

Title of meeting: Health and Wellbeing Board

Date of meeting: 21st February 2018

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 present to the Health and Wellbeing Board the Health and Wellbeing Strategy for 2018-2021 for approval.

2. Recommendations

- 2.1 The Health and Wellbeing Board is recommended to:
- a. Approve the Health and Wellbeing Strategy attached at Appendix 1.
 - b. Recommend that partner organisations adopt the strategy through their own governance arrangements, as set out on paragraph 6.1
 - c. Consider the approach to progressing the strategy as set out in section 6, and propose areas for HWB consideration.

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. At the last meeting of the Board, a draft document was approved for consultation until 31st January 2018.

4. Reasons for recommendations

- 4.1 The 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 set out in the consultation document approved at the last meeting represented early suggestions to be developed through the consultation process.

4.2 The consultation document reflected previous decisions 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 and intervening earlier
- that the strategy needs to work on all dimensions of the city in a whole systems approach
- that broad themes are supporting physical good health, supporting social, emotional and mental health, working to improve outcomes for marginalised groups fastest; and improving access to services.

5. Feedback from consultation

5.1 Over 80 responses were received in response to consultation. Most responses were made by individuals rather than on behalf of organisations. Organisations represented include:

- Healthwatch
- Portsmouth College
- Portsmouth Hospitals Trust - maternity
- North End Baptist Church
- Safer Portsmouth Partnership
- NHS Property
- Portsmouth CCG (ICS)
- Wessex Cancer Trust
- Adult Social Care, PCC
- Stroke Association
- Milton Neighbourhood Forum
- Home of Comfort Nursing Home
- The Roberts Centre
- The Society of St James
- Portsdown U3A
- Regeneration Directorate, PCC
- Public Health, PCC
- Vivid Housing
- Tackling Poverty Steering Group

5.2 Most respondents were female, and there were very few responses from people under 25.

5.3 There was strong agreement that the four priorities that had been identified felt correct for Portsmouth's strategy. Key comments in relation to the general priorities were that:

- There needs to be a greater reflection of the importance of economic good health because it is so important for overall wellbeing

- We need to come alongside communities, with their skills and aspirations, and look at 'what is strong rather than what is wrong'.
- Look at how the voluntary and community sector can work alongside the statutory services and organisations to deliver services and build better understanding.
- Ensure the wider determinants of health are integrated into commissioning plans - 'somewhere to live, someone to love and something meaningful to do.'

- 5.4 In relation to Priority 1 - Physical Health, there was strong agreement that this is an important priority, and agreement about the themes of preventing the harms from tobacco and increasing physical activity. However, there was also a sense that the overarching theme needed to be "reducing obesity" or "encouraging healthy weight" with physical activity and diet/nutrition as the enablers to that aim. There was also feedback about the importance of starting early with support to children and families.
- 5.5 Commentary around Priority 2 - Social, emotional and mental good health suggested that there was strong support that the right priorities had been identified, although the question was posed if issues related to addiction (including substance misuse) would sit better linked to tobacco and physical health. Many respondents picked up on the issues that mental wellbeing is influenced by a huge range of factors and that preventing matters arising in the first instance (such as abuse, loneliness and lack of opportunities) is critical to any approach.
- 5.6 In considering vulnerable groups, there was broad agreement that the right groups had been identified but that more needed to be done to reflect issues of homelessness.
- 5.7 In response to the feedback, a number of amendments have been made to the draft document, including:
- o Inclusion of reference to the children's physical health strategy
 - o More emphasis on the issue of homeless as a cause and effect of marginalisation
 - o More consideration of issues relating to diet and healthy weight
 - o Recognition of the importance of the surrounding environment, picking up issues such as air quality and quality of the public realm
- 5.8 Detailed anonymised summary of feedback can be made available on request.

6. Proposed work programme to progress the Health and Wellbeing Strategy

- 6.1 Subject to approval of the draft text attached at Appendix 1, it is recommended that this is incorporated into an accessible designed version (as with the consultation document) and that partner organisations progress the document for adoption through their governance structures as required.
- 6.2 In terms of progressing the areas of concern identified in the HWB strategy, it is recognised that many of the areas are being taken forward through other

partnerships, but that there would be value in the HWB Board inviting discussion on progress and where the HWB Board could support moving further and faster.

- 6.3 It is also recognised that for some areas, there are looser oversight arrangements (for example, around physical activity healthy weight) and the HWB Board could add some value in drawing work together. It is recommended that the Director of Public Health is tasked with bringing discussion items on this work to the HWB Board, along with any other elements that the HWB would welcome discussion on.
- 6.4 There are thematic issues arising from the development of the Strategy that could benefit from further discussion. Chief among these is the idea of tackling loneliness and isolation in the city, and tapping into the strong community assets that exist in the city. This could be an area where the HWB Board could add considerable value and comment is requested on how this could be progressed in support of the strategy.
- 6.5 Finally, there were examples of good practice highlighted, particularly from voluntary sector partners, and it may be that HWB Board would wish to invite discussion of some of these schemes and consider what learning could be taken from them. This could be as part of a wider discussion around the concepts of social isolation and building on community assets.

7. Equality impact assessment

- 7.1 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 2.

8. Legal implications

- 8.1 Legal implications are set out in the body of the report.

9. Director of Finance's comments

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

.....
Signed by:

Appendices:
Draft Health and Wellbeing Strategy for consultation

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

.....
Signed by: