

Title of meeting: Cabinet

Full Council

Date of meeting: 16 March 2018 (Cabinet)

20 March 2018 (Council)

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: Yes

1. Purpose of report

1.1 To present to the Cabinet the Health and Wellbeing Strategy for 2018-2021 for approval.

2. Recommendations

- **2.1** The Cabinet is recommended to:
 - a. Approve the Health and Wellbeing Strategy attached at Appendix 1.

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, which should be adopted by the partner organisations. At the last meeting of the Health and Wellbeing Board, a document was approved by the Health and Wellbeing Board, with the recommendation that this is adopted by partner organisations.

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.
- 4.2 A draft consultation document was issued in December that 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 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.'
- 5.3 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.
- 5.4 Commentary around Priority 2 Social, emotional and mental good health suggested that there was strong support that the right priorities had been identified, althought 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 t any approach.
- 5.5 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.
- 5.6 In response to the feedback, a number of amendments were made to the draft document, including:
 - o Inclusion of reference to the children's physical health strategy
 - More emphasis on the issue of homeless as a cause and effect of marginalisation
 - More consideration of issues relating to diet and healthy weight
 - Recognition of the importance of the surrounding environment, picking up issues such as air quality and quality of the public realm
- 5.7 The revised text (attached as Appendix 1) was approved by the Health and Wellbeing Board on 21st February 2018, with a recommendation that this should be formally adopted by partner organisations.
- 5.8 An accessible designed version of the document will be produced for wider circulation.

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



	6.1 Legal implications are set out in the body of the report.		
9.	Director of Finance's comments		
9.1	The work outlined in the strategy will be resources and will not incur additional		
_	Signed by: Dr Jason Horsley, Director of Public Health		
	endices: Health and Wellbeing Strategy for consu	ultation	
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:			
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Tit	rial extent by the author in preparing this	Location approved/ approved as amended/ deferred/	