

Nottingham City Health and Wellbeing Board
26 February 2025

Report Title:	Joint Local Health and Wellbeing Strategy for Nottingham (April 2025 – March 2028)
Lead Board Members:	Cllr Jay Hayes, Chair Lucy Hubber, Director of Public Health
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<p>Executive Summary:</p> <p>The Health and Social Care Act 2012 statutorily requires Health and Wellbeing Boards to develop and agree a Joint Local Health and Wellbeing Strategy (JLHWS) with the purpose of improving the health and wellbeing of the local community and reducing inequalities. The current JLHWS, agreed by the Board in March 2022, will expire at the end of March 2025. Significant progress has been made during the lifetime of the current JLHWS, and a final report summarising this will be shared with the Health and Wellbeing Board at the next meeting (May 2025). This report provides an overview of proposed updates to the JLHWS for the Boards approval, ahead of publication via the Health and Wellbeing Board’s website (www.healthynottingham.co.uk) in April 2025.</p> <p>In line with previous Board discussions the updated JLHWS will have six priorities, in addition to a cross-cutting commitment to addressing mental health and race health inequalities. The six priorities are;</p> <ol style="list-style-type: none"> 1) Smoking and tobacco control 2) Eating and moving for good health 3) Severe multiple disadvantage 4) Work and health 5) Best start 6) Alcohol <p>These have been identified based on a review of relevant data for Nottingham (including the Joint Strategy Needs Assessment and Public Health Outcomes Framework), relevant national and local strategies (including the refreshed Integrated Care Strategy also presented at this meeting) and have been tested with and endorsed by local stakeholders and community representatives (community champions).</p> <p>Building on the positive arrangements established over the last three years, it is suggested that delivery of the JLHWS continues to be overseen by the Place-Based Partnership for Nottingham City. It is important to note that delivery of the JLHWS is a shared responsibility and will be most effective through the combined efforts of Health and Wellbeing Board members and their respective organisations. The Place-Based Partnership is well positioned to secure and facilitate this broader input.</p>	

Recommendations: The Board is asked to:

- Approve the inclusion of six priorities within the updated JHLWS for Nottingham, to be the focus of delivery for a further three-year period (April 2025-March 2028), with the overall aim of improving healthy life expectancy and reducing health inequalities in Nottingham.
- To note the ongoing / planned work to finalise the detailed content of the updated JLHWS for Nottingham
- To delegate responsibility for agreeing the final document to the Chair of the Health and Wellbeing Board and Director of Public Health ahead of publication on the Healthy Nottingham website in April 2025.
- Seek endorsement of the updated JLHWS and commitment to supporting its delivery within members respective organisations / sectors.

The Joint Health and Wellbeing Strategy

Aims and Priorities

How the recommendations contribute to meeting the Aims and Priorities:

Aim 1: To increase healthy life expectancy in Nottingham through addressing the wider determinants of health and enabling people to make healthy decisions

Aim 2: To reduce health inequalities by having a proportionately greater focus where change is most needed

Priority 1: Smoking and Tobacco Control

Priority 2: Eating and Moving for Good Health

Priority 3: Severe Multiple Disadvantage

Priority 4: Financial Wellbeing

The updated JLHWS for Nottingham continues to be focussed on the core aims of increasing healthy life expectancy and reducing health inequalities. Whilst the gap has narrowed in recent years, Nottingham continues to have (statistically) significantly lower healthy life expectancy than the England average.

The updated JLHWS enables Health and Wellbeing Board to retain and build on the positive progress made during the lifetime of the current Strategy, whilst also introducing additional priorities where it is considered the focussed and collaborative efforts of Health and Wellbeing Board members can further drive progress towards the overall aims.

Progress reports will continue to be provided to the Board and the associated outcomes framework is being updated to reflect changes.

How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health:

As per the Health and Wellbeing Boards previous steer the updates proposed to the current Strategy relate primarily to the identified priorities. The model which underpins the Strategy, with parity of physical and mental health and wellbeing at the core, will therefore be retained within the updated JLHWS. This principle is supported by the delivery of a cross cutting mental health programme, subject to the same governance arrangements as the JLHWS priority programmes. It is recognised however, that there could be further work undertaken to ensure that this cross-cutting priority is given thorough consideration in each of the other priority programmes, and this is fully reflected in delivery plans. To this end there will be a description of the relevance and role of mental health and wellbeing to each of the JLHWS priorities included within the updated Strategy.

List of background papers relied upon in writing this report (not including published documents or confidential or exempt information)	None
Published documents referred to in this report	<p>Joint Health and Wellbeing Strategy for Nottingham 2022-2025 – www.healthynottingham.co.uk</p> <p>Statutory guidance on joint strategic needs assessment and joint health and wellbeing strategies - JSNAs and JHWS statutory guidance - GOV.UK</p>

Joint Local Health and Wellbeing Strategy for Nottingham (April 2025 – March 2028)

1. Introduction

The Health and Social Care Act 2012 requires Health and Wellbeing Boards to produce a Joint Health and Wellbeing Strategy that is relevant to the local area. The Health and Care Act 2022 renamed these documents to ‘joint local health and wellbeing strategies’, shortened to JLHWS throughout this report. Statutory guidance describes the purpose of the JLHWS as being to explain what priorities the health and wellbeing board has set in order to address the health and wellbeing needs of the local population (as informed by the Joint Strategic Needs Assessment (JNSA)).

In March 2022, Health and Wellbeing Board agreed the Joint Health and Wellbeing Strategy for Nottingham 2022-2025, identifying four priorities (smoking and tobacco control, eating and moving for good health, severe multiple disadvantage, financial wellbeing) for collective action in order to meet the overall aims of improving healthy life expectancy and reducing health inequalities.

The current strategy is due to expire at the end of March 2025 and Health and Wellbeing Board has given consideration to the updated JLHWS throughout its final year. This report details the proposed updates to the JLHWS for the next three year period, and provides the rationale for these. The Board are asked to agree to these updates (primarily in relation to future priorities) whilst the detailed content of the JLHWS is finalised. The Board are asked to delegate responsibility for agreeing the final JLHWS for Nottingham 2025-2028 to the Chair of Health and Wellbeing Board and Director of Public Health ahead of publication in April 2025.

2. Strategic context

The partnership landscape has changed during the lifetime of the current strategy, with Nottingham and Nottinghamshire's Integrated Care Strategy approved by the Integrated Care Partnership (ICP) in March 2023. In line with requirements for an annual review and refresh the ICP will be considering the revised strategy at their meeting next month (March 2025). The revised Integrated Care Strategy and the updated JLHWS (as described in this report) will reflect shared priorities to support coherent delivery for the benefit of local communities.

The Integrated Care Strategy has three foundational principles of prevention, equity and integration. The revised JLHWS will align strongly with these and will be a key delivery vehicle for driving change.

Additionally, the government have highlighted three 'shifts' in their health mission, with a stronger focus on interventions in communities rather than hospital; a move towards prevention rather than treatment; and embracing digital potential. These strategic shifts are coherent with the revised JLHWS.

3. Context (data)

Whilst there have been small improvements in recent years, people in Nottingham continue to have (on average) poorer health outcomes compared to England as a whole. With a life expectancy of 76.2 years (males) and 80.6 years (females) people in Nottingham can expect to live three years less than the average person in England.¹ With a healthy life expectancy of 57.4 years (males) and 56.8 years (females), people in Nottingham are estimated to spend 25-30% of their lives in poor or ill health. We also know that within Nottingham some groups experience poorer health outcomes than others, whether that be people living within a particular geography or people sharing a particular demographic characteristic.

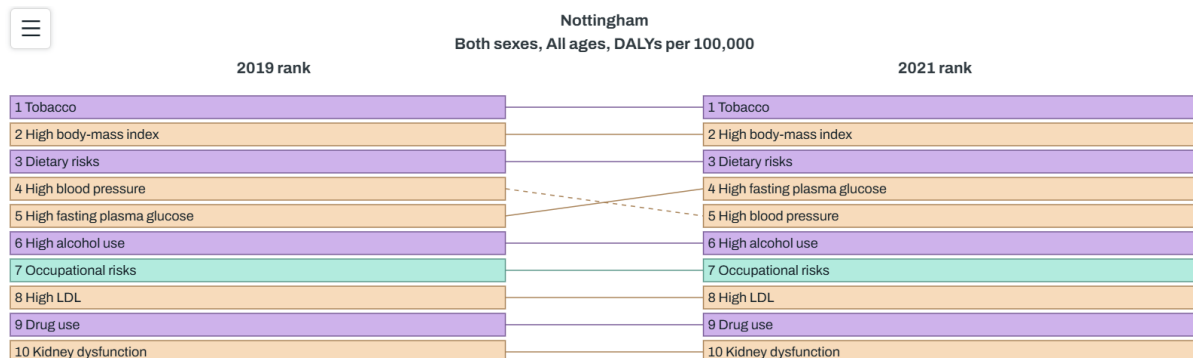
In recognition of the importance of addressing these challenges, the updated JHLWS will continue to aim to improve the health and wellbeing (healthy life expectancy) and reduce health inequalities within the population of Nottingham.

