

HEALTH AND WELLBEING BOARD - 30th September 2015

Title of paper:	Health and Wellbeing Strategy Refresh Update	
Director(s)/ Corporate Director(s):	Alison Michalska Corporate Director for Children & Adults, Nottingham City Council. Colin Monckton, Director of Commissioning, Policy and Insight, Nottingham City Council. Alison Challenger, Interim Director of Public Health, Nottingham City Council. Dawn Smith, Chief Operating Officer, Nottingham City Clinical Commissioning Group.	Wards affected: All
Report author(s) and contact details:	James Rhodes, Strategic Insight Manager, Nottingham City Council James.rhodes@nottinghamcity.gov.uk Colin Monckton, Director of Commissioning, Policy and Insight, Nottingham City Council.	
Other colleagues who have provided input:	John Wilcox, Insight Specialist – Public Health, Nottingham City Council. Helen Hill, Research, Engagement & Consultation Manager, Nottingham City Council.	
Date of consultation with Portfolio Holder(s) (if relevant)	18 th September 2015	
Relevant Council Plan Strategic Priority:		
Cutting unemployment by a quarter		<input type="checkbox"/>
Cut crime and anti-social behaviour		<input type="checkbox"/>
Ensure more school leavers get a job, training or further education than any other City		<input type="checkbox"/>
Your neighbourhood as clean as the City Centre		<input type="checkbox"/>
Help keep your energy bills down		<input type="checkbox"/>
Good access to public transport		<input type="checkbox"/>
Nottingham has a good mix of housing		<input type="checkbox"/>
Nottingham is a good place to do business, invest and create jobs		<input type="checkbox"/>
Nottingham offers a wide range of leisure activities, parks and sporting events		<input type="checkbox"/>
Support early intervention activities		<input type="checkbox"/>
Deliver effective, value for money services to our citizens		<input type="checkbox"/>
Relevant Health and Wellbeing Strategy Priority:		
Healthy Nottingham: Preventing alcohol misuse		<input checked="" type="checkbox"/>
Integrated care: Supporting older people		<input checked="" type="checkbox"/>
Early Intervention: Improving Mental Health		<input checked="" type="checkbox"/>
Changing culture and systems: Priority Families		<input checked="" type="checkbox"/>
Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities):		
The report provides an update on the outcomes of the Health and Wellbeing Board Development Session (held 24 th Aug) and the engagement and consultation strategy.		
Recommendation(s):		
1	To note the outcome of the initial engagement with Board members on the development of the refreshed Joint Health and Wellbeing Strategy	

2	To endorse the outcomes of the Health and Wellbeing Board Development Session in regards to the development of the Joint Health and Wellbeing Strategy
3	To note the Project Plan (Appendix A)
4	To endorse the Draft Engagement and Consultation Strategy (Appendix B) and support the delivery of engagement events (in particularly the three bespoke public events)
5	To support your nominated officer in the development of the front-line workforce focus groups (request was previously sent vis email by the Chair of the HWB)
	<p>How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem'):</p> <p>One of the existing priorities in the Joint Health and Wellbeing Strategy is to intervene earlier to increase the number of citizens with good mental health. This will be achieved through actions to improve early year's experiences to prevent mental health problems in adulthood; and addressing mental health issues which are barriers to employment. This priority and actions also contribute to the city's vision for mental health and wellbeing set out in the Wellness in Mind Strategy. The focus of the new strategy will be endorsed by the Board.</p>

1. **REASONS FOR RECOMMENDATIONS**

- 1.1 The outcomes of HWB Development Session and the subsequently developed engagement strategy are being presented for endorsement in order that the development of the strategy can incrementally be progressed under the steer of the Board.

2. **BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)**

- 2.1 A proposal for developing the next strategy was agreed by the HWB at its meeting on 29th July 2015. The Board endorsed the formation of the Steering Group to oversee the process of development and approved the outline timetable which would see a refreshed strategy being endorsed by the Board in July 2016. At the last Commissioning Executive Group meeting (11th August 2015) an outcome based approach to developing the strategy was endorsed. The outcome-based approach and the summary results of engagement with Board members were presented for discussion at the HWB Development Session held 24th August 2015.

Initial Engagement with Board Members¹

- 2.2 Since the last HWB meeting 29th July, the steering group have been engaging with Board Members to collate their views on what the next strategy should include. At the HWB's June Development Session it was suggested that the strategy should focus on a small number of priorities and themes. This approach has been used as the basis to initially engage with Board members, but as highlighted below, a consensus around an alternative approach for developing the strategy has emerged based on outcomes. Nonetheless, a full summary of the engagement results are provided below.

- 2.3 To-date 17 board members have provided their views and the following common priorities and themes are starting to emerge:

- Mental Health, Smoking, Obesity, Alcohol and Older People (e.g. frail elderly and dementia) in terms of priority areas

¹ Please note: some of this information was previously circulated via email from the Chair of the HWB in order to development time could be maximised

- Prevention/ Early Intervention, Tackling Inequalities, integration and Working with Communities/ Social Capital as potential cross-cutting themes

2.4 It must be noted, however, that an emerging theme from Board members is a preference to develop the strategy based on an outcome-based approach as opposed to the deficit model. Other comments from the initial engagement with Board Members also include:

- *Alignment of CCG strategy and the Vulnerable Persons Plan with the JHWS.*
- *The JHWS should complement the CCG strategy by addressing drivers of poor health and inequalities*
- *Personal responsibility*
- *Aspirations of the strategy should be set out in a positive way*
- *The plan should be based on SMART targets/ objectives*
- *There are already a lot of other plans relating to Health and Wellbeing and we should be taking the objectives of those plans into account*
- *In particular Board members referred to the relationship and status of the Nottingham Plan and questioned if the HWB should be delivering the healthy related components of that strategy*
- *The focus of the overall strategy should be influenced by impact based on evidence of what works*
- *All citizens should be able to see themselves in the plan and where they fit in. One suggested approach would be to focus on children and young people, families, older people and vulnerable adults*
- *The Board needs to focus on what it can influence and add value to by adopting collective priorities*
- *Baseline data needs to be up-to-date and reliable to measure progress*

2.5 The consensus emerging so far is that the strategy should be developed from an outcome-based perspective with regard to objectives already set out in other relevant plans/strategies and with a focus on impact and how the Health and Wellbeing Board can add value. **It is recommended that the Board note the outcome of the initial engagement with Board members on the development of the refreshed Joint Health and Wellbeing Strategy.**

Outcome of the HWB Development Session (24th Aug 2015)²

2.6 In order to progress the development of the strategy, the findings of the engagement work with HWB members was presented back in order to confirm the consensus and so that the development of the strategy can incrementally be progressed under the steer of the Board. The following provides a summary of the outcomes and a more detailed overview of the discussions is available.

- The outcome-based approach was endorsed provided that outcomes are defined through priorities and clear SMART objectives/targets;
- Segmentation of the population into four broad groups (Children, Young People and Families; Adults of Working Age, Older People; and, Vulnerable

² Board members present/ represented: Cllr Alex Norris (HWB Chair); Alison Challenger (NCC); Helen Jones (NCC); Cllr Sally Longford, Christine Oliver (CDP); Leslie McDonald (HWB3); Dawn Smith (Nottingham City CCG); Dr Ian Trimble (HWB Vice Chair) (Nottingham City CCG); Dr Chris Packham (Notts Healthcare Trust); Simon Smith (Notts Healthcare Trust); Michael Manley (Nottinghamshire Police); Alberto Juame (Nottingham University Hospital Trust); Richard Holland (Nottingham City Homes).

Adults) is a useful approach to engagement and that the development of an engagement calendar should be shared with partners to ensure that all relevant groups and communities are sought out;

- Engagement should be broad and but the conversations would need to be framed through summary evidence;
- A draft vision statement should be adopted to help articulate the overall purpose of the HWB and HWS as this will be important when engaging with citizens. *A favoured suggested draft vision statement for the HWS was: **Nottingham will be a place where we all enjoy positive health and wellbeing*** (the 'all' emphasising the need to tackle inequalities for physical and mental health);
- A simpler vision statement was also suggested by another Board Member: **Healthier and Happier Lives**;
- The strategy should be for a 4/5 year duration in order to align with the political cycle;
- The Vulnerable Adults Plan should report to the HWB as part of its governance arrangements; and,
- Where there are common objectives/ priorities the HWS should be aligned with the Vulnerable Adults Plan and the Children and Young People's Plan.

It is recommended that the Board endorse the outcomes of the Health and Wellbeing Board Development Session in regards to the development of the Joint Health and Wellbeing Strategy

- 2.7 It is also worth noting that the first part of the development session looked at sustainable health and care. A full summary of the discussions can be found in the Board paper titled 'Sustainable Health and Care' (HWB, 30th Sep 2015) where it is recommended that sustainability be a cross cutting theme of the Health and Wellbeing Strategy.

Next Steps: The Project Plan and Engagement Strategy

- 2.8 Appendix A provides a detailed project plan based on the outcomes of the HWB Development Session. **It is recommended that the Board note the project plan.**
- 2.9 Based on the outcome of the development session, a draft Engagement and Consultation Strategy has been developed. The draft strategy is provided in Appendix B but in summary the approach is broadly divided into two phases:

Phase 1: Engagement - Opportunity for everyone to input their thoughts about health and wellbeing. The information from this phase will be analysed and fed into the development of the initial draft of the new Health & Wellbeing Strategy³

Phase 2: Consultation on the draft Health & Wellbeing Strategy

- 2.10 The engagement strategy was developed based on the outcome of a citizen focus group. The focus group was arranged in order to pilot the suggested questions. The session enabled the questions to be refined and a full summary of the session is

³ See Project Plan for a more detailed timeline

available upon request. The original questions were refined based on the views of the focus group. These questions form the basis of the engagement strategy and full session plans can be found in Appendix B.

2.11 The intention is engage with as many citizens, interest groups and front-line workers/practitioners as possible. The approaches to be adopted are outlined below:

Target Group	Methodology
Interest Groups	<ul style="list-style-type: none"> • Existing meetings and networks – depending on available time on the agenda the session will either be a focus group exercise or sign-posting to larger public events and the offer to use a toolkit for groups to run their own sessions and submit the results. • Existing events – world café/ pop up research approach • On-line survey and toolkit
Citizens	<ul style="list-style-type: none"> • 3 bespoke events across the city – focus groups • On-line survey
Workforce	<ul style="list-style-type: none"> • Focus groups made up of staff from across partner agencies and CVS

2.12 Some provisional dates have been identified for the three public events:

Venue	Provisional Dates	Time	Room capacity
Bulwell Riverside	Monday 9 November	5.15pm-7.15pm	50
Clifton Cornerstone	Tuesday 3 November	1pm-3.30pm	40
Council House Ballroom	Wednesday 4 November	4pm-7pm	100+

2.13 **It is recommended that Board Members support these events** (E.g. opening the sessions, help facilitate some of the discussions etc).

2.14 Appendix B provides a draft of the engagement strategy (including the detailed session plans for each of the three target groups and a calendar of existing meeting/events) for comment.

2.15 **It was previously requested by the Chair of the HWB that Board Members support the delivery of the front-line workforce focus groups by nominating a lead officer from within your organisation to identify a group of up to 16 people.** Someone from the City Council's Strategic Insight Team will then be available to facilitate the session. If you have not already done so, **please send the details to James.rhodes@nottinghamcity.gov.uk who will be able to help and ensure that a facilitator and note taker are available.** These focus groups will then be added to the engagement calendar. It is envisaged that the sessions would be about two hours in duration.

2.16 Finally **it is recommended that Board Members endorse the draft engagement and consultation strategy.**

2.17 The next steps will be to:

- Summary information from the JSNA created in info graphic form to inform engagement activity
- An engagement calendar of existing groups and networks will be finalised
- Liaison with CCG in order to collaborate on engagement where possible
- Implementation of engagement activities

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 A deficit approach (i.e. focusing on those areas Nottingham is performing badly) was considered but an alternative approach has emerged through the initial engagement with Board members upon which these recommendations are based.

4. FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

4.1 Not applicable at this stage.

5. LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND LEGAL CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

5. Not applicable at this stage.

6. EQUALITY IMPACT ASSESSMENT

Has the equality impact been assessed?

Not needed (report does not contain proposals or financial decisions)

No

Yes – Equality Impact Assessment attached

Due regard should be given to the equality implications identified in the EIA.

7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

None

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- Nottingham City Joint Health and Wellbeing Strategy 2013-2016
- Development of the Nottingham City Joint Health and Wellbeing Strategy 2016 to 2019 (Report to the Health and Wellbeing Board, 29th July 2015)