

## HEALTH AND WELLBEING BOARD PAPER FORMAL PUBLIC MEETING

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**Report of:** Greg Fell

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**Date:** 6<sup>th</sup> December 2018

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**Subject:** Background Paper - Draft Joint Health & Wellbeing Strategy 2019-24

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**Author of Report:** Dan Spicer, 0114 273 4554

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### **Summary:**

This paper sets out the draft refreshed Joint Health & Wellbeing Strategy to cover the period 2019-23, and asks the Board to advise on its future development ahead of its planned agreement at the Board's March public meeting.

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### **Questions for the Health and Wellbeing Board:**

1. Are the board content with the specific wording of each ambition statement?
2. Are the board content with the development of the substance underpinning the ambitions?
3. Do the Board feel the strategy properly addresses mental health and wellbeing, and healthy communities, and other issues that cut across the life course?
4. Are the Board content with the proposed approach to implementation and measurement?

### **Recommendations for the Health and Wellbeing Board:**

- That the Board formally agree the wording of the proposed ambitions
- That the Board commit to further engagement and development of the strategy for agreement at the March meeting

### **Background Papers:**

- Draft Health & Wellbeing Strategy 2019-23

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**What outcome(s) of the Joint Health and Wellbeing Strategy does this align with?**

N/A

**Who have you collaborated with in the writing of this paper?**

Health & Wellbeing Strategy Editorial Group

# DRAFT JOINT HEALTH & WELLBEING STRATEGY 2019-23

## 1.0 SUMMARY

1.1 This paper sets out the draft refreshed Joint Health & Wellbeing Strategy to cover the period 2019-23, and asks the Board to advise on its future development ahead of its planned agreement at the Board's March public meeting.

## 2.0 WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE?

2.1 The Joint Health & Wellbeing Strategy represents the Health & Wellbeing Board's considered view on the best strategic approach to improving the health and wellbeing of Sheffield's population. Once approved it will frame and drive the Board's work, and be the lens through which it examines and holds accountable the health and wellbeing system in the city.

## 3.0 THE WORK SO FAR

3.1 In September, the Health & Wellbeing Board received a paper setting out a proposed approach to developing a refreshed Joint Health & Wellbeing Strategy for Sheffield. This paper set out an approach that:

- Focused on reducing health inequalities across the city by improving the health of the most deprived the fastest;
- Used a life course to describe a set of 9 ambitions that if delivered would lay the foundations for that reduction; and
- Would describe the ambitions but not the delivery mechanisms, with these to be developed in partnership with the rest of the city following publication of the Strategy.

3.2 The paper also set out an approach to producing the Strategy that was guided by the Board, but actively engaged with the rest of Sheffield to test and refine the content. To this end it was agreed that the Board would receive an initial rough draft of the Strategy at its October Strategy Development session, with a public first draft to be produced for its December public meeting, based on feedback from the Board and from broader engagement. This paper introduces that updated draft.

## 4.0 THE DRAFT STRATEGY

4.1 As agreed at the Board's September meeting, the Strategy sets out a generational target of reducing health inequalities in Sheffield, described as committing to:

***Closing the gap in healthy life expectancy in Sheffield by improving the health and wellbeing of the poorest and most vulnerable the fastest***

- 4.2 This is described as generational because there is an acceptance that such a goal cannot be achieved within the life of the Strategy; it is a 20-year vision, not a five year vision.
- 4.3 The Strategy describes the Board's view of the critical foundations that must be laid for achieving this vision. These reflect those discussed at the Board's September meeting, but have been developed and refined further through engagement with board members and a range of stakeholders across Sheffield.
- 4.4 These foundations are set out as ambitions for the city, and broken into three Life Course stages. The ambitions are that:

**Starting & Developing Well**

- Every child in Sheffield achieves the level of development needed in their early years to provide the foundation for a healthy life
- Every child is included in their education and can access their local school
- Every young person in Sheffield is equipped to be successful in the next stage of their life

**Living & Working Well**

- Everyone in Sheffield has access to a home that supports their health
- Everyone in Sheffield has a fulfilling occupation and the resources to support their needs
- Everyone in Sheffield can safely walk or cycle in their local area regardless of age or ability

**Ageing & Dying Well**

- A decisive shift of resources from acute hospital settings to preventative primary and community settings
- Everyone in Sheffield has the level of meaningful social contact that they want
- Everyone in Sheffield lives the end of their life with dignity in the place of their choice

- 4.5 It is important to recognise that this document remains a draft, and is expected to develop further between now and its intended agreement in March. Officers will continue to engage with stakeholders in the system as part of this process, seeking to ensure broad buy-in to the Strategy.

**5.0 DELIVERING THE STRATEGY**

- 5.1 As proposed in the September paper, the Strategy does not go into detail on how these ambitions are to be achieved. The intention of the Strategy is to develop a city position on the critical things that matter for improving the health of the population and reducing health inequalities. Designing the required activity to achieve these is the business of all partners in Sheffield, not just those around the Health & Wellbeing Board table; it is proposed that the role of the Board be to convene and lead the development of these plans.
- 5.2 Similarly, there is no attempt to set out specific measures for assessing success. This is not to say that these are not important: they clearly are. However, discussions with a range of stakeholders have suggested that determining success measures ahead of agreeing activity would have the affect of skewing those discussions, focusing them on what we intend to measure, not necessarily what needs to be done.
- 5.3 To this end, it is proposed that following its agreement, the Board should make the Strategy the driving force behind its work, with a programme of work from March 2019 onwards to develop action plans, and a commitment to challenge the rest of the system on their contribution to reducing health inequalities and to meeting the ambitions in the Strategy.
- 5.4 With this in mind, it would be helpful for the Board to confirm the precise wording of the ambitions to aid development of the Strategy towards its intended agreement in March, either along the lines set out in the current draft, or in agreed amended versions.

## **6.0 QUESTIONS FOR THE BOARD**

- 6.1 Are the board content with the specific wording of each ambition statement?
- 6.2 Are the board content with the development of the substance underpinning the ambitions?
- 6.3 Do the Board feel the strategy properly addresses mental health and wellbeing, and healthy communities, and other issues that cut across the life course?
- 6.4 Are the Board content with the proposed approach to implementation and measurement?

## **7.0 RECOMMENDATIONS**

- 7.1 That the Board formally agree the wording of the proposed ambitions
- 7.2 That the Board commit to further engagement and development of the strategy for agreement at the March meeting

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