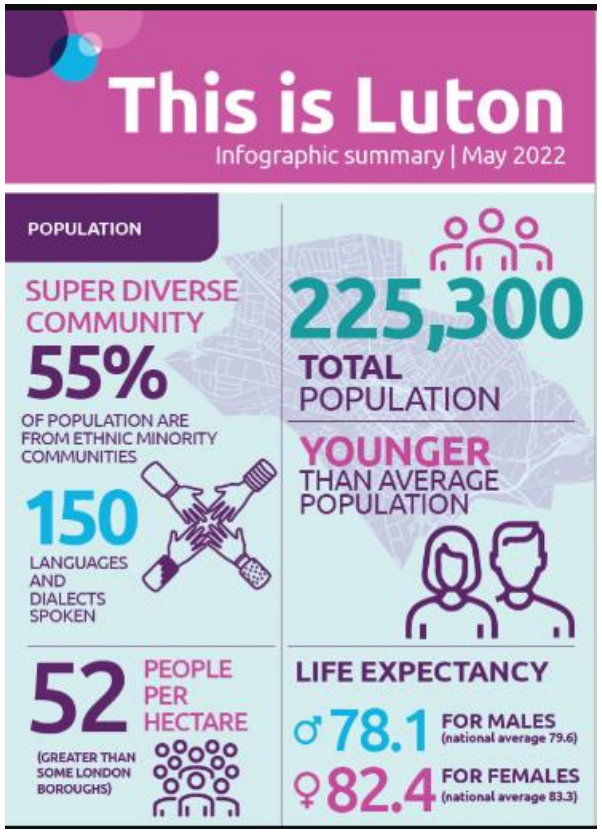
Luton as a health equity town

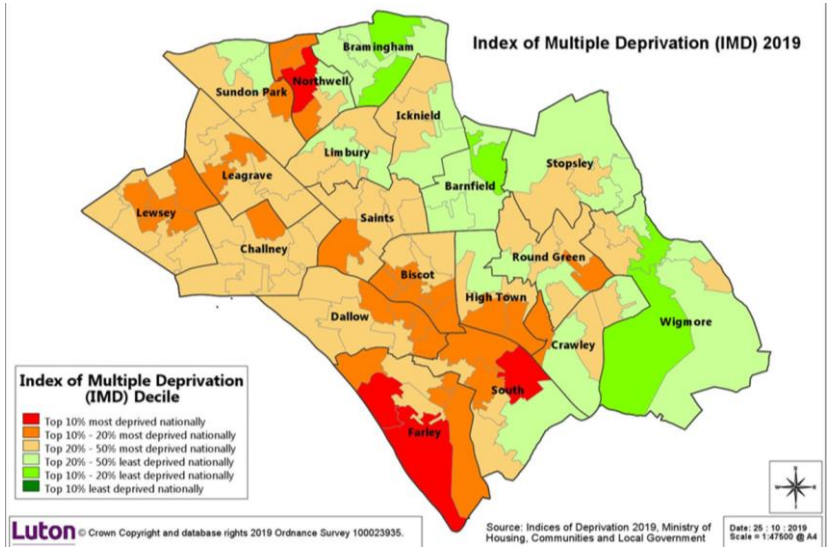
Setting the scene: Luton – a snapshot

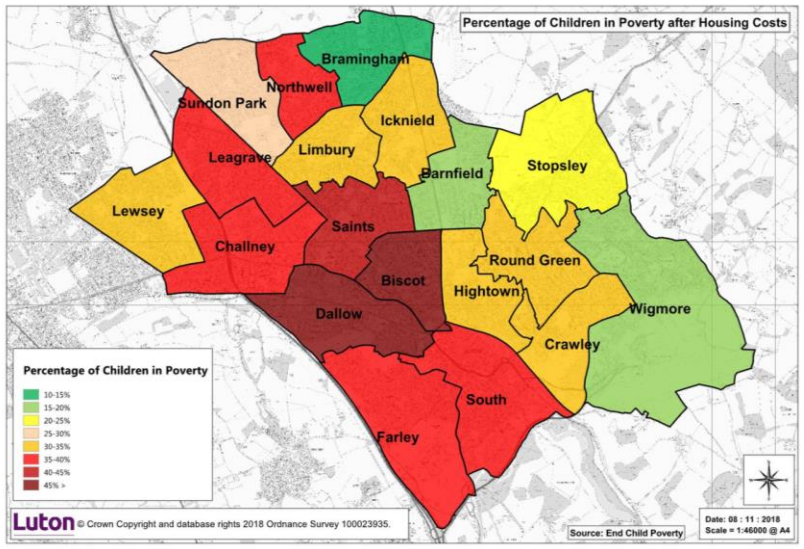
Luton 2020 - 2040
A place to thrive

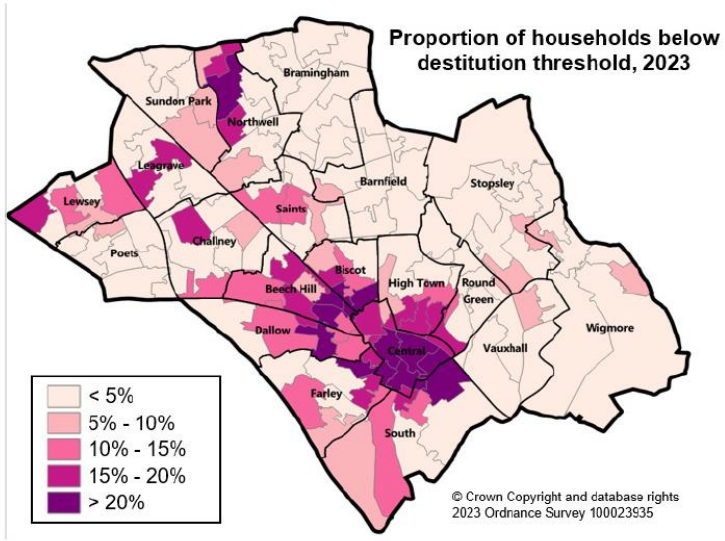


Luton is an ethnically diverse town, with significant long-standing Indian, Pakistani, Bangladeshi, African-Caribbean and Irish communities, as well as complicated pattern of migration and population turnover.

In 2019, there were three wards in Luton with over 40% of children living in poverty – Saints, Biscot, and Dallow







Source: Indices of Deprivation, 2019, Ministry of Housing, Communities and Local Government

Why a Marmot Town?

Why now?
2040 vision: a healthy, fair, and sustainable town where everyone can thrive and no one has to live in poverty

Historical stark health inequalities and areas of deprivation across Luton

Luton's experiences during the covid pandemic – high rates, inequalities

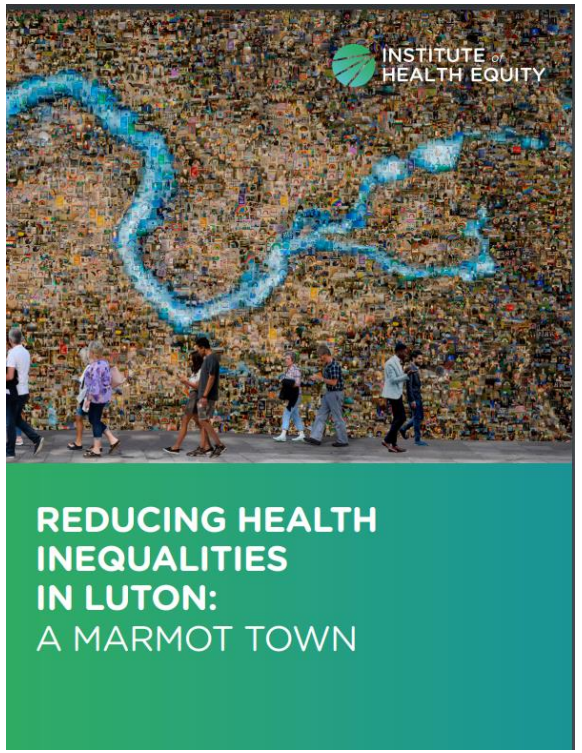
→ Consensus understanding of injustice, challenges of issues and sense of urgency

What gain?
Assess and develop actions across inequalities in the social determinants of health

Focused action to increase impact on health inequalities across 4 areas:

1. Children & Young People – Raising aspirations
2. Housing
3. Business, Employment and Skills
4. Net Zero

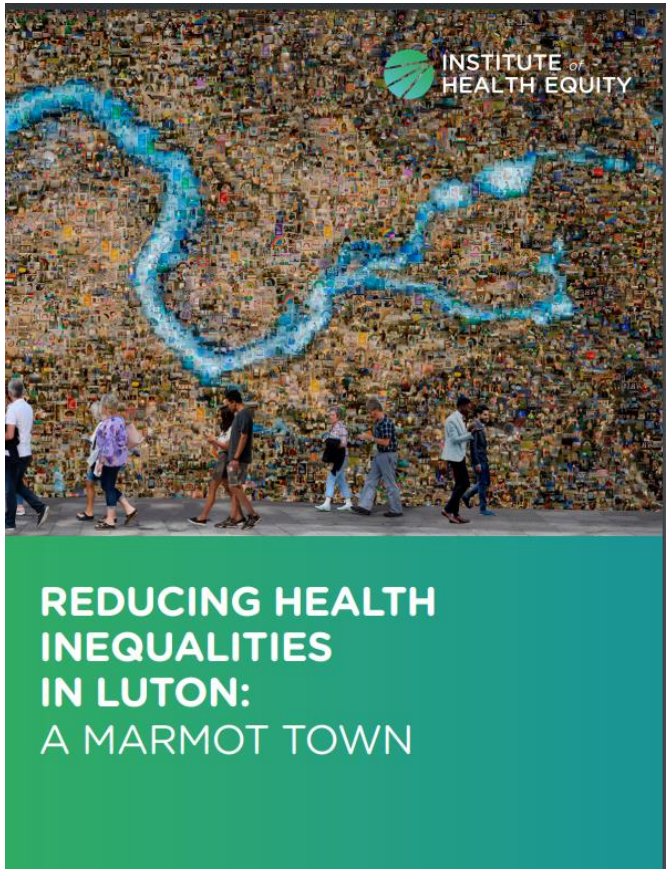
Develop the Luton Health Equity System
Link Luton with other places in the UK which are prioritizing health equity

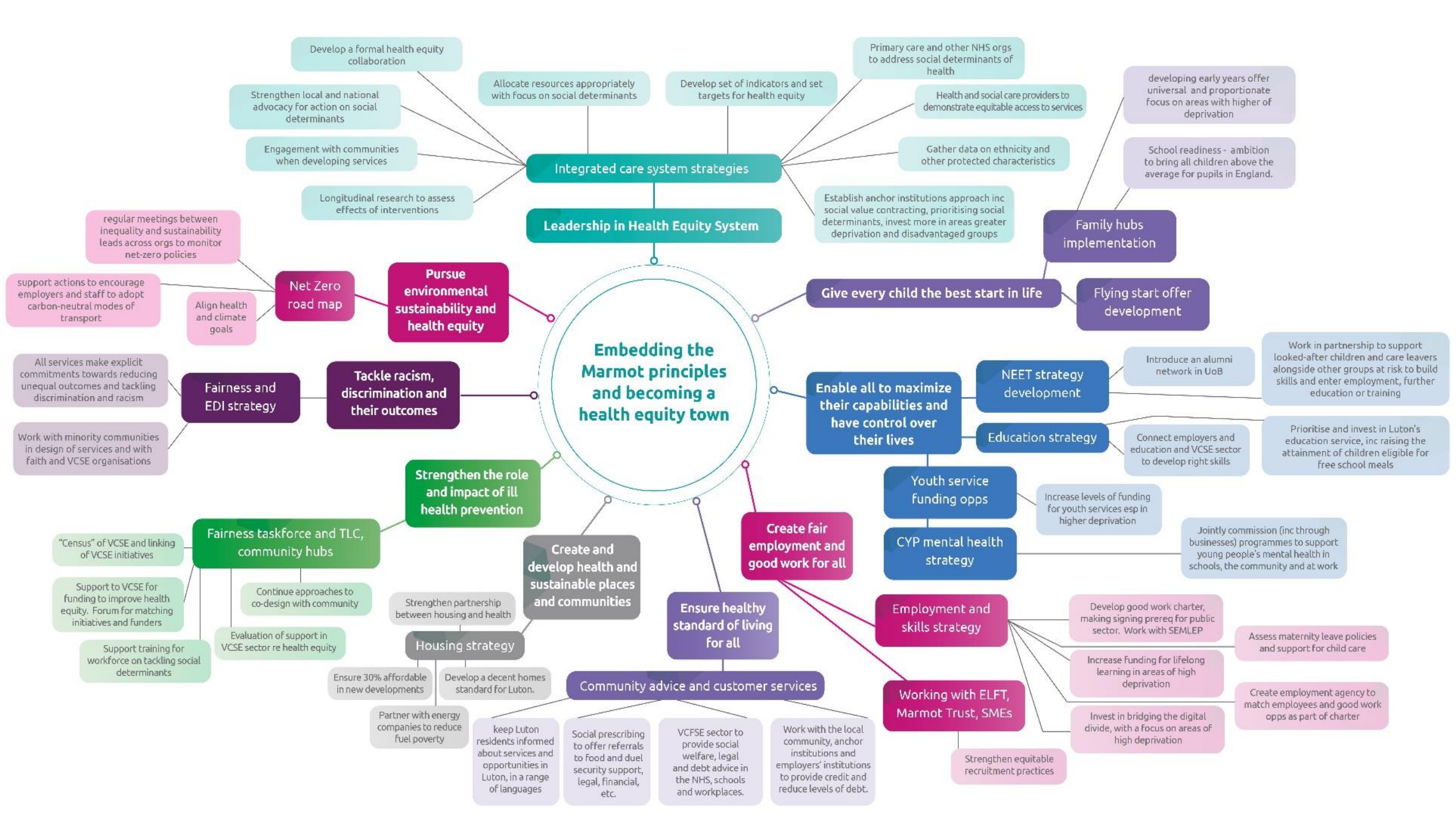


Timeline

Luton 2040
A place to thrive

July 2021 –	Decision to explore IHE engagement
Oct 2021 –	Kick off
Nov 21 – June 22 –	Stakeholder engagement, steering group and workstream meetings, Report development
September 2022 –	**Report Published**
throughout 2023 -	Marmot Oversight group working groups for key theme areas mapping recommendations against workstreams Develop evaluation Health equity town prize launch one year on celebration event
Throughout 2024	APHR focus Impact measures Workstream activity – gap analysis and logic models Toolkit launch Newsletter, microsite Frameworks – building blocks of health one year on event




Embedding the Marmot principles and becoming a health equity town
Leadership in Health Equity System
Integrated care system strategies
Develop a formal health equity collaboration
Strengthen local and national advocacy for action on social determinants
Engagement with communities when developing services
Longitudinal research to assess effects of interventions
Allocate resources appropriately with focus on social determinants
Develop set of indicators and set targets for health equity
Primary care and other NHS orgs to address social determinants of health
Health and social care providers to demonstrate equitable access to services
Gather data on ethnicity and other protected characteristics
Establish anchor institutions approach inc social value contracting, prioritising social determinants, invest more in areas greater deprivation and disadvantaged groups
Pursue environmental sustainability and health equity
Net Zero road map
regular meetings between inequality and sustainability leads across orgs to monitor net-zero policies
support actions to encourage employers and staff to adopt carbon-neutral modes of transport
Align health and climate goals
Tackle racism, discrimination and their outcomes
Fairness and EDI strategy
All services make explicit commitments towards reducing unequal outcomes and tackling discrimination and racism
Work with minority communities in design of services and with faith and VCSE organisations
Give every child the best start in life
Family hubs implementation
developing early years offer universal and proportionate focus on areas with higher of deprivation
School readiness - ambition to bring all children above the average for pupils in England.
Flying start offer development
Enable all to maximize their capabilities and have control over their lives
NEET strategy development
Introduce an alumni network in UoB
Work in partnership to support looked-after children and care leavers alongside other groups at risk to build skills and enter employment, further education or training
Education strategy
Connect employers and education and VCSE sector to develop right skills
Prioritise and invest in Luton's education service, inc raising the attainment of children eligible for free school meals
Youth service funding opps
Increase levels of funding for youth services esp in higher deprivation
CYP mental health strategy
Jointly commission (inc through businesses) programmes to support young people's mental health in schools, the community and at work
Create fair employment and good work for all
Employment and skills strategy
Develop good work charter, making signing prereq for public sector. Work with SEMLEP
Assess maternity leave policies and support for child care
Increase funding for lifelong learning in areas of high deprivation
Create employment agency to match employees and good work opps as part of charter
Invest in bridging the digital divide, with a focus on areas of high deprivation
Working with ELFT, Marmot Trust, SMEs
Strengthen equitable recruitment practices
Ensure healthy standard of living for all
Community advice and customer services
keep Luton residents informed about services and opportunities in Luton, in a range of languages
Social prescribing to offer referrals to food and duel security support, legal, financial, etc.
VCFSE sector to provide social welfare, legal and debt advice in the NHS, schools and workplaces.
Work with the local community, anchor institutions and employers' institutions to provide credit and reduce levels of debt.
Create and develop health and sustainable places and communities
Strengthen partnership between housing and health
Housing strategy
Ensure 30% affordable in new developments
Develop a decent homes standard for Luton.
Partner with energy companies to reduce fuel poverty
Strengthen the role and impact of ill health prevention
Fairness taskforce and TLC, community hubs
"Census" of VCSE and linking of VCSE initiatives
Support to VCSE for funding to improve health equity. Forum for matching initiatives and funders
Support training for workforce on tackling social determinants
Continue approaches to co-design with community
Evaluation of support in VCSE sector re health equity

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Health Equity Town Evaluation and monitoring framework

We have focused on developing an evaluation of the work to ensure we know how to continue to maximise impact and get the measures right to assess progress on an annual basis.

Over the last year, an evaluation of the health equity town work has been completed. The evaluation had three main aims:

1. To understand the impact of the Luton Marmot report on system-wide efforts to tackle health inequalities through the wider determinants of health.

2. To develop a set of measures to illustrate early impacts of the Luton Marmot report and set out an approach for future outcome measurement structured around the eight Marmot principles set out within the report.

3. To activate the health equity system through the process of evaluation, through stakeholder engagement and re-enforcement of priorities and direction of travel

Some findings from the evaluation:

Opportunities	Challenges
Improved evidence base and articulation of issues – have been used to influence proposals, develop work programmes (core20plus5) Clear narrative to support priorities Clear focused recommendations to work on Increased collaboration and focus on wider determinants of health and inequalities - changing conversations - galvanising actions - influencing strategies underway Influencing wider decision making to consider health inequalities	Long term-ism View of leading versus influencing Competing system priorities Some areas have limited levers of influence Getting the governance right – to be seen as part of system not another “project” Capacity to deliver at desired pace

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Some recommendations from evaluation:

- Ensure system-wide clarity and strengthening of governance and accountability.
- Ensure all stakeholders understand the role they can and are playing in tackling health inequalities.
- Embed Marmot and health inequalities within workforce development across the system.
- Develop a coherent workplan around the seventh Marmot principle; tackling discrimination and structural racism and its outcomes.
- Use of logic models may be a useful method to build on for future workstreams associated with Luton's Marmot Town ambitions.
- Ensure that we learn from best practice amongst Luton partners and from national adn international evidence base, whilst also sharing our own knowledge and learning.

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Four Priority Workstreams

- Housing
- Net Zero
- Children and Young People
- Business, Skills and Employment

Hypothesis: Increasing the availability of good quality work and the employability of the local population to take on these jobs will improve health outcomes.

Assumptions: Target groups will take up employments skills training
Work places will implement recommendations
There will be economic growth and therefore more high quality jobs available to local people

Inputs

Marmot report recommendations
Staff
Time
Funding
Business and employment skills strategy

Activities

ELFT/Total wellbeing Luton - workplace wellbeing offer

Mental health First Aid training

Connect 2 Luton

Passport to employment

'Destination digital'

Apprenticeship brokerage scheme

UoB's 'Passport to Entrepreneurship' programme under Pathways to Recovery

Careers hub.

Schools' careers and employment skills offer

SEMLEP employment skills

Luton Adult Learning family learning programmes

ELFT inclusive recuitment QI project

SEMLEP business support

Good business charter

Luton 2040 pledges for businesses

Outputs

Number of organisations that take up MHFA/total wellbeing training

Number of people accessing employment skills training

Number of people registering with/seeking employment via

Connect 2 Luton

Number of people enrolling on Passport to Entrepreneurship programme

Number of apprenticeships arranged via brokerage scheme

Number of businesses accessing SEMLEP business support

Outcomes

Luton employment rate

% of Luton based jobs paying the

Real Living Wage

% of residents in higher-level occupations (Level4, Level2 and No Formal Qualifications)

Proportion of highly skilled workforce (% with NVQ level 4,3,2,1 and no formal qualifications)

Minimum Income Standard (Luton adapted model)

Context: The Marmot report for Luton was published in September 2022.
Implementation of the report recommendations is being led by LBC but in close collaboration with system partners. There are 4 priority work streams for the first stage of implementation: business and employment skills; housing and warm spaces; children and young people, net zero.
Implementation of the recommendations aligns with the 2040 vision and several strategies within

Barriers: No formal governance structure for implementation or evaluation.
Maybe unclear how the Marmot report fits with the 2040 vision and other exisiting strategies
may be seen as additional work in an already pressured system
Will be challenging to determine what change is due to Marmot.
Outcomes and impacts may not be seen for a long period of time and momentum to continue with

Impact to date - workstreams

Housing	Business and employment	CYP	Net Zero
• Chaired by Housing SMT • Logic model developed for outputs/impact • Draft annual workplan developed and requested input from partners (x4 priorities: Delivering Healthy housing and Promotion; Housing Conditions (PRS); Housing Security and Support Refresh of Local Plan) Actions include: • Funding healthy housing project from core20plus5 fund looking at low energy ratings and compliance • Childhood asthma project linking to Luton Housing department to support families • Successfully secured funding to work with NEA to develop and build on PCN and fuel poverty project • Undertaken concierge road shows in social housing and stop smoking advice with over **Next steps:** • Sign-off workplan in October meeting • Develop KPI dashboard	• Chaired Public Health Manager • Logic Model focussed outputs / impact Actions include: • In partnership with ELFT to deliver into employment programmes for people with mental health conditions • Partnership working with ELFT and Luton Adult Learning on passport to employment • Development of an Anchors Framework for Luton's major employers – draft in consultation (19 organisations involved in its development) . **Next steps:** • Monitor Workplans and actionable items • Scope and share interventions: Workplace Adjustment passports, Skills Wallets	• Chaired by Public Health Consultant Actions include: • Undertaken audit of Marmot report recommendations • Undertook QI project linking to childhood vaccines • Funded enterprise coordinator working with schools to build aspirations **Next Steps:** • Sign off workplan • Ensuring that hearing the voice of the child is included in actions • Developing and delivering on Healthy, Wealthy Families using a QI approach	• Chaired by Climate change professional from the wider community Actions include: • Education of front-line staff to become Air Quality Champions • Luton wide communications campaign on climate change • Working with ICS to deliver on the green plan **Next Steps:** • Monitor net-zero policies for health equity impacts . • Align health and climate goals • To understand what health goals are missing from Net zero roadmap and what gaps exist.

