#### **Divisions Affected - All**

# Health and Wellbeing Board 29th JUNE 2023

## Updating the Health and Wellbeing Strategy

# Report by ANSAF AZHAR, Corporate Director of Public Health

#### RECOMMENDATION

- 1. The Health and Wellbeing Board is RECOMMENDED to
  - Note the formation and activity of the cross-organisational Task and Finish group, with representation from all organisations on the Health and Wellbeing Board;
  - Note ongoing progress towards updating the Health and Wellbeing Strategy;
  - Approve plans to communicate and engage with residents;
  - Approve proposed structure for the Health and Wellbeing Strategy;
  - Consider and determine the timeframe for the updated Health and Wellbeing Strategy;
  - Discuss emerging themes, principles, and priorities and offer guidance to officers regarding content of the strategy;
  - Approve a workshop of the HWB to take place in September (date TBC) so that board members and officers on the Task and Finish group can work together on further content development.

# **Executive Summary**

2. Officers have now begun the process of updating Oxfordshire's Health and Wellbeing Strategy as agreed by the Health and Wellbeing board on 16 March 2023. The strategy will offer a strong, unified vision for improved health and wellbeing at place and will act as the primary place strategy for health and wellbeing in Oxfordshire. A cross-organisational Task and Finish Group has been established to drive forward strategy development between board meetings, with representation from all organisations on the Health and Wellbeing Board. All organisations on the Task and Finish group have contributed to the proposed structure for the strategy and to ongoing discussions around high level themes, principles, and priorities. This report proposes an overarching structure for the Health and Wellbeing Strategy and summarises 'emerging themes' from these ongoing discussions. The Task and Finish Group has also contributed to and agreed an overall approach to communications and engagement, as summarised in this report and outlined in full in Annex 1.

## Background

- 3. Oxfordshire's Health and Wellbeing Board (HWB) last published a Joint Local Health and Wellbeing Strategy in 2019. The Health and Wellbeing Board has a statutory responsibility to publish this strategy. The most recent strategy comes to a close in 2023.¹ Since 2019, the social, economic, and health context has changed very significantly: residents, local authorities, and the NHS have experienced Covid-19 and continue to be impacted by the cost of living crisis. Inequalities in health outcomes continue to widen—the most recent data shows that, on average, men in one of our poorest neighbourhoods (Blackbird Leys) live 14 years less than men from one of our wealthiest neighbourhoods (North Thame).² Moreover, since 2019, the organisation of health and social care has changed: the Health and Care Act 2022 created statutory Integrated Care Systems (ICSs), aiming to closer integrate health and social care.
- 4. Since the formation of the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care System (ICS) in July 2022, partners have worked across the BOB area to create an overarching system wide <a href="ICS Strategy">ICS Strategy</a>, published in March 2023. Nonetheless, the Health and Wellbeing Board has a statutory responsible to create and publish a health and wellbeing strategy.
- On 16 March 2023, the Health and Wellbeing Board approved initial plans to update Oxfordshire's Joint Local Health and Wellbeing Strategy. The Board approved an indicative timeline as well as the establishment of a steering group comprised of senior officers from organisations sitting on the Health and Wellbeing Board.
- 6. The Health and Wellbeing Strategy must outline the Board's priorities to tackle the needs identified in Oxfordshire's Joint Strategic Needs Assessment (JSNA).<sup>3</sup> As such, the Health and Wellbeing Strategy must be closely informed by the JSNA, which is published annually to give data and intelligence on the health needs of local residents. The publication of the JSNA 2023 coincides with the publication of this paper and seeks final approval from today's Board meeting.
- 7. Updating Oxfordshire's Health and Wellbeing Strategy therefore offers a real opportunity for Oxfordshire to establish a strong local vision for improved health and wellbeing and to develop the strategic direction of Oxfordshire's Health and Care system.

<sup>&</sup>lt;sup>1</sup> https://www.oxfordshire.gov.uk/sites/default/files/file/constitution/oxfordshirejointhwbstrategy.pdf

<sup>&</sup>lt;sup>2</sup> Oxfordshire Local Area Inequalities Dashboard

<sup>&</sup>lt;sup>3</sup> Statutory guidance on joint strategic needs assessments and joint health and wellbeing strategies (publishing.service.gov.uk), pp. 8-9

## Footprint and Scope

8. The Health and Wellbeing Strategy will act as the primary place strategy for health and wellbeing in Oxfordshire. Figure 1 below outlines how officers propose this strategy intersects with the ICS Strategy and the NHS Joint Forward Plan:

Figure 1: proposed intersection between ICS Strategy, NHS Forward Plan, and local Health and Wellbeing Strategy



9. The scope of the updated strategy will be quite broad. While NHS organisational strategies often have a clinical or bio-medical focus, the Health and Wellbeing Strategy needs to reflect the wider determinants of health which significantly influence local residents' health and wellbeing.

