

06 December 2017**Agenda Item: 6****REPORT OF CHAIR NOTTINGHAMSHIRE HEALTH AND WELLBEING
BOARD****SECOND NOTTINGHAMSHIRE JOINT HEALTH AND WELLBEING
STRATEGY****Purpose of the Report**

1. To secure support for the second Nottinghamshire Joint Health and Wellbeing Strategy and recommend it to the County Council's Policy Committee for approval.
2. To agree to the publicise alongside the Strategy, the report which summarises the consultation findings and the changes taken in response.

Information and Advice

3. The consultation for the second Nottinghamshire Joint Health and Wellbeing Strategy was launched by the Health and Wellbeing Board at the meeting on 6 September 2017. It ran until 29 October 2017. The consultation focussed on proposals for a Strategy based on:
 - A vision
 - An approach
 - 4 strategic ambitions
 - Priorities for action

The online consultation attracted 306 responses from individuals and a range of organisations including service providers from across the county. The online consultation was supported by seven events held in each district, hosted by the Chair of the Health and Wellbeing Board. Overall (online and through events) there was support for the proposals made within the consultation document.

3. The Board considered the feedback at a workshop on 1st November and after consideration, agreed some refinements to the draft consulted on. The final Nottinghamshire Joint Health and Wellbeing Strategy 2018 – 2022 is included as Annex 1 and reflects those refinements.
4. Based on the feedback received the Board has amended its **vision** to:

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

5. This consultation included an approach, a new element of the Strategy, which sets out how the Board intends to work to deliver its vision. The approach was supported during the consultation but was also amended to reflect the feedback received:

As the Nottinghamshire Health and Wellbeing Board we will:

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

6. To deliver the Vision the Board agreed four Strategic Ambitions which will be:

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

7. To deliver the ambitions a good start and healthy & sustainable places a number of priorities were proposed. These are:

A good start	Healthy & sustainable places
Child poverty	Food environment
Keep children & young people safe	Physical activity
Making sure that children & young people are happy & healthy	Tobacco
	Mental wellbeing including dementia
	How we plan where we live – spatial planning
	Warmer & safer homes
	Stronger & resilient communities
	Skills, jobs and employment
	Domestic and sexual abuse
	Compassionate communities supporting those at the end of life
	Substance misuse (drugs & alcohol)
	ASD/Asperger's
	Carers

8. A summary of the consultation feedback and the Boards responses are attached as Annex 2.

Next steps

9. As a formal committee of Nottinghamshire County Council the Joint Health and Wellbeing Strategy must be approved by the Councils Policy Committee. Subject to endorsement by the Health and Wellbeing Strategy it will be presented to Policy Committee on 20 December 2017 for implementation from 2018.
10. Approval will also be sought through Policy Committee for a formal launch of the Strategy in January 2018 to raise the profile of the Health and Wellbeing Board and the Joint Strategy with partners.
11. The ambitions and priorities are high level and although the consultation document included some outline actions and measures a formal delivery plan for each of the priorities will need to be agreed. So, for each area of work the Board will receive a paper making explicit what the Board is being asked to support the associated measures, timescales and population outcomes. With the Boards agreement this will be developed into a delivery plan which will be shared with partners and be made available through the Health and Wellbeing Boards web page. The first of these papers will be presented in January 2018.
12. Governance will also be reviewed as part of implementation and a further workshop is proposed instead of a formal Board meeting on 7 February 2018. This will give the Board an opportunity to consider that the governance arrangements will enable delivery of the Strategy and will include Board membership, supporting structures and relationships with other key bodies.

Other Options Considered

13. The Board has considered at a workshop the feedback submitted as part of the consultation in developing the proposed Strategy.

Reason for Recommendation

15. The Board has a statutory duty to produce a Health and Wellbeing Strategy in response to local health and wellbeing needs. This Strategy has been developed based on the Joint Strategic Needs Assessment (JSNA) findings, the views of the Health and Wellbeing Board members and its partners.

Statutory and Policy Implications

16. 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

17. There are no financial implications arising from the recommendations within this report.

Impact on Health Inequalities

18. Reducing health inequalities is a statutory responsibility of the Health and Wellbeing Board. The proposed Joint Health and Wellbeing Strategy will support the delivery of this objective.

RECOMMENDATIONS

- 1) Health and Wellbeing Board members support the second Nottinghamshire Joint Health and Wellbeing Strategy and recommend it to the Policy Committee for approval
- 2) To agree to the publication alongside the Strategy of the report which summarises the consultation findings and the changes taken in response.

Councillor Dr John Duddy

Chair of Nottinghamshire Health and Wellbeing Board

For any enquiries about this report please contact:

Nicola Lane
Public Health and Commissioning Manager
0115 977 2130
nicola.lane@nottscg.gov.uk

Constitutional Comments (LMC 27.11.2017)

1. The Health and Well Being Board is the appropriate body to consider the content of the report and that members consider whether there are any actions required in relation to the issues contained within the report

Financial Comments (DG 27/11/17)

2. The financial implications are contained within paragraph 17 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

Paper to Health and Wellbeing Board
6 September 2017

Electoral Division(s) and Member(s) Affected

- 'All' or start list here

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 a the local Health watch. 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 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 our 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

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

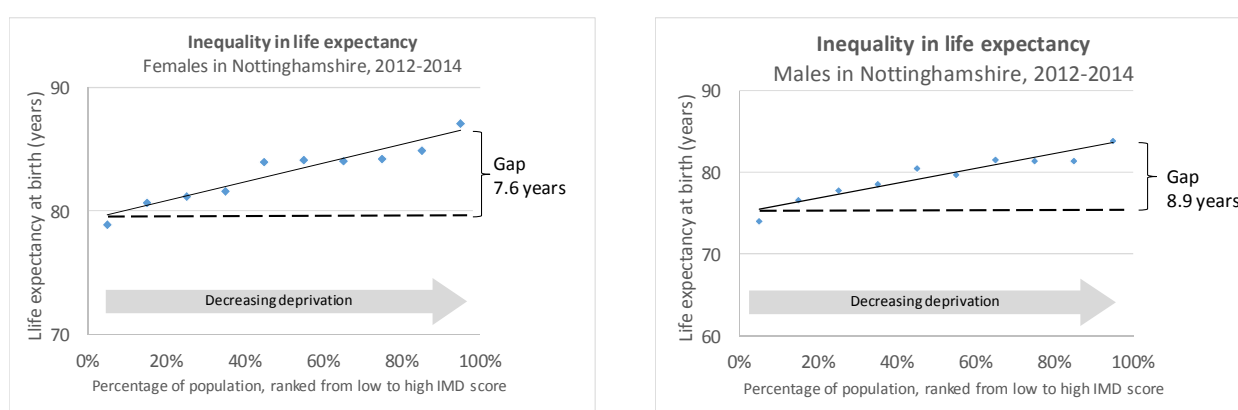
A work programme for the Health and Wellbeing Board during 2018 will be developed which will identify specific actions, outcomes and measures. From this we will agree a reporting schedule which will be shared across our partners so we can clearly identify what the impact our efforts.

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 SII 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.

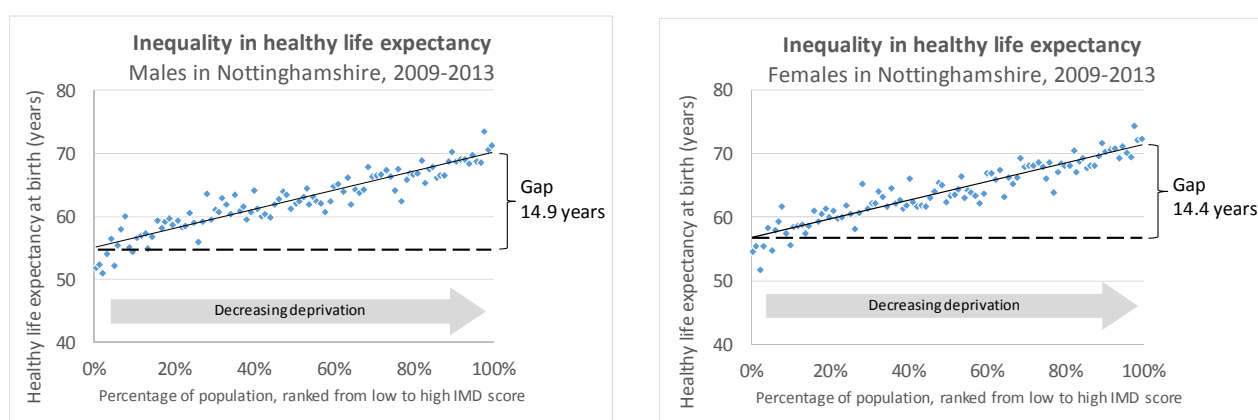
Figure 1: SII in Life Expectancy for Nottinghamshire 2012-14 female and male



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.

