



## INTEGRATION JOINT BOARD

<b>Date of Meeting</b>	26.03.2019
<b>Report Title</b>	Aberdeen City Health & Social Care Partnership's Health Improvement Fund
<b>Report Number</b>	HSCP.18.145
<b>Lead Officer</b>	Sandra Ross, Chief Officer (ACHSCP)
<b>Report Author Details</b>	Name: Katie Cunningham Job Title: Public Health Coordinator Email Address: <a href="mailto:katie.cunningham@nhs.net">katie.cunningham@nhs.net</a>
<b>Consultation Checklist Completed</b>	Yes
<b>Directions Required</b>	No
<b>Appendices</b>	A. Health Improvement Fund, 2016-19 Report B. Health Improvement Fund Infographic 2017-18

### 1. Purpose of the Report

The purpose of the report is to:

- a) Provide an update on the use of the Health Improvement Fund and developments from 2016-19.
- b) Present the 2016-19 report on the Health Improvement Fund before it is circulated widely to partners, colleagues and members of the public.
- c) Make recommendations regarding the annual reporting arrangements for the Fund from financial year 2019/20 onwards.



## INTEGRATION JOINT BOARD

### 2. Recommendations

2.1. It is recommended that the Integration Joint Board:

- a) Note the content of the report contained in appendix A, including the contribution of the Fund towards achieving the principles of the Christie Commission<sup>1</sup> and Community Empowerment Act<sup>2</sup>
- b) Instruct the Chief Officer to bring an annual report relating to the Health Improvement Fund to the IJB in April 2020 and annually thereafter.
- c) Instruct the Chief Officer to further develop the HIF core and Neighbourhood Health: HIF to be directed through localities with the ambition to allocate funds through Participatory Budgeting in the future

### 3. Summary of Key Information

- 3.1. The Health Improvement Fund (HIF) was established by the Scottish Executive in 2000 to focus on tackling priority health topics and addressing the broader determinants underlying health inequalities.
- 3.2. The fund remains an annually occurring allocation administered through the Aberdeen City Health & Social Care Partnership (ACHSCP) budget by public health and wellbeing. Since 2016, a proportion of HIF (£123,638) has remained available to commission or procure initiatives using evidence based rationales which address identified public health priorities. In recent years this has been used to fund City wide health improvement projects or pieces of work such a series of co-production training workshops during 2017/18 and to fund temporary health improvement posts in Aberdeen.
- 3.3. The remainder of the fund (£68,000) is available to kick-start community level initiatives to improve health and wellbeing, with the term 'community' encompassing both geographical areas and communities of interest (eg. carers). Advertised under the brand 'Neighbourhood Health: HIF,' grants of up to £2500 are available to anyone living or working in Aberdeen, as long as the work takes place within Aberdeen. Applications must meet the following funding principles:



## INTEGRATION JOINT BOARD

1. Inspire members of the community to get involved
  2. Meet local needs and reflect local circumstances
  3. Are innovative and creative
  4. Join people together
  5. Help make Aberdeen a healthy and happy place for all
- 3.4. The fund is managed and overseen by staff from Aberdeen City H&SCP public health and wellbeing team. Allocations are decided upon by local decision making groups involving a range of frontline staff and community representatives, guided by a scoring process based on the funding principles stated above. There is one decision making group per locality with applications for city-wide projects being distributed amongst the groups.
- 3.5. Since its inception 2016, Neighbourhood Health: HIF has been subject to ongoing review and refinement. Quality improvement methodology was utilised to ensure the fund was in keeping with a number of principles and priorities described in the report of the Christie Commission<sup>1</sup> and Community Empowerment (Scotland) Act 2015<sup>2</sup>. These include:
- A focus on prevention and reducing inequalities
  - Empowering people and communities
  - Collaboration and engagement
- 3.6. A number of changes have been made including steps to improve visibility and ownership of the fund amongst staff and communities; streamlining of the administrative and financial processes involved; and development of a more robust evaluation method, in partnership with NHSG Health Intelligence. In 2018, an options appraisal was undertaken to inform the future direction of the fund. The approved option going forward is that HIF core and Neighbourhood Health: HIF are further developed and directed through localities with the ambition to allocate funds through Participatory Budgeting in the future.

