

Anchor/Community Wealth Building (CWB) Strategy

A strategy to harness our power as an anchor institution and to positively impact health, social, economic and environmental outcomes in Ayrshire and Arran.



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1. CEO Foreword



Widening health, social and economic inequalities, increasing demand for health services, along with the climate emergency, is affecting Scotland and our local communities' health and wellbeing. In Ayrshire & Arran, as in the rest of Scotland, we are responding to an economic downturn, an aging population, a tighter labour market and increasing pressure on public services and funds.

It is widely acknowledged that traditional economic growth is no longer the answer. We need a new approach to our economy, centred on wellbeing and inclusion in order to tackle existing challenges.

The Scottish Government adopted the internationally recognised Community Wealth Building (CWB) approach as a key practical means to economic development. CWB addresses the challenges posed by post-Covid recovery, entrenched inequalities, child poverty and the climate emergency, and offers a means to rewire our economy progressing towards a wellbeing economy as outlined in the [National Strategy for Economic Transformation](#)¹.

On 31 January 2023, the Scottish Government launched its [Community Wealth Building consultation](#)² with the intent to bring forward Community Wealth Building legislation in 2024. The 2023 NHS Scotland Annual Delivery plan commits all Scottish Health Boards to develop an Anchor Strategy for submission to the Scottish Government by 27 October 2023. Building on work already underway as part of the recovery programme, NHS Ayrshire & Arran launched its Anchor/Community Wealth Building Board and programme in July 2022.

Caring for Ayrshire is our exciting and ambitious programme that will transform health and care services across Ayrshire and Arran. It will provide a platform to support wider economic regeneration and inclusive growth across the region.

This strategy sets out our plans to deliver on our anchor organisation ambitions alongside our anchor partners in the Ayrshire Community Wealth Building Commission and in support of the [Ayrshire Regional Economic Strategy](#)³ and the [Ayrshire Growth Deal](#).

I very much hope you will recognise and acknowledge the challenges described in this strategy and are supportive of our ambitions to influence and change the course of the social, economic and environmental challenges presented. I welcome this strategy which outlines our ambition to use a Community Wealth Building lens to reduce the flow of wealth out of Ayrshire & Arran by increasing our local investment, keeping spend local where possible, making better use of our assets, creating more secure and better paid jobs and supporting local businesses to share the wealth they create with workers, consumers and communities.

I am delighted to present NHS Ayrshire & Arran's first Anchor/Community Wealth Building strategy and encourage you to be bold, ambitious and creative in delivering the strategy. The power of Community Wealth Building (CWB) can ensure that wealth is retained within Ayrshire & Arran. **We can all play a part in investing and spending locally, supporting local businesses and communities creating a successful place to live, work and play.** This is just the start of our journey which I hope you will join us on.

Claire Burden, Chief Executive Officer - NHS Ayrshire & Arran

2. Introduction

2.1 Community Wealth Building

Community Wealth Building (CWB) is an internationally recognised model of economic development which tackles long standing challenges facing local, regional and national economies. CWB considers the ways in which wealth is generated, circulated and distributed, providing an alternative people-based approach to traditional economic development redirecting wealth back into local economies.

CWB aims to reduce the flow of wealth out of communities by increasing local investment, keeping spend local, making better use of local assets, creating more secure and better paid jobs and more locally rooted, 'generative' businesses that share the wealth they create with workers, consumers and communities. This ensures our collective wealth works better for people, the place and the planet.

2.2 Policy Context

The Scottish Government is committed to CWB as a key means of addressing the challenges posed by post-Covid recovery, and the climate crisis, while tackling child poverty and entrenched inequalities. The Scottish Government is taking forward a Community Wealth Building Bill to enable more local communities and people to own, have a stake in, access and benefit from the wealth the Scottish economy generates.

The CWB Bill will cement and augment the role local authorities and other public sector anchor organisations, such as the NHS, play in supporting local economic development and advancing a wellbeing economy, legislating for them to consider their economic footprint within a wider place system. [The Scottish Government consultation on CWB legislation](#) ² closed on 09 May 2023 with legislation expected to be forthcoming in 2024.

CWB and development of territorial Health Boards as anchor institutions falls within the Scottish Government Care and Wellbeing portfolio. Care and Wellbeing is the key NHS reform vehicle to improve population health; address inequalities and improve system sustainability.

Care and Wellbeing work supports the Scottish Governments mission to: tackle poverty and protect people from harm; create a fairer, green and growing economy; and prioritise our public services, as set out in: equality opportunity community new leadership – A Fresh Start⁴.

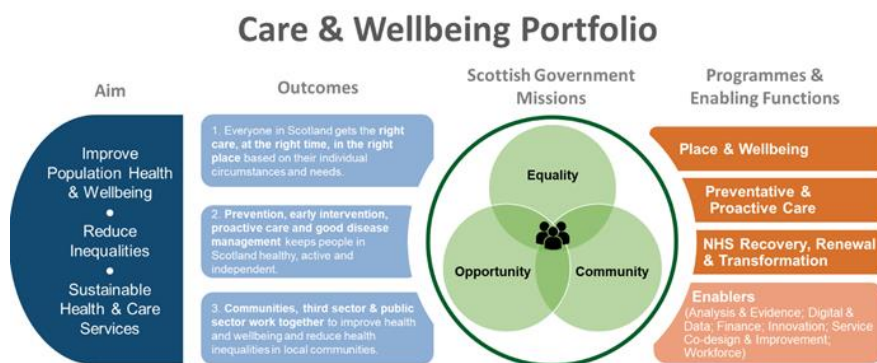


Figure 1: Scottish Government Care and wellbeing Portfolio

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The Scottish Government through the [NHSScotland Delivery Plan for NHS territorial boards \(28 February 2023\)](#) ⁵ outlines actions to progress deliverables in the Place & Wellbeing and Preventative & Proactive Care Programmes. This includes the requirement for all territorial boards to support and be effective anchor Institutions. As part of the 'COVID Recovery Strategy: for a fairer future' this requires all Scottish Health Boards to:

Set out their approach to developing an Anchors strategic plan by October 2023 setting out governance and partnership arrangements to progress anchor activity; current and planned anchor activity and a clear baseline in relation to workforce; local procurement; and use or disposal of land and assets for the benefit of the community.

This strategy is our first Anchor/CWB strategy which meets this Scottish Government requirement. It builds on work NHS Ayrshire & Arran has initiated as part of Covid recovery and Infrastructure and Support Services programmes and summarises our progress so far.

2.3 Reducing Poverty and Inequality

Health inequalities are unfair, avoidable differences in health outcomes between population groups. In Ayrshire, there are **seven times as many early deaths** in the most deprived areas, compared with the wealthiest, and our adults will live **3 years fewer in good health** than the Scottish average (Appendix 1) ⁶. Widening health inequalities and growing pressures on healthcare services have prompted discussion on the role of the NHS in preventing ill health and its broader influence in local communities.

Population health depends on much more than just healthcare services. It is shaped by the social, economic, commercial and environmental conditions in which people live ⁷. **Healthcare delivery is estimated to account for around 10% of a population's health** ⁸. However, in its role as an anchor institution, the NHS can meaningfully influence these wider, social determinants of health within a community, improving overall health and reducing health inequalities ⁷. The figure below illustrates the fundamental causes of inequality that influence health, many of which can be tackled through a Community Wealth Building lens (Public Health Scotland).

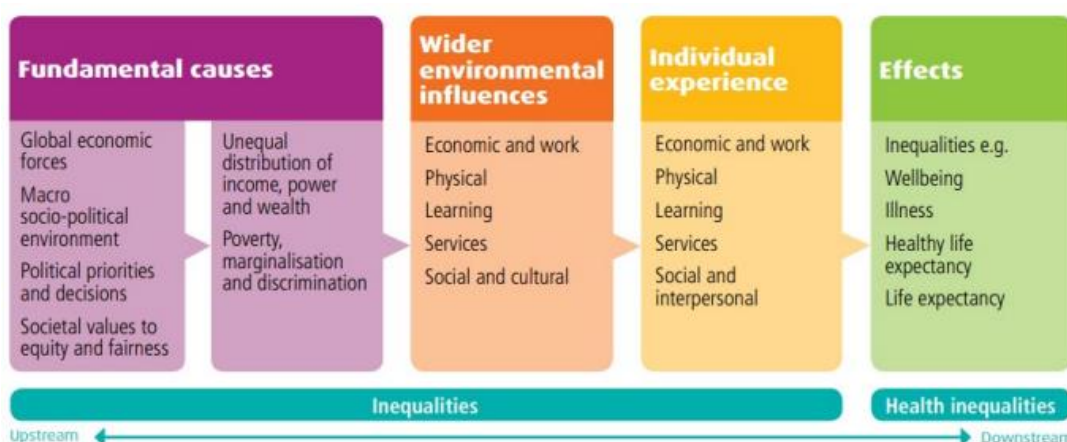


Figure 2: fundamental causes of inequality that influence health (Public Health Scotland)

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The COVID-19 pandemic highlighted the impact of health inequalities and had a disproportionate impact on those who are already facing disadvantages and discrimination. As Scotland now enters a cost-of-living crisis, concern around the impacts on health inequalities is considerable among researchers, policy makers, and the Scottish public.