Health equity system achievements

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Health Equity Town

- Evaluation report -
- Health & Built Environment workshop
- Collaborative Fund Evaluation
- Building blocks of Heath training and champions
- Development of microsite

Talk Listen Change – refreshed action plan

- Formation of black and muslim health steering group
- TLC Anchor Institutions Project
- Health Fair for communities including GRT's
- Physical Activity for communities
- Town-wide mental health campaign
- Culturally Adapted CBT
- TLC webpage

Core20plus5

- Food First Luton - >8000 Food map distribution
- 7 week Pulmonary rehab transport and course potential savings of up to £2000 bed days per patient
- Employment of a community programme lead& local area coordinators to support neighbourhood working.
- Luton citizens advice outreach workers in PCN's to support income maximisation in GP surgeries
- Housing and health projects improving PRS

Outcome indicator list for each Marmot principle

	Measure description	2022/23								2023/24							
		Date of measure	Luton	England	Region	Comparison to England	Comparison to Region	Comparison to NN	Trend	Date of measure	Luton	England	Region	Comparison to England	Comparison to Region	Comparison to NN	Trend
Overarching	Life expectancy, Male (Years)	2018-20	78.1	79.4	80.2	R	R	A	Comparable	2020-22	77.0	78.9	79.8	R	R	G	Significantly worse
	Life expectancy, Female (Years)	2018-20	82.4	83.1	83.8	R	R	A	Comparable	2020-22	81.3	82.8	83.5	R	R	A	Comparable
	Healthy life expectancy, Male (Years)	2018-20	59.2	63.1	64.6	R	R	A	Comparable	2018-20	59.2	63.1	64.6	R	R	A	Comparable
	Healthy life expectancy, Female (Years)	2018-20	60	63.9	65	R	R	A	Comparable	2018-20	60	63.9	65	R	R	A	Comparable
1	Percentage children achieving a good level of development at 2-2.5 years	2021/22	85.40%	81.10%	85.40%	G	A	G	Comparable	2022/23	85.7%	79.2%	84.7%	G	A	G	Significantly worse
	Percentage children achieving a good level of development at the end of Early Years	2021/22	56.60%	65.20%	56.60%	R	R	R	N/a	2022/23	61.10%	67.20%	67.20%	R	R	R	N/a
	Infant mortality rate (deaths under 1 year rate per 1000 live births)	2019-21	5.7	3.9	3.4	R	R	A	Comparable	2020-22	6.1	3.9	3.4	R	R	G	Comparable
	Percentage of 5 year olds with experience of visually obvious dental decay	2018/19	36.80%	23.40%	19%	R	R	R	Comparable	2021/22	36.5%	23.7%	19.3%	R	R	R	Comparable
2	Child Poverty (after housing costs)	2021/22	39.10%	30.80%	23.60%	R	R	A	Comparable	2022/23	39.4%	30.0%	23.0%	R	R	A	Comparable
	Average Progress 8 score**	2022	0.05	0	-0.01	A	G	A	N/a	2023	0.11	0	0.1	A	G	A	N/a
	Average Attainment 8 score**	2022	46.00	47.20	49.10	A	R	R	Comparable	2023	44.5	44.7	46.6	A	R	R	Comparable
	Proportion of Luton children attending good or outstanding schools	2023	89.50%	88%	-	G	N/a	G	Significantly improving	Dec-23	93.0%	90.0%	-	G	N/a	G	Significantly improving
	Proportion of care leavers (aged 18-24) who are NEET	2023	40%	38%	40%	A	A	A	Comparable	2023	40%	38%	40%	A	A	A	Comparable
	Hospital admissions for self-harm for young people aged 10-24 (rate per 100,000 16-24 year olds)	2021/22	352.4	427.3	383.5	G	A	R	N/a	2022/23	230.0	319.0	281.4	G	A	A	Comparable
	Proportion of children that are overweight or obese (At year 6)	2021/22	43.60%	37.80%	35.40%	R	R	R	Comparable	2022/23	42.5%	36.6%	34.2%	R	R	A	Comparable

	Minimum Income Standard (Luton adapted model - destitution)	Apr-22	10.5% households	-	-	N/a	N/a	N/a	N/a	Apr-23	8.9% households	-	-	N/a	N/a	N/a	N/a
	Unemployment claimant count(% working age residents)	2023	5.70%	3.90%	3.00%	R	R	A	Significantly improving	2024	6.0%	3.9%	3.1%	R	R	A	Comparable
	% of residents in higher-level occupations (Level 4, Level 2 and No Formal Qualifications)	2022	35.60%	51.00%	50.60%	R	R	R	N/a	2023	41.4%	53.3%	5340.0%	R	R	A	Significantly improving
3	% of employees below the living wage	2022	30.00%	-	26%	N/a	R	G	Significantly worse	2022	30.00%	-	26%	N/a	R	G	Significantly worse
	Proportion of children in workless households	2021	11.10%	9.90%	7.70%	R	R	A	Comparable	2022	4.8%	10.2%	7.6%	G	G	R	Significantly improving
4	Percentage of households in fuel poverty	2021	16.70%	13.10%	12.30%	R	R	A	Comparable	2022	13.0%	13.1%	10.0%	A	R	A	Comparable
5	Households in temporary accommodation (per 1000 households)	2022/23	13.5	3.2	2.6	R	R	R	Comparable	2023/24	13.9	3.7	2.8	R	R	R	Comparable
	Smoking prevalence(% adults 18+)	2021	14.10%	13.00%	12.90%	A	A	A	Comparable	2022	21.1%	12.7%	13.2%	R	R	R	Comparable
	Adult obesity rate(% adults 18+)	2020/21	67.50%	63.50%	64.00%	A	A	A	Comparable	2022/23	63.4%	64.0%	64.8%	A	A	G	Comparable
6	Under 75 mortality rate from circulatory diseases considered preventable (DSR per 100,000)	2021/22	37.1	30.2	25.1	A	R	A	N/a	2020-22	37.4	30.1	25.4	A	R	A	Significantly improving
	Cycling / walking for travel (3-5 times / week)	2021	58.90%	71.20%	71.90%	R	R	R	Significantly worse	2022	55.9%	70.6%	72.0%	R	R	R	Significantly worse
8	Air Quality Annual Status Report (ASR)	2022	0.89	0.3	-	A	N/a	A	N/a	2024	0.69	0.26	-	A	N/a	A	Significantly improving

Reflections on system impact to date…

Next steps

Continue to build tangible outputs from the sub-groups using KPI dashboards to monitor progress

Deliver annual conference in November focused on structural inequalities "*Luton a Marmot Town: The Social Responsibility for health equity. (Dismantling structural inequalities. How does this affect our lives)".*

Launch next round of Luton's Health Equity Town Prize – focusing on business and areas not well represented

Develop and launch the Health Equity Town 'Ways of Working Toolkit – Common Language' partners and stakeholders to identify and understand their levers of influence for improving health equity

Undertake audit of HET partners and stakeholders building on findings from the HET Evaluation

Full evaluation of core20plus5 work undertaken to date

Review outcome measures analysing by inequalities

Continue to build network of champions through training and network meetings

https://www.local.gov.uk/case-studies/reducing-health-inequalities-luton-first-marmot-town

APHR