

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Derek Ward, Director of Public Health

Report to	Lincolnshire Health and Wellbeing Board			
Date:	27 March 2018			
Subject:	Joint Health and Wellbeing Strategy for Lincolnshire			

Summary:

Currently the JHWS produced by the Health and Wellbeing Board for Lincolnshire (HWB) is due to end 2018. Over the course of the last 18 months the HWB has undertaken significant engagement on the development of the new JHWS, the outcome of which has previously been reported to the Board in September 2017.

In summary the HWB agreed that further work should be undertaken on each of the following priority areas:

- Carers
- Mental Health & Emotional Wellbeing (Children & Young People)
- Mental Health (Adults)
- Dementia
- Housing
- Physical Activity
- Obesity

Since the meeting of the HWB in December further work has been undertaken with each of the groups identified by the HWB in order to:

- Discuss delivery planning based on the outcome of the HWB which can be used to capture the specific objectives, deliverables and outcomes for each priority area within the JHWS;
- Review next steps for developing the JHWS including potential governance and assurance processes to ensure the HWB can delegate certain responsibilities regarding the JHWS to the groups identified;
- Exploring possible future engagement with relevant boards/groups, key stakeholders and communities on the shape of the JHWS and the objectives, deliverables and outcomes within the delivery plans.

As part of this work some emerging areas for discussion at the HWB have been identified which will help to steer the more detailed planning:

- 1. Whole system approach to obesity (potential system leadership role by HWB on this priority area through establishment of multi-agency partnership group)
- 2. Financial implications of JHWS (commitment to deliver objectives but recognition that some may require additional resources subject to investment decisions across partners)
- 3. Strategy alignment (opportunity for the JHWS to negate the need for separate strategies for some priority areas, e.g. JHWS to act as Joint Carers Strategy in same way as it will serve as the Children and Young Peoples Plan and the potential for other areas to follow suit where appropriate)
- 4. Further engagement (to check back with wider stakeholders regarding the appropriateness of the objectives and to ensure an ongoing process of engagement through the delivery of the JHWS)
- 5. Merge two themes (to merge "Embed prevention in integrated locality teams" and "Build prevention into all pathways across health and care" into one theme "Embed prevention into all pathways across health and care including integrated locality teams")

Actions Required:

- 1. That the further development of the JHWS as set out in this report is received and noted.
- 2. That the emerging areas for discussion are considered and the view of the board is captured on these matters to enable final delivery planning to be undertaken.

1. Background

A statutory duty under the Health and Social Care Act 2012 requires the Local Authority and each of its partner clinical commissioning groups to produce a Joint Health and Wellbeing Strategy (JHWS) for meeting the needs identified in the Joint Strategic Needs Assessment (JSNA).

The purpose of the JHWS is to set out the strategic commissioning for all organisations who commission services in order to improve the health and wellbeing of the population and reduce inequalities.

Currently the JHWS produced by the Health and Wellbeing Board for Lincolnshire (HWB) is due to end 2018. Over the course of the last 18 months the HWB has undertaken significant engagement on the development of the new JHWS, the outcome of which has previously been reported to the Board in September 2017. In summary the HWB agreed that further work should be undertaken on each of the following priority areas:

- Mental Health & Emotional Wellbeing (Children & Young People)
- Mental Health (Adults)
- Carers
- Physical Activity
- Housing
- Obesity
- Dementia

The HWB agreed that this further work would be undertaken in the context of some key principles/values which emerged during the engagement. These included the need for the JHWS to:

- Have a strong **focus on prevention** and early intervention
- Take **collective action** across a range of organisations to deliver the JHWS
- Focus on tackling inequalities and equity of service provision to meet the population needs
- Deliver transformational change in order to improve health and wellbeing

Further to this, a presentation was given to the HWB in December 2017 to set out the progress made in identifying some key areas which the JHWS might include following further discussions with commissioners, JSNA sponsors and key groups which lead on the priority areas identified through the engagement. At this meeting the HWB agreed the following:

- The JHWS will act as the Children and Young People Plan for Lincolnshire in future;
- A more formalised governance arrangement was to be implemented for this strategy which would include regular progress reporting to the Board. Regular reviews and updates to the strategy would be made following prioritisation discussions as and when required. The overarching governance structure is included at Appendix A along with proposed aims for the JHWS;
- The need to include safeguarding as a cross cutting theme. It was re-enforced that
 it is the responsibility of the members of the Lincolnshire Health and Wellbeing
 Board to promote the health of the residents of Lincolnshire and to protect their
 safety where required and to this end the LA had enforcement duties and powers

Alongside this the HWB supported the themes identified and some key messages including:

 HWB (and JHWS) should be at the forefront of leading a system shift towards joint commissioning for Prevention;

- Develop a robust delivery plan formalised through the proposed new governance structures;
- Align to JSNA as a continuous process with periodic review;
- Taking a whole family/well family approach to tackling issues identified.

Progress Report

Since the meeting of the HWB in December further work has been undertaken with each of the groups identified by the HWB in order to:

- Discuss delivery planning based on the outcome of the HWB which can be used to capture the specific objectives, deliverables and outcomes for each priority area within the JHWS;
- Review next steps for developing the JHWS including potential governance and assurance processes to ensure the HWB can delegate certain responsibilities regarding the JHWS to the groups identified;
- Exploring possible future engagement with relevant boards/groups, key stakeholders and communities on the shape of the JHWS and the objectives, deliverables and outcomes within the delivery plans.

Each of the groups has now identified a set of objectives and commenced delivery planning to set out key actions, milestones and outcomes. The proposed objectives are set out in Appendix B.

This will form the basis for the final JHWS (along with associated Delivery Plans) which is now proposed to come to the HWB for decision in June 2018. At this point a more detailed approach to on-going governance, reporting and review arrangements for the JHWS will also be presented.

2. Conclusion

Emerging areas for discussion

1. Whole System Approach to Obesity

A number of discussions on the new JHWS have picked up the issue of systems leadership for obesity and the need for there to be concerted multi-agency approaches to tackling this issue. This is in line with the HWB's principle of taking collective action across a range of organisations to deliver the JHWS.

Lincolnshire's Healthy Weight Strategic Action Plan aims to tackle obesity through a preventative, life course approach from antenatal through to reaching adulthood. NICE guidelines state schools play a crucial role in improving the diet and activity levels of children and young people, with this being a priority for action to help prevent excess weight gain. Interventions should be sustained, varied and address the whole school, including after-school clubs and other activities. Short-term interventions and one-off events are insufficient on their own and should be part of a long-term integrated programme. This has prompted the development of a self-serve 'portfolio' of interventions including resources or organisations that schools can book from/ refer to, to support

schools in enhancing their healthy weight activity. A whole-school approach should be used to develop life-long healthy eating and physical activity practices.

In agreeing to include obesity as a priority area within the JHWS, the HWB may wish to consider the establishment of a specific sub-group to the HWB to oversee a whole system approach to tackling obesity (similar to the HWB decision to establish the Housing, Health and Care Delivery Group to drive closer integration between housing, health and care).

In taking this approach the work on obesity across Lincolnshire would be in line with work commissioned by Public Health England being delivered by Leeds Beckett University. This work has been set up to identify ways in which local areas can create whole systems approaches to obesity by focussing on two key elements; promoting collaboration and focussing on creating a framework through which all partners can build a sustainable partnership in order to tackle the complex range of issues associated with obesity.

2. Investment

Whilst the HWB has indicated a desire for the JHWS to be built on the principles of prevention, collective action, tackling inequalities and equity and transformational system change, one key issue that was discussed at the STP Mental Health and Learning Disability Group was that some of the proposed objectives may have considerable resource implications attached to them. It was therefore felt important to recognise that delivering some of the objectives will require the responsible agencies to develop sound business cases that identify and secure additional investment and resources to deliver the priority objectives identified.