Annex 2.

Nottinghamshire Health and Wellbeing Board

Report on feedback from consultation for the second Joint Health and Wellbeing Strategy

The consultation for the second Nottinghamshire Joint Health & Wellbeing Strategy was launched by the Health & Wellbeing Board at their meeting on 6 September 2017 & ran until 29 October 2017.

The consultation aimed to invite views from members of the professionals from service providers & voluntary sector organisations, members of the public & wider partners.

The focus of the consultation was an online survey accessed through the Nottinghamshire County Council consultation hub. It was supported by a series of 7 district based events across the county. Feedback was also accepted by email & hard copy of the consultation questionnaire.

In total 306 responses were received through the online questionnaire, email & hard copy and 128 people attended the consultation events representing 50 organisations. Some individuals & organisations attended an event as well as submitting on line feedback. A list of organisations who contributed to the consultation is attached.

The consultation events followed a standard agenda with an introductory presentation from the Chair of the Health & Wellbeing Board followed by table discussions based on the consultation questions around proposed:

Vision - what the HWB want to achieve

Approach - how the HWB will work

Ambitions – broad themes for work

Priorities - specific areas of work to improve health & wellbeing

A presentation & supporting notes were also made available on the Health & Wellbeing Strategy web page for groups to use at meetings or other events.

What the consultation said

Question 1: Do you agree with the overall Vision?

	Percentage	Number
Strongly agree	31%	86
Agree	52%	145
Neither agree or disagree	10%	28
Disagree	3%	9
Strongly disagree	3%	7
Did not answer	1%	4

More than 80% of people who responded to the online survey agreed or strongly agreed with the proposed vision. All of those people who came to the events also agreed but there were suggestions to improve the wording which were considered by the Health & Wellbeing Board at a workshop on 1 November 2017. The feedback particularly highlighted the

importance of leading healthier lives, the role of communities & the importance of good mental & physical health.

Question 2: Do you agree we are taking the right approach?

	Percentage	Number
Strongly agree	20%	55
Agree	58%	162
Neither agree or disagree	14%	40
Disagree	5%	13
Strongly disagree	3%	7
Did not answer	1%	2

Again more than 80% of people who responded to the online consultation agreed or strongly agreed with the approach. All of the discussions at the events supported the proposed approach. Again though there were suggestions for improvement, particularly in the language that is used to describe the proposed approach.

Feedback particularly highlighted the role of community & voluntary organisations, the role of the Board in communication & coordination across the county & the importance of developing locally appropriate solutions.

Question 3: Do you support the 4 strategic ambitions?

	Percentage	Number
Strongly agree	24%	68
Agree	55%	154
Neither agree or disagree	11%	32
Disagree	4%	12
Strongly disagree	3%	8
Did not answer	2%	5

79% of people agreed or strongly agreed with the ambitions proposed in the consultation and again there was support at all of the consultation events.

Much of the feedback within the responses to the question around the ambitions actually related to the more detailed priorities which will sit below the priorities & were the focus of question 4.

There were a number of comments around the wording of ambition 4 – transforming care services which is already a recognised programme of work within the NHS.

Question 4: We have started to identify potential priorities for action for the Health & Wellbeing Board under the Strategic Ambitions 2. Healthy & sustainable places and 3. A good start
Do you think that these are the right emerging priorities to support these strategic ambitions?

	Percentage	Number
Strongly agree	16%	46
Agree	55%	153
Neither agree or disagree	18%	50
Disagree	6%	16
Strongly disagree	3%	7
Did not answer	3%	7

From the online consultation responses, 71% agreed or strongly agreed with the priorities proposed for the Good Start & Healthy & Sustainable Places ambitions. Feedback from all of the events supported the ambitions.

Throughout all of the feedback there are suggestions to limit the number of priorities but no suggestions about which priorities could be excluded.

Children & young people were a strong theme throughout the responses & event discussions, particularly parenting, the role of education, mental health & raising the aspirations of young people were all highlighted.

There was broad support for tackling obesity through the food environment & physical activity. Dementia & housing were consistently highlighted as a particular concern through the responses online & at the events.

There was recognition during the consultation events that many of the priorities identified overlapped.

A number of suggestions were made for additional priorities but on review these are already covered within the proposed priorities & the local Sustainability & Transformation Partnership Plans.

Online responses

Question 4: Which type of organisation are you responding on behalf of?

