What is our Health and Wellbeing Strategy?

“Our Health and Wellbeing Strategy is a plan for reducing health inequalities and improving health and wellbeing for our residents. Together with other local health and care partners we want to use the strategy to guide a range of local services.

“We rely on all of our partners to play a part in improving the quality of life for all our residents. That’s why our strategy will also look for more opportunities to work together, share resources and build upon examples of good work across all of our organisations.”

Cllr Kamran Caan, Cabinet Member, Chair of the Coventry Health and Wellbeing Board

What’s in place now?

Coventry has been tackling health inequalities as a Marmot City since 2013. This is one of the priorities in the current Health and Wellbeing Strategy 2016-19, which is helping create more integrated services across different agencies. This includes agencies that in the past may not have regarded themselves as providing health and wellbeing services and has led to better outcomes.

In the strategy for future years this will be expanded upon.

Expanding our work - The case for change

For the past six months we have been talking to over 200 residents and 70 community organisations to understand the key issues facing local communities.

Coventry has a growing, changing and increasingly diverse population and particularly the expected growth of over-65s means there is a need to focus on preventative health amongst the working age population now to help manage future demand on health and care services. Population growth is concentrated in certain parts of the city, so place based service planning will need to be considered.

Overall health in the city is below the national average, with residents living in more deprived parts of the city not only living shorter lives but also spending a greater proportion of their lives in poor health. Males living in some parts of the city can expect to live up to 10 years longer; and for females, the gap is eight years. The difference is linked to a number of inequalities related to deprivation.

Premature mortality is also higher than average in the city.

There are avoidable differences in health outcomes, particularly around issues such as alcohol use, obesity / physical activity, Tuberculosis and sexual health.

Significant pockets of deprivation limit people’s opportunities to succeed in life. 19% of Coventry neighbourhoods are amongst the 10% most deprived nationally. By the age of five, fewer children achieve a good level of development (68%) than nationally (72%) or in similar places.

Fear of crime also impacts on residents’ health and wellbeing. Most notably nearly a third of young people feel unsafe in the city, with only 16% of the city’s young people saying they feel very safe or safe in the city in 2018.

Reducing the high levels of homelessness, particularly amongst young people and families, is a key priority in Coventry.

We know that social inequalities and life chances are already established from the early years of life and that educational achievement; economic prosperity; good quality housing; and community safety all impact on health and wellbeing.
How to tackle this?

Community organisations we spoke to said that communities are best placed to address health challenges. This is because they have networks, understand issues on the ground and are trusted advocates of residents.

However, their resources are limited and capacity is stretched so the public sector must enable community organisations to take a more leadership style role, by joining forces and building capacity.

More information about the findings from our Joint Strategic Needs Assessment (JSNA) can be found at www.coventry.gov.uk/jsna/.

What do we want to achieve over the next four years?

1. People will be healthy and independent for longer
2. Children and young people will lead successful lives
3. People will live in connected, safe and sustainable communities

How we will do this - Our population health framework

There is consensus nationally that to reduce health inequalities and improve health outcomes, we need a population health approach.

We are proposing a population health framework for Coventry which will underpin everything we do as a health and wellbeing system to achieve change. Taken from a model developed by the King’s Fund (a national health and care think tank), this is based on four components that impact on people’s health and wellbeing. For us in Coventry this means:

- **Wider determinants** – embedding the Marmot City approach by working in partnership to tackle health inequalities through addressing the social determinants of health
- **Our health behaviours and lifestyles** – aligning and coordinating prevention programmes across the system to maximise impact and tackle barriers to healthy lifestyle choices
- **The places and communities we live in and with** – working together in our places and with our communities to mobilise solutions, informed by our understanding of local needs and assets from our place-based JSNAs
- **An integrated health and care system** – health and social care commissioners and providers working together to commission and deliver services in Coventry

We will make sure that all of our plans and activities consider each of these components and – most importantly – the connections between them. We recognise that we have particular work to do around ‘the places and communities we live in, and with’ – by fundamentally changing the way we work with communities and we plan to include a specific priority in our Health and Wellbeing Strategy to reflect this.

We will require that every item brought to the Health and Wellbeing Board can be clearly mapped onto our population health framework.

We anticipate that using this framework will help us to improve outcomes for everyone, and will lead to a particular focus on health inequalities and tackling the causes of these.
Making it real

We want to focus on three priorities where we can make a tangible difference in the short-term by working together in partnership. We will use these to bring our population health framework to life – they will be our test bed for learning how to do things differently and change the culture of how we work.

The potential priorities are below and we want to hear from you about which you think we should focus on:

- Loneliness and social isolation
- Screening and immunisation uptake
- Young people and violence and exploitation
- Young people’s mental health
- Giving every child the best start in life
- Temporary housing and homelessness
- Health impact of air quality
- Access to urgent care

For each priority we will develop a detailed action plan, with clear performance measures, and we will monitor and report progress against the plans to the Health and Wellbeing Board.

We propose to evaluate the impact made and review these priorities after 18 months to two years.

Our ways of working will include the principles of:

- prioritising prevention;
- listening and strengthening communities;
- co-ordinating services;
- and sharing responsibility by pooling resources, budgets and accountabilities where it will improve services for the public.

The Coventry Health and Wellbeing Board brings together senior leaders from Coventry City Council, West Midlands Police, West Midlands Fire Service, voluntary sector organisations, Coventry and Rugby Clinical Commissioning Group, acute and community NHS trusts, and local universities.

How to have your say

We would like to hear from partner organisations, community groups and frontline staff involved in delivering health and care services and working in the city to improve health and wellbeing, as well as individual residents with an interest in how the Strategy affects you and your communities. Please visit our website to complete the survey by 3 June 2019: www.coventry.gov.uk/hwbstrategy

To request a paper copy of the survey or for further information, please contact:
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