

REPORT OF THE CHAIR OF THE NOTTINGHAMSHIRE HEALTH AND WELLBEING BOARD JOINT HEALTH AND WELLBEING STRATEGY FOR NOTTINGHAMSHIRE

Purpose of the Report

1. To seek approval for the Joint Health and Wellbeing Strategy for Nottinghamshire 2018-2022.
2. To request support for the development and implementation of a communications and engagement plan to support the delivery of the Strategy

Information and Advice

3. Health and Wellbeing Boards were introduced as a statutory committee of all upper tier local authorities under the Health and Social Care Act 2012 and became fully effective on 1st April 2013. The Board has a statutory responsibility to prepare a Joint Strategic Needs Assessment (JSNA) which identified the current and future health needs of the local population. The Board must use the JSNA to inform a Joint Health and Wellbeing Strategy to address the health needs identified. The Strategy is the main way in which the Board executes its other statutory responsibilities to:
 - Improve the health and wellbeing of the people in their area
 - Reduce health inequalities
 - Promote the integration of services & closer working
4. The statutory duties of the Health and Wellbeing Board are aligned to the statutory duties of the Council, which were also as a result of the Health and Social Care Act. From April 2013, this Council became responsible for improving the health of their local population. This responsibility is reflected in the Council Plan 'Our Nottinghamshire, Our Future 2017-2021'. Whilst this is explicit in ambition 6 'People are healthier', the reality is that there could be significant health gain if all of the ambitions were taken forward in a way that sought to improve health and reduce health inequalities as all ambitions involve the social and economic determinants of health. According to the Health Foundation these social and economic factors explain approximately ninety percent of the population's health.
5. Nottinghamshire's first Health and Wellbeing Strategy covered the period 2014 -17. So a refresh is now due. The consultation for the refresh was launched by the Health and Wellbeing Board at its meeting on 6 September 2017 and ran until 29 October 2017. The consultation focussed on:
 - A vision
 - An approach
 - 4 strategic ambitions
 - To give children and young people a good start in life
 - To have healthy and sustainable places

- To enable healthier decision making
 - Working together to improve health and care services
6. The online consultation attracted 306 responses from individuals and a range of organisations including service providers from across the county. In addition seven events were held, one per district which were hosted by the Chair of the Health and Wellbeing Board.
 7. This Strategy builds on the first Health and Wellbeing Strategy for Nottinghamshire and the lessons learnt during its implementation. Therefore its focus is on partnership actions that only the Board could deliver, rather than on actions that any individual organisation might do on their own. It was also prepared in the context of a number of national and local policy documents, published during the lifetime of the first Strategy, in particular Delivering the NHS Five Year Forward View which required the preparation and implementation of Sustainability and Transformation Plans, Health in all Policies: a manual for local government, the Marmot report Fair Society, Healthy Lives and most recently Nottinghamshire County Council's Strategic plan: 'Your Nottinghamshire, Your Future'.
 8. Overall (online and through events) there was support for the proposals made within the consultation document. The Health and Wellbeing Board considered the feedback at a workshop on 1 November 2017. While the feedback broadly supported the proposals there were suggestions for improvement which members considered before agreeing a final Strategy.
 9. The final Strategy has now been considered at the December Health and Wellbeing Board meeting and is recommended to the Policy Committee for approval. The full Strategy is at **Annex 1**. A delivery plan to secure implementation will be developed by the Board during 2018 and will include clear actions, outcomes, measures and governance to deliver each of the ambitions.
 10. During the consultation there were numerous requests for improved communication and engagement between the Board and wider partners. A communications and engagement plan will be developed to support the implementation of the Strategy with an initial launch across local media and social media with a view to ongoing communications as the delivery plan is agreed. This will give an opportunity to highlight different aspects of the Strategy as a delivery plan is developed, inviting collaboration with partners and highlighting the added value of the Board's involvement.

Other Options Considered

11. Feedback from the Strategy consultation has been considered during the development of the final Strategy document.

Reason/s for Recommendation/s

12. The Joint Health and Wellbeing Strategy is a statutory responsibility of the Health and Wellbeing Board and will enable delivery of its responsibilities to encourage integration, closer working with partners and to reduce health inequalities.

Statutory and Policy Implications

13. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

14. There are no financial implications arising from the Strategy. It will be delivered through existing resources across the Board partners.

Implications for Sustainability and the Environment

15. The Strategic Ambition to Create Healthy and Sustainable Places will include a priority to increase physical activity and active transport which will support improvements to air quality and the environment.

RECOMMENDATIONS

- 1) That the Committee approves the Joint Health and Wellbeing Strategy for Nottinghamshire 2018 – 2022.
- 2) That the Committee supports the development and implementation of a communications and engagement plan to support the realisation of the Strategy.

Councillor John Doddy

Chair

Nottinghamshire Health and Wellbeing Board

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Constitutional Comments (LMC 27.11.2017)

16. The Policy Committee is the appropriate body to consider the content of the report

Financial Comments (DG 27.11.2017))

17. The financial implications are contained within paragraph 14 of this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Refresh Of the Nottinghamshire Joint Health and Wellbeing Strategy](#)

Report to Nottinghamshire Health and Wellbeing Board 6 September 2017

[Second Nottinghamshire Joint Health Wellbeing Strategy](#)

Report to Nottinghamshire Health and Wellbeing Board 6 December 2017

[Nottinghamshire Joint Strategic Needs Assessment \(JSNA\)](#)

[Delivering the NHS Five Year Forward View](#)

NHS England

[Health in all Policies: a manual for local government,](#)

Local Government Association

[Fair Society, Healthy Lives](#)

The Marmot Review

[‘Your Nottinghamshire, Your Future’.](#)

Nottinghamshire County Council Strategic Plan 2017-2021

Electoral Division(s) and Member(s) Affected

- All

Annex 1.



Nottinghamshire Health and Wellbeing Board

Joint Health and Wellbeing Strategy 2018 – 2022

1. Introduction

Welcome to our second Joint Health and Wellbeing Strategy for Nottinghamshire. Our thanks goes to everyone who has helped with its development. This new strategy, builds on our first and our successes so far, like breast feeding, housing, spatial planning and tobacco control.

In preparing this Strategy we are aware of our legal duties as a Board which are to

- Improve the health and wellbeing of the people of Nottinghamshire
- Reduce health inequalities
- Promote the integration of services
- Produce a Joint Strategic Needs Assessment (JSNA), identifying current and future health needs
- Develop a Strategy which addresses the health needs identified in the JSNA

The JSNA for Nottinghamshire has been in progress since 2007 and is constantly being updated, improved and extended. It provides us with the evidence base for our Strategy and enables us to make informed decisions.

There is a huge amount of work already underway across Nottinghamshire to improve health and wellbeing and supports the delivery of our shared vision. So when it comes to our strategy we want to focus on those issues which need a partnership approach rather than those which can and should be taken forward by individual organisations within the County

We have a well-established Stakeholder Network to involve our wider partners in our work and we look forward to improving these relationships.

We look forward to working with you to deliver our vision which is,

Working together to enable the people of Nottinghamshire, from the youngest to the oldest, to live happier and healthier lives in their communities, particularly where the need is greatest.

Thank you for your help and support in delivering this Joint Health and Wellbeing Strategy. We look forward to continuing our work with you, our partners, to improve the health and wellbeing of the people of Nottinghamshire.

Councillor Dr John Doddy
Chair of Nottinghamshire Health and Wellbeing Board

2. Who are 'we'?

The Health and Wellbeing Board is a statutory committee (as a result of the Health and Social Care Act 2012) of Nottinghamshire County Council, and was established in shadow form in 2011 and took on its full responsibilities from 2013.

The Act sets out the requirements for membership of the Board which includes county councillors, the Directors of Adult Social Care, Children's services and Public Health, along with representatives of the local Clinical Commissioning Groups and the local Healthwatch. In Nottinghamshire the Board also includes representatives from the local District councils, the Police and Crime Commissioner and NHS England.

Nottinghamshire Board members recognise that health and wellbeing is everyone's business and so whilst not members of the Board, partners like the fire and rescue service, police, service users and providers, carers, the public and wide range of the community and voluntary sector organisations across Nottinghamshire all have a crucial part to play in making our vision a reality.

