

The Health Creation Alliance

CIC34 Report: 01 Sept 2020 to 31 Aug 21

Part 1: General description of the company's activities and impact

In the space provided below, please insert a general account of the company's activities in the financial year to which the report relates including a fair and accurate description of how they have benefitted the community, or section of the community, which the company is intended to serve

The Health Creation Alliance Community Interest Statement (CIC36) states that *The company's activities will provide benefit to: Improve the health and wellbeing of the population of the United Kingdom by influencing public policy on health inequalities and providing practical guidance.*

We started to make a bigger impact than in previous years:

- Launch of four reports in April 2021 – widely disseminated and ideas noted and explored up by primary care, CCGs and ICSs across England
- Response to NHSEI consultation: 'Integrating care: next steps to building strong and effective integrated care systems across England'
- Letter to and meetings with Danny Kruger MP on civil society and 'levelling up'
- Ran several free webinars for members to learn about Health Creation in relation to topical issues and developments eg. COVID-19, primary care
- Pro bono support throughout the year to facilitate a movement for professionals and local people across North Yorkshire to develop a health creating approach across services
- Had several people to present the voice of lived experience and community leaders at a number of online events.

Health Creation is starting to be widely recognised as important by NHS, local authorities, communities, other local partners. We can take some credit for that shift.

Part 2: Consultation with stakeholders

Please indicate who the company's stakeholders are; how the stakeholders have been consulted and what action, if any, has the company taken in response to feedback from its consultations? If there has been no consultation, this should be made clear.

Our stakeholders include: our professional and lived experience members, partner organisations, sponsors, clients, professional sectors including; GPs, nurses, community pharmacy, health visitors, public health, local authorities, housing and national bodies such as NHS England and NHS Improvement, Public Health England, DHSC, Kings Fund, Health Foundation.

Ways in which we have consulted stakeholders through participation in our work include:

- Annual member meeting – Mar 21
- Regular online events attended by a range of members and others
- Three projects involving significant consultation on (1) Primary Care Networks (2) Learning from COVID-19 and (3) What works in community development
- Our IHAV (I Have a Voice) lived experience group to find out what they want to focus on

- Monthly Health Creation events in N Yorks attended by ~30 stakeholders
- Many meetings with national stakeholders

PART 3 – DIRECTORS’ REMUNERATION

If you have provided full details in your accounts you need not reproduce it here. Please clearly identify the information within the accounts and confirm that, “There were no other transactions or arrangements in connection with the remuneration of directors, or compensation for director’s loss of office, which require to be disclosed” (See example with full notes). If no remuneration was received you must state that “no remuneration was received” below.

Merron Simpson, Chief Executive: Total remuneration: £31,387

Neil McGregor-Paterson (De Facto Director): Total remuneration: £19,007

Alex McCraw, Director: Total remuneration £950

PART 4 – TRANSFERS OF ASSETS OTHER THAN FOR FULL CONSIDERATION

– Please insert full details of any transfers of assets other than for full consideration e.g. Donations to outside bodies. If this does not apply you must state that “no transfer of assets other than for full consideration has been made” below.

No transfer of assets other than for full consideration has been made.