Tackling Ayrshire's social and economic inequalities will not be easy. **Poverty rates are higher** than the Scottish average, and 23% of adults in our least well off areas are classed as 'employment deprived' (Appendix 1) ¹⁰. **North and East Ayrshire also have the 2nd and 3rd highest rates of children living in low-income households nationally** ¹¹. Compared to the rest of Scotland, **Ayrshire's workforce has fewer qualifications**, and it is **forecast to experience less economic growth and greater reductions in workforce** in the short- and medium-term (Appendices 2 and 3) ¹⁰.

Given these stark economic inequalities, if Ayrshire's health inequalities are to be reduced there cannot be a focus only on addressing individual diseases or risk factors. Strategies must tackle the 'fundamental causes' driving inequality. This requires a joined-up approach, bringing together local partners to tackle inequality and to maintain a long-term vision of developing a local Ayrshire wellbeing economy.

Given its size, scale and reach, NHS Ayrshire & Arran must play an important role in these partnerships, improving outcomes for local people by mitigating these ingrained inequalities that cause poor health for many in our society. An overarching goal of reducing poverty and all sources of inequality is therefore embedded throughout this strategy.

2.4 Contribution to action on Climate Change

In addition to undertaking work that supports community health and economic outcomes, NHS Ayrshire & Arran and everyone working within the organisation are required to support Scotland's ambition of a net-zero health service by 2040. NHS Ayrshire & Arran has adopted Climate Change and Sustainability policies, targets, and aims to design services to reduce the impact of health services on the environment. We see this as inherently linked with our CWB approach, and it is one of the pillars of our strategy.

2.5 Our Vision, Mission and Values

Our organisational purpose



**Working together to achieve the healthiest
life possible for everyone in Ayrshire and Arran**

Our organisational values



Our organisational values underpin who we are, how we behave and the way we work together across all aspects of our organisation.

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Our Anchor/CWB mission

Our anchor work should not be viewed as an additional one-off programme of work but should encompass how we better use our assets to do what we already do: employ people, buy goods and services, manage our land, buildings and the environment and form partnerships.

Our Anchor/CWB vision



To support creation of a fair local wellbeing economy which enhances local wealth, reduces poverty and inequality through investing and spending locally, creating fair and meaningful employment, designing and managing our buildings, land and assets to maximise local and community benefits and reduce our environmental impact.

We aim to ensure Community Wealth Building (CWB) is embedded within NHS Ayrshire & Arran's organisational strategy and processes, and to ensure that we deliver, monitor and report on progress supported by a nominated Anchor/CWB programme board.

We will deliver on our vision and mission by:

- Investing in the social and economic wellbeing of the communities we serve to achieve health equity;
- Working with our partner Ayrshire anchor institutions and our communities developing and maintaining an understanding of the local economy and impacts of Covid-19 on Ayrshire allowing us to support development of a fair local economy which reduces poverty, ill health, social isolation and inequality;
- Working as an Anchor institution to build on good practice and alignment with local recovery strategies;
- Using our assets for social, economic and environmental benefit - sharing local learning to accelerate progress more widely and taking opportunities to collaborate;
- Developing our Anchor/CWB action plans to address our anchor responsibilities using our economic levers to advance the cause of social and economic justice; and
- Undertaking annual Anchor/CWB performance reviews allowing adjustment and refinement of our strategy.

2.6 What is an Anchor Institution?

Community Wealth Building (CWB) uses the economic power of large, locally rooted organisations known as anchor institutions. Anchor institutions include, for example, local authorities, further education colleges, universities and health boards.

Anchor institutions' headquarters are based within the local community areas they serve and they are unlikely to relocate elsewhere. They employ many people, spend substantial amounts of money, own and manage land and assets and deliver crucial services. They are connected to their community, and their community is central to their success. The way in which anchor institutions spend their money, employ people and use their land, property and financial assets can make a huge difference to a local area.

2.7 NHS Ayrshire & Arran as an Anchor Institution

NHS Ayrshire & Arran is a large anchor institution. We provide local healthcare services to 368,690 people in Ayrshire & Arran. However, this is just the start of what we do for the community we serve: as an employer; a partner; a purchaser of goods and services; and through the impact we have on the environment.

We therefore have a moral obligation to maximise the value and reach of our funds and to look at the role the NHS can play in influencing local economies, reducing inequalities and preventing ill health.

We serve a population of 368,690 people (2021) ¹² and employ approximately 11,345 staff (as at financial year 2023/2024).

As at financial year 2022/2023 we:

- Employed 48 clinical and 3 non-clinical apprentices
- Implemented 2 employability programmes supporting 11 student work placements.
- Spent £13,202,857 locally with 214 local suppliers.

As at the end of financial year 2023/24 the operational Land and Assets for NHS Ayrshire and Arran included:

- 60 owned / leased properties and 123 Ha of Land

Our six Anchor/CWB pillars represent an opportunity to improve the local economy, people's health and wellbeing by providing: good work, nurturing young people & supporting our communities, local businesses and caring for the environment.

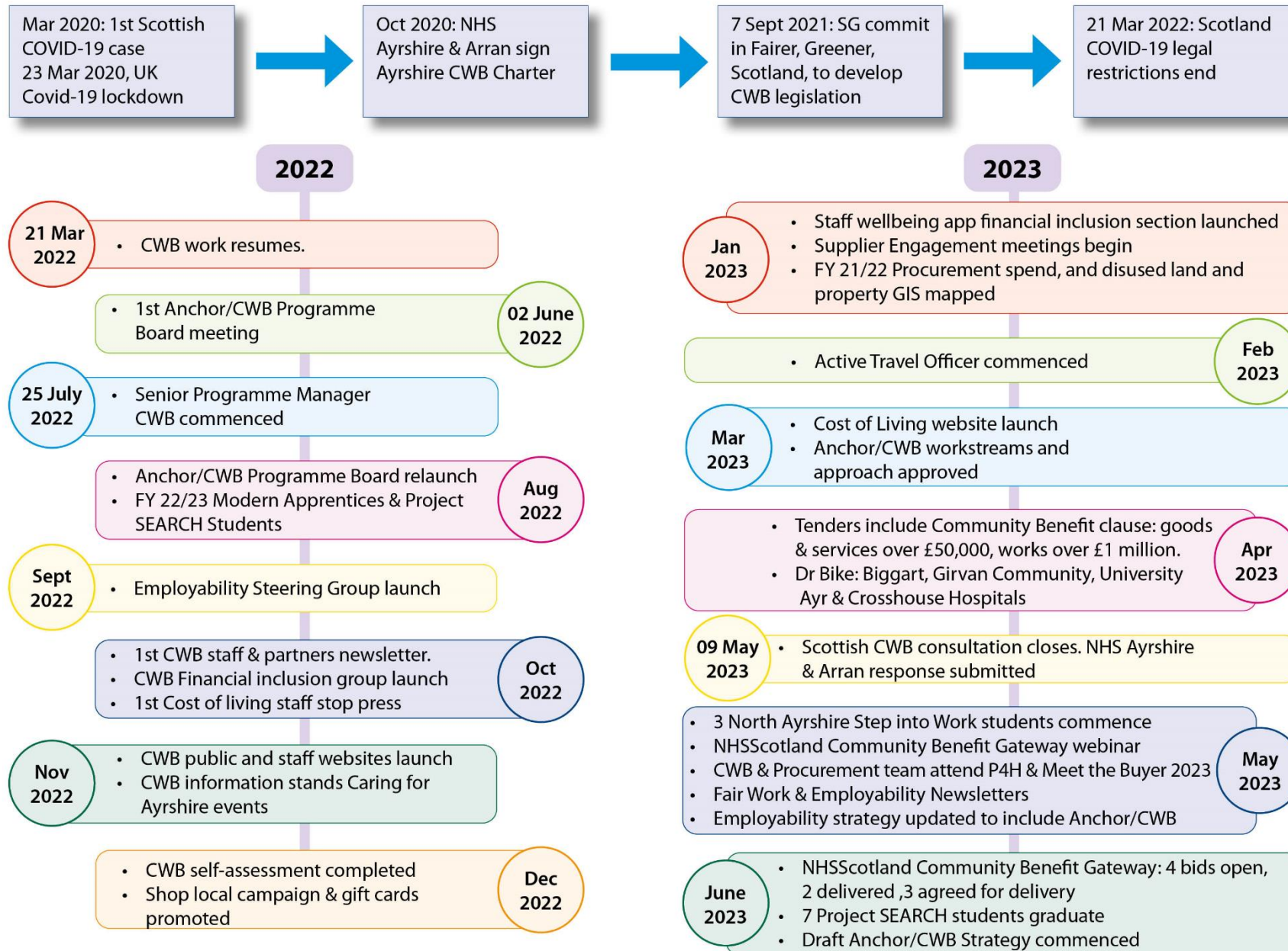
” We know NHS Ayrshire & Arran’s success depends on our communities being well supported, resilient and vibrant places where people can thrive. Which is why we are serious about our anchor responsibilities and will use a Community Wealth Building lens in all that we do.”



Claire Burden, Chief Executive Officer

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3. Record of Main Achievements



4. Corporate Responsibilities & Partnership Working

Anchor institutions and approaches benefit from collaboration, with wider partners and other anchor institutions. This helps to reduce duplication; allows work towards common ambitions; sharing of expertise and resources; and maximises impact. Addressing our corporate responsibilities and wider partnership working is essential to tackle the complex social determinants of health.

4.1 Anchor partnership Working

NHS Ayrshire & Arran signed the Ayrshire Anchor Charter in 2020 and is a leading member of the Ayrshire Community Wealth Building Commission. We will continue to embrace our role as an anchor institution championing collaboration with partners and the local community taking civic responsibility to work in partnership through local Community Planning Partnerships to address local Anchor/CWB priorities.

We will ensure that Anchor/CWB responsibilities are at the heart of our strategic thinking and delivery as an organisation. We will engage with staff and partners to review our policies and practice in order to deliver a more inclusive Ayrshire wellbeing economy.

We will engage with our staff, local communities, national, local and regional partners to raise awareness of our anchor responsibilities, Community Wealth Building and the organisations desire to support development of a more inclusive Ayrshire local wellbeing economy.

We aim to ensure our anchor/CWB strategy and mission is visible, regularly reviewed and aligned with the corporate strategies of the health board.

There are finite environmental, social and financial resources available to deliver a high standard of patient care. The overall goal of sustainable quality improvement is to maximise sustainable value whilst meeting our social and corporate responsibilities. ¹³

$$\text{SUSTAINABLE VALUE} = \frac{\text{OUTCOME FOR PATIENTS AND POPULATIONS}}{\text{ENVIRONMENTAL + SOCIAL + FINANCIAL IMPACTS}} \\ \text{(THE 'TRIPLE BOTTOM LINE')}$$

Figure 3: Sustainable value (Source: The SusQI Framework)

To get there we have:

- Appointed a Senior Responsible Officer for Anchor/CWB work within the Health Board; and
- Created an Anchor/CWB programme and are embedding CWB in our corporate strategies and planning.

We will:

- Work in partnership through local Community Planning Partnerships to address poverty, inequalities and the climate emergency.
- Further develop our Anchor/CWB work plans;
- Engage with National, regional and local partners on CWB in support of the [National](#) ¹ and [Ayrshire Regional](#) ³ Economic Strategies and [the Ayrshire Growth Deal](#);
- Provide regular and appropriate CWB communications, resources, reports and training.
- Use the resources, skills and expertise of our organisation to support our local communities, Ayrshire third sector organisations and local businesses.

5. Our Anchor/CWB Commitments

The following sections set out what we will do under each of our anchor pillars to reach our overarching mission.

5.1 Fair Work/Workforce



Our staff are our most important asset. We are committed to delivering the intentions set out in the NHS Ayrshire & Arran People Plan, Workforce plan and Employability Strategy.

There is a strong link between work and health. For work to have a positive impact on health it must be 'good work' and provide a decent income. [The Fair Work Convention](#) sets out what good work looks like in Scotland. Fair work is work that offers all individuals effective voice, opportunity, security, fulfilment and respect.

Through our Fair Work/Workforce pillar we aim to improve the prospects and wellbeing of our local community by making NHS Ayrshire & Arran the best place to work by supporting, enabling, and empowering implementation of Fair Work practices through improved policy and practice enabling recruitment and retention of a workforce representative of the local population.

We will do this by implementing our Fair Work/Workforce workstreams:

- Anchor Fair Work partnership and networking
- Employability/recruitment actions: Promoting NHS Ayrshire & Arran employment opportunities, seeking to bring local people - particularly those further from the labour market and most likely living in poverty - into good work through provision of:
 - Employment programmes (Project SEARCH, Modern & graduate apprenticeships, work placements);
 - Pre application support; and
 - Employment careers outreach work.
- Living Wage Employer: Aspiring to be a Living wage employer exploring progression towards Living Wage accreditation in order to attract and retain talented staff through provision of good pay and conditions.
- Staff training and progression pathways – providing equitable career opportunities to all staff.
- Staff Health, Safety and Wellbeing - Ensuring safety of our staff and their physical and mental wellbeing is a priority.

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- Support for Distributed working – Development of a suite of documentation and resources to support Implementation of a flexible employee and service focused distributed working approach in NHS Ayrshire & Arran.
- Development and monitoring of Fair Work/workforce data sets - identifying and demonstrating success of fair work actions.

5.2 Procurement

NHS Ayrshire & Arran spends large sums of money on goods and services. We aim to take a balanced approach to procurement ensuring our procurement processes consider social, environmental and economic impacts along with price and quality improving our supply chain resilience in the face of economic variation or barriers to international and long-distance trade.

We recognise our procurement decisions can support the Ayrshire local economy where we are not constrained to utilise national procurement frameworks. Over the years recirculation of our spend in the local economy can help to retain wealth in Ayrshire communities supporting provision of local jobs, apprenticeships, providing local people with incomes and supporting community wellbeing.

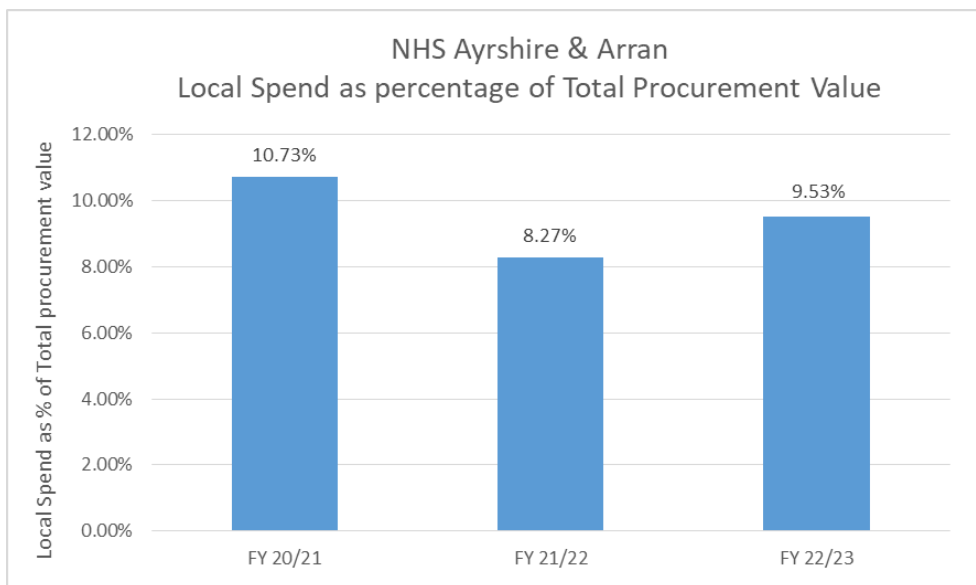


Figure 4: NHS Ayrshire & Arran local procurement spend as a percentage of total procurement value

We will do this by implementing our Procurement workstreams:

- Implementation of consistent and transparent procurement terms and conditions.
- Increased understanding of the skills and capacity of the Ayrshire business base
- Identification of where our procurement contracts can improve social, environmental and economic value for our local communities.
- Making procurement opportunities accessible and attractive to local suppliers.
- Prioritising purchasing from local suppliers and from small and medium sized enterprises (SMEs) where possible helping them to survive grow, employ more staff and pay better wages.
- Local supplier engagement to raise supplier’s awareness of our sustainable procurement policies and procurement opportunities.
- Progression of our contractors where possible towards paying their staff the real Living Wage.
- Maximisation of local employment in the supply chain, including capital investment through community benefit and social value clauses.
- Monitoring and managing contracts to ensure they deliver the social, environmental and economic value to which suppliers have committed.
- Collaborative working with colleagues to influence inclusion of CWB principles in NHS national and regional procurement frameworks and policies.

5.3 Land & Assets

NHS Ayrshire & Arran commands a substantial amount of land and property assets. As at the end of financial year 2023/24 the operational Land and Assets for NHS Ayrshire and Arran included:

- 60 owned / leased properties and 123 Hectares (Ha) of Land

The non-operational estate consists of all properties that the Board has confirmed as surplus and vacant within the PAMS, as at 2023/24 there were 4 sites within the Board's owned / leased estate which were non-operational. A breakdown of the operational estate by property type is noted below.

Table 1: NHS Ayrshire & Arran operational Land and Assets

Property Type	Number of Properties
Acute & Maternity Hospitals	3
Elderly & Mental Health Hospitals	4
Community Hospitals	4
Health Centres & Clinics	42
Other (Offices, Residential etc.)	7



Figure 5: NHS Ayrshire & Arran Hospital sites

The land and assets principle of Community Wealth Building looks at how the NHS can design and manage its land, buildings and assets to support delivery of healthcare services whilst promoting broader social, economic and environmental aims.

We aim to manage our land and assets in a positive and proactive way to support delivery of healthcare services whilst promoting an inclusive wellbeing economy, empowering our local communities, meeting community aspirations and contributing to climate action.

By doing so we will use our land and assets in a responsible way to benefit everyone in the local community and to support community regeneration.

Using local labour where possible on capital investment projects and encouraging contractors into the capital investment supply chain.

We will do this by:

- Proactively and positively managing of our land and assets to support current and future delivery of healthcare services.
- Optimising the flexible use of our estate to support distributed working in NHS Ayrshire & Arran enabling the right work, in the right place at the right time.
- Supporting net zero ambitions and sustainable development.
- Expansion of community access to NHS land and property - for example where appropriate, enabling local groups and businesses to use NHS estates.
- Effectively managing surplus land and property through productive re-use or disposal to ensure best value.
- Engaging with our local communities and involving others in our land and asset decisions.
- Continuing to maintain and update our land and asset data set and sharing where appropriate information to support transparent land and asset decision making.
- Supporting our community aspirations and local economic growth

We commit to:

- Measuring the wider impacts of our capital investments on the local economy, the environment and local biodiversity.

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5.4 Climate Change



People's health and the environment are inextricably linked. Protecting and improving health are at the core of NHS Ayrshire & Arran's commitments, especially where they disproportionately affect our most vulnerable patients and residents.

We therefore take sustainability and our impact on the environment seriously. The NHS is responsible for around 4 percent of the nation's carbon emissions, we must be a part of the solution in tackling climate change by reducing emissions by 80 percent by 2028-2032 and achieving a net-zero health service by 2040. NHS Ayrshire & Arran has already implemented a number of initiatives to reduce our carbon footprint and we intend to build on this work.

The NHS Ayrshire & Arran Climate Change and Sustainability Strategy 2021 - 2032 along with our commitment to our Anchor responsibilities and use of CWB commits Ayrshire and NHS Ayrshire & Arran to a more sustainable future by supporting the transition to a low-carbon economy and meeting our net zero commitments.

NHS Ayrshire & Arran is committed to working with local anchor partners to tackle climate change through shared policy and local emission plans tracking progress and evaluating practice together with other anchor organisations.

Our Anchor/CWB climate change actions aim to support us to:

- Reduce the impact of our health services on the environment and reduce our greenhouse gas emissions.
- Adapt the organisation to the effects of climate change.
- Integrate sustainability into the organisation's everyday actions.
- Increase our contribution to Green Space and improve biodiversity in our estate.
- Establish sustainable models to provide care in the community.

We will do this by:

- Implementing our Climate Change and Sustainability Strategy 2021 - 2032 instigating sustainable practices, building sustainability into procurement processes and promoting environmental awareness with staff and partners.

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Anchor/CWB Climate Change commitments are a subset of this strategy:

- NHS A&A and staff Climate Change Communications and Engagement
- Active travel.
- Electrification of NHS Fleet & Provision of charging infrastructure.
- Greening the Estate/Green Health.
- Assessment and improvement to NHS Ayrshire & Arran land and biodiversity.
- Supporting local authorities in developing their Local Development Plans through place-based partnership working.
- Ayrshire - Local Heat and Energy Efficiency.
- Ayrshire Clean Green Growth workstream.
- Energy efficiency in the home for patients with high levels of medical equipment in the home.

5.5 Financial Powers

We will ensure that NHS Ayrshire & Arran flows of investment and spending works for local people, communities and businesses to grow the local economy.

We aim to:



- Examine how NHS Ayrshire & Arran can invest locally and encourage others to do the same
- Harness the power of NHS Ayrshire & Arran's spending by procuring goods and services locally where possible; and
- Harness the wealth of our employees by encouraging them to spend their wages locally where possible.

We will implement the following Financial Powers workstreams:

- Promotion of the shop local campaign offering support to local businesses.
- Ethical investment of NHS Ayrshire & Arran endowment funds.
- Sign posting and provision of referral pathways for staff to cost of living help and advice ensuring staff can take up benefits and the support they are entitled to.
- Provision of training and support to our managers enabling them to provide advice to staff struggling during cost-of-living crisis.
- Provision of an exemplar non-pay staff benefits package and ensuring this is widely communicated and accessible to all staff reducing staff cost of living.
- Promotion of the work of credit unions to staff, supporting staff to identify opportunities to receive fair banking and to take control of their money, saving what they can and borrowing only when they can afford to repay loans.
- Ensure we meet our statutory requirements on provision of workplace pensions and provide appropriate and up-to-date pensions information and guidance to staff. This service will continue to be staff led and information provided as and when requested directly by staff members to enable informed choices on an individual basis.
- Ensuring staff access to good financial advice and support.

5.6 Service/Plural Diverse Ownership:

NHS Ayrshire & Arran along with the three Integration Joint Boards (IJB) of the Health and Social Care Partnerships (HSCP) in East, North and South Ayrshire, seek to deliver Caring for Ayrshire, an ambitious programme for delivery of high-quality, safe, effective and sustainable health and care services that are fit for the future.

Our Caring for Ayrshire programme aims to develop an integrated health and care service model transforming our services so that they are more accessible and provided as close to home as possible. This model will look at all aspects of health and care from birth, to end of life, with citizens being at the heart of the proposals ensuring our future services consider the changing population demographics – for example ageing population and increasing inequalities, particularly as a result of poverty - and the other key drivers that impact on service needs.

We will:

- Develop and maintain health service local needs information including intelligence on hard to reach or disadvantaged groups;
- Review existing health service delivery and design new services to reach and benefit diverse and disadvantaged communities; and
- Work with other anchor institutions and local community organisations to co-design, simplify and streamline health and social care services.

These will extend our reach and impact and deliver multiple outcomes more effectively and broadly to enhance provision of services in areas of greater need to help mitigate against inequality.

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6. Governance

In Scotland, the NHS Anchor workstream sits within the Scottish Government Care and wellbeing Portfolio.

