

# Overview and Scrutiny (Health Communities): Review of Health Inequalities: a tool for change

## Process

Mandate from OSC: focus on 2 wards with high and low life expectancy

Multi-disciplinary core group across Council and PCT

Evidence: what do we know about what works

Analysis: what are the local issues

Policy context

Local Area Agreement targets

Review of previous consultations

Invitation to comment to key stakeholders

Member engagement

Critical friend supported by IDEa

Prioritisation process transparent

OSC endorsement

Service improvement plans now under way

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### Determinants of Health

Introduce the use of 'Health Inequalities Impact Assessment' to ensure that decisions made across the Council and PCT maximise the effect they will have on reducing the health inequalities gap.

To develop with the Central Area Forum a community-based approach to tackling health inequalities and determinants of health with residents and front line workers, including raising aspirations and roll out learning to other deprived neighbourhoods.

Co-ordinate develop and re-shape initiatives addressing low income as a determinant of health.

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### (2) Lifestyle

Smoke Free Gateshead will take forward its goal of smoking prevalence across all social groups down to 5% by 2030.

Lifestyle interventions to prevent obesity, (physical activity and food and health), through community led initiatives.

Build on and expand work to minimise harm from alcohol.

Improving mental health. Will include: refreshing the health and wellbeing strategy, worklessness and mental health, black and ethnic minority issues, physical care for people with mental health conditions, targeted interventions for those at risk; work to address high levels of depression and anxiety.

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### (3) Secondary Prevention

Secondary prevention such as identifying and working with people at high risk or with early signs of heart disease/stroke/diabetes (this usually involves lifestyle change and/or prescribing) are seen as clear PCT lead responsibilities, working with primary care. They complement recommendations. They are vitally important in tackling inequalities in health because their impact on life expectancy within a three year time scale could be significant. OSC will review these at regular intervals.

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### (4) Access to Services

Establish Health Equity Audit Action Learning Set to develop capacity to use this tool as part of improving access to services to ensure they reach those most in need.

## Learning Points (So Far)

Recognise challenge of working in a political environment and culture

Defining health inequalities – compared with health improvement

Influencing and including partners and the community takes time

Review resources and capacity

Make time for programme and project management

Create a process to prioritise and gain ownership - be realistic about how much can be tackled

Make use of the whole team

Keep thinking positively and using learning process approaches

Ensure you are communicating as well as delivering outcomes – separate actions from outcomes

"Tell the story" based on group reflective practice with critical friend.

**Reducing inequalities in life expectancy**