

WMCA Wellbeing Board

Date	24 October 2019
Report title	Population Intelligence Hub update
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Accountable Employeest	<p>Sean Russell - Implementation Director Wellbeing Email sean.russell@wmca.org.uk Tel: 07818 276 259</p> <p>Dr Henry Kippin - Director of Public Service Reform Email henry.kippin@wmca.org Tel: 7903 627 000</p> <p>Dr Lina Martino – Consultant in Public Health (PHE/WMCA) Email lina.martino@phe.gov.uk Tel: 07966 435 403</p>
Report has been considered by	

Recommendation(s) for action or decision:

The Wellbeing Board is recommended to:

Critically assess the proposed updates to the Population Health Intelligence Hub projects for relevance and usefulness to the overall Wellbeing Board work programme.

1. Purpose

- 1.1 To update the WMCA Wellbeing Board on the current position of the Population Intelligence Hub, including progress on intelligence projects so far.

- 1.2 Propose updates to the work plan for the financial year 2019-2020, with some ongoing and proposed projects for 2020/21, to be led by the Population Intelligence Hub and delivered collectively by partners across the West Midlands.
- 1.3 To invite challenge from the WMCA Wellbeing Board on proposed updates.

2. Background

- 2.1 The Population Intelligence Hub is a virtual intelligence hub established by PHE in collaboration with the WMCA. It is part of the WMCA's Inclusive Growth Unit.
- 2.2 Its remit is to initiate primary research, support the development of data systems and integrate a wide variety of existing intelligence, resulting in actionable insight to improve outcomes and reduce health inequalities for the West Midlands population.
- 2.3 The Hub is intended to be a resource for the whole West Midlands and be a focal point for place based intelligence on population outcomes. Whilst aligning closely with the priorities of the WMCA and supporting work to demonstrate impact across thematic areas, the Hub will deliver outputs that will be of use for population health focused organisations across the West Midlands.

3. Completed projects and progress to date

- 3.1 The 2018/19 work plan and completed projects to date are summarised in Appendix 1.

4. Updated work plan 2019/20 and developing the 2020/2021 plan

- 4.1 The Hub will continue to lead and support projects in line with its strategic objectives of **demonstrating impact, delivering solutions** and **increasing capacity**. These projects are planned to support the Inclusive Growth Unit, the WMCA Healthy Weight Strategy and the next phase of the Thrive West Midlands programme. Additional activities will contribute to growing the capacity of the hub to draw upon available resources for intelligence and analysis within the West Midlands and nationally.
- 4.2 The work plan is designed to complement and align to the development of a more cohesive approach across the Public Service Reform team and wider WMCA, and stronger relationships with PHE, the WM ADPH and other regional partners.
- 4.3 Table 1 summarises the revised 2019/20 work plan, with ongoing and proposed projects for 2020/21. These will cover the period to the end of Q2 (September 2020). Further detail is provided in Appendix 2.

Table 1: Population Intelligence Hub updated work plan 2019/20 – 2020/21 (Q2)

Project <i>See numbered items in Appendix 2 for further details</i>	Status	Ongoing/ Start due	Due
Demonstrating impact			
Further develop the Wellbeing Board dashboard in line with key thematic/priority areas (1)	A survey is being undertaken to review use and inform how the dashboard is developed. We will work with programme leads from across the PSR team and wider WMCA to identify how the dashboard can add value in terms of demonstrating impact.	Ongoing	
Growth Corridor Population Analysis (2)	Baseline reports to support the development of the Growth Corridors are in progress. A symposium event to share learning from across corridor areas and encourage collaboration between LA and university partners is being planned for February/ March 2020.	Ongoing	Q4 2019/20
Develop logic model to underpin evaluation of Inclusive Growth Unit (3) – <i>links to above</i>	This will clearly link actions/inputs to promote inclusive growth to its outputs, as well as interim (process) indicators, to demonstrate impact and interim progress against defined objectives and show the contribution made by each part of the system. It is likely that a Specialty Registrar in Public Health based at PHE will take this on as a project.	Q3 2019/20	Q4 2019/20
Produce workplan for Mental Health & Theatre project evaluation metrics and process (4)	This is nearing completion – a framework has been developed with a view to handing over to a researcher to complete the evaluation itself.	Ongoing	Q4 2019/20
Develop metrics and targets for the WMCA Healthy Weight strategy, and support consultation process (5)	<p>PHE’s Local Knowledge & Intelligence Service (LKIS) produced intelligence reports around childhood obesity in the West Midlands, and refined some of the metrics and targets using the most up to date WMCA data. This has been shared with Sean Russell.</p> <p>The strategy document is currently in draft and will go out for wider consultation following feedback from the WMCA Wellbeing Board,</p>	Q4 2019/20	