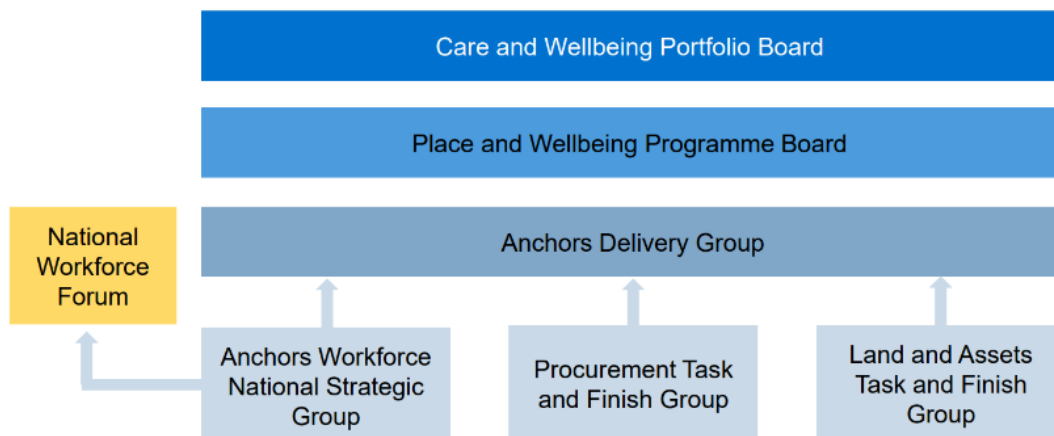


Figure 6: NHS Anchor Governance in Scotland

6.1 NHS Ayrshire & Arran Anchor/CWB Governance

To drive forward CWB NHS Ayrshire & Arran formed an Anchor/Community Wealth Building Programme Board which first met on 02 June 2022. Appendix 4 outlines our governance structure.

NHS Ayrshire & Arran Anchor/CWB Programme works across six Anchor/CWB pillars led by Senior Management representatives.

Table 2: NHS Ayrshire & Arran Anchor/CWB Leads

Fair Work/Workforce	Director of Human Resources
Procurement	Head of Procurement
Land & Assets	Assistant Director of Infrastructure & Support Services (ISS), (Programmes), Property & Capital Planning
Climate Change	Assistant Director of Infrastructure & Support Services (ISS), Estates and Support Services
Financial Powers	Assistant Director of Public Health
Service/Plural/Diverse Ownership	Assistant Director of Infrastructure & Support Services (ISS), Estates and Support Services

We appointed a Senior Programme Manager Community Wealth Building to take forward and monitor Anchor/CWB work on a two-year secondment basis to 25 July 2024.

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Our Anchor/Community Wealth Building Programme Board ensures links to:

- National CWB Scottish Government discussions, influencing the development of the proposed Community Wealth Building Act.
- NHS Ayrshire & Arran's Caring for Ayrshire strategic ambition.
- National Public Health Scotland discussions, and any support they might offer to health boards on this agenda.
- Seeks opportunities for funding (internal and external) to support Anchor/CWB work.
- Reports on CWB programme activity identifying barriers, challenges, good practice and sharing learning from other organisations.
- Supports the Anchor/CWB workstream leads.
- Provides briefings to the Board Chair, who represents NHS Ayrshire & Arran on the Ayrshire Community Wealth Building (CWB) Commission.
- Assists the Anchor/CWB programme SRO (Senior Responsible Officer) with completion of annual reporting to the CWB Commission.
- Shares communication with staff on the role of the NHS as an anchor institution and professional and or personal behaviours required to meet the expectations of an anchor organisation which makes a positive impact on the local wellbeing economy.
- Ensures that the correct governance arrangements are in place for reporting on the Anchor/CWB programme.

6.2 Measuring our progress

NHS Ayrshire & Arran's Anchor/CWB Strategy progress will be measured over the lifetime of this strategy by the extent to which the commitments we have set out are achieved.

Our commitments reflect the Scottish Government Anchor ambitions and are aligned to the priority outcome within our annual delivery plan 2023: to improve health and wellbeing for our local population, and ensuring this is carried out in an equitable manner. By delivering our Anchor/CWB Strategy we will contribute to the priority outcome of reduction of health inequalities.



Our Anchor/CWB commitments are clear and will be supported by Key Performance Indicators. We will develop a performance baseline and dashboard as part of annual business planning purposes and in line with the developing Scottish Government Anchor metrics to track our progress over time.

Anchor/CWB performance will be measured annually, using robust data, ensuring our Anchor Strategy remains adaptive and responsive.

We will publish an annual Anchor/CWB performance delivery report reviewing progress against our strategy and the Ayrshire anchor charter principles and will provide specific examples of our social, economic and environmental improvement.

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During the life of the strategy, measurement will be continually improved to allow new data sources to be included.

We will also use our experience and expertise to support other anchor institutions to align with the Ayrshire anchor charter principles.

7. Find out more

We ask our staff to review our Anchor/Community Wealth Building Strategy and think about how they can contribute within their own role.

We want our staff to talk about our Anchor responsibilities and Community Wealth Building (CWB). Say it loud! Talk to your colleagues, line manager and embed Community Wealth Building practices within your area of work. Whether it is a small or large project, it all adds up to make a difference to our local economy and environment.

Contact us

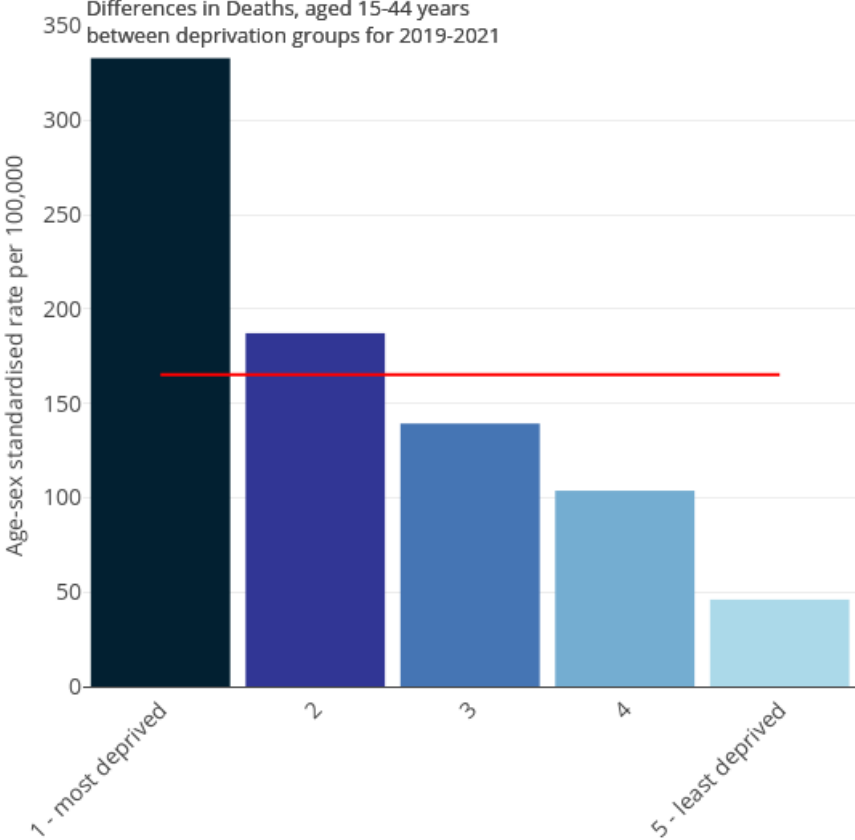
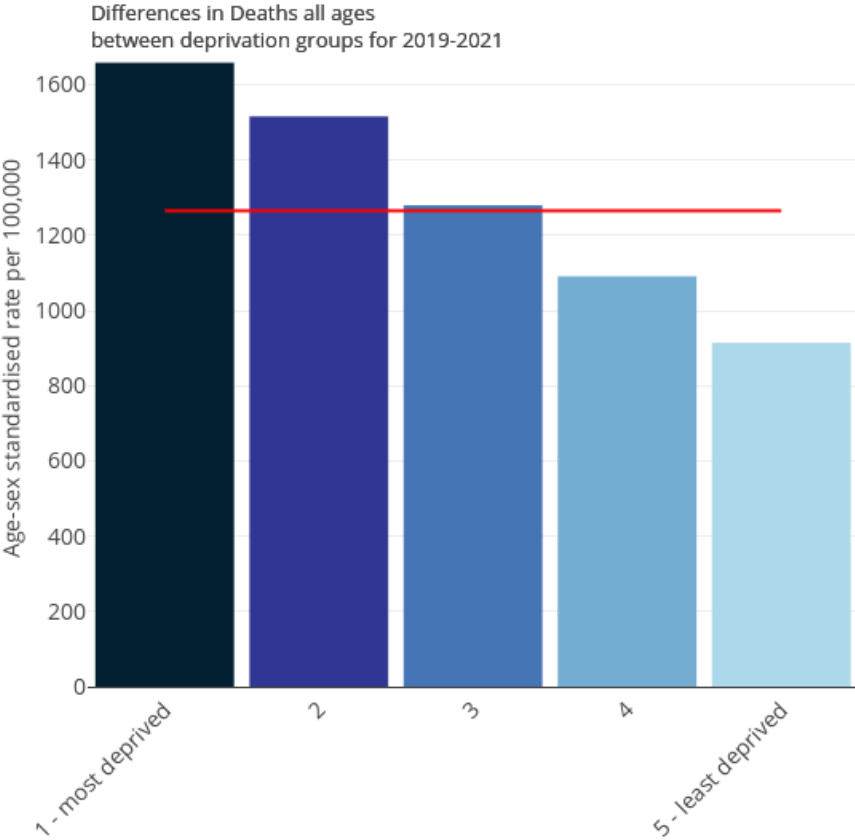
Contact aa.cwb@aapct.nhs.uk for advice and support on the NHS Ayrshire & Arran Community Wealth Building Programme.