3. Strategy alignment

The Joint Carers Strategy is due to be refreshed. The Carers Steering Group is keen to utilise the JHWS as its Joint Carers Strategy rather than develop a separate strategy. This would be in line with the agreement to have the JHWS act as the Children and Young Peoples Plan. This may be something which is worth exploring with other groups leading on priorities within the JHWS in future also.

4. Further engagement

Engagement will be built into the priority lead groups (see Appendix A) for the purposes of ongoing delivery. However it is proposed that an online survey is established so as to ensure interested parties have an opportunity to comment and feed into the more detailed planning work. This is something which people identified during the engagement in the summer of 2017 where there was a strong desire amongst those who were involved in the process that the HWB continues to engage wider stakeholders in the development and implementation of the new strategy. It is suggested that this would focus on gathering people's views on whether the objectives are tackling the issues they feel are important to the priority areas and/or if there are any objectives or actions that they feel are missing.

More broadly it is planned that as part of the accountability and governance framework associated with the new JHWS there will also be a formalised engagement framework for the strategy as a whole. This will enable the HWB to be clear and transparent about how the delivery groups are involving/engaging stakeholders including patients, service users, carers and the public as well as the wider engagement work of the HWB itself regarding JHWS engagement. This will also support engagement and involvement in the JSNA.

5. Merge "Embed Prevention" themes

In December the themes presented included two as follows:

- Embed prevention in integrated locality teams across all JHWS priorities
- Build prevention into all pathways across health and care through 'place-based' and co-commissioning opportunities and mechanisms

It is proposed that these are merged into one theme as follows:

- Embed prevention into all pathways across health and care including integrated locality teams

3. Consultation

Each of the lead groups identified is considering how to build engagement into the process for the further development of the JHWS. Alongside this is a proposed online survey as set out above. The report to the HWB in June will also propose a formal approach to periodic engagement to assure the HWB that the priorities remain the key issues for people who live and work in Lincolnshire.

4. Appendices

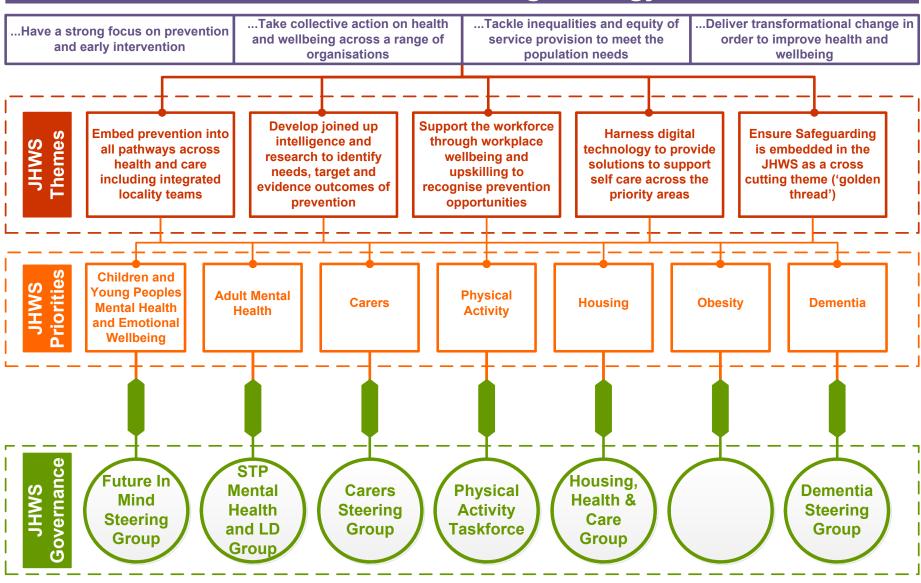
These are listed below and attached at the back of the report				
Appendix A Proposed Governance Structure for JHWS				
Appendix B	JHWS Delivery Plan – Draft Objectives			

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by David Stacey, Programme Manager for Strategy and Performance who can be contacted on 01522 554017 or david.stacey@lincolnshire.gov.uk

Lincolnshire Health and Wellbeing Board's Joint Health and Wellbeing Strategy will...