	Percentage	Number
Public sector organisation in Nottinghamshire	16%	46
Private sector	6%	16
Third sector or not for profit organisation	9%	26
As a county or district councillor	4%	10
On behalf of a local community group	6%	18
None of the above	58%	161
Did not answer	5%	13

The majority of the responses on the online questionnaire are from individuals representing their personal views.

Question 5: Do you have any responsibility for a particular part of the County?

	Percentage	Number
Ashfield	10%	28
Bassetlaw	13%	35
Broxtowe	9%	24
Gedling	10%	28
Mansfield	11%	32
Newark & Sherwood	11%	31
Rushcliffe	11%	32
Outside of Nottinghamshire	6%	16
Did not answer	61%	171

Question 6: Are you a member of the Health & Wellbeing Board?

	Percentage	Number
Yes	14%	40
No	82%	229
Did not answer	4%	10

From these responses 82 people have provided contact details to join the Stakeholder Network.

Other comments

Governance arrangements were highlighted, particularly during the consultation events. The Board has agreed to consider governance arrangements at a workshop in the new year including membership of the Board, supporting structures & relationships with other key groups. This meeting will also consider the relationship with the Nottingham City Health & Wellbeing Board.

The Health & Wellbeing Board considered the feedback from the consultation at a workshop on 1 November 2017. A summary of their response to the feedback is given below in table 1.

Table 1: Main points from the consultation feedback, the Health & Wellbeing Boards views & proposed action

You said	The HWB	We did
VISION		
We support your vision but think it needs to encourage healthier lives. <i>'Take out the part about living longer – not much help if we're in poor health I suggest the vision should be to live healthier longer etc.'</i>	Agreed – living healthier lives is really important & is key to our focus on preventing ill health & problems.	Change the vision to reflect that – the vision has been amended to include healthier lives.
Should we identify those people who need help most or should we apply the Strategy equally? <i>'Prioritising delivery – resources allocation in areas of greatest health inequality would be helpful Not sure I like the final clause regarding communities with the poorest health as it could be viewed as negative I wonder if 'especially in communities with the poorest health' should be replaced with in all communities?'</i>	We have a legal duty to reduce health inequalities & we are determined to do that in Nottinghamshire. We know that we can only do that by focussing on those people who most need support.	We have changed the language to identify areas of greatest need.
The vision needs equal recognition of physical & mental health. <i>'Physical & mental health go hand in hand. Attention need to be paid to BOTH in order to be well.'</i>	We agree. During the consultation events we heard suggestions that including 'happier' would make that connection within the vision.	We have changed the vision to include an aspiration for people to have happier, healthier lives & will maintain our interest in physical & mental health.
APPROACH		
The approach is good but it could be clearer. <i>'You need to use plain speaking' 'Language is unclear' 'Could be plain englished'</i>	We would like our Strategy to be clear, understood & accessible to everyone in Nottinghamshire.	We have reworded the approach to make the language more accessible.

<p>A community led approach is really important. <i>'I think that this approach could enable and empower individuals and communities to take ownership of their own wellbeing and some interest in that of their community. Give the community & voluntary sector a greater role. Needs to be bottom up not top down'</i></p>	<p>We agree – this is a key part of our approach. We want to enable communities to be responsible for their own health & wellbeing & will work with partners to achieve this.</p>	<p>While the Strategy will be across the whole of Nottinghamshire we will be working with partners to implement locally driven plans to deliver our vision.</p>
<p>The voluntary & community sector is a key partner in delivering the Strategy. <i>'ITS VITAL THAT YOU ENGAGE WITH THE VOLUNTARY SECTOR. How do smaller VCS organisations get their voice heard? Improve communication.'</i></p>	<p>We agree. We have always recognised the importance of voluntary & community organisations in improving health & wellbeing. We have tried to engage with them, & all of our partners through the stakeholder network but we will review this as part of a wider governance review during the implementation of the new Strategy.</p>	<p>A governance workshop will be held early in 2018 to consider the best way to involve & collaborate with our partners in delivering the Strategy & in improving health & wellbeing.</p>
<p>The Board needs to be the focus for health & wellbeing in Nottinghamshire. <i>'Partners may not be aware of what others areas are doing Stronger links to health services improved communication and joint working is evidentially needed.'</i></p>	<p>We agree. Our role is to provide leadership across the county & to provide the coordination required to deliver our vision & Strategy. We want this to be reflected in our approach & seen throughout the lifetime of the Strategy.</p>	<p>We have extended our approach to include coordination & will consider how we will deliver this during implementation.</p>

