

Title of meeting: Health and Wellbeing Board

Date of meeting: 21st June 2017

Subject: Health and Wellbeing Strategy refresh, 2018-2021

Report by: Jason Horsley, Director of Public Health

Wards affected: n/a

Key decision: No

Full Council decision: No

1. Purpose of report

- 1.1 To propose to the Health and Wellbeing Board the process for refreshing the Health and Wellbeing Strategy for Portsmouth.

2. Recommendations

- 2.1 The Health and Wellbeing Board is recommended to:
- a. Comment on the proposed principles, objectives and focus areas set out in section
 - b. Agree the proposals for next steps set out in section

3. Background

- 3.1 There is statutory duty on local Health and Wellbeing Boards to produce a strategy for the Health and Wellbeing of their population. Portsmouth's current strategy runs from 2014-2017, so it is now necessary to consider how this needs to be refreshed.

4. Reasons for recommendations

- 4.1 The next Health and Wellbeing Strategy needs to focus on the highest impact issues for the city, and the areas where the work of the Health and Wellbeing Board can add maximum value. The proposals above set out early suggestions that will be developed through the drafting process, and through wider consultation.
- 4.2 The recommendations for the timeline for development will ensure that the Health and Wellbeing Board achieve the development of a strategy by March 2018.

5. Portsmouth's challenges

- 5.1 The refreshed Health and Wellbeing Strategy needs to focus on the biggest health and wellbeing challenges for Portsmouth. The most recent summary of the Joint Strategic Needs Assessment analysis showed that the looking at last JSNA analysis showed that the main areas for concern for the city are:
- male life expectancy;
 - female life expectancy;
 - achievement of GCSEs;
 - recorded crimes of violence against the person;
 - premature mortality from cancer;
 - deaths from drug misuse;
 - deaths by suicide
- 5.2 The areas where Portsmouth is improving, but remains in a poorer position relative to other areas in the country are:
- children living in poverty;
 - women still smoking at time baby was delivered;
 - adult smoking prevalence;
 - smoking related deaths;
 - hospital stays for self-harm;
 - newly diagnosed sexually transmitted diseases;
 - killed and seriously injured on the roads;
 - premature mortality from heart disease and stroke.
- 5.3 Portsmouth is improving in line with England on issues of childhood obesity, teenage pregnancy, hip fractures in people aged 65+ years, excess winter deaths and recorded diabetes. The city is improving and better than England around cancer diagnosed at an early stage hospital stays for alcohol related harm.
- 5.4 In a number of the indicators causing concern, there is a greater prevalence in areas of deprivation.

6. Issues for consideration in refreshing the strategy

- 6.1 The 2014-2017 strategy is wide-ranging and provides a very comprehensive overview of health and wellbeing matters in the city. This is expected, given that it was the first document of its kind. However, it is arguable that the current strategy not sufficiently focused, and is not clear on the "added value" of the Health and Wellbeing Strategy, replicating issues reflected in other areas. An example would be the inclusion of education as a theme, when this is also covered through the Children's Trust Plan.
- 6.2 It is therefore important that in constructing the next strategy, the HWB n to have regard to the other lead strategic partnerships:
- o Children's Trust - stronger futures, education, SEND and LAC
 - o SPP - substance misuse, domestic abuse, ASB (complex individual cases)

- Health and Care Executive - Blueprint for Health and Care Portsmouth
- Tackling Poverty Partnership

6.3 All these partnerships link to the HWB Board, and there need to be clear mechanisms for reporting, so that the critical wider determinants of health that these Boards consider are examined at the Health and Wellbeing Board.

7. Suggested principles to guide a refresh of the strategy

7.1 Based on previous work of the Health and Wellbeing Board, it is proposed that:

- Our overarching aims should be to improve healthy life expectancy in the city; and reduce inequality by improving the areas with lowest expectancy fastest. We do this by working to principles around:
 - promoting prevention,
 - supporting independence
 - intervening earlier

7.2 We know we want to give people the best start in life, empower them to live healthy lives, and enjoy a healthy older age. In order to do this, we need to:

- Empower people to take care of their physical health
- Empower people to take care of their social, emotional and mental health
- Work with marginalised groups to make improvements for them fastest (including income deprived households).

7.3 The strategy needs to work on all dimensions of the city in a whole systems approach, examining:

- Individuals - attitudes, beliefs, knowledge, needs and behaviours
- Social Environments - individual relationships, families, support groups, social networks
- Organisations and institutions - schools, healthcare, business, VCS, faith groups etc
- Physical environments - Built, natural, transport links
- Policy - local laws, rules, regulations, codes.

8. Model for the strategy

8.1 An exemplar of how the strategy could be developed is set out below:

Objectives	Proposed focus areas	Example action areas
Vision: Improve healthy life expectancy in the city; and reduce inequality by improving the areas with lowest expectancy fastest		
Support physical good health	Reduce the harms from tobacco	<ul style="list-style-type: none"> ● Promoting smokefree environments ● Helping people to quit ● Promoting e-cigarettes as

		a harm reduction product
	Reduce the harms from physical inactivity	<ul style="list-style-type: none"> • Promoting active transport • Working with schools and community groups to increase options for physical activity • Making sport a fun option for people who are currently inactive
	Improve access to health and social care support in the community	<ul style="list-style-type: none"> • Support the implementation of the Portsmouth Blueprint
Support social, emotional and mental health	Reduce the harms from alcohol and other substance misuse	<ul style="list-style-type: none"> • Promote access to housing for vulnerable people recognising that having a stable base is the first step in addressing substance misuse and helping people deal with poor mental health • Supporting the recovery community in the city • Reduce availability of low cost high strength alcohol • Using licensing powers to promote the responsible and moderate use of alcohol
	Reduce the drivers of poverty	<ul style="list-style-type: none"> • Promoting the creation of quality employment in the city • Use a combination of planning and licensing powers to reduce the harms of problem gambling

8. Next steps

- 8.1 Subject to the comments of the Health and Wellbeing Board, it is proposed to work up a draft of the strategy in consultation with all members for agreement to consult more widely at the next Health and Wellbeing Board in September 2017. This will enable the HWB to agree their new Strategy for recommendation for adoption to the relevant boards before March 2018.

8.2 Alongside the development of the strategy, we will seek to develop a high-level action plan and an associated work programme for the HWB, including consideration of the wider determinants where work is led through other partnerships.

9. Equality impact assessment

9.1 A preliminary EIA was completed for the document and concluded that there will be no negative impact on any of the protected characteristics arising from the development of a refreshed Health and Wellbeing Strategy. Any individual projects or measures arising from the strategic approach outlined will be subject to impact assessments in their own right. The preliminary EIA is attached as Annex 1.

10. Legal implications

10.1 Legal implications are set out in the body of the report.

11. Director of Finance's comments

11.1 Not sought. This work will be undertaken using existing staffing resources and will not incur additional costs.

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Signed by:

Appendices:
None

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

The recommendation(s) set out above were approved/ approved as amended/ deferred/
rejected by on

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Signed by: