NHS Cheshire and Merseyside

One Halton - Update

September 2025

Place-Based Partnerships - Recap

NHS
Cheshire and Merseyside

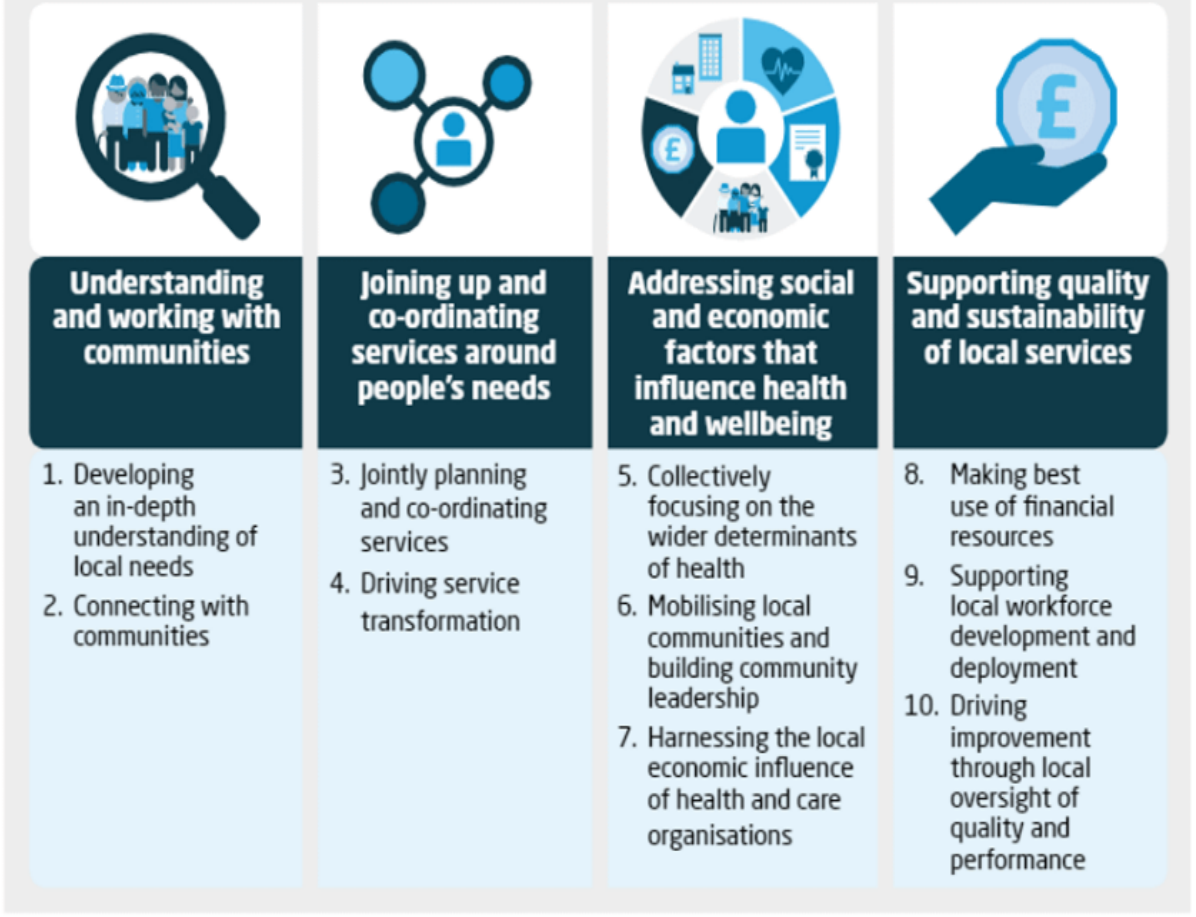
Place-based partnerships

NHS Cheshire and Merseyside will arrange for some of its functions to be delivered and decisions about NHS funding to be made in the region's nine Places – Cheshire East, Cheshire West, Halton, Knowsley, Liverpool, Sefton, St Helens, Warrington, Wirral.

While NHS Cheshire and Merseyside will retain overall accountability for NHS resources deployed at Place-level, Place-based partnerships – led by Place Directors – will have freedom to design and deliver services according to local need.

The infographic below - courtesy of the King's Fund - sets out the key functions of Place-based partnerships:

Figure 1 Key functions of place-based partnerships



C&M ICB - Key Priorities - Recap

NHS
Cheshire and Merseyside

1 Improve population health and healthcare

- Reduce deaths from cardiovascular disease, suicide and domestic abuse
- Reduce levels of obesity
- Reduce harm from alcohol
- Provide high quality, safe services
- Provide support to all those experiencing 'long Covid'
- Provide integrated, high quality, mental health and wellbeing services for all people requiring support from low levels of intervention to crisis management and inpatient care
- Underpin improvements in health and healthcare with Research and Innovation by supporting collaboration between Cheshire and Merseyside academic partners and making them a key part of Cheshire and Merseyside Health and Care Partnership

2 Tackle unequal outcomes and access

- Reduce the life expectancy gap in the most deprived communities, in children and those with mental health conditions and help people live extra years in good health
- Improve early diagnosis, treatment and outcome rates for cancer
- Improve waiting times for children and adult mental health services
- Target those with chronic diseases so they access services especially those in our most deprived areas
- Reduce the impact of poor health and deprivation on educational achievement

3 Enhance productivity and value for money

- Prioritise making greater resources available to prevention and well-being services
- Plan, design and deliver services at scale (where appropriate) to drive better quality, improved effectiveness and efficiency
- Maximise opportunities to reduce costs by procuring and collaborating on corporate functions at scale
- Develop whole-system plans to address workforce shortages and maximise collaborative workforce opportunities
- Secure value for money
- Develop a whole system Estates Strategy

4 Support broader social and economic development

- Embed a commitment to social value in all our partner organisations
- Establish an 'Anchor Institution' in Cheshire and Merseyside, offering significant employment opportunities for local people
- Integrated Care System will be involved in regional initiatives to develop economy and support communities in Cheshire and Merseyside
- Develop a programme in schools to support mental wellbeing of young people and inspire a career in health and social care
- Work with Local Economic Partnerships to connect partners with business and enterprise.

[No Title]

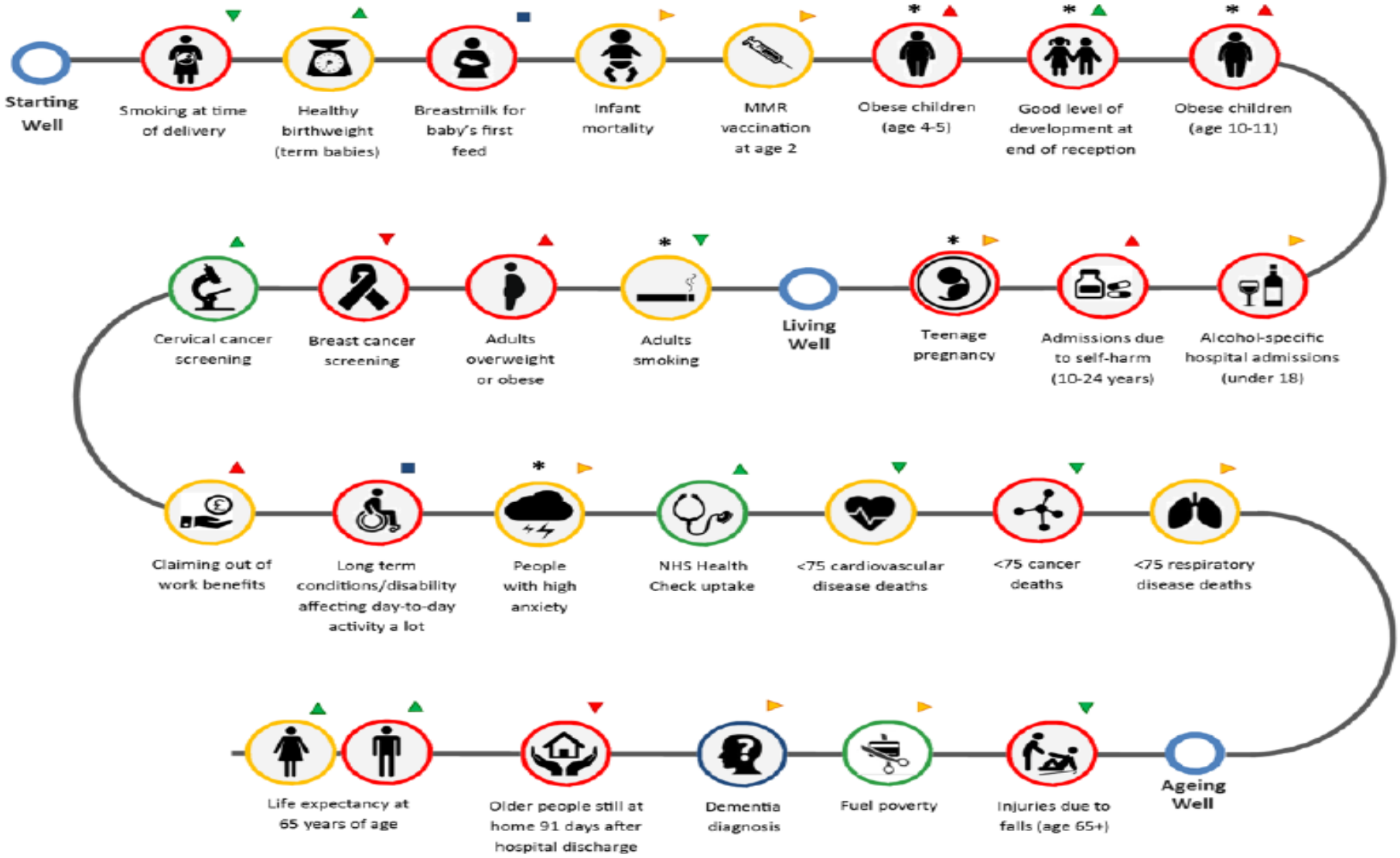
C&M ICB – Aligned to Halton Place Priorities

NHS
Cheshire and Merseyside

Halton's life course statistics 2021

A comparison to the North West

* INDICATES NATIONAL DATA COLLECTION HAS BEEN AFFECTED BY COVID-19



HALTON FACTS

Population

About **129,400** people live in Halton.

By 2041, this is projected to change:

age 0-14 ↓ 11%
age 15-64 ↓ 5%
age 65+ ↑ 38%

Deprivation

48.7% of Halton's population live in the top **20%** most deprived areas in England.

Child Poverty

19.6% of children aged 0-15 live in relative low income households

KEY

Direction of travel

- ▲ Improved since last period
- ► Similar to last period
- ▼ Worse than last period
- ■ No Comparator