Website & social media

Follow our [CWB website](#) & social media channels for the latest Anchor/CWB information, news and updates.

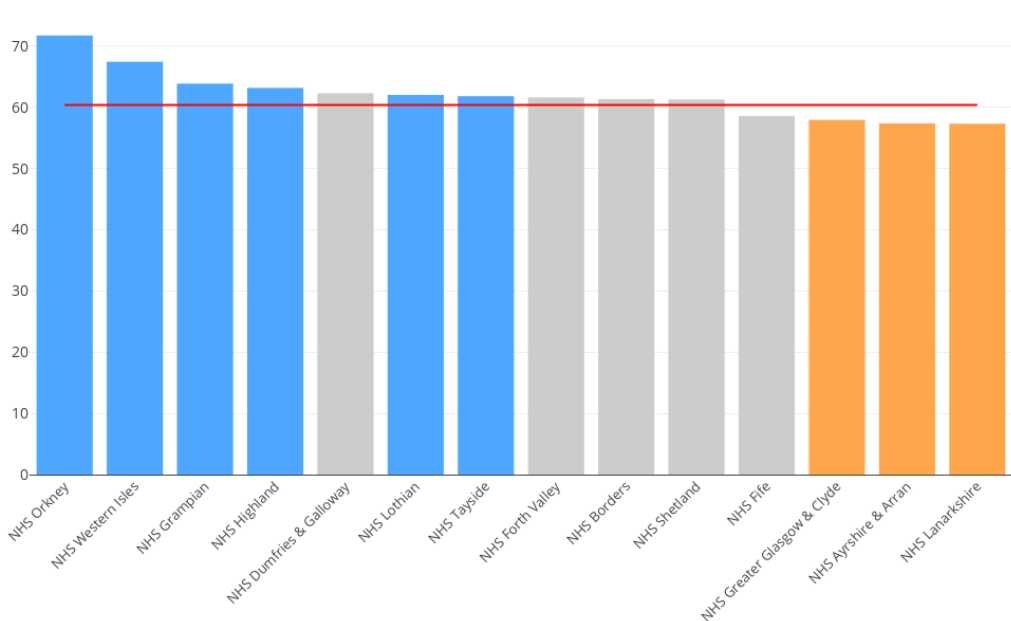
8. Appendix

Appendix 1: Reducing Poverty and Inequality - Ayrshire Population and Health Inequalities

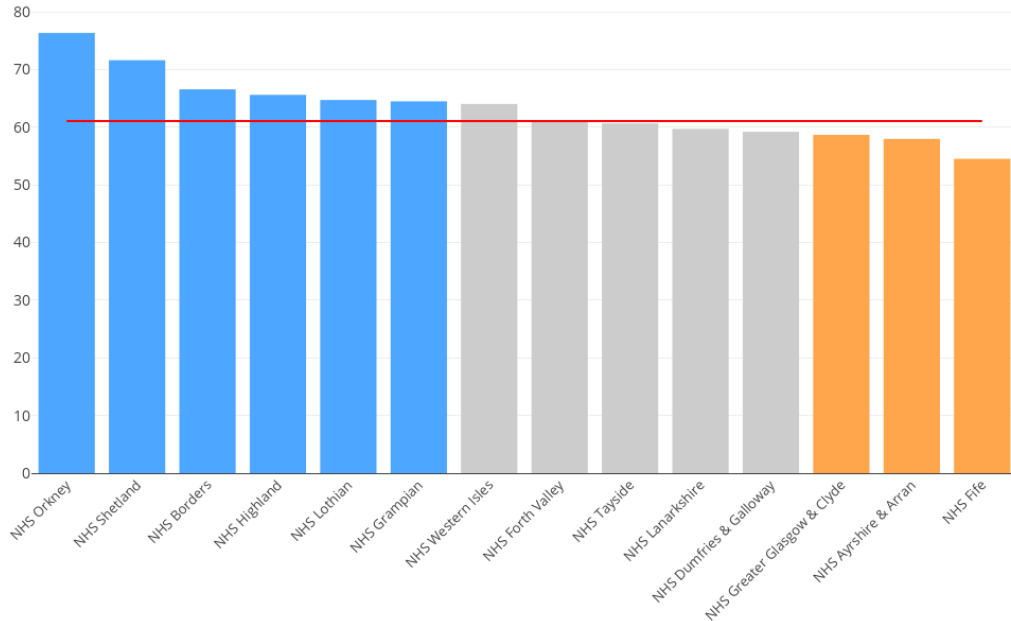


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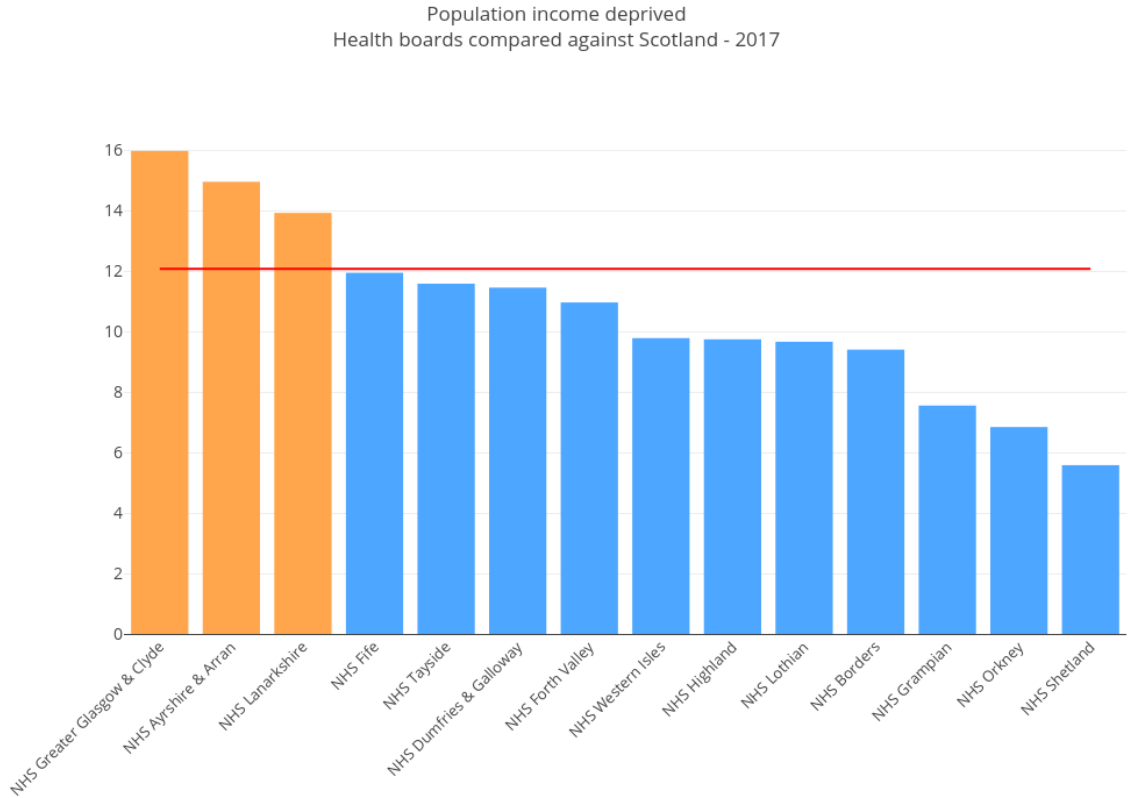
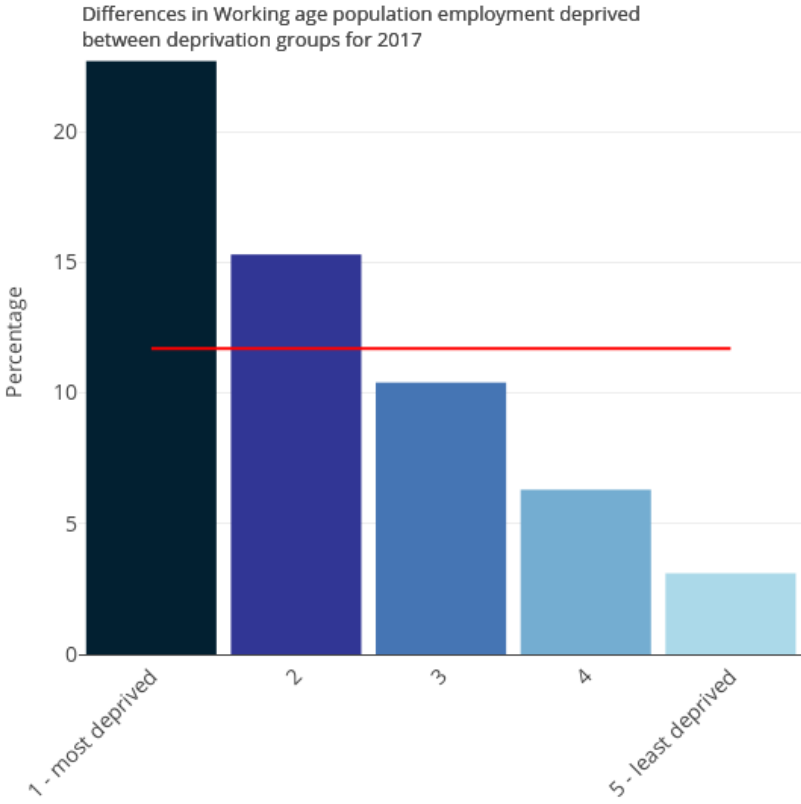
Healthy life expectancy, males
Health boards compared against Scotland - 2019-2021



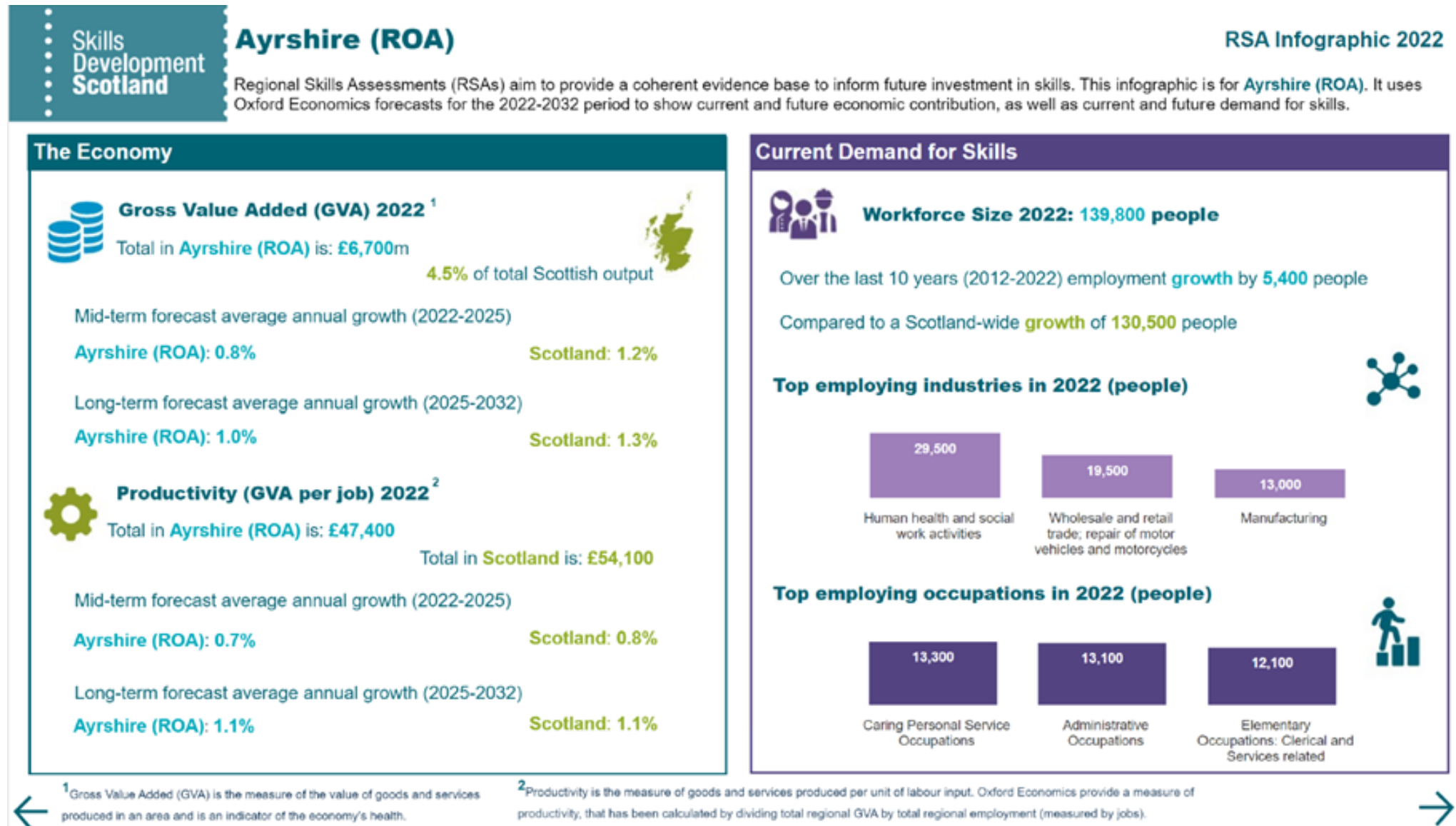
Healthy life expectancy, females
Health boards compared against Scotland - 2019-2021



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Appendix 2: Reducing Poverty and Inequality Ayrshire Economy & Demand for Skills



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Appendix 3: Reducing Poverty and inequalities – Ayrshire Workforce & Skills

Skills Development Scotland

Ayrshire (ROA)

RSA Infographic 2022

Regional Skills Assessments (RSAs) aim to provide a coherent evidence base to inform future investment in skills. This infographic is for **Ayrshire (ROA)**. It uses Oxford Economics forecasts for the 2022-2032 period to show current and future economic contribution, as well as current and future demand for skills.

Future Demand for Skills in Mid-term



Workforce Size 2025: 136,800 people

The workforce is expected to **decline** by **-2.1%** or **-3,000** people between 2022 and 2025

Compared to a Scotland-wide increase of **1.2%** or **31,900** people

Job openings* between 2022-2025:



Expansion Demand:

-3,000 people

Scotland:

31,900 people

Replacement Demand:

16,900 people

Scotland:

299,800 people

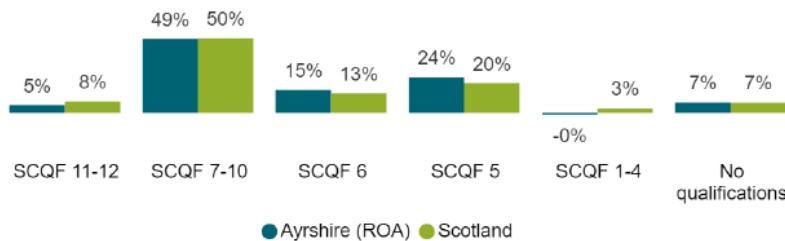
Total Job Openings:

13,900 people

Scotland:

331,700 people

Total Requirement for people with Qualifications between 2022-2025 are:



Future Demand for Skills in Long-term



Workforce Size 2032: 139,500 people

The workforce is expected to **grow** by **1.9%** or **2,700** people between 2025 and 2032