The data shows that progress is being made but the underlying risk factors (or causes of the causes) behind Nottingham's poor health outcomes are primarily the same as they were at the time of agreeing the current strategy, with no change in the

¹ Public health outcomes framework – Healthy/Life expectancy at birth – 3 year range (2021-2023)

top ten risk factors leading to death and disability as identified by Global Burden of Disease Study (noting latest available data is for 2021) ([VizHub - GBD Compare](#))

Figure 1:



A review of the Public Health Outcomes Framework shows that whilst there has been positive progress there is still some way to go to meet our stated aims;

- Just under one in five (18.2%) adults in Nottingham are current smokers (2023), this remains significantly higher than the England average of 11.6% but is a reduction from 20.9% in 2019 (the latest available data at the time of the current Strategy).
- Nearly 1 in 4 (23.7%) of reception aged children are overweight or living with obesity in Nottingham and this increases to more than 2 in 5 (42.5%) by the time they are in Year 6. Although this has reduced from a peak of 44.8% at the start of the current strategy (2021/22).
- Reductions in the proportion of adults that are overweight or living with obesity in Nottingham means that this is now similar to (not worse than) the England average, although remains concerning at 63.9%.

4. Updated JLHWS priorities

At its meeting in May 2024 Health and Wellbeing Board agreed that updates to the JLHWS should focus specifically on the included priorities, with the broader strategy (including vision, principles and approach) remaining relevant and should therefore be rolled forward into the updated JLHWS.

The first stage was to consider the case for retaining (or otherwise) the existing priorities. As evidenced in the regular updates to Health and Wellbeing Board over the last three years significant progress has been made against the current strategic priorities. Significant highlights will be recognised and celebrated in the updated JLHWS such as;

- The (re)establishment of the Nottingham and Nottinghamshire Smoking and Tobacco Control Alliance and the publication of their vision document – setting out their ambitions to see smoking amongst adults reduced to 5% or lower by 2035. The Alliance website will be launched shortly.

- Increased partnership resource to address illegal tobacco/vape sales, leading to the seizure of a high volume of products and the successful prosecution of a shop in Nottingham following illegal vape sales.
- The launch of Thriving Nottingham, an integrated wellbeing service providing smoking cessation, weight loss and physical activity programmes amongst others.
- Launch of the Achieve Well team (based within Nottingham City Council) supporting schools to better enable their pupils to eat and move for good health.
- The securing of additional national and local funding to enable the continued delivery of specialist services to individuals experiencing severed and multiple disadvantage (via the Changing Futures programme)

Whilst delivery against the agreed action plans has remained broadly on track, and relevant outcomes are starting to show positive impact, the Board previously agreed (September 2024) that the current priorities continued to be relevant, with a maintained focus required to improve health and wellbeing outcomes for Nottingham.

As such the updated JLHWS will continue to identify the following priorities:

1. Smoking and tobacco control
2. Eating and moving for good health
3. Severe multiple disadvantage
4. Work and health

The above priority programmes have shown that alignment with national priorities and funding opportunities (for example Changing Futures) is an important enabler of local delivery. It has therefore been previously proposed that the current financial wellbeing priority is reshaped as follows in recognition of the opportunities to make positive progress from a solid national and regional (EMCCA) platform.

In order to remain ambitious for the population of Nottingham, whilst balancing the agreed importance of having a small number of priorities in order to give them the focus needed to make a difference, the Board agreed to the inclusion of additional priorities in the updated JLHWS. This recognises the progress that has been made in relation to the current priorities, in terms of being set up to deliver (with structures and resources largely in place).

In line with the previously agreed approach (November 2021) consideration has been given to the following parameters whilst identifying additional priorities:

- Data and intelligence about the health and wellbeing needs of the local population
- Deliverable outcomes that will positively impact the mental and physical health and wellbeing of Nottingham's population
- A requirement for renewed focus and collaborative efforts from a wide range of partners and stakeholders in order to make the desired change
- Complementary to, but not duplicative of priority areas where there is already a clear strategy and strong partnership working in place

As a result, two additional priorities are proposed for inclusion in the updated JLHWS for Nottingham, bring the total number of priorities to six.

5. Alcohol

As shown in Figure 1 (above) alcohol use is a significant contributor to poor health outcomes in Nottingham, ranked in 6th (with all risks ranked 1-5 relating to tobacco and/or eating and moving for good health). However, the same study shows that alcohol use is in fact the biggest risk factor for disability-adjusted life years (DALYs) among 15 to 49 year olds in Nottingham. Alcohol has been identified as a causal factor in more than 60 medical conditions, including various cancers, heart disease and liver disease. It is estimated that 1,948 potential years of life are lost due to alcohol-related conditions amongst males in Nottingham (2023).² Nottingham sees significantly higher hospital admissions for alcohol-specific and alcohol-related conditions than the England average.

6. Best start

The importance of a babies' earliest days and years to their lifelong health and wellbeing is well recognised. In order to ensure sufficient focus on this critical period it is proposed for inclusion as a priority in the JLHWS. This will be complemented by the development of a separate (long-term) Best start strategy for Nottingham, with initial work to develop this already well underway. Initial engagement has identified relevant specific health outcomes including;

- Oral health – 34.2% of 5 year olds in Nottingham have experience of visually obvious dental decay in Nottingham, significantly higher than the England average of 23.7%
- Smoking during pregnancy – whilst there has been a steady decrease from a peak of 19.2% in 2015/16, 12.1% of mothers are known to be smokers at the time of delivery in Nottingham. This continues to be significantly higher than the England average of 7.4%.
- Breastfeeding – 68.7% of baby's first feed is breastmilk in Nottingham (compared to an England average of 71.9%). Breastfeeding prevalence reduced to 53.6% by 6 to 8 weeks after birth (although the recent trend is increasing/getting better).
- Speech and language – 63.6% of children in Nottingham achieve a good level of development at the end of Reception, compared to an England average of 67.7%
- Infant mortality³ – Nottingham (5.2 deaths per 1000 live births) has a higher rate than England (4.1) or the region (4.2)

Health and Wellbeing Board have previously considered the inclusion of a priority related to housing, noting the important relationship between our homes and our health. Initial scoping of this as a proposed priority has identified existing strategies (including the recent Housing Strategy) and newly establishing governance structures to facilitate a partnership approach to this complex issue. It is therefore no

² Alcohol Profile - [Alcohol Profile | Fingertips | Department of Health and Social Care](#)

³ [Child and Maternal Health - Data | Fingertips | Department of Health and Social Care](#)

longer recommended that housing is included as a priority (for programme delivery) within the updated JLHWS as it no longer meets the requirement of needing the additional collaborative focus (as alternative arrangements in place). This does not negate the importance of housing to health, and this can be recognition of this will be strengthened within the JHLWS. Consideration of the Board's ongoing role in relation to housing and the strategies/partnerships in place will be the subject of a separate discussion.

6. Producing the updated JLHWS

The updated JLHWS will have a similar format to the current strategy, with relevant but non-substantial updates made to the introductory sections (About the Health and Wellbeing Board, About Nottingham, Our vision, principles and approach).

Specific content for each of the six priorities is currently being prepared, with headings largely mirroring those in the current document. This will set out the scope, key stakeholders and high-level outcomes and delivery plans for each priority. In a change to the current strategy there will be additional sections detailing the relevance to and relationship with the cross-cutting programmes (mental health, race health inequalities). Case studies will be included to illustrate and celebrate the progress already made.

A single pdf document will be produced and published online (www.healthynottingham.co.uk) but an interactive version of the strategy shall also be hosted on the website. This has the additional benefits that changes and updates can be more easily made as required – including the addition of detailed delivery plans, progress reports and case studies. The website will also support relevant connections to support and services relating to the priorities.

7. Next Steps

As noted above the success of the JLHWS will depend on the commitment and engagement of Health and Wellbeing Board members and their respective organisations. Specific contributions to resourcing the delivery of the JLHWS (including in-kind) will be sought and agreed via the place-based partnership.

Delivery plans (including logic models) will be developed according to the requirements of the specific priority, to maximise relevant engagement and alignment with connected strategic developments and partnerships. This work will inform an updated outcomes framework to support the Boards monitoring of progress.