

Meeting Date	03 December 2024	Agenda Item	3.3	
Report Title	Anchor Institution Baselineing - Progress Update			
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Presented by	Jennifer Davies, Executive Director of Public Health (Interim)			
Freedom of Information	Open			
Purpose of the Report	This report updates on the progress made in support of baselining Swansea Bay University Health Board in pursuit of being a purposeful anchor institution, based on the phased approach and key deliverables outlined in the update provided to the Committee in September 2024.			
Key Issues	<ul style="list-style-type: none"> • Some of the challenges around definition of work that contributes to 'anchor' and 'anchor institution' activity has required the need to change the approach so that the mapping of activity will now be undertaken alongside the stakeholder interviews. • Ongoing focus of the Health Board on short-term changes and investments due to financial pressures without utilising the benefits of anchor to mobilise and repurpose Health Board resources may impact on our ability as an anchor institution to maximise long-term population health benefits. • Given the targeted intervention/enhanced monitoring status of the Health Board and the ongoing Recovery and Sustainability Programme, utilisation of the required resource to deliver this work across the organisation is an ongoing challenge. 			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • Be assured of the progress to date in line with the plan presented at the last Population Health and Partnerships Committee in September. • Consider & approve the approach being undertaken with stakeholder involvement / interviews and mapping of current activity. 			

Anchor Institution Baselineing – Progress Update

1. INTRODUCTION

This report updates on the progress made in support of baselining Swansea Bay University Health Board in pursuit of being a purposeful anchor institution, based on the phased approach and key deliverables outlined in the update provided to the Committee in September 2024.

2. BACKGROUND

As part of its responsibilities as a population health organization, SBUHB acting as an effective anchor institution is a key component in supporting the medium to long-term recovery and sustainability of SBUHB and delivery of our high-quality organisational vision.

The Population Health & Partnerships Committee received a paper in September 2024 which provided an indicative timescale for this work and a list of key products. This will enable progress on the development of Swansea Bay as an anchor system working collaboratively with other anchors in pursuit of sustainable, measurable population health gains.

PROGRESS TO DATE:-

- **Phase 1: Reviewing the existing activity, considering existing frameworks and methodologies and identifying relevant partners, September 2024.**

A literature review was undertaken and identified a wide range of principles and topic areas which are typically included as part of activities of an effective anchor institution, which were broadly categorised as follows:

- People (including employability and skills)
- Place (including estates, community engagement and environmental sustainability)
- Procurement
- Partnerships

There is strong alignment between these overall themes and a range of existing local and national strategies. Our Population Health Strategy uses the term ‘anchor’ and ‘anchor institution’ which has not routinely been used in many locally and national policies. This provides a challenge in cross reference with local and national programmes of work. This creates a challenge of needing to identify where and how the work captured under ‘anchor’ is being implemented/delivered currently. Given the lack of reference of ‘anchor’ it has not been feasible to date to undertake a systematic mapping of anchor activity solely through a review of documents.

Built in to the methodology of this work is to embrace the learning in real-time to continuously develop and refine the approach. Based on this learning identified during Phase 1 it was decided to shift the mapping exercise of activity into Phase 2 and to tailor the interview questions with key stakeholders to more efficiently draw out relevant policies and strategies where the anchor principles are embedded locally.

A working definition of anchor institution based on the literature review has been developed to inform the SBUHB approach to anchor baselining and has been used to support the creation of interview questions as part of Phase 2 (further details on this can be found in the following section):

An anchor institution is:

“a large place-based organisation that is closely connected to the local community. By utilizing its assets and everyday business operations (such as employment power, spending power and land assets) it is able to improve the physical, mental and social health and wellbeing of the local population by impacting on the social determinants of health,

reducing health inequalities and reducing the organisation's environmental impact.

Alongside the review of literature there has been ongoing activity to communicate this developing area of work and to build networks with internal and external partners, which is key to ensuring the approach is continuously refined based on stakeholder feedback and ensuring appropriate delivery mechanisms are identified. Key updates of note since the last committee meeting are as follows:

- **Health Board Presentation on Foundational Economy 27th September** – The Health Board reaffirmed its commitment to its role within the foundational economy at the most recent Board and its alignment with our role as an anchor institution, in line with our Population Health Strategy aspirations and recommendations. The Board noted progress already made across different agendas and our ongoing exploratory work with a range of partners.
- **HDUHB / SBUHB Board to Board meeting 17th October** – as part of discussions around building on existing regional working across the two Health Boards, there is ambition to progress towards development of a regional foundational economy agenda with Hywel Dda University Health Board.
- **Health Anchors Learning Network (HALN) for Wales** – The Health Board has agreed to commit resources, through in-kind contribution, to developing a national Health Anchors Learning Network for Wales. This will help to support cross organisational partnership working & learning and support the development of collaboration with existing and new partners.
- **SBUHB, HDUHB and CTMUHB around Health & Housing 20th November** – a meeting with Swansea Bay, Hywel Dda and Cwm Taf Morgannwg Health Boards around Health & Housing and was an opportunity to explore collaboration opportunities. The Public Health Team have been part of these meetings to date and will continue to be a part of these discussions.
- **Wellbeing Economy Festival of Ideas, 18th November, Swansea Arena** – 4theRegion, WE Cymru, Oxfam Cymru, Cwmpas, Public Health Wales and the Future Generations Commissioner for Wales organised the inaugural Wellbeing Economy Cymru conference in November 2024. SBUHB was an exhibitor at this event.
- **Regional working** – ongoing discussions between Hywel Dda and Swansea Bay University Health Boards to explore opportunities to becoming a Regional Health Economy within a World Health Organisation Sub-Regional Health Network.

➤ **Phase 2: Establish a baseline position for SBUHB and key partners (what is currently taking place), November 2024 – January 2025**

Findings from Phase 1 have been used to create semi-structured interviews to undertake systematic mapping of current activity and policy / strategy alignment with key stakeholders under the following broad headings:

- Perceived value of anchor approaches
- People (including employability and skills)
- Place (including estates, community engagement and environmental sustainability)
- Procurement
- Partnerships

Key areas of focus within these headings include:

- Awareness of any activities/practices in which SBUHB / the organisation is working in a way that may benefit the local population
- Awareness of any relevant strategies/policies that may be relevant to SBUHB / the organisation that aims to benefits the local population
- Barriers and enablers which may influence impact on the local population

Given the nature of the questions and the need to capture depth and richness of data a qualitative methodology has been adopted. A purposive sampling technique has been adopted to identify relevant stakeholders, with a focus on:

- existing groups which span the organisation as well as an opportunity to
- includes representation across the range of headings identified through the literature review
- enable depth and richness of data to be uncovered from a smaller number of key individuals

Based on the focus identified above the initial groups that have been approached include:

- Strategic Partnerships Group (internal group)
- Sustainable Swansea Bay Group (internal group)
- South West Wales Foundational Economy Group (multi-agency)
- Representation from local economic partnership groups (multi-agency)

To date, nine semi-structured interviews and two group presentations have been completed since the last update, with further interviews planned until January 2025. Initial emerging findings from these interviews are as follows:

- Current policies / areas of work which are more explicit in progressing the approaches of an effective anchor institution include:
 - Approach to Foundational Economy for Health and Social Care in Wales – this makes reference to anchor institutions in the context of foundational economy but does not explicitly define what is meant by an anchor institution.
 - UK Government Shared Prosperity Fund in Swansea and Neath Port Talbot – this fund is locally categorised under six ‘anchor projects’ on key themes of the programme aligned to corporate and partnership strategies. It is not clear however how this use of the term anchor is defined in this context.
 - Strategies outlined in the Health Foundations report on ‘the role of the NHS as an anchor institution’
 - Six key anchor strategies outlined by the Health Anchor Learning Network.
- There is general support of the working definition proposed, although the concept of ‘place’ is not well understood across different groups and partners. This will be an area of focus to explore in subsequent interviews
- There are potential gaps in the strength of external partnerships on the anchor agenda at the local level, some of which have been lost and not restarted since 2020. There is a need to further explore the current landscape of existing networks and the role of either establishing a new network to facilitate this agenda or to strengthen existing network(s)
- Varying levels of familiarity and confidence / competence across the system in delivering this agenda
- Data capture and quality is varied and not well coordinated or communicated across the local system. A number of strategic indicators and system indicators are already in development to support SBUHB track its progress towards achieving the vision and be a high-quality organisation. Strategic Objective 1 takes a Marmot approach which aligns closely with this work through its focus on influencing the wider determinants of health and creating healthy and sustainable places through placemaking. Other Strategic Objectives also align with the Health Board’s anchor mission. For example, delivering services in a way that contributes to the environmental, economic, social and cultural well-being of Swansea Bay (Strategic Objective 3). Or by investing in, and working with, others locally and responsibly, using its assets to positively contribute to the community (Strategic Objective 5). Ongoing integration with this work will be key to ensure we are able to fully realise the Health Board’s role as an anchor institution and a high quality organisation.