As we start to implement our Strategy we will review our Board membership along with our working arrangements to ensure we are confident in our ability to deliver our vision.

3. How we will work

Building on the first Health and Wellbeing Strategy we are keen to set out not just what we want to achieve but how we want to work to deliver our vision and ambitions.

As the Nottinghamshire Health and Wellbeing Board we will:

- Focus on things that need a shared approach.
- Focus on prevention – helping people and communities to support each other and prevent problems from arising.
- Consider everyone when we make decisions, recognising that starting young has the biggest impact.
- Make sure that health and wellbeing fairness according to need will be at the centre of all public policy making by influencing other agendas such as housing, the economy, education, the environment, planning and transport.
- Build on the strengths of our local communities and enable local solutions.
- Base our decisions on evidence and learn from what has or has not worked.
- Work together with our partners such as voluntary and community organisations, service providers' patients/service users, carers and family members equally in planning, delivering and reviewing projects and services.
- Coordinate health and wellbeing in Nottinghamshire and keep people informed.
- Use our influence to make sure that improving health and wellbeing is everyone's responsibility.

4. What is health and wellbeing?

We have adopted the World Health Organisation's definition of health which is: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

We know that as little as 10% of someone's health and wellbeing is linked to health care – it's our environment, jobs, food, transport, houses, education and our friends, families and local communities which affect our health and wellbeing most. These are the things that we can influence most to improve the health and wellbeing of people in Nottinghamshire.

5. Our ambitions

In order to make our vision a reality, we have identified four ambitions, which are:

- To give everyone a **good start in life**
- To have **healthy and sustainable places**
- To enable **healthier decision making**
- To **work together to improve health and care services**

1. A good start in life

We want to improve the life chances of all of the children of Nottinghamshire. There is overwhelming evidence that making healthier decisions early, from pregnancy, can influence someone's health throughout their life. During the consultation we suggested potential priorities that the Board might focus on to achieve a good start in life:

- Child poverty
- Keeping children and young people safe
- Making sure that children and young people are happy and healthy

The consultation included some draft proposals for these priorities which will be developed into a delivery plan during 2018. This plan will include specific actions, anticipated outcomes, timescales and measures to track success.

2. Healthy and sustainable places

We want to create places which maximise the health benefits for those people who live or work in those places. We know that our strength is in tackling the wider issues which affect health and wellbeing like housing, our environment, the food we eat, skills and education, transport and our friends, families and local communities. These are the issues we believe we can have the biggest impact on:

- Food environment
- Physical activity
- Tobacco
- Mental wellbeing including dementia
- How we plan where we live – spatial planning
- Warmer and safer homes
- Stronger and resilient communities
- Skills, jobs and employment
- Domestic and sexual abuse
- Compassionate communities supporting those at the end of life
- Substance misuse (drugs and alcohol)

- ASD/Asperger's
- Carers
- Sexual health

We appreciate that these are huge issues and that they cannot be solved by a single action so we will be working to identify specifically what we can do as a partnership to help to address these issues and deliver the maximum impact. A delivery plan for each priority will be developed and shared on the [Health and Wellbeing Strategy web page](#).

3. Healthier decision making

We want to make sure that we influence decisions where there is the potential to impact on improving health and reducing health inequalities. We want all of the Board partners to think about the impact that every strategic decision might have on health.

We will be working to implement the guidance in [Health in all policies: a manual for local government](#) and to extend the approach across the partnership. We know that the challenges to health and wellbeing are complex and that no one organisation or even one sector has the knowledge, skills or resources to address them.

This approach starts with the policy issue rather than the health problem e.g. transport rather than obesity and encourages policy makers to think about what the impact of the policy would be on health and wellbeing. This would include all policies, for instance licensing, transport, waste management, and employment to name but a few.

4. Working together to improve health and care services

In December 2015, the NHS shared planning guidance 'Delivering the Forward View: NHS Shared Planning Guidance 2016/17 – 2020/21' outlined a new approach to help ensure that health and care services are built around the needs of local populations. To do this, every health and care system in England has produced a multi-year Sustainability and Transformation Plan (STP), showing how local services will evolve and become sustainable over the next five years – ultimately delivering the Five Year Forward View vision of better health, better patient care and improved NHS efficiency. These plans have become Sustainability and Transformation Partnerships and are developing into Accountable Care Systems and are the main vehicles which are driving integration. The Board will oversee, challenge and support these and other change programmes. The residents of Nottinghamshire relate to 2 STPs

- Nottingham and Nottinghamshire
- South Yorkshire and Bassetlaw.

The Better Care Fund (BCF) incentivises service integration. It creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their wellbeing as the focus of health and care services, and shifting resources accordingly.

6. Monitoring and Managing our Progress

Governance

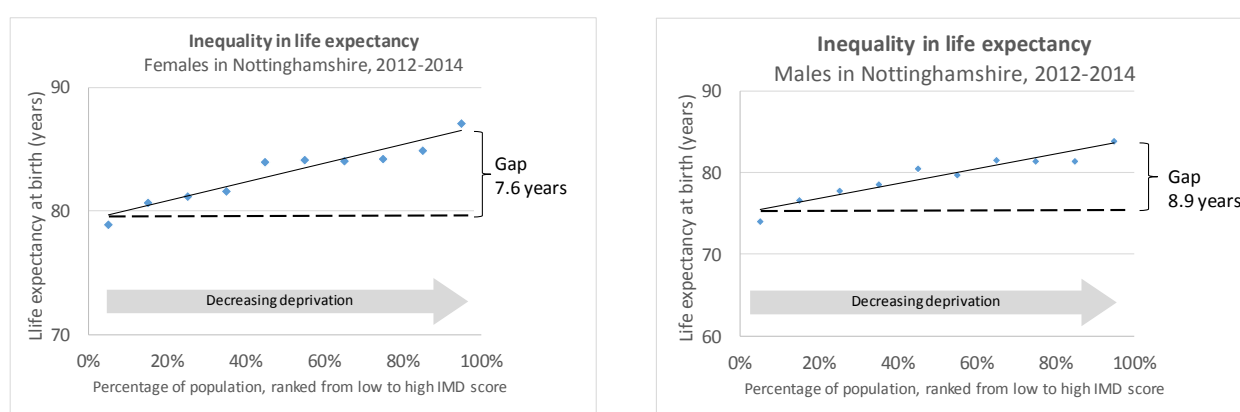
A work programme for the Health and Wellbeing Board during 2018 will be developed which will identify specific actions, outcomes and measures. From this we will agree a reporting schedule which will be shared across our partners so we can clearly identify what impact our efforts have had.

Monitoring Progress

Life expectancy and healthy life expectancy are headline indicators. However as they mask inequalities seen at smaller units of geography we will measure our progress through the use of the Slope Index of Inequality (SII). This measures the difference in life expectancy (or healthy life expectancy) between the most and least deprived sections of our population.

There has been no significant change in the Life Expectancy Slope Index of Inequality for males and females. Recent data from 2012-14 shows that there is an 8.9 year gap for males between the least and most deprived areas within Nottinghamshire, the gap is 7.6 years for females and can be seen in Figure 1.