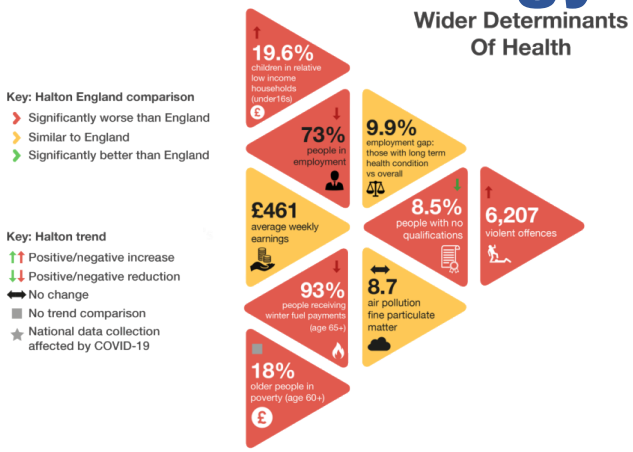
Statistical significance to North West

- Better
- No different
- Worse
- Lower

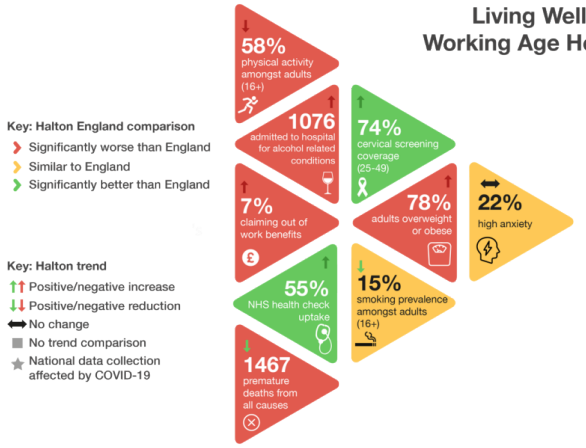
For more information, please contact Halton Borough Council's Public Health Intelligence Team: health.intelligence@halton.gov.uk

Icons made by Flaticon and available here: www.flaticon.com
Concept developed from Gateshead PHAR 2013/14 and leicestershire PHAR 2015

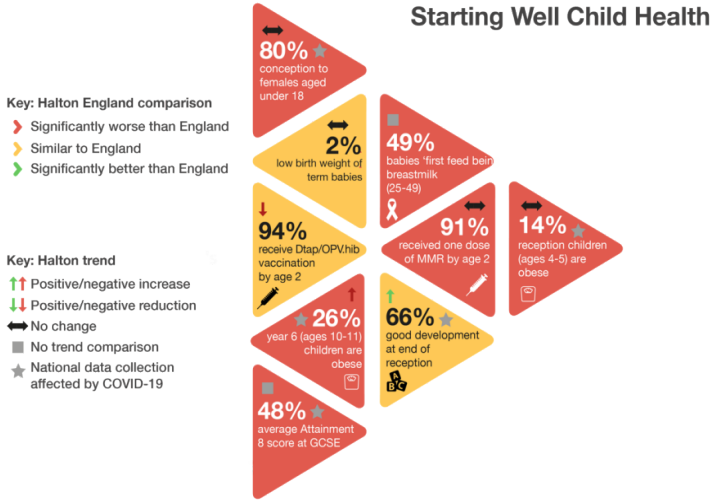
Halton Joint Health and Wellbeing Strategy



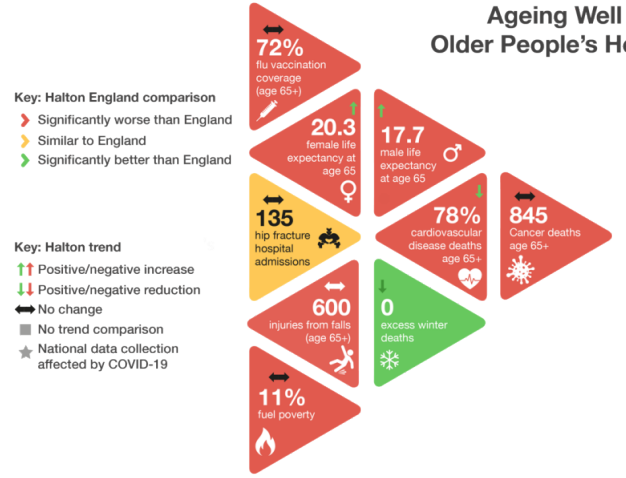
The Wider Determinants of Health: Improve the employment opportunities for the people of Halton in particular where it affects children and families.



Living Well: Provide a supportive environment where systems work efficiently and support everyone to live their best life



Starting well: Enabling children and families to live healthy independent lives



Ageing Well: Enabling older adults to live full independent healthy lives

Vulnerable Groups

Marmot and All Together Fairer

Inequalities/PHM/Core20+5

One Halton

One Halton's Ambition

To improve the health and wellbeing of the population of Halton by empowering and supporting local people from the start to the end of their lives by preventing ill health, promoting self-care and independence, arranging local, community based support and ensuring high quality services for those who need them

Leadership, Oversight and Delivery Arrangements:

Achievement of our ambition and delivery of our strategic priorities is led and overseen by the One Halton Place Based Partnership Board.

Our vision for neighbourhood working is greater than just health and social care and moves beyond treating symptoms to addressing the underlying causes of poor health and wellbeing and supporting people to have a good life.

Strategic Priorities and Goals:

Wider Determinant of Health: Improve the employment opportunities for the people of Halton in particular where it affects children and families.	**Starting Well:** Enabling Children and Families to live Healthy Independent Lives.	**Living Well:** Provide a supportive environment where systems work efficiently and support everyone to live their best life.	**Ageing Well:** Enabling Older Adults to live Full Independent Healthy Lives.
Goal: A more financially active and enabled community who are employed in good jobs that provide greater financial stability, improves quality of life and provide better health outcomes	**Goal: More financially stable,** informed and supported families with children who have better health outcomes	**Goal**: A more supported and enabled community who are able to understand where to go to get the support and care they need in time.	**Goal:** A more active and independent older population who are able to live at home or are supported to get the care they need.

Integrated Neighbourhood Working:

One Halton partners have also agreed that the development of an integrated neighbourhood way of working as fundamental to our success.

Building on the good work completed to date including learning from the pandemic

Delivering both the NHS Operational Plan and the Long Term plan

Addressing the Challenges in Halton

Cheshire and Merseyside

We want to:

Create a better understanding the impact of poverty and health inequalities within local communities

Focus on wider determinants using Marmot priorities

Focus on delivery of CORE20PLUS5

Focus on prevention to tackle the drivers of the life expectancy gap locally

Social Prescribing

Some One Halton Partnership priorities. Further work being undertaken.

STARTING WELL

Family Hubs
(infant feeding; perinatal MH; Parenting; Parent and Carer Panels; Start for Life)

LIVING WELL

Prevention
(screening, healthy weight, CVD)
Mental health and Wellbeing
(self-harm, talking therapies)
EMI Health Checks

AGEING WELL

End of Life

Social Isolation

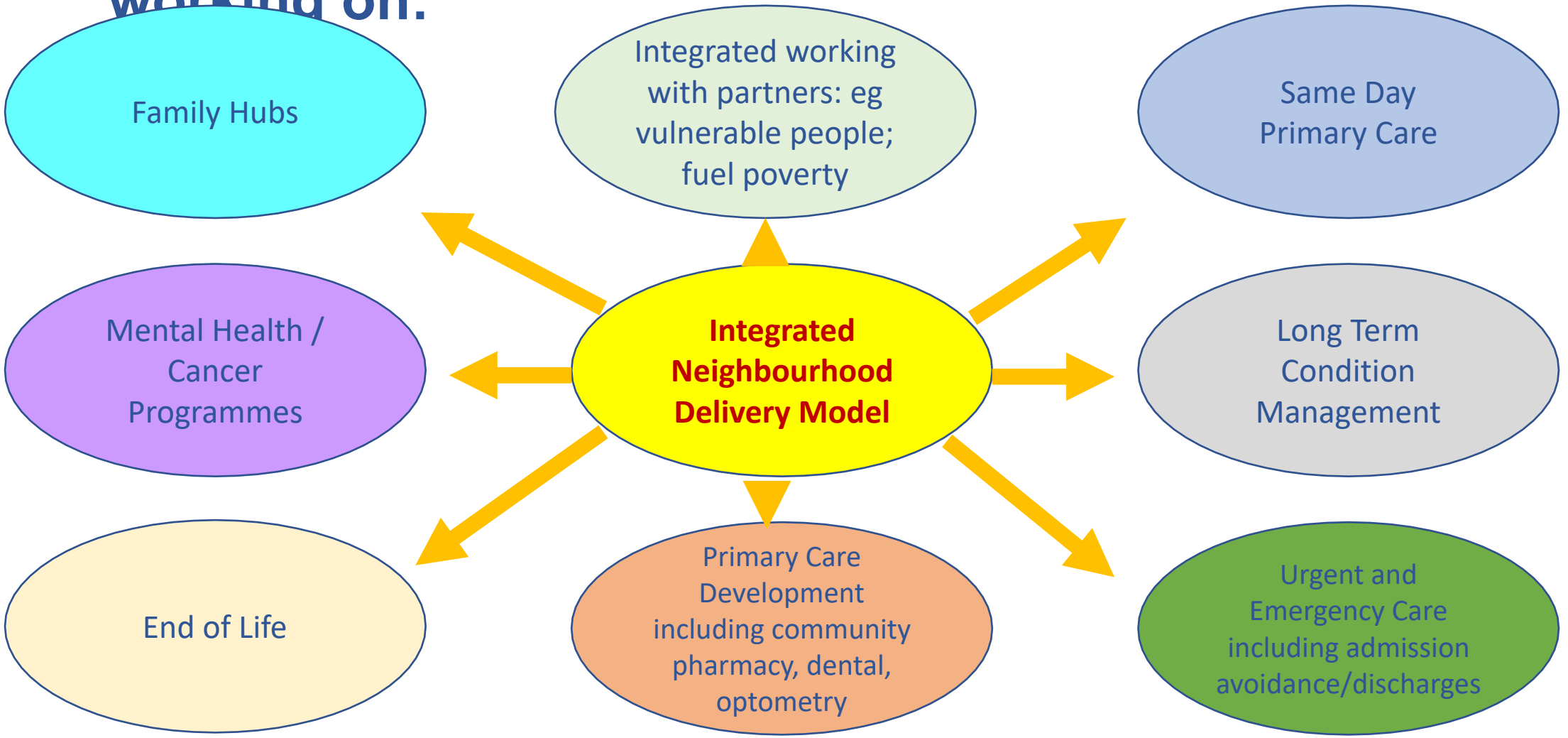
Integrated Neighbourhood Delivery Model

Same Day Primary Care

Long Term Conditions

Addressing Health Inequalities

Some examples of things we are working on:



Financial Maturity Framework Digital Strategy Estates and Assets Strategy

Summary: working together in Halton to:

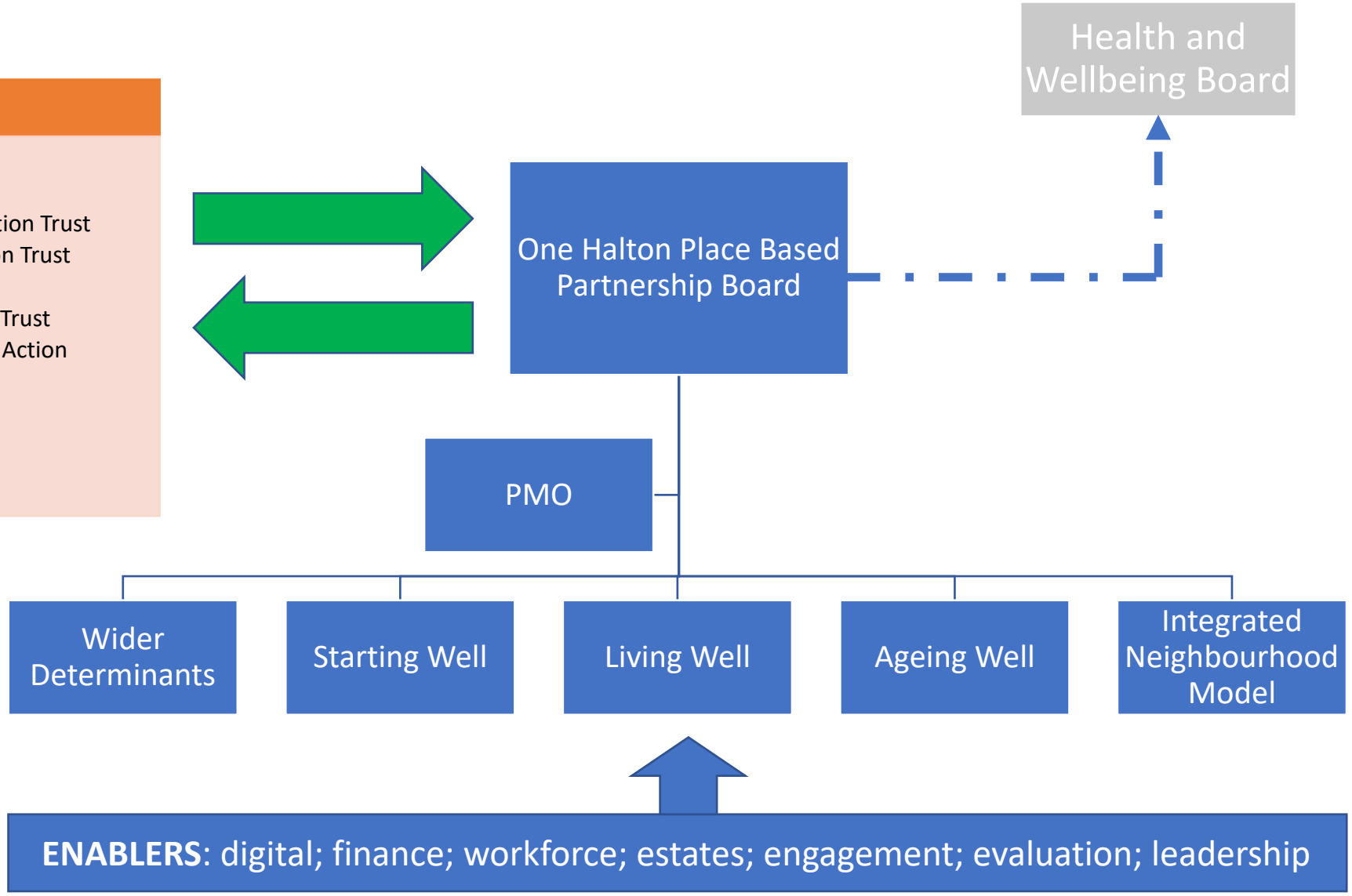
1. Deliver **NHS Operational Planning Priorities 2022/23** and local **Place priorities** and **Halton Joint Health and Wellbeing Strategy**.
2. Improve the **employment opportunities** for the people of Halton in particular where it affects children and families.
3. Enable **Children and Families** to live Healthy Independent Lives.
4. Provide a **supportive environment** where systems work efficiently and support everyone to **live their best life**.
5. Enable **Older Adults to live Full Independent Healthy Lives**.
6. Ensure that **primary care** is fully integrated into delivery mechanisms in Halton.
7. Mitigate the impact of **cost-of-living** increases on our population and **support the most vulnerable**.
8. Maximise the use of **public sector estate** and ensure that this is linked to Halton Council's local plans and regeneration work.

One Halton – Delivery Structure

NHS Cheshire and Merseyside

Partner Organisations

- NHS Cheshire and Merseyside
- Halton Borough Council
- Bridgwater Community Healthcare NHS Foundation Trust
- Warrington and Halton Hospitals NHS Foundation Trust
- Healthwatch Halton
- St Helens and Knowsley Teaching Hospitals NHS Trust
- Halton and St Helens Voluntary and Community Action
- Widnes Primary Care Network
- Runcorn Primary Care Network
- Mersey Care NHS Foundation Trust
- Halton Housing



Some examples of work stream progress

Cancer Update

Halton Cancer Improvement Group was established to ensure a shared understanding of existing prevention and diagnosis services. It is a partnership across Halton which works with the C&M Cancer Alliance Group to seek opportunities for improving the focus on cancer prevention services including:

1. **Improved utilisation of existing resources**
2. **Understanding and removing barriers to uptake**
3. **Collaboration of partners to improve uptake**
4. **Consistent messages to patients**
5. **Consider service improvements / changes required to improve access**
6. **Reduce unwarranted variation and health inequalities**

Cancer Update

Cancer screening campaign launched in Halton borough

25TH JUNE HEALTH

The campaign, 'Two Minutes of Chat and An Early Screening', is backed by actors Will Mellor and Ralf Little *(Image: Supplied)*

Runcorn and Widnes World

25 June 2025

The CMCA has worked with Runcorn-born writer and creator of Two Pints of Lager and A Packet of Crisps, Susan Nickson, to create the **campaign for Halton to raise awareness of cancer screening**.

