

Improving Population Health Theme
Thursday 26th February 2020
10.30-12:30
Hall 1, The Conference Centre at LACE, Sefton Park, Liverpool

Theme Lead: Ben Barr & Theme Manager: TBC

1. Welcome and introductions

Ben Barr welcomed the group

2. Introduction – update on theme progress

Data infrastructure – utilise data aspects to put together a portfolio of projects.

Discussed short term objectives – use methods to find out what works and what should be invested

Engagement with members – meetings with organisations to help develop projects and working with members to develop.

3. 6 proposed/proceeding pieces of work – presentations/discussions

1) Ways-to-wellbeing – Social Prescribing and welfare advice in Liverpool. – Clare Mahoney, Liverpool CCG



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2020.pptx

Social Prescribing (SP) in Liverpool is to support those who need community assets.

Liverpool is badly affected by vulnerable people with illness and deprivation. This causes significant challenges – use SP to reduce health inequalities.

Social Prescribing can be broken down into 3 core elements. 1st - identify need, 2nd - remove barriers to participation, 3rd – connect to people.

Challenges – there are lots of providers who are not commissioned by CCG. There are no concessions to cluster resources in the model at the moment.

Advantages – with regards to single provider poverty response, they have been able to link data sets. It has also helped with knowing how to grow. Ideally, 12,500 people can be helped.

Comments from audience:

Pathway to get information to Ben Barr – either email ARC and they will pass onto Ben, or email Ben directly.

How to compare CCG areas and share learning – Liverpool is an area that has been identified across ARC as a place that needs looking at. SP is a discussion for all areas.

2) Preventing Self Harm – Pooja Saini, Liverpool John Moores University

Working with Cheshire public health collaborative boards.

Self-harm is a public health issue – there are over 2,000 presentations in A&E per year.

STP are providing funding. The NHS has 3 set areas, self-harm, middle aged men and mental health. Self-harm is an area to focus on to help reduce figures.

Medication induced suicide is a problem and this needs to be looked at.

The theme is looking into focusing and implementing in children. Its challenge is getting it into primary care. Funding is needed to pursue this area.

3) Air Pollution – Ben Barr, University of Liverpool

There is little evidence to show the impact of changes to Air Pollution (AP).

The EPHC theme has focus groups that are looking at AP.

This work will be looking at the impact AP has on different areas – are they seen to be worse places to live because of AP?

Comments from audience:

The issues around 5G were discussed and it was suggested that Liverpool has not looked into the implications of 5G and that ARC should look into this.

Ultimately, the issue with AP will be reduced if people drive less. Liverpool council are trying to look into this.

4) Local Economic Strategies and Health – Alan Higgins, Public Health England

The wealth and wellbeing programme started 18 months ago. The idea is to get good health & work into local industrial strategy, which is an ongoing task.

There are 3 main areas to focus on:

- 1.** Employing support programmes - Helping people get back to work, which is targeted at people with mental health issues.
- 2.** Wellbeing economics – what would it mean if wellbeing was a product from economic planning

3. Workplace – the way employment has changed/is changing – looking into how jobs can be health enhancing.

Comments from audience:

It was suggested to bring a historian's point of view into this work.

Trade unions should be involved if you want workplaces to investigate health.

5) Equitable Resource Allocation for community services – Wes Baker, Mersey Care NHS Foundation Trust

When looking into mental health data for children, there are lots of gaps. The aim is to develop a model to distribute workforce appropriately.

There will be investigations into family units and move from KPI metrics by segmenting data, allocating resources.

It was suggested for Wes Baker to talk to the health economics team to see if they can help.

6) Pneumonia admissions in Blackburn – Ken Barnsley, Blackburn with Darwen Borough Council

There is a high level of child poverty in the Blackburn area, which is a huge problem. There are high levels of admissions for pneumonia in the North West.

It was suggested to investigate prevention before the research starts – can look into preventing children having asthma.

Factors for pneumonia include low birth weight, indoor air pollution, incomplete immunization (smoking).

It is important to get the community involved to address this issue.