Appendix B | JHWS Delivery Plan – Draft Objectives

	Priorities	Mental Health & Emotional Wellbeing (Children & Young People)	Mental Health (Adults)	Carers	Physical Activity	Housing	Obesity	Dementia
	Objectives	Build emotional resilience and positive mental health	Improved preventative services for adults who have mental health needs and their families through closer integration with neighbourhood teams.	Early identification of carers from the point of diagnosis and signpost to appropriate support.	Integrating physical activity into pathways and strategic planning (e.g. clinical pathways, neighbourhood integrated teams, locality teams, district council networks, planning and transport services and GLEP)	Adopt a whole family approach to tackling housing needs	Develop a Whole System Approach to Obesity	Comprehensive, integrated pathways for timely identification, referral, diagnosis and post-diagnosis support
Page 144		Action on the wider determinants and their impact on mental health and emotional wellbeing	NHS Health Checks – targeting uptake of those with MH conditions	Whole family approach to support an integrated and seamless carers journey	Undertaking robust local insight analysis (including population need and service provision). Use the insight to drive developments and service improvements	Understand and address housing related delayed transfers of care	Improved information and support for people	Focused prevention programme for vascular dementia
		Better understanding of self-harm/suicidal intent in young people	Reducing in-patient numbers (both in & out of county)	Ensure carers are listened to from the outset, and involved in the care of the person they support	Supporting workforce wellbeing through physical activity and workforce strategy.	Supported housing arrangements, across partners, fully support vulnerable people with complex presenting needs	Develop Making Every Contact Count (MECC)	Ensure appropriate support is available for those with dementia under 65 years of age

Priorities	Mental Health & Emotional Wellbeing (Children & Young People)	Mental Health (Adults)	Carers	Physical Activity	Housing	Obesity	Dementia
d Page 145	Greater parity between Mental Health and Emotional Wellbeing as experienced for Adults and that of Children and Young People and between mental health and physical health Ensure that young people have timely access to appropriate crisis services	Development of an allage crisis service going forward Development of better analytical data to identify needs and target service provision more effectively, including improved understanding of Mental Health Investment Standard and where resources are being targeted.	Ensure young carers are identified in the education sector with supportive learning environments that are sensitive to their needs and promotes educational attainment. Carers are supported to look after their own physical and mental wellbeing, including developing coping mechanisms	Explore innovation and technology to increase physical activity levels across the county Ensure safeguarding is embedded and considered across physical activity within the county	Commitment to joint action on a housing Memorandum of Understanding across partners Addressing poor standards of housing and the level of appropriate housing required	Deliver the Healthy Weight in Children Strategic Actions to reduce Childhood Obesity to the targets set in the STP	Address the sustainability of future support provision Greater integration and awareness raising within neighbourhood teams
	Families of young people with mental health needs are supported	Ensure appropriate transport arrangements are available for People with Mental Health Needs including at times of crisis and/or mental health assessment.	Carers are supported to plan for the future, including emergencies, to make choices about their lives, such as combining care and employment.		Concerted action across partners to tackling homelessness		Wider public and professional awareness of dementia to support services in all parts of the community to be dementia friendly

Priorities	Mental Health & Emotional Wellbeing (Children & Young People)	Mental Health (Adults)	Carers	Physical Activity	Housing	Obesity	Dementia
	Ensure appropriate support services are in place for pupils with special educational need and a disability	Development of a new patient-held digital information platform for Mental Health (including families caring for people with dementia)	Improved understanding of the local intelligence to influence and shape preventative measures and support services for carers		Ensure people have the financial capability to access and maintain secure housing		