Framework analysis of interviews will be undertaken to inform ongoing iteration of the sampling strategy and stakeholders to approach in order to refine a list of emerging priorities. A key output as part of this will include a mapping of key areas of activity and will be shared back with those interviewed and the groups identified above.

➤ **Phase 3: Identification and agreement of priority areas in support of anchor mission, March 2025**

Outputs from Phase 1 and 2 will be used to develop an options appraisal of priority areas and agree joint priorities to progress as a Health Board and will be presented to the groups identified above, alongside any additional groups that are identified as potential delivery mechanisms as the interviews are analysed.

Initial emerging areas which could be progressed as priority actions include:

- Developing our collective understanding and role in placemaking, through the Local Development Plan (LDP) processed and through the primary care clusters / pan cluster planning group
- Establishing a network / strengthening existing network(s) across the local system to facilitate collaboration and shared learning across anchor partners
- Utilise and progress anchor aspects of the Health Board's People Strategy
- Integrate this work with the Health Board's development of strategic and system indicators to support the Health Board's vision.

3. GOVERNANCE AND RISK ISSUES

Engagement with stakeholders to develop insight will shape future governance arrangements for the work that emerges through the baselining activity, leading to the Health Board's anchor mission and plan. Overarching governance for the anchor institution agenda has already been highlighted as a gap. Leadership will be required across strategic, tactical and operational perspectives to develop understanding of the importance of our function as an anchor institution, to prioritise the agenda and enable the work to be driven forward. The Health Board is already active across many of the areas included within the scope of anchor activity e.g. people / employment; procurement/purchasing; place / estates etc. Progress against the deliverables of this work will help to outline how this work can be integrated alongside existing mechanisms where possible.

Ongoing focus of the Health Board on short-term changes and investments due to financial pressures without utilising the benefits of anchor to mobilise and repurpose Health Board resources will likely impact on our ability as an anchor institution to maximise long-term population health benefits. Given the targeted intervention/enhanced monitoring status of the Health Board and the ongoing Recovery and Sustainability Programme, utilisation of the required resource to deliver this work across the organisation is an ongoing challenge.

4. FINANCIAL IMPLICATIONS

Funding of £95k to support this work had been identified within the Population Health reserves for 2024/25. As a health board we have decided not to source external support and so despite having the funding, we are not in a position to use it to support progressing this work. Whilst the ambition remains to augment health board resource with external expertise to deliver this programme, we have adapted our approach to work within organisational constraints. Given the ongoing developmental nature of this work the requirement to procure external support may need to be addressed, including additional capacity and technical expertise to progress priority actions as they emerge.

5. RECOMMENDATION

Members are asked to:

- **Be assured** of the progress to date in line with the plan presented at the last Population Health and Partnerships Committee in September
- **Consider & approve** the approach being undertaken with stakeholder involvement / interviews and mapping of current activity

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Implementation of an effective whole of organisation population health approach will lead to a more consistent approach to prevention. The expectation is that opportunities for patients to be supported to make changes that will reduce their risk of ill-health and which will lead to improved well-being will be offered in a more systematic way across the sector.		
Financial Implications		
The paper notes that investment is required in order of £95K to enable baselining of us as an anchor institution. It also recognises the constraints of the current financial position of the health board.		
Legal Implications (including equality and diversity assessment)		
No legal implications identified. Enhancing our role as an anchor institution to address the wider determinants of health and invest in and reduce health inequity in our population supports fulfilling our legal duties under the Equality Act, Socioeconomic Duty and WCFG. The incorporation of population health approaches will allow for the identification of equality and diversity issues and development of appropriate responses.		
Staffing Implications		
The proposed programme will offer an opportunity to significantly increase the organisation's capacity and capability to adopt different / new ways of working and thinking in order to implement the population health strategy aspirations through its anchor institution role/function. The Public Health Team remains small. Additional roles are being created and recruitment underway but progress remains slow. Development of the implementation plan will identify the skills and workforce requirements.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
Population health approaches incorporate a prevention ethos and delivery is contingent on collaboration among partners to deliver better outcomes for our population. A coproduction approach is integral to public health practice and seeks to involve communities and staff in designing services and programmes.		
Report History	17/12/23, 14/03/24, 06/06/24, 05/09/24	
Appendices	Appendix 1- Phase 1 Report: A definition of anchor institution to inform the SBUHB approach to anchor baselining	