

# Health and Wellbeing Board

27 November 2019

## Draft Joint Health and Wellbeing Strategy

Ordinary Decision



---

### Report of Gordon Elliott, Head of Partnerships and Community Engagement, Durham County Council

#### Electoral division(s) affected:

Countywide

#### Purpose of the Report

- 1 The purpose of this report is to present the draft Joint Health and Wellbeing Strategy (JHWS) 2020-2025 for comment. The draft strategy is attached as Appendix 2.

#### Executive summary

- 2 The JHWS is a legal requirement under the Health and Social Care Act 2012, to ensure health and social care agencies work together to agree services and initiatives which should be prioritised.
- 3 The Health and Wellbeing Board has the responsibility to deliver the JHWS, which is informed by the Joint Strategic Needs Assessment (JSNA), as part of Durham Insight, which is an assessment of the current and future health, wellbeing and social care needs of residents in County Durham.
- 4 The current strategy runs until the end of 2019 and therefore a new strategy is required to meet this duty. An interim strategy will provide a holding position for a year while a strategic governance review of partnerships is undertaken, linked to the new County Durham Vision 2035 which has recently been agreed by the County Durham Partnership.
- 5 The JHWS has been aligned to the Director of Public Health Annual Report 2018, the new County Durham Vision 2035, the developing Five-Year Health and Care System Plan and the North East and North Cumbria Integrated Care System Plan.

## **Recommendation(s)**

- 6 Members of the Health and Wellbeing Board are recommended to:
  - (a) Provide comment on the draft Joint Health and Wellbeing Strategy, prior to wider consultation.
  - (b) Agree the strategic priorities and objectives.

## Background

- 7 The development of the JHWS has been aligned to the new County Durham Vision 2035, which is a document developed with partners as a shared vision for the next 15 years with the following three strategic ambitions:
  - (a) More and better jobs
  - (b) People live long and independent lives
  - (c) Connected communities
  
- 8 The JHWS will take forward aspects of the vision that are focussed on the health and wellbeing of residents of County Durham and will contribute to other areas, working in partnership with other strategic partnership boards.
  
- 9 At the Health and Wellbeing Board meeting in November 2018 the Board agreed the HWB vision and the JHWS. In addition, the Board agreed to focus on a small number of six strategic priorities for inclusion, and objectives on which to measure success.
  
- 10 Since November 2018, work has taken place through a strategy development group (comprising representatives from Durham County Council, Public Health and Culture and Leisure, Harrogate and District NHS Foundation Trust, Clinical Commissioning Groups, County Durham and Darlington Fire and Rescue Service and Area Action Partnerships) to ensure that the JHWS is fit for purpose and reflects the work being undertaken in partnership by organisations across the county.
  
- 11 A **Wellbeing Approach** has been developed for County Durham, which was informed by evidence and local conversations. The following six key wellbeing principles have been agreed, which will underpin the delivery of the JHWS and will be considered by partners when developing plans, commissioning services and delivering care:
  - (a) Working with communities to support their development and Empowerment
  - (b) Acknowledge the differing needs of communities as well as the potential of their assets
  - (c) Focus activities to support the most disadvantaged and vulnerable, helping to build their future resilience

- (d) Align our related strategies, policies and services to reduce duplication and ensure greater impact
- (e) Develop and deliver services and assets in a way that encourages co-design and co-production with the people who need services and those who provide support
- (f) Make person-centred health and care interventions available, ensuring they are empowering rather than stigmatising.

## **Joint Health and Wellbeing Strategy**

- 12 The vision for the Health and Wellbeing Board was agreed in November 2018 as ***'County Durham is a healthy place, where people live well for longer'***.

## **Health and Wellbeing Board Development Session in November 2019**

- 13 A Health and Wellbeing Board development session took place on 14 November 2019. Professor David Hunter attended to provide an overview of his research, evaluating the leadership of Health and Wellbeing Boards. Work also took place on further developing the draft JHWS and ensuring the Five-Year Health and Care System Plan, which is a requirement of the NHS Long Term Plan, is aligned to the JHWS. The System Plan is a sub-part of the JHWS, outlining those work programmes and joint areas of work which will contribute to the integration of health and social care for 2020 and beyond.

## **Strategic priorities**

- 14 At the development session there was broad agreement to look at reducing the number of priorities to ensure that as a Board we can see real outcomes.
- 15 The Board agreed that a life course approach was the preferred option for the JHWS.
- 16 It was discussed that supporting Positive Behaviours was addressed through all the priorities and that Better Quality of Life was more of an outcome.
- 17 The proposed strategic priorities are outlined below as two options:

**Option 1 – please note the draft JHWS attached is currently formatted as this option**

Proposed Strategic Priorities	Proposed High Level Objectives for Strategic Priorities
<p><b>1. <i>Improved mental health and wellbeing for everyone</i></b>            Having optimum mental health and resilience is important to people’s quality of life and the capacity to cope with life’s ups and downs. Poor mental health and wellbeing contributes to poorer outcomes across the life-course and reinforces inequalities.</p>	<p>We will have improved self-reported wellbeing.</p>
<p><b>2. <i>Every child has the best start in life</i></b>            This starts with a baby’s mother being healthy before and during pregnancy. There is a lasting impact in future years from what happens in the early years of a child’s life.</p>	<p>Over 90% of pregnant women will not smoke at the time of delivery.</p> <p>Over 90% of children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight</p>
<p><b>3. <i>Living Well and Ageing Well</i></b>            Living well in the community involves more than an integrated health and social care system. Early detection of long-term conditions, the opportunity to be involved in coproducing services and support from the community around us makes a big difference to our ability to live well.</p>	<p>We will have a smoke free environment with over 95% of our residents not smoking</p>
<p><b>4. <i>Good jobs and places to live, learn and play</i></b>            We know that a good job, poverty, the natural and built environment, the quality of housing and opportunities for active travel have a big influence on health and wellbeing.</p>	<p>We will close the gap in employment rates between those living with a long-term health condition, learning disability, or in contact with secondary mental health services and the overall employment rate</p>
<p><b>5. <i>Promoting a healthy workforce</i></b>            Helping people with health issues to obtain or retain work and be happy and productive within the workplace is a crucial part of the economic success and wellbeing of our communities</p>	<p>Number of organisations involved in Better Health at Work Award</p>