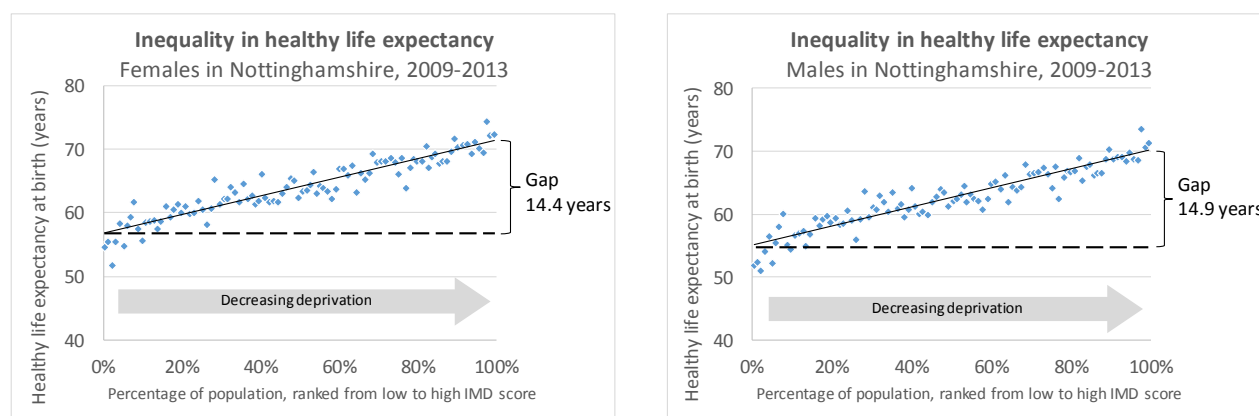
Figure 1: SII in Life Expectancy for Nottinghamshire 2012-14 female and male



Source: PHE Public Health Outcomes Framework Fingertips Tool, Life expectancy at birth by sex and inequalities IMD2015

Note: this measure is based on Lower Layer Super Output Area (LSOA) populations, grouped into deprivation deciles, and uses pooled data for 3 years. Points are for each decile in Nottinghamshire.

Figure 2: SII in Healthy Life Expectancy for Nottinghamshire 2009-13 female and male



Source: ONS (2015), [“Slope index of inequality \(SII\) in healthy life expectancy \(HLE\) at birth by sex for Upper Tier Local Authorities \(UTLAs\) in England”](#), last accessed November 2017.

Note: this measure is based on Middle Layer Super Output Area (MSOA) populations and uses pooled data for 5 years.

Healthy Life Expectancy data only became available in 2009 and is shown in Figure 2. However for the most recent time period available 2009-13 we know that there is a 14.9 year gap for males between the least and most deprived areas within Nottinghamshire, the gap is 14.4 years for females. This shows us that Healthy Life Expectancy exposes greater inequality than life expectancy.

7. Useful links

[Nottinghamshire Health and Wellbeing Board](http://www.nottinghamshire.gov.uk/care/health-and-wellbeing/health-and-wellbeing-board)

<http://www.nottinghamshire.gov.uk/care/health-and-wellbeing/health-and-wellbeing-board>

[Nottinghamshire Health and Wellbeing Board Stakeholder Network](http://www.nottinghamshire.gov.uk/care/health-and-wellbeing/health-and-wellbeing-board/stakeholder-network-events)

<http://www.nottinghamshire.gov.uk/care/health-and-wellbeing/health-and-wellbeing-board/stakeholder-network-events>

[Nottinghamshire Joint Strategic Needs Assessment](http://www.nottinghamshireinsight.org.uk/research-areas/jsna/)

<http://www.nottinghamshireinsight.org.uk/research-areas/jsna/>

[Healthwatch Nottinghamshire](http://healthwatchnottinghamshire.co.uk/)

<http://healthwatchnottinghamshire.co.uk/>

[Health in All Policies](https://www.local.gov.uk/health-all-policies-manual-local-government)

<https://www.local.gov.uk/health-all-policies-manual-local-government>

[Nottingham and Notts Sustainability and Transformation Partnership](http://www.stpnotts.org.uk/)

<http://www.stpnotts.org.uk/>

[South Yorkshire and Bassetlaw Sustainability Plan](https://smybndccgs.nhs.uk/what-we-do/stp)

<https://smybndccgs.nhs.uk/what-we-do/stp>

[NHS Five Year Forward View](https://www.england.nhs.uk/five-year-forward-view/)

<https://www.england.nhs.uk/five-year-forward-view/>

8. Glossary

A **Lower Layer Super Output Area (LSOA)** is a geographic area designed to improve the reporting of small area statistics in England and Wales with an average population of around 1500 people.

A **Middle Layer Super Output Area (MSOA)** is a geographic area built from groups of neighbouring Lower Layer Super Output Areas with an average of around 7200 people.

Life expectancy is an estimate of how many years a person is expected to live.

Healthy Life expectancy is an estimate of how many years someone might live in a healthy state, free from disability or major health conditions.