1 Purpose

This paper provides a stock-take of progress against the 2016-19 Joint Health and Wellbeing Strategy; summarises the outcomes of a senior partner workshop held in March on the new strategy; and outlines the plan for the development of the new Joint Health and Wellbeing Strategy, including the Consultation Plan.

2 Recommendations

The Health and Wellbeing Board is asked to:

1. Consider the outcomes and learning from the current Health and Wellbeing Strategy to inform the Strategy refresh;
2. Note the outcomes of the Health and Wellbeing Strategy workshop held on 6 March 2019; and
3. Endorse the proposed approach to the Health and Wellbeing Strategy refresh, including the Consultation Plan and timeline.

3 Background

The Council and the Clinical Commissioning Group have a statutory duty, through the Health and Wellbeing Board, to develop a Joint Strategic Needs Assessment (JSNA) for the city and a Health and Wellbeing Strategy that translates these findings into clear outcomes the Board wants to achieve.

The core aim of the JSNA and Health and Wellbeing Strategy is to develop local, evidence-based priorities for commissioning local services which will improve the public's health and reduce inequalities. The outcomes of this work will help to determine what actions the Council, the local NHS and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing.

The current Health and Wellbeing Strategy covers the period 2016-19. Work is underway to produce a revised Strategy for approval and publication in autumn 2019.
4. Coventry Health and Wellbeing Strategy 2016-19

The existing Health and Wellbeing Strategy 2016-19 identified three priorities:

- Working together as a Marmot City: reducing health and wellbeing inequalities
- Improving the health and wellbeing of individuals with multiple complex needs; and
- Developing an integrated health and care system that provides the right help and support to enable people to live their lives well

Both the Marmot and Multiple Complex Needs programmes are being evaluated formally and comprehensively. However, it is important to capture impact and learning to inform the refreshed Health and Wellbeing Strategy and so a light touch stocktake of key outcomes and learning from the current Strategy has been undertaken. This is included as appendix 1 to this report, and is summarised below.

4.1 Key outcomes

- **Marmot City**

  The Marmot Steering Group monitors the impact of a range of partnership projects related to the two key priorities of improving resilience in young people and encouraging good growth in the city. This includes employer support for good quality jobs through the Chamber of Commerce and Workforce Wellbeing Charter and a range of youth programmes and support for families. Poverty has been added as a third priority, kick-started by a Poverty Summit in November 2012

- **Multiple Complex Needs**

  The Multiple Complex Needs (MCN) Board was established to oversee activity to improve coordination of services to meet the needs of individuals with multiple complex needs. This included piloting new approaches and helping to bring about systems change.

  Key outcomes include:
  - Funding for the Housing First pilot, capitalising on the MCN partnerships and approach
  - Steps for Change successful multi-agency advice & information shop in city centre
  - Experts by Experience group, creating opportunities for co-production
  - Commitment to Making Every Adult Matter approach until 2022 (help to design and deliver better coordinated services for people with MCN)
  - Evaluation framework to understand outcomes of programme

- **Integrated health and care**

  Integration of health and care has continued to evolve at pace in a context of a policy shift towards even closer collaboration through Integrated Care Systems. Coventry and Warwickshire Place Forum (the joint Health and Wellbeing boards) is now well established and delivering a Year of Wellbeing in 2019 to upscale prevention across health and care system. A refreshed Health and Wellbeing Concordat and Health and Care System Model have been agreed and will form the basis of a strategic framework for the Integrated Care System. Progress of the Better Health Better Care Better Value plan is reported regularly to the Health and Wellbeing Board.

4.2 Lessons learnt

Key learning from the current Strategy to inform the refresh includes:
Inclusion of priorities has raised their profile and galvanised commitment around addressing health inequalities and supporting individuals with multiple complex needs.

Partnerships have been brought together to address the priorities and the benefits of stronger partnership working have been realised.

There remains a need for more active engagement of wider partners, and this is needed at an early stage in Strategy development.

A lack of dedicated resource to support the Strategy priorities has restricted impact in some areas.

Opportunities have been lost as a result of the three priorities being implemented and monitored separately, so that links and synergies have not been identified and exploited.

There was no overarching performance framework to monitor progress of the Strategy and there is a need to find more tangible ways of measuring and demonstrating impact.

5. Health and Wellbeing Strategy Refresh

5.1 Health and Wellbeing Strategy workshop, 6 March 2019

A workshop for senior leaders from across the system was held on 6 March, facilitated by the King's Fund. This was an early opportunity to engage senior partners in shaping the new Health and Wellbeing Strategy. The purpose was to test the King's Fund's population health model (https://www.kingsfund.org.uk/publications/vision-population-health) as a framework for reviewing current activity and developing the Strategy, and hear from senior leaders about their ideas for future health and wellbeing priorities. Around 50 people attended, including Health and Wellbeing Board members, overview and scrutiny committee members, Public Health Consultants, and strategic leaders both from within the Council and the wider public, private and voluntary and community sector.