	regional forum for health partners, and internal stakeholders and WMCA DsPH. The consultation will be used to further develop metrics and targets so that these reflect subjective indicators of importance to communities as well as objective indicators of improvement, with a wider focus on healthy weight, physical activity and mental wellbeing.		
Develop metrics and targets for the Black Thrive West Midlands (6)	Delayed due to lack of capacity; it is anticipated that this will begin by January/February next year, once the new Project Manager has been appointed.	Q4 2019/21	
Delivering solutions			
Develop models to demonstrate return on investment for WMCA policies, strategies and programmes that impact on the wider determinants of health and health inequalities (7)	A brief scoping review was carried out in support of proposals for a WM Radical Prevention Fund. This highlighted a need to develop local models to demonstrate costs and benefits (including social return on investment) of WMCA activity.	Q4 2019/20	
Population health management	Contribute to developing system-wide approach to PHM in the region, linking with PHE, NHSE and community of practice.	Ongoing	
Integrate behavioural insights into strategy development and evaluation	Work with PHE's Behavioural Insights team to integrate evidence on behavioural insights, health psychology and behavioural economics into developing metrics and targets for key strategies and workstreams.	Ongoing	
Increasing capacity			
Establish Project Manager post (Grade 7)	Funding for this post has been agreed with WM ADPH and a job description is being developed. This will build on the previous Project Manager role to coordinate the public health input to support the work of the WMCA across the constituent Local Authorities and PHE.	Ongoing	Q4 2019/20
Establish StR placement	With the new Consultant lead now in post, potential projects/supervision arrangements are being identified with a view to offering a placement from January 2020. Irfan Ghani was happy with proposals to establish the	Ongoing	Q4 2019/20



	WMCA as an approved training placement; this will be picked up with the new lead TPD once in post.		
Support WMCA/ LA engagement event	The first meeting took place in May 2019, with a second meeting scheduled for October 2019. This has been rescheduled for December 2019 to allow a number of key meetings to take place. WM ADsPH have agreed and formalised arrangements to support the shared HWB agenda with WMCA, and good progress is being made to develop the Healthy Weight collaborative strategy and 'plans on a page' for key thematic areas (to be shared in October).	Ongoing	Q4 2019/20
Formalise system for allocating support from Local Authorities and other public sector bodies	A paper was produced setting out potential options for securing future resource from partners. This is being revisited in the context of new Hub appointments and collaboration with WM ADPH.	Ongoing	Q4 2019/20

5. Delivery of the work plan

5.1 Structure and governance

5.1.1 Appendix 3 sets out the updated structure of the Hub team, and governance/reporting arrangements for the Hub.

5.1.2 The Population Intelligence Hub is currently part of the WMCA's Inclusive Growth Unit. This enables the work programme to be directly aligned to priorities around inclusive growth, health inequalities and population wellbeing. In addition, being situated within Public Service Reform team facilitates the working relationships and key partnerships needed to ensure that the work programme is developed appropriately to support these priorities and related areas.

5.1.3 It has been suggested as an alternative that the Hub is integrated into the Office for Data Analytics (ODA). However, for the reasons stated above it is proposed that the Hub retains its place within the Inclusive Growth Unit.

5.1.4 It is proposed that the Hub will feed directly into the WMCA Wellbeing Executive Group, in place of the Steering Group under previous arrangements.

5.2 Resources and budget

5.2.1 The Hub recently appointed a Public Health Intelligence Analyst to support delivery of the work programme, funded by PHE. The Analyst joins the new Consultant appointed at PHE to support the wellbeing work of the WMCA. An Administration Assistant (Apprentice) has recently been recruited to provide administrative support to this programme, amongst others.

5.2.2 A Project Manager post (Grade 7) is being developed to co-ordinate the public health input to support the work of the WMCA across the constituent Local Authorities and PHE. The role will be a further development of the previous Project Manager role, with increased seniority reflecting the current position of the Hub and skills required.

5.2.3 Apart from these designated roles there is no dedicated budget for the delivery of this work. The Hub relies on intelligence partners across the West Midlands to support work programmes and activities.

5.3 WMCA Wellbeing Board Sponsor

5.3.1 The Wellbeing Board previously nominated Councillor Karen Grinsell (Deputy Leader of the Council and Cabinet Portfolio Holder - Adult Social Care & Health, Solihull MBC) as a sponsor to support the development and implementation of this work. The role of the sponsor will be to facilitate the use of the Hub and its outputs into the work of the Wellbeing Board, linking with the lead Consultant.

6. Financial Implications

6.1 There are no immediate financial implications.

6.2 Subsequent activity to progress the offer may generate new financial requirements.

7. Legal Implications

7.1 There are no immediate legal implications flowing from the content of this report.

8. Equalities Implications

8.1 Effective research and intelligence will support WMCA equalities responsibilities.

9. Inclusive Growth Implications

9.1 The work plan is designed to support and complement the work of the Inclusive Growth Unit.

10. Geographical Area of Report's Implications

10.1 The 14 local authorities within the West Midlands.

11. Other Implications

11.1 None noted.

12. Schedule of Background Papers

Appendix 1: 2018/19 work plan summary and progress

Developing Solutions	<ul style="list-style-type: none"> Evidence reviews for MCN Methods to map and influence complex adaptive systems
Demonstrating Impact	<ul style="list-style-type: none"> WMCA Wellbeing Board Dashboard Developing a WMCA Inclusive Growth Index HLE Analysis Youth Justice Needs Assessment Short briefing format, with HLE output as prototype
Capacity Generation	<ul style="list-style-type: none"> WMCA Skills Audit Establish PH SpR placement Support WMCA/ LA engagement event Engagement with senior decision makers at PHE and WMCA for support for hub Bid to draw down national resources for new staff to support Population Hub

Project	Status
Healthy Life Expectancy analysis	Project completed May 2018. Positive feedback received from Local Authority partners and WMCA.
West Midlands Youth Justice Needs Assessment	Completed by LKIS in June 2017. Positive feedback from Claire Dhami.
Creating a health and wellbeing dashboard for the WMCA Wellbeing Board	Dashboard developed in 2017. Further work to review use and any feedback. (See 19/20 workplan).
LA analyst skills audit	Completed in 2017
Evidence reviews for MCN	Completed September 2018 Review of data sharing for adults with MCN conducted by LSHTM MSc student, Katherine Korner. Formulated and presented actionable recommendations.
Developing a WMCA Inclusive Growth Index	Completed with partners September 2018 Received at WMCA Programme Board. Ongoing work to refine and embed into practice and policy. (See 19/20 workplan).
Engagement with senior decision makers at PHE and WMCA for support for hub	Completed May 2018
Bid to draw down national resources for new staff to support Population Hub	Completed July 2018
Methods to map and influence complex adaptive systems	Potential methods outlined and presentation on CAS given at WM Learning for Public Health event.