The videos were filmed with local **Runcorn and Widnes residents**, rather than actors, at some well-known venues across the area. Also making an appearance in the campaign are the famous faces of Will and Ralf, who are widely recognised to Halton residents as they help show how important it is to start those conversations about **breast, bowel and cervical cancer screenings.**

Mobile Cervical Screening Pilot

1. 12-week programme commenced in January until March
2. 1 location per week in Halton
3. Delivered by Living Well Service, utilising the Living Well Bus
4. Drop in
5. Focusing on non-responders
6. Reached 116 people from Halton over 10 weeks
7. In addition, between November 2024 – April 2025 Halton sexual health service piloting Saturday cervical screening clinics targeting first timers and advertising sexual health as a site for cervical screening

Developing Integrated Approaches

Same Day Access

In response to Fuller (2022) to:

- Enable PCNs to evolve into integrated neighbourhood teams
- Develop a single system-wide approach to managing integrated urgent care and improve access to care

Encompasses 14 Practices and 2 UTCs, building upon the MGPAM. Community Pharmacy, Community Services, Social Prescribing & Health Improvement are included.

Results: *Improved relationships, respect & understanding of roles, change in patient and workforce behaviours, new and updated pathways (e.g. Pharmacy First from UTCs), improvement culture and cross organisational booking (UTCs/Practices) ensuring co-morbidities are triaged by a GP.*

Long Term Condition Management – Respiratory

Driven by local and system-wide needs, this is a multi-Place programme comprising:

- Respiratory Review – designing an integrated model for prevention and management (COPD and asthma.)
- Proactive Care Management – scoping a future model for early intervention, MDT approach & risk stratification tools (implementation from 2026/27.)

Reporting into the C&M Respiratory Network, baseline data gathered, pathway development started, and digital tools explored to support self-management. Service changes are enabling an MDT approach. A quarterly bulletin supports collaboration and visibility.

Developing Integrated Approaches

Halton Intermediate Care and Frailty Service – an integrated health and care rapid response team supporting rehabilitation and preventing admissions. Multi-disciplinary SPA includes clinicians, nurses, therapists, administrative and social care staff.

Runcorn PCN Pharmacy team & Northwest Kidney Network (NWKN) are:

- Reviewing best practice & delivering education workshops for Pharmacists & GPs, pro-active identification & targeting of patients.
- Holding peer review meetings with practices & targets set to embed best practice.
- Neighbourhood proactive CKD model - including Nephrology consultants, psychologists, PCN pharmacists etc to discuss high risk CKD patients, identified by risk stratification, at MDT.

An integrated health and care approach to **care home quality improvement.**

Developing Integrated Approaches

Runcorn PCN ARRS funded Health Engagement Officers:

- Offer support to families of children with behavioural difficulties, mental health problems and neurodiversity.
- Liaise with schools, CAMHS and VCSE for children and young people.
- Provide education to practice teams (referrals and signposting.)
- Support families with children awaiting neurodiversity assessments.

Widnes PCN Cardio Renal Metabolic Conditions - partners and patients designed and implemented a Wellness Hub where Consultants, community nurses & GPs hold “one stop” clinics for diagnosis and management of heart failure. (HSJ award winning.)

Family Hubs & co-location of Building Attachment and Bonds Service - bring together council, health, and community services to support families to access the right support at the right time. An innovative digital offer underpins this service. A parent infant mental health service supports vulnerable parents and babies, preventing babies from entering care and delivering life-changing outcomes.

Mental Health Care Navigators, hosted by VCSE, embedded in secondary care community teams/in-patient units to address social needs by facilitating connection with local VCSE organisations for patients with SMI & complex needs, reducing anxiety and social isolation.

Primary Care Research Function: PCN, GP Federation and acute trust partnership, adding to research evidence for deprived populations.

Delivery & Challenges