

WMCA Wellbeing Board

Date	17 July 2020
Report title	Population Intelligence Hub update
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Report has been considered by	

Recommendation(s) for action or decision:

The WMCA Wellbeing Board is recommended to:

- Note progress made against the Population Health Intelligence Hub workplan for 2020/21 and the changes made in light of the coronavirus (COVID-19) pandemic;
- Critically assess these changes in relation to the wider WMCA approach to response and recovery.

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 Outline changes to the work plan for the financial year 2020/21, taking into account the impact of the COVID-19 pandemic and shifting priorities;
- 1.3 To invite comment and input from the WMCA Wellbeing Board on updates and changes.

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. 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.
- 2.2 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.
- 2.3 A summary of the Hub's work to date was presented to the WMCA Wellbeing Board in October 2019, along with the Hub structure, governance and resources. A work plan for the remainder of the year 2019/20 to the end of Q2 2020/21 was proposed and endorsed by the Wellbeing Board.
- 2.4 While there has been considerable progress on a number of project areas, the COVID-19 pandemic has shifted resources and focus to supporting the acute response around the region, and informing the development of longer-term recovery plans.
- 2.5 COVID-19 has the potential to create and widen existing health inequalities, both through the direct impacts of the virus, and the indirect impacts of the control measures imposed. The updated workplan reflects a broader focus on working across the system to address these inequalities, recognising the two-way relationship between health and wealth.

3. Progress against workplan for 2019/20 – Q2 2020/21

- 3.1 Table 1 summarises progress made against the previously agreed workplan for the period covering September 2019 to September 2020. This includes projects that have been delayed or paused as a result of the COVID-19 response.
- 3.2 The Hub is continuing to lead and support projects in line with its strategic objectives of **demonstrating impact, delivering solutions** and **increasing capacity**, supporting the Inclusive Growth Unit and wider priorities across the WMCA.
- 3.3 The workplan 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. This is also the case for additions focusing specifically on the COVID-19 response (see section 4).
- 3.4 Projects focusing specifically on the impacts of COVID-19 are current priorities for the Hub, with a Regional Health Impacts of COVID-19 workstream the primary focus until October 2020 (see section 4.2). However, we are also retaining focus on core project areas and ways of working that will support optimal use of population health intelligence across programmes and policy areas.

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

Project	Progress update	Status
Demonstrating impact		
Further develop the Wellbeing Board dashboard in line with key thematic/priority areas (1)	Work has been undertaken with programme leads from across the PSR team and wider WMCA to identify how the dashboard can add value in terms of demonstrating impact. A draft version of the updated Dashboard and accompanying logic models (see item 3 below) has been produced and is currently being refined for further consultation.	Ongoing – on target (due Sep 2020)
Growth Corridor Population Analysis (2)	Baseline reports and narratives to support the development of the Growth Corridors are still in progress and 3 of 4 have been completed – however, the remainder has been delayed to allow new work supporting the COVID-19 response and recovery to be prioritised. The planned regional symposium event is currently on hold until there is clarity on options for delivery.	Ongoing - delayed
Develop logic model to underpin evaluation of Inclusive Growth Unit (3) – <i>links to above</i>	This links 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.	Ongoing – on target (due Sep 2020)
Produce workplan for Mental Health & Theatre project evaluation metrics and process (4)	This has been completed and is now ready to be applied in evaluation.	Completed
Develop metrics and targets for the WMCA Healthy Weight strategy, and support consultation process (5)	This is currently on hold until we are able to progress with stakeholder and community engagement. The current strategy document will also need to be revised taking into account the impact of COVID-19 and wider work around health inequalities.	Paused
Develop metrics and targets for the Black Thrive West Midlands (6)	While immediate plans to establish this project are currently on hold, it is recognised that this would be an important and timely piece of work. Options	Delayed

	for delivery alongside current evidence and ongoing work around BAME inequalities in COVID-19 morbidity and mortality are being considered.	
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)	This is still being explored as part of the approach to demonstrating impact. While resources are currently limited, there should be capacity to focus on this element once work on the Dashboard and logic models has been completed.	Ongoing - delayed
Population health management	Continuing to link with partners and networks to develop local and regional approaches.	Ongoing
Integrate behavioural insights into strategy development and evaluation	As above – this forms part of ongoing approaches.	Ongoing
Increasing capacity		
Establish Project Manager post (Grade 7)	This has been paused while ongoing needs and priorities are being assessed.	Paused
Establish StR placement	A Specialty Registrar started a placement with PHE in January 2020, as a member of the Hub team.	Completed
Support WMCA/ LA engagement event	A WMCA and PHE collaboration workshop took place in January 2020 to discuss improving alignment of shared health and wellbeing priorities for the region, focusing on a number of key thematic areas. The aim was to inform discussions with the WM ADPH; however, this is being reconsidered and refocused in light of the changing situation and emerging needs, challenges and opportunities.	Ongoing – refocusing
Formalise system for allocating support from Local Authorities and other public sector bodies	Potential options for securing future resource from partners were previously explored and were being revisited. This is ongoing but will take into account the changing landscape and emerging priorities.	Ongoing