	Concepts adopted for WMCA Wellbeing Board Activity Plan and WMCA Childhood Obesity Strategy.
Intelligence to support Multiple Complex Needs Programme	This has been picked up as part of the wider Inclusive Growth agenda.
Develop short briefing format, using HLE output for WMCA	The final reports from the HLE work were shared with partners and are hosted on the LKIS khub site.
Establish PH StR placement	See updated 19/20 workplan
Support WMCA/ LA engagement event	See updated 19/20 workplan

Appendix 2: Summary of ongoing and proposed projects

1. Developing the WMCA Wellbeing Board dashboard

Section: Demonstrate Impact

Lead(s): Public Health Intelligence Analyst (WMCA); Public Health Consultant (WMCA)

Aims: Further develop the dashboard to demonstrate the health and wellbeing impacts of the Wellbeing Board and work of the PSR team and wider WMCA, aligning to key thematic and priority areas.

Description:

- Ensure current dashboard and monitor is fit for purpose and contains the most up to date data.
- Engage with stakeholders (WMCA Wellbeing Board Portfolio Lead and members, WMCA Programme Board, WMCA Wellbeing and PSR executive team) to determine whether these metrics are being used, and if so how.
- Identify what learnings can be obtained from the past year, and what changes need to take place to improve the use of routine information in the coming year.
- To be undertaken with support from PH WM LKIS.

2. Growth Corridor Population Analysis

Section: Demonstrate Impact

Lead(s): WMCA Analyst, (LA Insight teams LKIS)

Aims: To generate a granular understanding of the populations surrounding the proposed growth corridors and sites of major WMCA regeneration, and to predict the potential population impact of upcoming activities in these areas.

Description:

- Characterise the existing populations surrounding the proposed growth corridors and/or major transport development.
- Consider the current constitution in terms of demographics (age, gender, ethnicity, migration status), education, skills and health outcomes.
- Map local assets such as healthcare facilities, children's centres, educational facilities, major businesses and cultural attractions.
- Review evidence and learnings from previous regeneration and area development projects in
- the UK and internationally.

- Forecast potential implications for these populations in terms of migration, mobility, access, job availability, health outcomes, and other relevant outcomes. The Hub will focus on health outcomes in the first instance, with a view to working with partners to expand analysis to other outcomes.

Potential partners in delivering this project are City REDI at Birmingham University, the Black Country Consortium, Transport for West Midlands and West Midlands Police Data Driven Insight team.

3. Develop logic model to underpin evaluation of Inclusive Growth Unit

Section: Demonstrate Impact

Lead(s): Specialty Registrar in Public Health (TBC); Public Health Intelligence Analyst

Aims: To demonstrate how policies and programmes within each Inclusive Growth thematic area/workstream contribute to specific health, wellbeing and social outcomes.

Description:

- Logic models are used to clearly link actions/inputs to results/outputs to demonstrate impact over the short-, medium- and long-term, including process (interim) measures of progress.
- This work will complement the Inclusive Growth framework and Growth Corridor analyses, and enable a narrative to be developed around the contribution made by each part of the system.
- It will also support the development of tools/approaches to demonstrating return on investment for whole-system approaches (see item 7).

4. Produce work plan for Mental Health & Theatre project evaluation metrics and process

Section: Demonstrate Impact

Lead(s): Public Health Intelligence Analyst

Aims: Develop a framework for assessing the impact of arts programmes and interventions for health and wellbeing.

Description:

- There is an emerging evidence base that suggests that the arts can be used to change people's knowledge, attitudes and behaviours. We aim to strengthen the understanding of what works in specific contexts; by using this standard public health arts evaluation framework we can enable realistic assessment and appropriate comparisons.



- Arts interventions seeking to improve health need to be rigorously evaluated to determine the extent that the project has achieved its objectives. It is important to understand what went well and what challenges were encountered to support sustainability for arts programmes for health and wellbeing.
- This project aims to use a specially commissioned set of performances to promote positive workplace cultures that support and champion people who have experienced mental health challenges and illness.
- The project is a feasibility project which will also attempt to demonstrate that the performing arts can be purposefully used as a tool to improve public mental health.
- The aim for this project is to raise individual awareness and upskill managers who need to manage the boundaries between being supportive and signposting the individual but equally having to make difficult decisions around management.

5. Develop metrics and targets for the WMCA Healthy Weight strategy

Section: Demonstrate Impact

Lead(s): Specialty Registrar in Public Health; Public Health Intelligence Analyst

Aims: To determine useful metrics and targets which can be adopted by the WMCA Healthy Weight Strategy as evidence of progress.

