

## **Written evidence submitted by Mrs Emma Ansell Meehan**

### **Proposed area of focus**

The role of the voluntary, community, and social enterprise sector (VCSE) in prevention, specifically:

- Understanding, enhancing and enabling the VCSE sector role in driving prevention and population health, and reduction of structural inequalities at neighbourhood and place level
- Working collaboratively to tackle social, economic and environmental conditions that impact residents health and wellbeing
- The enhanced role for the VCSE sector in integrated care systems, not just as service providers but in system leadership and governance as part of the policy shift to prevention focused, collaborative care

### **Why the Health and Social Care Committee should consider this issue**

The VCSE sector plays an important role in helping people to stay well and prevent ill-health, as well as supporting those who are unwell. As organisations close to the communities they serve, the VCSE sector has a deep understanding of the barriers to good health and wellbeing, and hold the trust and confidence of the people they work with, particularly groups who experience health inequalities and poorer health outcomes.

System transformation will not be possible without the meaningful involvement, leadership and representation of the VCSE sector. Addressing deep-seated inequalities requires collaboration between the NHS, localities, the VCSE sector, and co-production with local people. The inquiry offers an opportunity to understand current practice, address barriers to system transformation, and unlock the full potential of the VCSE sector in enabling healthier and more equal communities.

### **Why the Committee should look at it now**

ICS Implementation Guidance recognises the VCSE sector as a key strategic partner in shaping, improving and delivering services, developing and implementing plans to tackle the wider determinants of health, and embeds the VCSE sector in how the ICS operates. In the early years of Integrated Care systems it is essential to maximise both of these areas and unlock any barriers to making them a reality.

Simultaneously, the current cost-of-living crisis means urgent action is needed. Poverty is the single biggest driver of ill health, and the relationship is bi-directional: Poverty causes ill health, and ill health causes poverty. Those already in or near poverty are likely to experience a greater impact, as are those who are already in relatively poor health. It is therefore vital that the VCSE sector is appropriately resourced to work collaboratively at place level to tackle social, economic and environmental conditions that impact residents health and wellbeing.

### **Why this area would benefit from scrutiny**

Greater Manchester is a disproportionately deprived area within England. Chronic pain, heart and lung disease, alcohol problems, anxiety and depression, and diabetes are all 50% more prevalent in the most deprived tenth of the country (25% of GM residents).

In Greater Manchester, there are many examples of work already being done to enhance the VCSE sector role in driving prevention and finding innovative ways of tackling health inequalities:

- 10GM working with partners from Population Health, Primary Care Networks and the wider VCSE sector to establish Test and Learn Sites to explore how the VCSE sector and GPs can build lasting relationships that help them work together to tackle health inequality.
- Caribbean & African Health Network working with partners from Population Health and Primary Care Networks, have recruited 30 Caribbean & African Community Connectors to work with PCNs to explore the elements of care pathways that matter to Black people.
- Answer Cancer is a partnership working to improve cancer awareness and increase the uptake of cancer screening across Greater Manchester via grants, cancer screening awareness sessions, supporting a network of Cancer Champions, and training.
- The Greater Manchester and Eastern Cheshire Local Maternity and Neonatal System has worked with VCSE providers and communities to co-design an Equity and Equality action plan outlining steps needed from 2022-2027, to address gaps and improve outcomes for those most in need.

### **Why the Government needs to take action in this area**

DHSC and NHSE's roles are essential to:

- Co-ordinating collaboration and activity across government departments to enable the shift to prevention orientated healthcare
- Put in place national policy, resourcing and enablers so that VCSE organisations will be seen as full and equal partners in a 'system' (not a 'sector') that is focussed on people and place, with VCSE organisations recognised and valued as the natural leaders in facilitating co-production and achieving shared outcomes designed with people.
- Support the legislative, contractual, commissioning, and funding framework in primary care to enable and support preventative models of care and integrated working

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