AMBITIONS		
Transforming care services is already an established work programme elsewhere.	This ambitions is essential for us to deliver our legal duty to enable integration & support closer working. We want all of our ambitions to be clear & identifiable for Nottinghamshire we will change how this ambition is described.	Ambition 4 will be described as 'working together to improve health & care services'.
The overall ambitions are good but we need to know how they will deliver the vision. <i>'I do not think that your objectives are SMART. Is EACH objective 1 Specific 2 Measurable 3 Achievable 4 Realistic and 5 Timebound Need more greater understanding of the process you intend.'</i>	The Strategy sets our high level vision & ambitions. We now want to work on a more specific delivery plans which include SMART objectives.	A work programme is being developed for the Board, based on agenda items at each meeting to introduce priority areas & agree specific objectives & actions. The work programme will be available through the Health & Wellbeing Board web page, as will the delivery plans as they are agreed.
<i>'How are young people involved?'</i>	We recognise the importance of a good start in life. We have included schools & the youth service in the consultation & will continue to involve young people in the development & implementation of the new Strategy in the same way as we have done previously.	Children & young people are represented at the Board through the director for children, young people & families. We will work on how we can make sure that they are included as we develop our implementation & delivery plan.
The ambitions are wide ranging. Will this be too much or should the Board have a narrower focus? <i>'Too broad under current circumstances with reduce finances. Would prefer to see a more focussed ambition that is realistic to this area.'</i>	We agree that our ambitions are broad but they give us a framework to deliver our vision & specifically meet our legal duties. We will focus on the priorities we agree below that though so we can focus on where we can add value.	The 4 ambitions will be included in the final Strategy. We will work to identify specific priorities & actions to deliver them.

PRIORITIES		
<p>Education & lifelong learning is important to improving health & wellbeing. <i>'Education is intrinsic to health & wellbeing. Need to address importance of education and skills linked to jobs and work.</i> <i>Links with education and the important role schools play in child health needs to be reflected in the strategy.'</i></p>	<p>This was a strong theme during the consultation & we agree about its importance. This would support a number of priorities around jobs, skills & work, child poverty & mental health.</p>	<p>We would like to look at how we can support education & skills development in Nottinghamshire during our implementation & while we develop our delivery plan.</p>
<p>There are a lot of priorities how can you effectively manage so many things? <i>'Loads of priorities to work on, probably too many at once, group them so they are easier to work on and consider which will have biggest impact.</i> <i>To make a real difference you need fewer, more focussed and measureable aims.'</i></p>	<p>We acknowledge that there are a lot of potential priorities. The responses to the consultation didn't identify any that we should leave out. While we have a long list of things we would like to deliver we will concentrate on specific things that only we can do & which will result in clear benefits.</p>	<p>The delivery plan will identify specific actions which are unique to the Board but which are realistic to achieve.</p>
<p><i>'Not enough information about how you intend to approach these strategies'</i></p>	<p>The Strategy sets out our overall vision & ambitions we are now looking forward to developing a more detailed delivery plan for each of the ambitions during 2018.</p>	<p>We will make sure our delivery plan is shared across partners & wherever possible involve others in developing delivery plans.</p>
<p>Working together is key to the success of the Strategy. <i>'Working with fellow authorities and organisations to get the best bang for the buck.'</i></p>	<p>This is exactly how we intend to approach the delivery of the Strategy. We want to identify the areas where we can work together to have the maximum effect.</p>	<p>The delivery plans which will be developed during 2018 will identify areas where the Board can add the most value by working together.</p>
<p>We have not been satisfied with our experience of services in Nottinghamshire & we want to see that improved. <i>'Need more health visitors.</i> <i>The strategy should have focus on access to services where required & how support can be obtained.</i></p>	<p>We recognise that there are areas for improvement in services. As a Board we this is not within our remit but we will make sure that any issues raised in the consultation feedback are passed on to those organisations responsible.</p>	<p>Service related issues raised within the consultation responses will be passed on to commissioners & service providers for review.</p>

