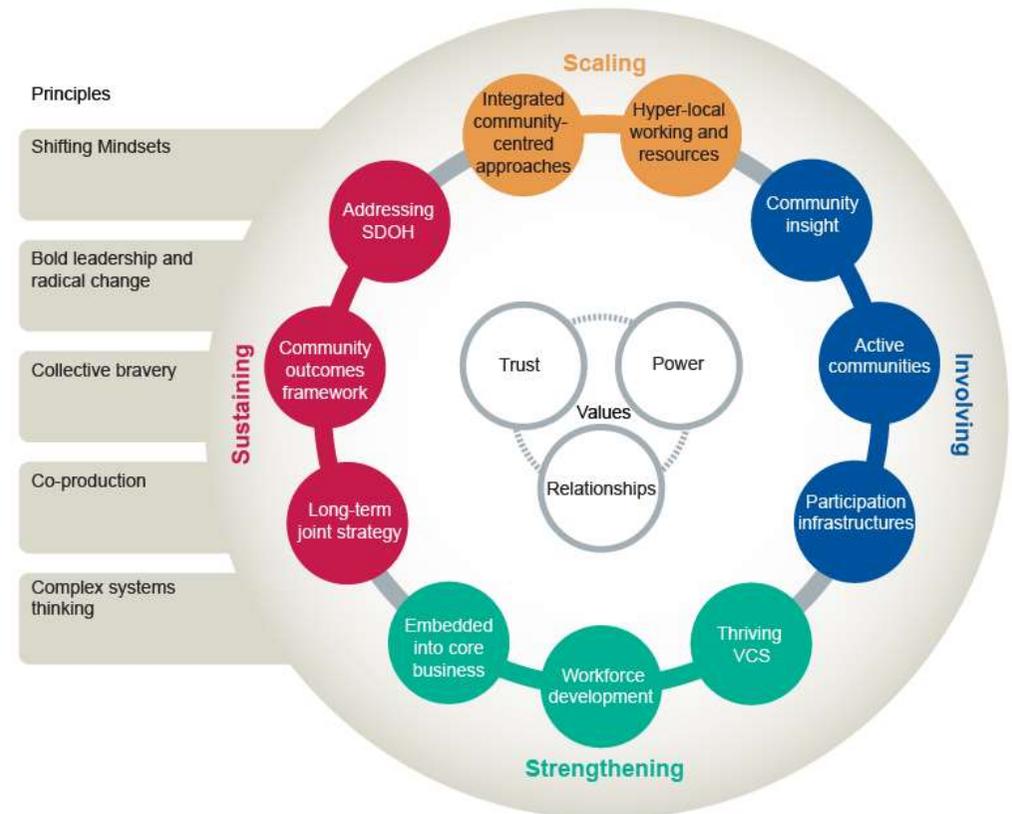
## Intelligence-led

- Ensuring an intelligence-led approach (often referred to by the NHS as [population health management](#) PHM) shapes our understanding of local inequalities to drive action
- Investment in Insight Team and creation of joint PHM post with CCG/ICS
- Developing a systematic approach to use of data to understand what factors are causing poor outcomes in different population groups, with a focus on deprivation, disparities and diversity e.g.:
  - **deprived communities**
  - **people with poor mental health**
  - [Equality Act protected characteristics](#)
  - **those from Black and Minority Ethnic backgrounds**
  - **inclusion health populations**
  - **people with physical disabilities**
  - **people with learning disabilities and autism**
  - **people experiencing frailty**
- Evolving JSNA profiling to understand need and unmet need and how people use and benefit (or not) from health and social care and community services and support – **data and information** and **insight from community engagement** and consultation
- Developing a comprehensive **performance and outcomes framework** to monitor progress

## Community centred co-production

Putting communities at the heart of everything to reduce health inequalities through meaningful engagement and co-production. The Health & Wellbeing Board have committed to [use community-centred approaches to help build connected and empowered communities](#)

### [Whole system approach to community-centred public health](#)



## Equitable targeting

- Narrow the gap in service and support uptake and outcomes by targeting groups who are **most at risk or underserved** as demonstrated through intelligence

### Reducing barriers to access

#### Interpersonal

peer views  
family views  
fake news & misleading views

#### Community

religious & cultural norms  
gender norms  
stigma & discrimination

#### Intrapersonal

language  
Literacy  
health literacy and beliefs

#### Access to services and support

Transport and language barriers  
digital inclusion  
GP registration  
culturally-specific services  
programme organisation –  
service location

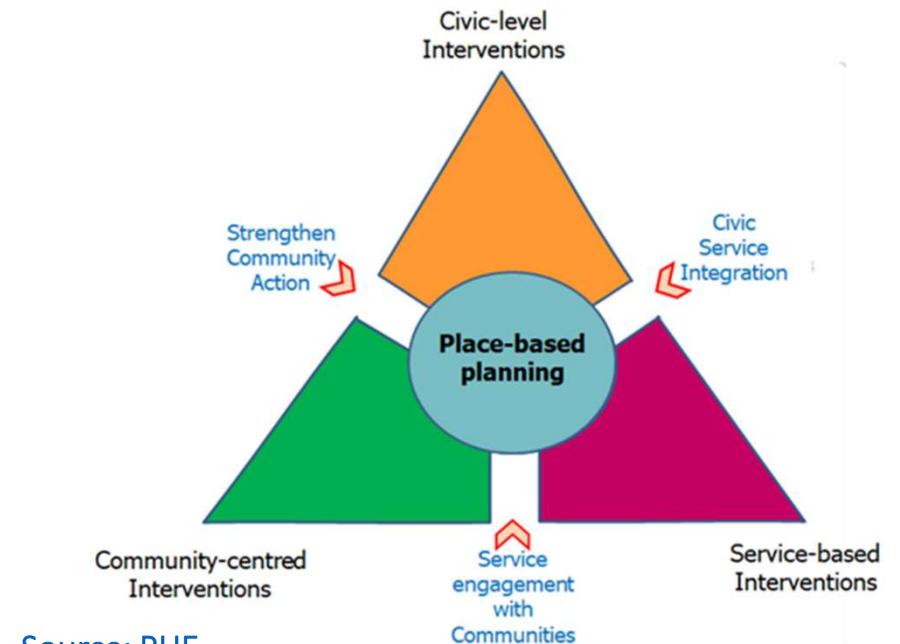
[Source: PHE](#)

- Ensure we take an evidence-based approach of what works to reduce inequalities – drawing on Marmot and best practice

## Place-based, system-wide collaboration

- Tackling the complex issue of inequalities through [place-based approaches](#) through the TWIPP
- Strong place focus within the wider Shropshire, Telford & Wrekin Integrated Care System, linked to restoration of NHS services and NHS England prevention and health inequalities expectations
- Systematic action at scale

### Place Based Approaches to Reducing Health Inequalities



[Source: PHE](#)

# Framework for Tackling Inequalities in Telford & Wrekin

	Best Start in Life	Economic opportunity work, income, welfare, poverty, debt	Community and Place	Public Health and Prevention	Health & Social Care Integration	COVID-19 Impact
<b>Focus</b>	children and young people's development, early years and education	Unemployment, poverty, low income and debt	homelessness and housing support  safer stronger communities	lifestyle-related preventable conditions  immunisation & screening	service transformation, integrated pathways	infections, testing, immunisations
<b>Rationale</b>	poor outcomes and inequalities gaps for infant & child health & development and educational attainment	entrenched and persistent poverty  worse than average unemployment levels in young people & deprived communities	youth crime, exploitation community cohesion  increasing vulnerability of tenants and homeless people	high levels of alcohol consumption and excess weight, especially in deprived communities  worse than average lifestyle-related diseases – exacerbated in lockdown	lower than average life expectancy for people with serious mental illness and learning disability	enduring transmission and vaccine inequalities in deprived and BAME communities  delay in cancer diagnoses & treatment

# Contribution of Key Strategies, Plans & Transformation Programmes

## Council Plan – Protect, Care and Invest priorities

- Every child, young person and adult lives well in their community
- Everyone benefits from a thriving economy
- All neighbourhoods are a great place to live
- Our natural environment is protected, and addressing the climate emergency
- Community-focussed, innovative council providing efficient, effective quality services

	Best Start in Life	Economic opportunity work, income, welfare, poverty, debt	Community and Place	Public Health and Prevention	Health & Social Care Integration	COVID-19 Impact
<b>Strategy/ plan</b>	Local Maternity System Plan (& perinatal equity strategy)  Children’s Safeguarding & Family Support Services Strategy - Family Safeguarding transformation  Education & Skills Service Strategy - NEET Action Plan, Belonging Strategy	Communities, Customer and Commercial Services Strategy  Prosperity and Investment Service Strategy  Housing, Employment & Infrastructure Service Strategy  Council as an employer of choice	Neighbourhood & Enforcement Services Strategy  Community Safety Partnership  Building Safer Strong Communities Plan  Housing & Affordable Warmth Strategies  Digital Inclusion Strategy	Health & Wellbeing Service Strategy  NHS Prevention Programmes – smoking, alcohol & obesity	Integrated Care System Plan – TWIPP Plan  Adult Social Care Service Strategy  Mental Health and Community Health services transformation	Local Outbreak Management Plan  Inclusive restoration of NHS services

# Best Start in Life

## Inequalities Outcomes

- Smoking at time of delivery (15.4%) worse than England average (10.4%) – highest levels in the most deprived areas (up to 29.2%)
- Children achieving a good level of development at 2-2½ years (64.9%) worse than England average (83.3%)
- School readiness and Free School Meals (FSM) gap = 13% - 60.7% of children receiving FSM achieve a good level of development compared to 73.7% of children not receiving FSM
- Young People Not in Education, Employment or Training (NEET) (6.7%) worse than England (5.0%)

## Priority interventions/developments 2021-2022

- implement a new smoke-free pregnancy pathway (as part of the NHS Tobacco Dependency Programme)
- expand initiatives to narrow the gap in school readiness and educational attainment for the most vulnerable children
- develop the enhanced parenting support for offer for those families most in need
- further develop bespoke, targeted support for young people who are NEET
- enhance emotional and mental health support for children and young people most risk

# Economic Opportunity - poverty - work, income, welfare & debt

## Inequalities Outcomes

- 15.6% of population (28,000 people) experience income deprivation - worse than England average (12.9%)
- 21.3% of children (7,500) affected by income deprivation - worse than England (17.1%)
- 9.4% of households (6,600 households) experience fuel poverty
- higher rates of unemployment benefit claims in younger people (9.6%) compared to borough average (6.0%)
- claimant rates in most deprived areas (11.2%) almost double the borough average and four and half times that of the least deprived areas

## Priority interventions/developments 2021-2022

- increase the number of people receiving welfare assistance (given Universal Credit cut from Oct 2021) – inc. older person's focus
- enhance community-based debt support e.g. through CAB – increasing the number of people who benefit from debt advice
- reduce unemployment rates in young people and those from BAME backgrounds
- improve employability support for people with learning disabilities

# Community & Place

## Inequalities Outcomes

- significant variation in recorded crime rate between communities. Highest 140.7 per 1,000 population and lowest 24.2 in 2020/21
- higher average levels of youth crime – first time entrants into the youth justice system
- need to develop indicators for and housing/homelessness

## Priority interventions/developments 2021-2022

- further expand tailored wrap-around housing support for our most vulnerable residents / those facing homelessness
- enhance targeted interventions to reduce fuel poverty
- expand violence prevention initiatives such as mentoring in schools and targeted youth provision