## Option 2

- 18 The Board may also wish to reduce the priorities further and not have specific priorities relating to improving the mental health of everyone and good jobs, places to live learn and play and have these as cross cutting themes through all of the Board's work.

Proposed Strategic Priorities	Proposed High Level Objectives for Strategic Priorities
<p><b>1. Start Well</b> This starts with a baby's mother being healthy before and during pregnancy. There is a lasting impact in future years from what happens in the early years of a child's life.</p>	<p>Over 90% of pregnant women will not smoke at the time of delivery.</p> <p>Over 90% of children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight</p>
<p><b>2. Live Well</b> Living well in the community involves more than an integrated health and social care system. Early detection of long-term conditions, the opportunity to be involved in coproducing services and support from the community around us makes a big difference to our ability to live well.</p>	<p>We will have a smoke free environment with over 95% of our residents not smoking</p>
<p><b>3. Age Well</b> Ageing Well includes ensuring all our communities are empowered to become dementia friendly as well as focusing on those people that are most vulnerable who are at risk of significant deterioration in their health and wellbeing, for example, the frail elderly. This priority also includes supporting people to die in the place of their choice with the care and support that they need</p>	

- 19 In addition, a number of milestones are included in the JHWS for each strategic priority to identify the changes we expect to see each year in a number of performance areas.
- 20 Work will take place with relevant performance leads as part of the strategy development group meetings to ensure that key performance indicators are identified to ensure realistic, but challenging measures are in place. The aim is to streamline the previous arrangements so there is focus for the Board on those performance issues that are the hardest to address. Regular updates will be provided to the Health and Wellbeing Board as part of its work programme.

- 21 An Equality Impact Assessment (EIA) is being undertaken alongside the development of the JHWS.

### **Strategic Governance review**

- 22 Following the agreement of the Vision 2035, a strategic governance review of the Partnerships Framework is currently taking place and will be completed by May 2020. This provides the opportunity to review how the work of the Board is taken forward to deliver the JHWS.
- 23 The Health and Wellbeing Board will be part of the strategic governance review consultation and will receive an update at the January 2020 meeting.

### **JHWS Consultation**

- 24 Work has taken place with partners and the HWB to develop the JHWS, and the draft strategy has been shared within individual partner organisations.
- 25 The following will be utilised to provide comment, prior to sign off of the final JHWS in March 2020:
- (a) Wider consultation via the Durham County Council website from **mid-December 2019 to February 2020**. In addition, consultation will take place with a number of groups and fora including the Area Action Partnerships, Better Together Forum, Armed Forces Forum, Local Councils working group, Investing in Children and the Learning Disabilities Parliament will be asked to comment. Public Health colleagues will also be instrumental in this consultation work.
  - (b) Overview and Scrutiny Committees (Adults Wellbeing and Health and Children and Young People's) in **January 2020**
  - (c) Final sign off of the JHWS will take place at the Health and Wellbeing Board meeting on **11 March 2020**.

### **Conclusion**

- 26 The development of the JHWS has been led by the Health and Wellbeing Board, supported by a multi-agency working group. The Strategy has been informed by the Joint Strategic Needs Assessment which provides the evidence base on which the priorities have been developed. The JHWS is also aligned to the County Durham Vision 2035 and will be the delivery mechanism for some of the objectives, particularly relating to living long and independent lives. Further work

will take place with the Health and Wellbeing Board and with partners to develop the Strategy prior to agreement in March 2020.

**Author:** Julie Bradbrook

**Tel:** 03000 267325

---

## **Appendix 1: Implications**

---

### **Legal Implications**

The Health and Social Care Act 2012 places clear duties on local authorities and Clinical Commissioning Groups (CCGs) to prepare a JHWS.

### **Finance**

Ongoing pressure on the public services will challenge all agencies to consider how best to ensure effective services are delivered in the most efficient way.

The demographic profile of the County in terms of both an ageing and projected increase in population will present future budget pressures to the County Council and NHS partners for the commissioning of health and social care services.

### **Consultation**

Details of consultation are provided in the report.

### **Equality and Diversity / Public Sector Equality Duty**

An EIA is being undertaken alongside the development of the JHWS

### **Climate Change**

There are no climate change implications

### **Human Rights**

There are no adverse implications

### **Crime and Disorder**

The JHWS is aligned with and contributes to the current priorities within the Safe Durham Partnership Plan which focuses on crime and disorder.

### **Staffing**

There are no staffing implications.

### **Accommodation**

There are no accommodation implications

### **Risk**

There are no risk implications

### **Procurement**

The Health and Social Care Act 2012 outlines that commissioners should take regard of the JHWS when exercising their functions in relation to the commissioning of health and social care services.

---

## **Appendix 2: Draft Joint Health and Wellbeing Strategy**

---

Attached as a separate document