Description:

- Support the consultation process for the Healthy Weight Strategy, and use information from local communities to shape and update the approach to evaluation.
- Appraise existing measures of overweight and obesity in adults and children for appropriateness and responsiveness for the West Midlands. Include metrics relating to physical activity, mental wellbeing and the built environment; also qualitative assessment of facilitators and barriers.
- Describe the evidence-based activities which contribute to the reduction of obesity in children and adults which are amenable to influence at the combined authority level.
- Collate success stories of obesity reduction in the UK, with close attention to reductions achieved and approaches/methods employed.
- Model changes in outcome measures represented by different targets – e.g the reduction in obesity achieved by reducing the gap between the most and least deprived by 20%.
- Propose ambitious but realistic targets to the WMCA Obesity Strategy Taskforce.



6. Develop metrics and targets for the Black Thrive West Midlands

Section: Demonstrate Impact

Lead(s): TBC

Aims: To describe inequalities in mental health and wellbeing, and access to and experience of mental health services among people of Black origin in the West Midlands; and develop a framework for implementing and evaluating a complex systems approach to address these inequalities.

Description:

- Existing mental health data poorly describes and tracks the experience of people of Black origin who suffer from mental health conditions. This is particularly the case when these people are at the severe end of the disease spectrum or are in contact with the criminal justice system.
- Current evidence suggests that a complex system focus is required to develop new theories on how lasting and significant change can be generated in this area. This requires a new complex systems approach and potentially new metrics.

Potential partners in delivering this project are the PHE National Mental Health team (Lily), PHE West Midlands (Paul Sanderson) and community and advocacy groups. Also links to Advancing Mental Health Equality work by the RCPsych.

7. Demonstrate return on investment for WMCA policies, strategies and programmes

Section: Demonstrate Impact

Lead(s): TBC

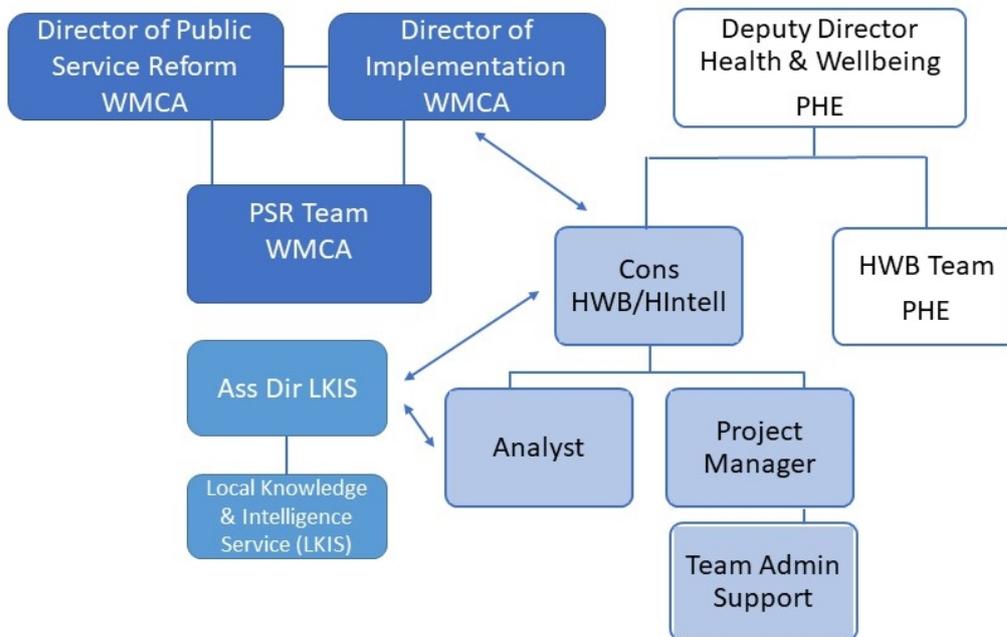
Aims: Develop models to demonstrate return on investment (ROI) for WMCA policies, strategies and programmes that impact on the wider determinants of health and health inequalities.