# Public Health and Prevention

## Inequalities Outcomes

- Worse than average early death rates from preventable cancers and heart disease
- Alcohol related hospital admissions worse than England average
- Highest rates of smoking in more deprived communities. Smoking related hospital admissions and mortality worse than England average (250 people smoking related deaths per year)
- 70.9% adults with excess weight (98,500 people) worse than England average (62.8%) - lower levels of physical activity in more deprived areas

## Priority interventions/developments 2021-2022

- further develop the targeted approach of the Council's Healthy Lifestyles offer:
  - tier 2 weight management service for BAME community and people with a Learning Disability
  - whole-school approach to tackle excess weight in our most deprived communities
  - food poverty action – working with food banks
  - smoking support for people with mental health problems and those in routine and manual roles through workplaces
- NHS England – Health Inequalities and Prevention requirements e.g. smoking, weight management and alcohol

# Public Health and Prevention – priority developments 2021-2022 (CCG/ICS)

## NHS England – Health Inequalities and Prevention requirements for ICSs

- Health checks for people with a learning disability and/or severe mental illness
- Diabetes and CVD prevention acceleration
- Focus on prevention of long-term conditions

## Tobacco

- By 2023/24, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services
- A new smoke-free pregnancy pathway including focused sessions and treatments (see Best Start in Life)
- A new universal smoking cessation offer, as part of specialist mental health services for long-term users of specialist mental health, and in learning disability services

## Obesity

- Access to weight management services in primary care for people with a diagnosis of type 2 diabetes or hypertension with a BMI of 30+ (adjusted for ethnicity)
- Doubling of the NHS Diabetes Prevention Programme over the next five years, including a new digital option
- Test an NHS programme supporting very low-calorie diets for obese people with type 2 diabetes
- Take action on healthy NHS premises

## Alcohol

- Hospitals with the highest rate of alcohol-related admissions will be supported to fully establish Alcohol Care Teams

# Health & Social Care Integration

## Inequalities Outcomes

- Reduced life expectancy for people with mental health problems and learning disabilities

## Priority interventions/developments 2021-2022

- expand community and peer support for people with mental illness, learning disabilities and autism
  - extend calm cafes
  - improve access to mental health services
  - reduce social isolation
  - improve the uptake of preventative health care
  - enhance the assisted technology offer