<p><i>What are you going to do about staffing problems & waiting lists?</i></p> <p><i>You need more nurses & better cleaning.'</i></p>		
<p>Family support & good parenting are key to delivering the Good Start ambition.</p> <p><i>'It would be good to identify families who perhaps lack good parenting skills'</i></p>	<p>During the consultation we heard about the essential role of parents too & we will also think about how we can support that role.</p>	<p>This will be a particular focus for those priorities within the Good Start ambition.</p>
<p>The Strategy is good but how can it be implemented without resources?</p> <p><i>'Will there be funding?</i></p> <p><i>No mention of resources</i></p> <p><i>It sounds wonderful but I'm not sure the authority has the resources to implement this'</i></p>	<p>We acknowledge that this won't be easy but we all understand that preventing illness & promoting good health & wellbeing is absolutely essential.</p> <p>We know that by working together, with the resources we already have & taking specific actions as a partnership we can make a difference.</p>	<p>The delivery plan will identify actions which can be achieved within existing resources & which are evidence based to deliver improvements in health & wellbeing.</p>
<p>How will you know its working?</p>	<p>Each of the priority areas will develop a detailed action plan with clear actions, governance, measures & timescales.</p> <p>We have also agreed to use the slope indices for life expectancy & healthy life expectancy as our headline indicators.</p> <p>We think that these highlight the health inequalities in Nottinghamshire which we would like to reduce.</p>	<p>We will publish a reporting schedule as we develop our deliver plan & make it available through the Health & Wellbeing Board webpage.</p>

Appendix A: Organisations that contributed to the consultation

A1 Housing Bassetlaw	Gedling Borough Council
Age in Car UK Ltd	Gedling Homes
Age UK Nottingham & Nottinghamshire	Gilt Primary School
Alzheimer's Society	Gotham Primary School
Ashfield District Council	Hallcroft Infant & Nursery School
Bassetlaw Action Centre	Healthwatch Nottingham
Bassetlaw District Council	Hetty's
Being Now	Hill Holt Health
Better Care Fund	Home Start Ashfield
Bramcote Care Group	Housing & Care 21
Broxtowe Borough Council	Innovation Future Specialist
Care World Wide	Insight
CCG Bassetlaw	Inspire
CCG Broxtowe	Keep our NHS public
CCG Mansfield & Ashfield Citizens Panel	Kings Mill Hospital
CCG Newark & Sherwood/Mansfield & Ashfield	Knesal, Kersall & Ompton Parish Council
CCG Nottingham West & P.P.G	Lotus Development & Learning
CCG'S Nottinghamshire	Manor Nifty 50's Group
Citizen/Retired/Individual/Resident	Mansfield District Council
Citizens Advice	Mansfield District Leisure Trust
Collingham Village Care	Maun View Home, Runwood Homes
Community of Christ	Metropolitan Connect
DICE Healthcare Ltd	National Autistic Society
Disability Independent Advisory Group (DIAG)	NCC Support to Schools Service
Doncaster & Bassetlaw Teaching Hospitals NHSFT	NCFP
Early Sensation	NEMS Urgent Care Partnership
Eden Futures	Newark & Sherwood Autism Support Group
Education	Newark & Sherwood District Council
Edwinstowe United Community Association	Newark & Sherwood Playsupport Group
Evolve	Newark Emmaus Trust
Family Action	Newark Town Council
Family Care Nottingham	NHS Nottingham City
Foodshare	North Muskham Parish Council
Forces in the Community	Nottingham City Council
Former Tin Hat Centre	Nottingham Community Housing Association
Foster Carer	Nottingham Trent University
Fourseason	Nottinghamshire Children's Trust
Framework	Nottinghamshire Counselling Service
Funeral Director	Nottinghamshire County Council

Nottinghamshire NHS Foundation Trust
Nottinghamshire Hospice
Notts Healthcare Trust
NUH NHS Trust
On your doorstep - Walking for health - Mansfield & Ashfield
PHE
Positive Homes
PPG Linden Medical Group
Radford Care Group
Reach Learning Disability
Real Life Options
Renew 37
Rhubarb Farm CIC
Rushcliffe Borough Council
Rushcliffe Ramblers
School
Self Care Hub
Self Help UK
Serco
Sherwood Forest Hospital Trust
Southwell Focus
Sport Nottinghamshire
St Augustine's School
Tenants UK Ltd
The Oaks Care Centre
The Patients Voice
The Primary School of St Mary & St Martin
Trent Academies Group
U3A Carlton & Gedling
University of Nottingham
VS Ashfield Voluntary Action
VS CVS Bassetlaw
VS CVS Newark & Sherwood
VS CVS Rushcliffe
VS CVS Sherwood Forrest Hospital Trust
VS Mansfield Community & Voluntary Service
VS Royal Voluntary Service
VS Voluntary Action Broxtowe
WAIS
Westwood Care Homes
Workwise Healthcare Ltd
Wren Hall Nursing Home