4. Additions to workplan for 2020/21: Supporting the regional COVID-19 response and recovery

- 4.1 Table 2 summarises additions made to the previously agreed workplan from January 2020. These additions focus primarily on supporting the regional response to COVID-19: understanding risks, impacts and inequalities, and informing plans for response and recovery.
- 4.2 A Regional Health Impacts of COVID-19 (RHIC) Task & Finish Group has been convened with representation from the WMCA, PHE, local authorities and the NHS. This group will focus on the relationship between disparities analysis from the PHE review and wider health inequalities in the WMCA Region. Key outputs will be a regional analysis of COVID-19 and health inequalities, and a *Health of the Region* report that reflects the regional impacts of COVID-19 (see Table 2).
- 4.3 The RHIC workstream will support the WMCA's wider response to COVID-19, including plans to mitigate impact, prevent existing inequalities from increasing, and build resilience across the system.
- 4.4 Other additions to the workplan that are not COVID-19 specific reflect how existing workstreams have evolved and developed, and have been included because they contribute to strengthening the overall approach to reducing health inequalities in the region.
- 4.5 In addition to defined projects, the Population Intelligence Hub has continued to provide information and advice on population health intelligence, approaches and metrics in a number of areas, including environment, employment & skills and longer term planning.
- 4.6 It is important to note that as PHE employees, members of the Population Intelligence Hub team are also providing direct support to the acute health protection response to COVID-19 alongside normal work activities, which has had an impact on team capacity. Care is being taken to limit the time spent in the response cell to no more than 40% of working time per week, reducing further as the focus shifts from the acute response phase to the recovery phase.

Table 2: New Population Intelligence Hub projects for 2020/21

Project	Description and status	Due
Regional Health Impact of COVID-19: Health of the Region report	This report was initially planned to accompany the State of the Region report on economic outcomes in the WMCA region. The initial draft described health outcomes and inequalities among the seven constituent authorities, proposing key priority areas for the year ahead. Due to the COVID-19 pandemic, it was decided that the report would be rewritten taking the changed context into account, and that a wider range of partners and stakeholders would be involved in shaping the content and recommendations. This is now being developed through the Regional Health Impacts of COVID-19 Task & Finish Group.	Sept 2020
Regional Health Impact of COVID-19: COVID-19	An initial descriptive analysis has been produced focusing on population vulnerabilities, risk factors and inequalities. The analysis covers the West Midlands region overall, This is being developed further to include a statistical analysis of the characteristics of areas (demographic, social, environmental, economic) that correspond to	Ongoing – interim report July 2020

Population Analysis	increased COVID-19 exposure, mortality and morbidity; indirect physical and mental health impacts; and social and economic impacts.	
Regional Health Impact of COVID-19: WM Region ethnicity and sector profiles	This is a descriptive piece focusing on occupational inequalities intersected with ethnicity. It will be considered alongside the COVID-19 population analysis as part of the Regional Health Impacts of COVID-19 work to help identify and address inequalities in risk.	Completed – include in interim report July 2020
Developing the Health in All Policies approach	A scoping review has been completed to understand previous work carried out in this area. This took the form of a Transport for West Midlands case study via key informant interviews. The aims were to describe the approaches used to imbed HiAP; understand the impact this had and what lessons could be learned; and consider options for how PHE could best support HiAP in the WMCA.	Sept 2020
Critical review of community engagement methods & action plan	This will enhance the ‘community fit’ aspect of the WMCA Inclusive Growth Decision Making Toolkit so that disadvantaged/marginalised groups are better reached and included. A critical review of community engagement methods will inform the development of an action plan to support the RHIC and Inclusive Growth workstreams.	TBC

5. Resources update

- 5.1 The Public Health Consultant for WMCA post has been extended until the end of September 2020, in line with the Public Health Intelligence Analyst post. Options for further extension are being explored. The Administrative Assistant Apprentice is in post until February 2021.
- 5.2 A Specialty Registrar in Public Health (0.8 WTE) joined the team in January 2020, with a view to completing training at the end of September 2020. Capacity to supervise additional trainee projects is being considered.

6. Financial Implications

- 6.1 WMCA are providing £43,000 to support the extension of the Population intelligence hub team until March 31st 2021 with the additional funding being met by the Directors of Public Health in the region.
- 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

12.1 Report presented to WMCA Wellbeing Board October 2019

12.2 COVID-19: WMCA population and health inequalities

12.3 Ethnic groups and sector employment profiles for understanding COVID-19 and inequalities in the West Midlands Region