Description:

- Apply PHE ROI tools (including social ROI) to the WMCA population to quantify economic and social benefits of WMCA activity to improve population health and wellbeing.
- While there is considerable evidence around ROI for interventions to improve specific health conditions, the evidence around whole-system approaches and/or those impacting on healthy life expectancy overall is limited. Learning from other areas (e.g. Liverpool City Region) will be applied to developing local models.
- This work will complement the WMCA Wellbeing Board Dashboard by providing additional evidence of impact, and support the case for Radical Prevention approaches and funding.
- It is anticipated that this project would be undertaken with support from PH WM LKIS, and the PHE National Health Economics Team.

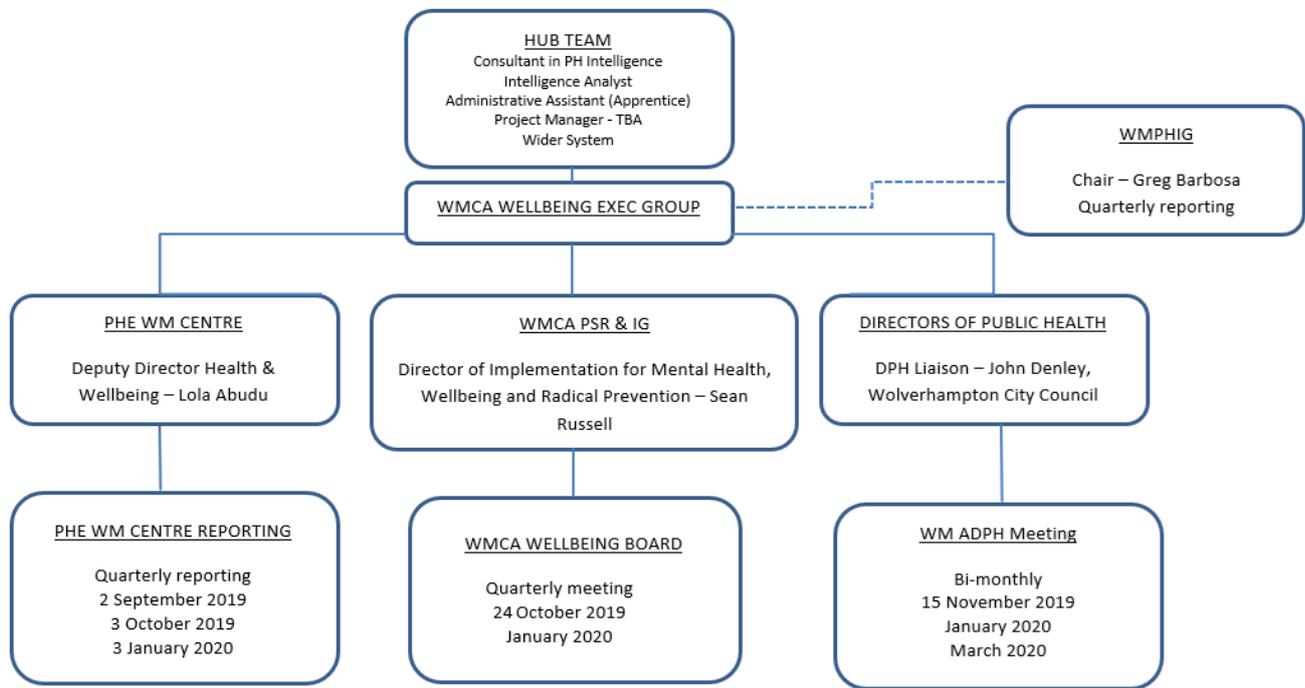
Appendix 3: Hub structure and governance arrangements

Population Intelligence Hub team and key relationships





POPULATION HUB – GOVERNANCE & REPORTING STRUCTURE



Proposed reporting

Project specific – Quarterly basis
Proposed annual work plan – Q4
Review progress – Bi-annual
Strategic objectives – Bi-annual