# COVID-19 impact

## Inequalities Outcomes

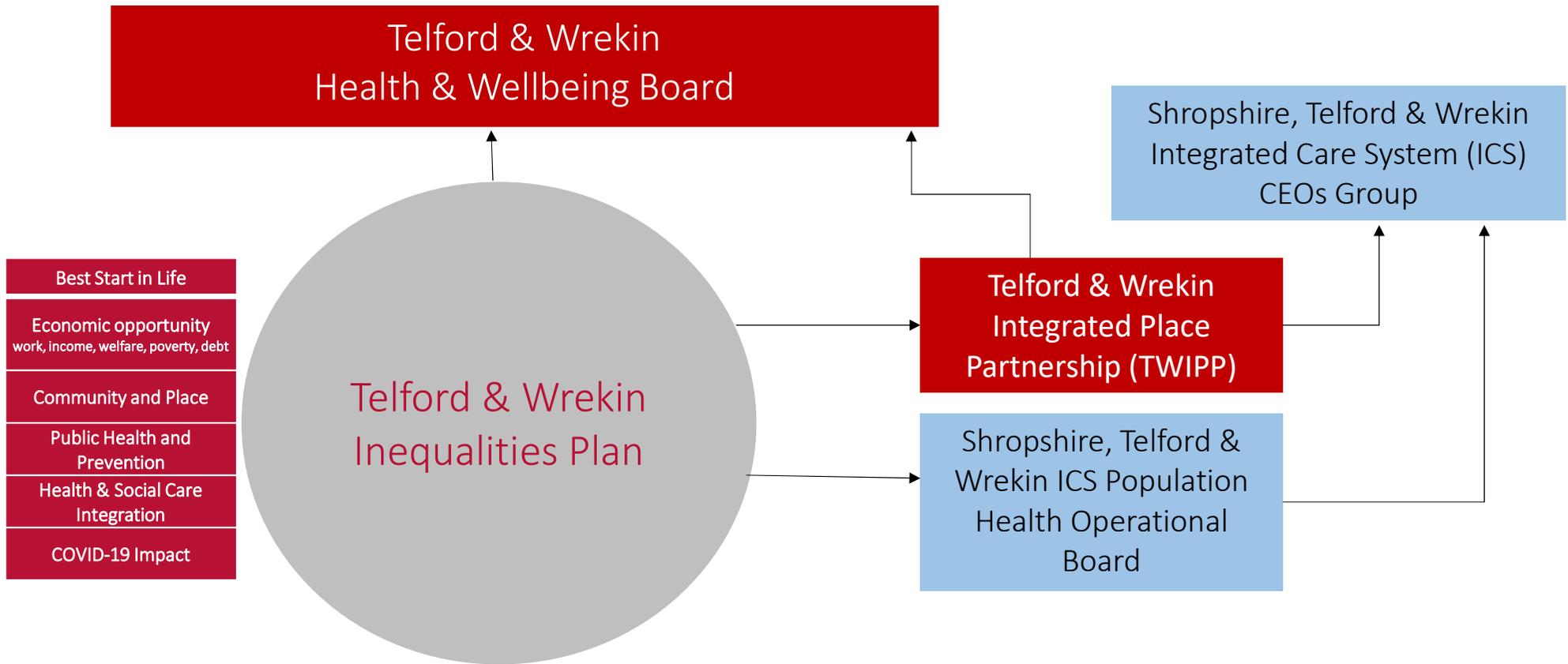
- higher proportion of population testing positive in BAME communities
- lower testing rates in deprived communities - 8% of pop in most deprived areas tested (July 2021) compared to 11% overall & 14% in most affluent areas
- vaccine inequalities - lower vaccination coverage in BAME communities and most deprived parts of the borough
- delay in cancer diagnosis and lower than average uptake of cancer screening programmes

## Priority interventions/developments 2021-2022

- continue to evolve the offer of COVID testing for both asymptomatic/symptomatic testing (LFT/rapid & PCR testing) in areas and groups where testing rates are lowest, through community venues and community champions
- develop a sustainable delivery model to improve uptake of COVID immunisation in those most at risk, including a comprehensive programme immunisation pop up clinics at accessible workplace and community venues
- NHS to restore services inclusively – e.g. improve early diagnosis of cancer and screening programme uptake in those most at risk

<b>Best Start in Life</b>	<ul style="list-style-type: none"> <li>➤ implement a new smoke-free pregnancy pathway (as part of the NHS Tobacco Dependency Programme)</li> <li>➤ expand initiatives to narrow the gap in school readiness and educational attainment for the most vulnerable children</li> <li>➤ develop the enhanced parenting support for offer for those families most in need</li> <li>➤ further develop bespoke, targeted support for young people who are NEET</li> <li>➤ enhance emotional and mental health support for children and young people, especially those at most risk</li> </ul>
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# Governance



*This strategic place-based inequalities plan links with NHS England expectations for Shropshire, Telford & Wrekin ICS in line with the [NHS Long-Term Plan](#) and recognising the COVID-19 impact has had on our communities*

## Next steps

- Work with leads to develop priority interventions/projects to narrow known inequalities gaps in outcomes
- Identify where partners can work together on priorities – particularly community organisations
- Further progress links with ICS prevention/health inequalities requirements
- Evolve a more systematic intelligence-led approach:
  - JSNA developments e.g. ward profiling and economic profile deep dive
  - link to ICS Population Health Management programme