

Cabinet

29<sup>th</sup> October 2019

**Name of Cabinet Member:**

Cabinet Member for Public Health and Sport - Councillor K Caan

**Director Approving Submission of the report:**

Deputy Chief Executive (People)

**Ward(s) affected:**

All

**Title:**

Coventry Health and Well-being Strategy

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**Is this a key decision?**

Yes - the proposals are likely to have a significant impact on residents or businesses in two or more electoral wards in the City.

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**Executive Summary:**

The Council and the Clinical Commissioning Group have a statutory duty, through the Health and Wellbeing Board, to develop a Health and Wellbeing Strategy that sets out how they will address the health and well-being needs of local residents, as identified in the Joint Strategic Needs Assessment (JSNA).

The Health and Well-being Strategy provides Coventry with a picture of what the Health and Wellbeing Board will deliver over the next three years and how partners will work together to achieve this. The Health and Wellbeing Strategy sets out three strategic ambitions, which are:

- People are healthier and independent for longer
- Children and young people fulfil their potential
- People live in connected, safe and sustainable communities

The full document is attached as Appendix 1 to the report.

**Recommendations:**

The Cabinet is requested to:

- 1) Approve the Coventry Health and Well-being Strategy

**List of Appendices included:**

Appendix 1: Coventry Health and Well-being Strategy 2019 – 2023  
Appendix 2: Results of consultation  
Appendix 3: ECA

**Background papers:**

None

**Other useful documents**

JSNA 2019 Citywide Profile

[https://www.coventry.gov.uk/downloads/file/29999/coventry\\_joint\\_strategic\\_needs\\_assessment\\_2019](https://www.coventry.gov.uk/downloads/file/29999/coventry_joint_strategic_needs_assessment_2019)

**Has it been or will it be considered by Scrutiny?**

No – However, the draft Health and Well-being Strategy was considered by the Health and Social Care Scrutiny Board (5) at its meeting on 19<sup>th</sup> June 2019 and feedback from the Board was used to develop the Strategy further.

**Has it been or will it be considered by any other Council Committee, Advisory Panel or other body?**

No – Although this report has not been considered elsewhere, the matter was considered by the Coventry Health and Wellbeing Board at its meeting on 14<sup>th</sup> October 2019.

**Will this report go to Council?**

No

## **Report title: Coventry Health & Well-being Strategy**

### **1. Context (or background)**

- 1.1. The Council and the Clinical Commissioning Group have a statutory duty, through the Health and Wellbeing Board (the Board), to develop a Health and Wellbeing Strategy that sets out how they will address the health and well-being needs of local residents, as identified in the Joint Strategic Needs Assessment (JSNA).
- 1.2. The aim of the Health and Wellbeing Strategy is to develop a set of shared, 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 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, and a new Strategy for 2019-23 has been developed for approval and adoption.

### **2. Options considered and recommended proposal**

#### **2.1. Developing the Draft Coventry Health and Well-being Strategy 2019 – 2023**

- 2.1.1. At its meeting on 8 April 2019, the Board endorsed the proposed approach to developing the new Health and Wellbeing Strategy and agreed to use the population health model as developed by the [Kings Fund](#). The revised Strategy has been developed based on the evidence from the JSNA and consultation and engagement with partners, stakeholders and the public. As part of the engagement on the revised Strategy, a prioritisation event was held for Health and Well-being Board members, Councillors from Health and Social Care Scrutiny Board and officers from partner organisations to review the evidence and emerging themes. This meeting agreed the proposed framework and priorities for the refreshed Strategy for public consultation.
- 2.1.2. The public consultation and engagement process for the refreshed Strategy was an extension of the JSNA engagement activity. Through the JSNA engagement process we have talked to over 200 residents and 70 community organisations to understand the key issues facing local communities and identify community assets.
- 2.1.3. The consultation on the Strategy proposals was in part an opportunity to go back to those we had engaged with previously and test with them our understanding of the needs and assets in the city and start to work together to mobilise solutions. It was also an opportunity to test our proposed approach and priorities more widely and begin to galvanise energy and resource around the Strategy. The public consultation period ran from 10 May to 3 June 2019. The communications and engagement process included opportunities for online and face-to-face consultation with stakeholders.

#### **2.2. Strategic Ambitions, Population Health Framework and Short Term Priorities**

- 2.2.1. The draft Health and Well-being Strategy sets out three strategic ambitions aimed at improving the health and wellbeing of our residents which together encompass our long-term vision for change in Coventry. The three strategic ambitions are:
  - People are healthier and independent for longer
  - Children and young people fulfil their potential
  - People live in connected, safe and sustainable communities

2.2.2. As part of the development of the Strategy, the Board has adopted a population health approach to addressing the issues affecting local residents. Our population health framework will underpin everything we do – for us in Coventry this means taking action on:

- **the wider determinants of health** – embedding the Marmot City approach by working in partnership across different services and organisations to tackle health inequalities through addressing the social determinants of health such as income and wealth, education, housing, transport, environment and leisure; to break the link between poverty and poor health
- **Our health behaviours and lifestyles** – aligning and coordinating prevention programmes across the system to maximise impact and tackle barriers to healthy lifestyle, including around mental wellbeing, diet, exercise, smoking and drugs and alcohol
- **The places and communities we live in and with** – working together in our places and with our communities to mobilise solutions for improved health and wellbeing, 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 in a joined-up way to commission and deliver seamless local services in Coventry

2.2.3. As part of the JSNA and consultation process, we identified a number of **short term priorities**, where we want to make a tangible difference in the next 12-18 months by working together in partnership. Our short term priorities are:

- Loneliness and social isolation
- Young people's mental health and well-being
- Working differently with our communities

## 2.3. Mobilising the Strategy

2.3.1. Since the last meeting of the Board in July, work has been undertaken to mobilise the Strategy and in particular to progress the short term priorities identified. A short progress update is provided for each priority area below:

2.3.1.1. **Loneliness and social isolation** – Board champions have been identified to lead this work. Councillor M Mutton and Pete Fahy (Director of Adult Services) will work with Sue Frossell (Consultant Public Health) and Clare Wightman (Grapevine) as an executive group to take this work forward.

It is envisaged that this will build on the work that has already been undertaken through the Improved Better Care Fund Prevention proof of concept projects, that were discussed at the Board in July 2019. We are proposing to use the learning from the proof of concept areas to grow the capability at individual and community level in different parts of the city. We will aim to strengthen support networks within communities so that individuals are stronger, self-sufficient and those who are vulnerable to ill health or health inequalities are better supported to develop resilience and reduce the reliance on public services.

2.3.1.2. **Young people's mental health and well-being** – Councillor Seaman, John Gregg (Director of Children's Services) and Liz Gaulton (Director of Public Health & Wellbeing) will act as Board champions for this priority. We will use an evidence based approach and work with partners, stakeholders and young people and their families to co-design a comprehensive approach incorporating early intervention across all partners, working together to target resources in a more coordinated way, whilst developing a collective and system wide understanding of children and young people at risk.

2.3.1.3. **Working differently with communities** – The One Coventry Partnership (formerly the People Partnership) met on the 12th September and agreed to develop a ‘network of networks’ approach as a means of supporting the public sector to connect effectively with voluntary and community sector organisations in the city and collaborate on issues of common interest. An event will be held on the 3rd October to co-design a mechanism for working the voluntary and community sector.

### **3. Results of consultation undertaken**

- 3.1. The consultation and engagement process for the refreshed Strategy was an extension of the JSNA engagement activity over the previous 6 months. Through the JSNA engagement we had talked to over 200 residents and 70 community organisations to understand the key issues facing local communities and identify community assets.
- 3.2. The consultation on the Strategy proposals was in part an opportunity to go back to those we had engaged with previously and test with them our understanding of the needs and assets in the city and start to work together to mobilise solutions. It was also an opportunity to test our proposed approach and priorities more widely and begin to galvanise energy and resource around the Strategy.
- 3.3. The public consultation period ran from 10 May to 3 June 2019 and was widely promoted. In total we received over 130 survey responses from both individuals and groups / organisations – including 77 members of the public – and engaged with around 40 individuals at community and staff events, many of whom were also representing groups and organisations. The proposals were also considered by a number of formal partner boards.
- 3.4. The consultation feedback demonstrated broad support for each of the 3 proposed strategic ambitions. There were some common views about some of the terminology used – for example, the terms ‘successful’ and ‘sustainable’ were felt to be too ambiguous, and ‘independent’ could imply lack of support.
- 3.5. There was also support for the proposed population health framework, with 88% of those responding to the survey agreeing that we need to change the way we work together as set out in the proposed framework. 90% of survey respondents agreed that public sector organisations should work differently with communities.
- 3.6. The majority who responded thought the proposals would have a positive impact on people who share protected characteristics, by ‘providing an opportunity to engage populations that are normally hard to engage with’.
- 3.7. Participants in both the survey and community events were asked to identify 3 initial priorities that partners should focus on in the short-term. From the options presented, two priorities stood out as having greatest resonance across the consultation responses: Young People’s Mental Health & Loneliness and Social Isolation. There was a strong view that many of the proposed priorities impacted on each other, and that these two areas of focus would have the potential to impact positively on some of the other areas suggested.
- 3.8. Some of the key themes and messages emerging from the consultation included:
  - Communication: demand for better communication between public sector and communities and more accessible information about available support and activities

- Networks: there is a need for networks to facilitate connections between small community and voluntary sector groups and organisations and a forum for engagement between the third sector and public sector leads.
- Making it happen: a challenge to demonstrate how the Strategy will be delivered and impact measure.

3.9. A full report on the outcomes of the consultation is attached at appendix 2. The feedback received has informed the draft Strategy that is now being presented to the Board. There will be opportunity to reflect further on the detailed feedback and specific suggestions and ideas as the implementation and action plans are further developed

#### **4. Timetable for implementing this decision**

4.1. Following its approval, an action plan for each of the three short term priorities will be developed.

#### **5. Comments from Director of Finance and Corporate Services**

##### **5.1. Financial implications**

There are no direct financial implications to the Council regarding the Coventry Health and Well-Being Strategy. The strategy commits the City Council and the other partners to deliver against its priorities within existing resources.

##### **5.2. Legal implications**

The Health and Well-being Board was set up by the Health and Social Care Act 2012 and from April 2013, “the members of the health and wellbeing board have been required to develop a joint health and wellbeing strategy for their area. This joint strategy should support health and wellbeing board members to take the important step from assessing needs and available assets to planning the delivery of integrated local services based upon those needs and assets, and collectively addressing the underlying determinants of health and wellbeing” from the Joint Strategic Needs Assessment and joint health and wellbeing strategies explained – commissioning for populations guidance published by the Department of Health in 2011.

#### **6. Other implications**

Any other specific implications

##### **6.1. How will this contribute to the Council Plan ([www.coventry.gov.uk/councilplan/](http://www.coventry.gov.uk/councilplan/))?**

The Health and Well-Being Strategy will support the delivery of key objectives through making a positive contribution to the health and wellbeing of residents in the city. It contributes to the Council plan objectives through:

- Improving the quality of life for Coventry people
- Improving health and wellbeing
- Reducing health inequalities
- Protecting our most vulnerable people
- Delivering our priorities with fewer resources through making the most of our assets and empowering our citizens

**6.2. How is risk being managed?**

The Health and Well-Being Strategy will be accompanied by action plans against each priority which seek to ensure that progress is made and the risks associated with each area of activity are managed.

**6.3. What is the impact on the organisation?**

The Health and Well-being Strategy will have wide reaching positive impacts on the residents of Coventry – improving health and wellbeing, supporting children and young people and creating safe and sustainable communities. This will reduce reliance on other Council services and have public health benefits.

**6.4. Equality and Consultation Analysis (ECA)**

Part 1 of the Equality and Consultation Analysis has been completed and is attached at appendix 3.

In summary, part 1 concluded that the approach outlined in the consultation proposals was expected to have a positive equalities impact and lead to a much better understanding of the needs of people with protected characteristics. A population health approach means we will be concerned to improve outcomes for everyone, and will lead to a particular focus on health inequalities and tackling the causes of these. A renewed focus on working with our communities to mobilise solutions will cause us to talk to, and work more closely with, representative groups and organisations.

**6.5. Implications for (or impact on) climate change and the environment**

None

**6.6. Implications for partner organisations?**

The Health and Wellbeing Board has membership across a range of partners, including Coventry City Council, Coventry University, the University of Warwick, Voluntary Action Coventry, West Midlands Fire Service, West Midlands Police, Coventry and Rugby Clinical Commissioning Group, University Hospital Coventry and Warwickshire NHS Trust, Coventry and Warwickshire Partnership NHS Trust and Healthwatch Coventry. The Strategy commits these organisations to deliver against the identified priorities.

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Liz Gaulton	Director of Public Health	People	7 <sup>th</sup> October 2019	7 <sup>th</sup> October 2019
Councillor K Caan	Cabinet Member for Public Health & Sport	-	8 <sup>th</sup> October 2019	8 <sup>th</sup> October 2019

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