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<sup>1</sup><https://www.gov.scot/publications/commission-future-delivery-public-services/>

<sup>2</sup><http://www.legislation.gov.uk/asp/2015/6/contents/enacted>



## INTEGRATION JOINT BOARD

- 3.7. Since 2016, over £280,000 has been allocated to 211 projects through the Neighbourhood Health process, supporting beneficiaries across all areas of Aberdeen City. Projects funded have sought to address a range of issues including physical activity, mental health, early years and community cohesion. Two celebration events have also been held as an opportunity to network and share practice.
- 3.8. The fund has enabled discussions and engagement about health improvement priorities and prevention at locality level. More frontline staff and community members have a broader understanding of the funding principles and have been involved in the decision-making process. It has therefore been concluded the fund and the processes adopted are meeting the funding principles and are contributing to an increased preventative spend at community level.
- 3.9. There is an opportunity to share transferrable learning from the fund, its principles, and the process of refinement. It is recommended that from April 2020, an annual reporting format is adopted which is easy read and accessible to the public building upon the 2016-19 report (appendix A) and infographics currently compiled for the fund (appendix B). The report would demonstrate how the funding was spent, outcomes achieved, and profile project case studies.

### 4. Implications for IJB

#### 4.1. Equalities

The principles of the Health Improvement Fund focus on 'making Aberdeen a healthy and happy place for all.' This inherently seeks to promote social inclusion and cohesion across the City. Specific groups protected by The Equality Act 2010 who have engaged with the fund since 2016 include people with physical disabilities; ethnic groups including Afro-Caribbean and Nepalese; lesbian, gay and bisexual people; and pre-natal groups.

#### 4.2. Fairer Scotland Duty

The allocation of current funding is weighted to enable more support to be given to projects in areas of socio-economic disadvantage.



## INTEGRATION JOINT BOARD

### 4.3. Financial

There are no direct financial implications arising from the recommendations of this report.

### 4.4. Workforce

The fund provides an opportunity to engage our staff in promoting a preventative approach to health with both clients and colleagues. Endorsement of the fund and approval of the recommendations described in the report will provide an opportunity to raise the profile of the fund with a broader range of H&SCP colleagues, increasing the range of staff who understand the funding principles and supporting the development of a health promoting culture across the organisation.

### 4.5. Legal

There are no direct legal implications arising from the recommendations of this report.

### 4.6. Other

No other implications have been identified.

## 5. Links to ACHSCP Strategic Plan

The principles of the Health Improvement Fund are in keeping with vision of the Aberdeen City H&SCP in that both seek to work with communities to enable people to achieve fulfilling, healthier lives and wellbeing. The fund has contributed to the following priorities in the H&SCP's Strategic Plan, 2016-19:

- *“Support and improve the health, wellbeing and quality of life of our local population”*
- *“Promote and support self-management and independence for individuals for as long as reasonably possible”*
- *“Contribute to a reduction in health inequalities and the inequalities in the wider social conditions that affect our health and wellbeing”.*



## INTEGRATION JOINT BOARD

### 6. Management of Risk

#### 6.1. Identified risks(s)

Risks due to a lack of IJB endorsement of the fund, its principles, and the recommendations described include:

- Lost opportunity to share learning from, and increase ownership of, the Health Improvement Fund, including opportunities to realise the outcomes described in the Christie Commission<sup>1</sup> and Community Empowerment Act<sup>2</sup>

#### 6.2. Link to risks on strategic or operational risk register:

None

#### 6.3. How might the content of this report impact or mitigate these risks:

This report provides the opportunity for the IJB to endorse the fund and share learning from the Health Improvement fund.

Approvals	
	Sandra Ross (Chief Officer)
	Alex Stephen (Chief Finance Officer)

### References

1. The Christie Commission (2011). Commission on the Future Delivery of Public Services. Available from: <https://www.gov.scot/publications/commission-future-delivery-public-services/>
2. Scottish Government (2015). Community Empowerment (Scotland) Act 2015. Available from: <http://www.legislation.gov.uk/asp/2015/6/contents/enacted>