Compared to a Scotland-wide increase of **1.5%** or **40,700** people

Job openings* between 2025-2032:



Expansion Demand:

2,700 people

Scotland:

40,700 people

Replacement Demand:

36,100 people

Scotland:

696,900 people

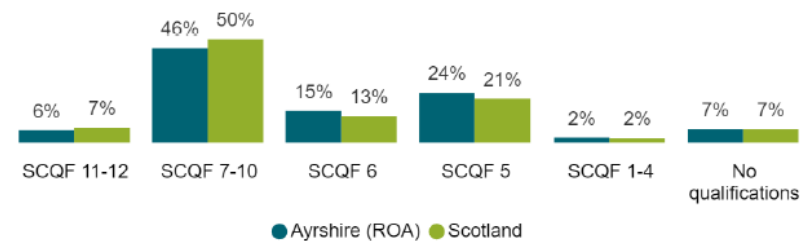
Total Job Openings:

38,800 people

Scotland:

737,600 people

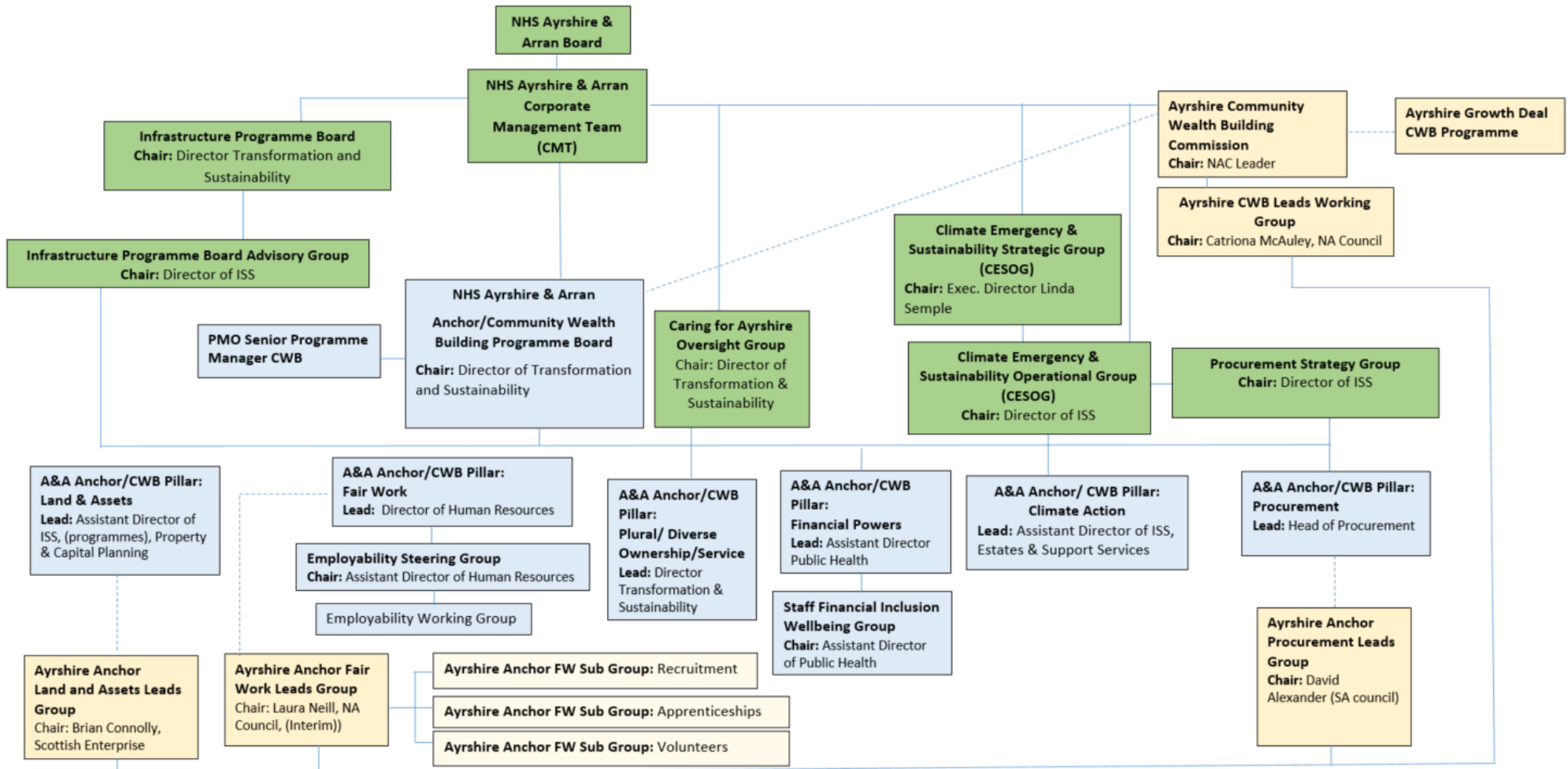
Total Requirement for people with Qualifications between 2025-2032 are:



* Total requirement for people is made up of expansion and replacement demand. Expansion demand is the measure of an increase/decrease in jobs as a result of economic growth or contraction; replacement demand is the number of job openings generated through labour market churn (i.e. those who retire, move away or change jobs). Please note, figures are rounded to the nearest 100 and as a result totals may not equal the sum of the constituent parts.

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Appendix 4: NHS Ayrshire & Arran Anchor/CWB GOVERNANCE CHART



9. Glossary of Terms

Anchor Institution – Large, locally-rooted organisations for example, local authorities, further education colleges, universities and health boards which have their headquarters based within the local community areas they serve which employ many people, spend substantial amounts of money, own and manage land and assets and deliver crucial services.

Community Wealth Building (CWB) – An internationally recognised model of economic development which tackles long standing challenges facing local, regional and national economies. CWB considers the ways in which wealth is generated, circulated and distributed providing an alternative people based approach to traditional economic development redirecting wealth back into local economies.

CEO: Chief Executive Officer

Climate Change (UN definition) - Climate change refers to long-term shifts in the earth's temperatures and weather patterns. Such shifts can be natural, due to changes in the sun's activity or large volcanic eruptions. But since the 1800s, [human activities have been the main driver of climate change](#), primarily due to the burning of fossil fuels such as coal, oil and gas.

Carbon Emissions – Carbon dioxide emissions or CO₂ emissions which stem from the burning of fossil fuels generating carbon/greenhouse gas emissions that act like a blanket wrapped around the Earth, trapping the sun's heat and raising temperatures.

Economic development: Proactive approaches to shaping economic progress. Local economic development activities in the UK (United Kingdom) are often carried out by organisations such as local authorities or local enterprise partnerships.

Economic growth: Increases in GDP over time. There is an association between GDP and health outcomes, though the relationship between them is complex.

Fair Work - work that offers all individuals effective voice, opportunity, security, fulfilment and respect.

Gross Domestic Product (GDP): The market value of goods and services produced by a country in a particular time period; often used as a major indicator of economic performance and success.

Green House Gas (GHG) (UNFCCC Definition): Any gas that absorbs infrared radiation in the atmosphere. Greenhouse gases include, but are not limited to, water vapor, carbon dioxide (CO₂), methane (CH₄), nitrous oxide (N₂O), hydrochlorofluorocarbons (HCFCs), ozone (O₃), hydrofluorocarbons (HFCs), perfluorocarbons (PFCs), and sulphur hexafluoride (SF₆). See *carbon dioxide, methane, nitrous oxide, hydrochlorofluorocarbon, ozone, hydrofluorocarbon, perfluorocarbon, sulphur hexafluoride*.

Gross value added (GVA): A regional indicator used to measure added value. GVA is not directly translatable to GDP or productivity.

Health inequalities: The difference in health outcomes across population groups, often due to differences in social, economic, environmental or commercial factors.

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Net Zero (United Nations 'High-Level Expert Group definition): a state by which the greenhouse gases (**GHG**) going into the atmosphere are reduced as close to zero as possible and any residual emissions are balanced by permanent removals from the atmosphere UN ¹¹

SRO: Senior Responsible Officer

Sustainability (UN Bruntland Commission definition) – meeting the needs of the present without compromising the ability of future generations to meet their own needs.

UNFCCC: United Nations Framework Convention on Climate Change

Wider determinants of health: The social, cultural, political, economic, commercial and environmental factors that shape the conditions in which people are born, grow, live, work and age. They may be called 'structural' or 'upstream' factors.

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