

WESTMINSTER CITY COUNCIL

STATEMENT OF DECISION

SUBJECT: ACHIEVING HEALTH EQUITY: A PROPOSAL TO LAUNCH A NEW PUBLIC HEALTH PARTNERSHIP FUND FOR VOLUNTARY AND COMMUNITY ORGANISATIONS SERVING WESTMINSTER RESIDENTS

Notice is hereby given that , Cabinet Member for Adult Social Care, Public Health and Voluntary Sector, has made the following executive decision on the above mentioned subject for the reasons set out below.

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Voluntary and community organisations in Westminster work daily with the people the Council most wants to reach, support and empower to improve their health. In 2023/24, a £1m investment is proposed to enable selected voluntary and community sector (VCS) organisations to initiate health-promoting activities with target communities and codesign a further three-year £4m funding programme to improve resident health and wellbeing and address health inequalities.

Public Health will administer the grants, with support from the Communities directorate initially with future administration of the fund being part of the codesign process.
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Summary of Decision

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The Cabinet Member has approved the launch of a new voluntary and community sector (VCS) grant programmes, totalling up to £5m, to be mobilised over the next four years to: build capacity and expertise of the VCS to improve health outcomes of residents through health-based training; deliver health improvement activities and advice which improve health behaviours and address the wider determinants of health which may present as barriers to resident engagement; and ensure sustained health promotion in the community past the funding period.

Reasons for Decision

Westminster has the highest life expectancy for males in the country (85 years) and the third highest in the country for females (87 years). It also has the highest life expectancy gap in the country for males.

A needs assessment on the health inequalities experienced by Global Majority communities in Westminster suggests that people may face specific barriers to getting the health services that they need, due to experiences of discrimination, challenges navigating the health system and receiving care, understanding of health conditions and barriers to accessibility, and that their experiences and outcomes from services can be poorer.

Population-level interventions that are less reliant on individual choice aim to alter the environments in which people live, and they are the most effective and equitable way to

improve physical activity, reduce smoking, improve diets, reduce harmful alcohol use and promote social connection.

Reasons for Decision

**Stuart Love, Chief Executive,
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Publication Date: 22 August 2023

Implementation Date:

Reference: