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| <b>AGENDA ITEM</b> |
| 4.4                |

**POPULATION HEALTH & PARTNERSHIPS COMMITTEE**

**CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD AS AN ANCHOR ORGANISATION – PROPOSAL FOR AN ANCHOR STRATEGY AND STEERING GROUP**

|   |   |
|---|---|
| <b>Date of meeting</b>                  | 4 <sup>th</sup> May 2022  |
| <b>FOI Status</b>                       | Open/Public   |
| <b>If closed please indicate reason</b> | Not Applicable - Public Report  |
| <b>Prepared by</b>                      | Jonny Currie, Specialty Registrar in Public Health  |
| <b>Presented by</b>                     | Kelechi Nnoaham, Executive Director of Public Health/Jonny Currie, specialty Registrar in Public Health |
| <b>Approving Executive Sponsor</b>      | Executive Director of Public Health   |
| <b>Report purpose</b>                   | FOR APPROVAL  |

| <b>Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)</b> |             |                |
|---|-------------|----------------|
| <b>Committee/Group/Individuals</b>  | <b>Date</b> | <b>Outcome</b> |
| Michelle Hurley-Tyers, Assistant Director, Workforce Development  |             |                |
| Anmarie Pritchard, Deputy Head, Procurement   |             |                |
| Rosie Cavill, Head of Capital, Strategic and Operational Planning   |             |                |



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|---|--|--|
| David Williams, Governance and Compliance Manager, Facilities |  |  |
| Claire Nicholas, Head of Policy, Workforce Development        |  |  |
| Tom Powell, Innovation Manager                                |  |  |
| Alison Howells, Central Processing Unit Manager               |  |  |

## ACRONYMS

|        |   |
|--------|---|
| CTMUHB | Cwm Taf Morgannwg University Health Board |
| CTM    | Cwm Taf Morgannwg                         |

## 1. SITUATION/BACKGROUND

- 1.1** Up to £1 in every £3 spent and four in ten jobs in Wales goes on basic services (the 'Foundational Economy'<sup>1</sup>). NHS providers across the UK are redefining themselves as 'anchor organisations' (see figure 1) – large, non-profit organisations, unlikely to relocate, whose long-term sustainability is tied to the well-being of the populations they serve.<sup>2</sup>
- 1.2** Cwm Taf Morgannwg faces significant population health challenges, made clearer during the COVID-19 pandemic;<sup>3,4,5</sup> Given population health outcomes are only 15-20% modifiable through health service delivery,<sup>6</sup> the need to focus upstream on the wider determinants of health which drive inequalities (including work, income, education, housing and the built environment) is essential.

## What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:



As an anchor institution, the NHS influences the health and wellbeing of communities simply by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider factors that make us healthy.



References available at [www.health.org.uk/anchor-institutions](http://www.health.org.uk/anchor-institutions)  
© 2019 The Health Foundation.

Figure 1 – Summary of potential actions by the NHS as anchor organisations.  
Source: Health Foundation.

- 1.3** The programme to transform CTMUHB into a Population Health Organisation includes an ambition to shape the health board further as an anchor organisation: CTMUHB employs over 12,000 staff with 80-90% resident within the health board boundaries. With an annual spend of over £1 billion and considerable geographic reach in estates and services, the opportunity to use such resources to maximal social value is substantial.
- 1.4** Given such areas play a significant role in population health and inequalities, there may be an opportunity post-COVID-19 for CTMUHB to strengthen its focus on the wider determinants of health, improve health, tackle inequalities and meanwhile improve access to well-being opportunities for its staff and residents.
- 1.5** A separate mapping paper summarises the exemplary work relevant to a programme to transform CTMUHB into an anchor organisation (Population Health Organisation projects 24-30, agreed by Board in May 2021); this paper proposes a new Anchor Strategy for the health board to strengthen such work and ensure efforts yield improved outcomes for residents and communities, overseen by a CTMUHB Anchor Steering Group to ensure improved communication, coordination and application of data and evidence-based approaches.

## **2. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE**

### **2.1 Summary of mapping on CTM as an anchor organisation**

**2.1.1** Table 1 in appendix 1 summarises activity relevant to PHO projects 24-30, described in further detail in the accompanying mapping paper. The majority of relevant projects are progressing appropriately with all featuring considerable activity, demonstrating recognised leadership by the health board in corporate social responsibility, partnership working and as an anchor to the communities of Cwm Taf Morgannwg.

**2.1.2** Considerable further opportunities remain, however, given the wider system infrastructure provided by the Public Service and Regional Partnership Boards and learning from other leading NHS anchor programmes across the UK. Furthermore, a number of cross-cutting themes/risks were identified during mapping regarding many anchor-related projects which ought to be considered prior to any decision concerning future work programmes.

### **2.2 Risks for consideration**

#### **2.2.1 Project metrics & Evaluation**

**2.2.2** Few of the projects identified as relevant to the anchor programme appear to have been evaluated, with limited data on their impact. Very few projects set specific metrics or established baseline data, for example:

- What proportion do residents in CTM in the most deprived areas comprise of health board employees?
- What proportion of health board procurement is spent on local suppliers, and what would a realistic target be?
- What annual value does the health board generate to healthy housing in CTM?

**2.2.3** Applying an evidence-based approach, making better use of available data to evaluate impact and engaging with anchor learning networks, such as that provided by the Health Foundation, may strengthen project quality and impact and ensure CTM resources are being used to greatest effect. Engaging with emerging research programmes as part of the National Institute of Health Research (NIHR) Health Determinants Research Collaboration (HDRC) planned in CTM could

support such an evaluation and is advised to improve CTM's anchor programme.

#### **2.2.4 Communication**

**2.2.5** A number of stakeholders engaged during mapping cited the challenge of ensuring staff and the public were aware of their initiative. While achieving universal understanding is an unrealistic aim, there are likely to be a number of risks to inadequate marketing or promotion of such work, including:

- duplication of projects and resources;
- poor understanding of the work the health board is undertaking to improve population health and well-being;
- missed opportunities in recruitment to staff potentially motivated to work for an employer who is tackling such long-term challenges; and
- reputational risks to the public who may, particularly post-pandemic, increasingly expect the NHS and other public bodies to demonstrate their commitment to tackling inequalities and investing in communities.

**2.2.6** Communicating the extent to which CTM is already an anchor organisation, and to which it intends to develop further, may be indicated, requiring involvement of health board communications officers to ensure alignment with wider corporate messaging.

#### **2.2.7 Coordination and governance**

**2.2.8** The majority of activities identified during mapping belonged to a single directorate. While professional relationships are strong among CTM staff, there is potential to improve such structures and to develop improved governance for the CTM anchor programme. The creation of a specific steering group with representation from Workforce, Procurement, Estates, Facilities, Strategic Planning and the local public health team could allow cross-seeding of ideas (for example, improving access to apprenticeships on green-spaces in CTM, or improving partnerships between housing associations now part of the Healthy Housing Partnership in pre-recruitment of staff) and ensure appropriate reporting of activity to the Board and Welsh Government. A suggested structure for such a group is included in appendix 2.



### 3. IMPACT ASSESSMENT

|   |  |
|---|--|
| <b>Quality/Safety/Patient Experience implications</b>   | There are no specific quality and safety implications related to the activity outlined in this report.   |
|   |  |
| <b>Related Health and Care standard(s)</b>  | Staff and Resources  |
|   | If more than one Healthcare Standard applies please list below:  |
| <b>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b> | No (Include further detail below)  |
|   | If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.  |
|   | If no, please provide reasons why an EIA was not considered to be required in the box below.   |
|   | This paper does not describe new services or health board policy and instead amalgamates existing work projects under one coordinated programme  |
| <b>Legal implications / impact</b>  | There are no specific legal implications related to the activity outlined in this report.  |
|   |  |
| <b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>   | Yes (Include further detail below)   |
|   | The proposed programme to strengthen the anchor programme in CTM will involve opportunity costs of staff members participating in and preparing for quarterly steering group meetings. |
| <b>Link to Strategic Goals</b>  | Creating Health  |



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#### 4. RECOMMENDATION

The Committee are asked to:

- 4.1 Approve** the creation of a CTM Anchor Steering Group as described in Appendix 2 tasked with overseeing the implementation of a new CTMUHB Anchor Strategy, coordinating across the health board and with partners to maximise the influence of health board assets to create social value for CTM communities.
- 4.2 Note** the attached Draft CTM Anchor Strategy for 2022-2025 with clear objectives and metrics for finalisation by the CTM Anchor Steering group.
- 4.3 Note** the potential for the anchor programme to have resource implications for the health board, and task the Steering Group immediately with summarising such implications to report to the Population Health & Partnership Committee and Board by July 2022.

## Appendices

### Appendix 1 - Mapping of activity against PHO projects 24-30

Key – **Red** (Limited activity financial year 2021/22), **Amber** (activity on track 2021/22), **Green** (Achieved)

| PHO Project Number | Project title  | Exec Lead         | Support to Executive Lead                      | Support to Additional Exec Lead  | Document Links   |
|--------------------|--|-------------------|--|----------------------------------|--|
| <b>PHO 24</b>      | Widen participation of CTM residents in the workforce            | Hywel Daniel, DOP | Michelle Hurley Tyers and Nick Carter          | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>Project Search</li> <li>Future Generations Leadership Academy</li> <li>Pathways to Management</li> <li>Work experience placements</li> </ul>  |
| <b>PHO 25</b>      | Create apprenticeships that target more vulnerable people in CTM | Hywel Daniel, DOP | Michelle Hurley Tyers and Nick Carter          | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>Appointment of apprenticeships and qualifications manager</li> <li>Kick Start</li> <li>UK Government apprenticeship scheme</li> </ul>   |
| <b>PHO 26</b>      | Shift more spend locally   | Sally May, DoF    | AnnMarie Pritchard, Deputy Head of Procurement | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>Duties under WBFGA/WG legislation</li> <li>CTMUHB Catering Central Processing Unit, Treorchy</li> <li>PPE and Royal Mint case study</li> <li>In-house waste management</li> <li>Food procurement</li> </ul> |
| <b>PHO 27</b>      | Embed social value into purchasing decisions                     | Sally May, DoF    | AnnMarie Pritchard, Deputy                     | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>Sustainability risk assessments for tenders &gt;£25k</li> <li>Sustainable Procurement Policy V2</li> </ul>  |



|               |  |                |   |                                  |  |
|---------------|--|----------------|---|----------------------------------|--|
|               |  |                | Head of Procurement   |                                  | <ul style="list-style-type: none"> <li>• NHS T&amp;C of Contract for both Goods and Services</li> <li>• WG Community Benefits toolkit – applied to PCH refurbishment</li> <li>• Multi-quotes for tenders &lt;£25k to increase bids from Welsh SMEs</li> <li>• Appointment of Senior Procurement Policy Lead for sustainability &amp; foundational economy</li> <li>• Sustainable plastics &amp; materials practice &amp; plans for in-house recycling/waste management system</li> </ul> |
| <b>PHO 28</b> | Expand community access to CTMUHB's property               | Sally May, DoF | Rosie Cavill, Head of capital, Strategic and Operational Planning | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>• Keir Hardie Health Park</li> <li>• Dewi Sant Hospital</li> <li>• Forthcoming Sunnyside development in Bridgend</li> </ul>   |
| <b>PHO 29</b> | Develop accessible community green spaces on CTMUHB's land | Sally May, DoF | Rosie Cavill, Head of capital, Strategic and                      | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"> <li>• Glanrhyd Green Flag Award activity</li> <li>• CTMUHB Biodiversity &amp; Ecosystem Resilience Plan</li> </ul>  |



|               |  |                |   |                                  |   |
|---------------|--|----------------|---|----------------------------------|---|
|               |  |                | Operational Planning  |                                  |   |
| <b>PHO 30</b> | Work in partnership across CTM to maximise the wider value of CTMUHB's estates | Sally May, DoF | Rosie Cavill, Head of capital, Strategic and Operational Planning | Philip Daniels, Consultant in PH | <ul style="list-style-type: none"><li>CTM Healthy Housing Partnership</li></ul> |

## Appendix 2 – Proposed governance for CTM anchor programme

### Objectives

- Finalise and implement a strategy to build CTMUHB as an anchor organisation for its citizens and communities
- Support and commission projects to ensure impact and appropriate use of resources
- Communicate the impact of CTM as an anchor to staff, residents and across Wales

### Project structure

| Name   | Role and responsibilities  |
|--|--|
| Local public health team representative      | Participation in steering group meetings   |
| Administrative support                       | TBC  |
| Communications and engagement representative | Participation in steering group meetings and responsibility for communication/engagement regarding anchor projects with staff and wider public |
| Workforce representative                     | Participation in steering group meetings and responsibility for workforce anchor projects  |
| Procurement representative                   | Participation in steering group meetings and responsibility for procurement anchor projects  |
| Strategic Planning representative            | Participation in steering group meetings and alignment of anchor projects with strategic priorities  |
| Estates representative                       | Participation in steering group meetings and responsibility for estates & facilities anchor projects   |
| Facilities representative                    | Participation in steering group meetings and responsibility for estates & facilities anchor projects   |



|  |  |
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| Research, Innovation and Improvement<br>Coordination Hub<br>representative       | Participation in steering group meetings and responsibility for alignment of anchor projects with research and innovation priorities |
| Community voluntary council representation from RCT, Merthyr Tydfil and Bridgend | Participation in steering group meetings and representation of community and third sector in anchor projects                         |
| Housing association representative   | Participation in steering group meetings and representation of housing associations in anchor projects                               |

### Controls

- Quarterly steering group meetings
- Updates to Board through Population Health and Partnerships Committee



## References

<sup>1</sup> See <https://gov.wales/foundational-economy>

<sup>2</sup> See Health Foundation. The NHS as an anchor institution. Available from: <https://www.health.org.uk/news-and-comment/charts-and-infographics/the-nhs-as-an-anchor-institution> [Accessed 09 Nov 2021].

<sup>3</sup> ONS. 2020. Life expectancy for local areas of the UK: between 2001 to 2003 and 2017 to 2019. Available from: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/bulletins/lifeexpectancyforlocalareasoftheuk/between2001to2003and2017to2019> [Accessed 22 Nov 2021].

<sup>4</sup> HealthMapsWales. 2021. Cancer mortality per 100k population, age-standardised. Available from: <https://www.healthmapswales.wales.nhs.uk/cancer-mortality> [Accessed 22 Nov 2021].

<sup>5</sup> HealthMapsWales. 2021. Hospital admission summary statistics, admission rates per 100k population, age-standardised. Available from: <https://www.healthmapswales.wales.nhs.uk/hospital-admissions-summary-statistics> [Accessed 22 Nov 2021].

<sup>6</sup> University of Wisconsin Population Health Institute. 2021. County Health Rankings. Available from: <https://www.countyhealthrankings.org/explore-health-rankings/our-methods> [Accessed 22 Nov 2021].