Table discussions were structured around the King's Fund population health model (below), with each table focusing on a 'pillar' from the model and discussing strengths and challenges for the system and the contributions between this and other pillars.

![Diagram of population health system](https://www.kingsfund.org.uk/publications/vision-population-health)

Taken from A vision for population health: Towards a healthier future, The King's Fund, November 2018.
By structuring the conversations around these pillars, attention was drawn to the importance of each of these elements in improving health outcomes and reducing health inequalities, and towards what needs to happen to ensure a more balanced approach that distributes effort across all four pillars and makes the connections between them.

Key themes and messages arising from the workshop were:

- There are already strong partnerships to build on in the city.
- The new Strategy should form part of the Year of Wellbeing legacy and reflect the opportunities arising from the UK City of Culture 2021 programme, which falls within the timeframe of the new Strategy.
- The system needs to facilitate community leadership – through investment in communities and having a flexible offer that empowers and enables community leadership, but also by engaging in more meaningful dialogue with communities.
- Outcomes and impact – we need to build an evidence base, especially around stronger communities and wider determinants, and develop capacity to research, evaluate, demonstrate and grow good practice and draw on learning from elsewhere.
- Communication – the power of personal stories in demonstrating impact and building trust in services, and the need for more effective messaging about self-care, and potential digital opportunities around signposting.
- Interconnectedness ("job, house, friend") – wider determinants and where I live / my community impact on lifestyle choices / healthy behaviours. We need to recognise the contribution of all services and consider the health and wellbeing impact of all policies.
- Concern about gaps in services – and people falling through gaps – and a need to be more joined up and strategic.
- Facilities – issues around access to services and availability of facilities locally; opportunities to bring community assets (eg. schools) into use.
- Focus on prevention – need to take bold decisions to move resources upstream.

There was a strong view that as a system there needs to be a clear focus on two or three priorities where we could make a difference by channelling resource and energy over the next few years, and a number of potential priorities were proposed. At the same time there was recognition that there are some key enablers (such as empowering community leaders or building stronger partnerships around wider determinants) where investment and change is also needed.

5.2 Timeline and proposed approach

The Health and Wellbeing Strategy refresh will be informed by evidence from the JSNA, the senior partner workshop and the learning from the current Strategy. This evidence will be triangulated by a core officer steering group.

A smaller prioritisation event has been arranged for the end of April for officers from partner organisations to review the evidence and emerging themes and agree the framework and priorities for the refreshed Strategy for public consultation. This event is likely to explore both identification of a small number of specific priority areas for action, and the potential to take these forward within the broad framework of the King’s Fund population health model.
5.3 Consultation Plan

It is intended that the consultation and engagement process for the refreshed Strategy will be an extension of the JSNA engagement activity. As agreed by the Board in January, public consultation is planned, including opportunities for online and face-to-face consultation with stakeholders, as well as engagement with overview and scrutiny.

The purpose of the consultation is to test both the approach the proposed priorities, build consensus and galvanise energy and resource around the Strategy. As well as sense checking the priorities, the consultation is also an opportunity to bring partners and communities on board and identify capacity and opportunities to help make a difference to identified needs.

The consultation plan is attached at appendix 2 for endorsement by the Board.

6. Next steps

It is now intended to bring a final draft of the Strategy to the Board in June / July for consideration and endorsement, enabling further development of plans for implementation over the summer and the approval and publication of the final Strategy in the autumn. This will be agreed by the Health and Wellbeing Board before going to the Council’s Cabinet and Coventry and Rugby CCG’s Governing Board for approval and adoption.

The next steps in the development of the Strategy are summarised in the table below.

<table>
<thead>
<tr>
<th>When</th>
<th>Action</th>
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</thead>
<tbody>
<tr>
<td>April 2019</td>
<td>Triangulation of data</td>
</tr>
<tr>
<td>29 April 2019 2-5pm</td>
<td>Prioritisation workshop</td>
</tr>
<tr>
<td>May – June 2019</td>
<td>Consultation on draft priorities</td>
</tr>
<tr>
<td>June / July 2019</td>
<td>Draft Health and Wellbeing Strategy considered by Health and Wellbeing Board</td>
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<tr>
<td>October 2019</td>
<td>Final Health and Wellbeing Strategy approved and published</td>
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Appendices

Appendix 1: Coventry Health and Wellbeing Strategy 2016-2019, Stocktake of progress March 2019
Appendix 2: Coventry Health and Wellbeing Strategy 2019, Consultation Plan