Figure 2: Dahlgren and Whitehead rainbow to illustrate wider determinants of health and scope of the health and wellbeing strategy



10. Given the broad scope of the Health and Wellbeing Strategy, it will need to build on a wide range of existing strategies, policies, and plans across different organisations. All organisations represented on the Health and Wellbeing Board have suggested, and can continue to suggest, existing strategies, plans, and policies which the updated Health and Wellbeing Strategy should account for. The Health and Wellbeing Strategy will need to provide the overarching focus and vision for improving health and wellbeing within these existing plans and work programmes.

### **Updated Process**

11. The Task and Finish Group is operating to the below timeline for publishing an updated Health and Wellbeing Strategy.

Figure 3: Timeline for updating the Health and Wellbeing Strategy



- 12. Progress will be reported to the HWB at its quarterly meetings ahead of final sign-off and publication at the HWB meeting on 7<sup>th</sup> December 2023. Officers also propose to host a deep-dive workshop for the Health and Wellbeing Board in early September, to delve into the details of an early draft version of the strategy. Officers will present a draft strategy to the Joint Health Oversight and Scrutiny Committee on 21<sup>st</sup> September 2023.
- 13. The Task and Finish Group is responsible for ensuring the strategy follows this process and publishes a strategy in good time. The group is comprised of representatives from the different partners on the HWB and meets monthly. It is chaired by David Munday, Deputy Director of Public Health. Group members are of sufficient seniority to represent their organisational priorities and regularly communicate progress to their respective organisations. The group has agreed a Terms of Reference outlining its role, responsibilities, and membership (see Annex 2). Further details on the progress of this group to date can be found under "Progress to date" below.

## **Communications and Engagement**

- 14. The Task and Finish Group, including Healthwatch Oxfordshire, have developed a Communications and Engagement Plan for the update to the Health and Wellbeing Strategy (see Annex 1). The plan outlines how officers will:
  - i. Gather and listen to residents, board members, Councillors, and staff
  - ii. Inform staff and residents that the Health and Wellbeing Strategy is being updated—and why that matters
  - iii. Enable the smooth progress of strategy development by informing and engaging key decision-makers
  - iv. Communicate how the final strategy helps residents and their loved ones
- 15. At the heart of communication with residents is the need to make this real. We must get beyond acronyms and complex data to tell stories: how does this affect real people living real lives? To make it real, we will use graphics, videos, and quotations from residents.
- 16. All Oxfordshire residents should have a say in what their Health and Wellbeing Plan looks like. Therefore, the Task and Finish group is keen that residents' voices help shape the strategy. Officers particularly want to hear from groups that are more impacted by or more at risk of poor health and groups we don't listen to often enough. So, officers are planning a 'golden thread' of engagement with residents throughout the development of this strategy:
  - i. Between June and August, officers will collate existing reports and research which detail resident' thoughts and opinions.
  - ii. Between June and August, officers will organise focus groups among residents we especially want to hear from, in partnership with existing community groups and voluntary organisations.
  - iii. Between June and August, Healthwatch Oxfordshire plan to survey residents, speak to residents at pop up events and in market towns, and host online conversations.
  - iv. In October and November, partners will jointly launch and promote a formal public and professional consultation. Public events will accompany this consultation exercise.

This activity will all inform the eventual strategy.

17. Healthwatch Oxfordshire will play an important part of this partner-wide engagement with the public. This work forms part of the Board's shared approach to speaking to residents and collecting insight from them. They propose to:

- Speak to residents at in-person 'pop-up' events
- Ask residents for their views in a short online survey
- Continue discussions with residents about health and wellbeing
- Hold an online wellbeing webinar
- Contribute to the public engagement report
- 18. All the activity noted above will generate a consultation and engagement report which will be presented to the Health and Wellbeing Board.

## Progress to date

- 19. The cross-organisational Task and Finish group has already met twice to drive forward the process of updating the Health and Wellbeing Strategy. During this time, it has:
  - a. Overseen the publication of the JSNA and used its findings to inform emerging themes for the Health and Wellbeing Strategy
  - b. Hosted conversations and/or workshops with colleagues in respective organisations about the Health and Wellbeing Strategy's priorities and principles
  - c. Developed a draft structure of the Health and Wellbeing Strategy and reviewed emerging themes, principles, and enablers
  - d. Viewed and commented on an early draft of the Communications and Engagement plan
- 20. Officers are finalising logistics for resident focus groups. Officers plan to host these focus groups among existing community groups to avoid placing extraneous burden on residents and community leaders, many of whom are already overburdened. Officers will offer training, a facilitation pack, slides/activities, and vouchers for residents to support community leaders facilitating these focus groups. Community leaders will feed back to officers. Officers have also worked with Healthwatch to develop their parallel plan to speak to and engage with residents.

#### **Timeframe**

21. The question remains open as to what timeframe Oxfordshire's updated Health and Wellbeing Strategy operates over. Oxfordshire's previous Health and Wellbeing Strategy operated over a five year period from 2019-2023. However, Oxfordshire's neighbouring authorities within the BOB area have opted for different timeframes: Buckinghamshire's strategy runs from 2022-2025 (three to four years) while Berkshire West's strategy runs from 2021-2031 (ten to eleven years).

- 22. The adopted timeframe must take into account the fact that, in many cases, improvement in health and wellbeing outcomes will take a reasonably long time to achieve. However, as the Covid-19 pandemic and the cost of living crisis have shown, significant events can occur which cannot be foreseen. Such events impact on health and wellbeing and require a new strategic approach to effectively address them. Taking this into account and building on feedback from the T&F group, setting the strategy for 2024-2030 represents a reasonable balance of organisational views on the overarching timeframe. It should be noted that, irrespective of the strategy's exact timeframe, it will contain some priorities that need to and can be delivered over a shorter time period (1 to 2 years) and others which are longer term in the nature.
- 23. The Health and Wellbeing Board is requested to consider the above points and provide its opinion on the appropriate length of the strategy, which the Board will finalise after feedback from residents as part of the formal consultation.

## **Proposed Structure & Emerging Themes**

- 24. This section outlines a proposed structure for the strategy, as approved by the Task and Finish Group. It also offers high level themes emerging from substantial ongoing contributions from and discussion among the Task and Finish group.
- 25. It is worth emphasising that this section is far from final. The final themes, priorities, and principles must be informed by resident voices and data insight. Further, officers propose that the final strategy advocates a limited number of priorities, to ensure that Oxfordshire's local vision for health and wellbeing has real focus. The process of refining these themes, priorities, and principles must be determined by three factors: 1) what residents tell us during our engagement work; 2) data insight from JSNA and other key sources; and 3) which areas of focus can only be achieved by system-wide working.

#### Structure

26. The Task and Finish Group proposes that the strategy adopts the Life Course approach, with 'Start Well', 'Live Well', and 'Age Well' as key themes. This reflects the approach taken by the ICS Strategy. The Task and Finish group continues to consider the possibility of additional themes which span the entire life course. The Task and Finish group also proposes that the strategy is guided by various 'principles'—ways of working that guide everything we do over the next few years—and underpinned by various 'enablers', without which the system will not be able to improve residents' health and wellbeing. A visual

representation of this framework is provided below. The Health and Wellbeing Board is requested to approve the overarching framework for the strategy.

Figure 4. Proposed high level structure of Health and Wellbeing Strategy



- 27. Officers suggest that, for each life course theme e.g., "Start Well", there are roughly three priorities. This will ensure the Board has a clear focus over the next few years. Officers also suggest that the strategy includes immediate actions, outlining where the Board will drive change over the first 1-2 years. For each priority area, officers propose that the strategy implements change through various routes: providing quality, inclusive, and accessible services; enabling healthy behaviours; building community resilience; putting in place the building blocks of health; and creating a healthy built environment.
- 28. Officers also suggest that the strategy and its priorities are linked to an associated delivery plan and outcomes framework. The outcomes framework would outline key KPIs and outcomes for each priority area. The delivery plan would outline in depth how respective organisations will work together to deliver these priorities, KPIs, and outcomes, year-on-year. Both the delivery plan and outcomes framework would be monitored by existing or to-be-formed groups, which would report directly to the Health and Wellbeing Board. The Health and Wellbeing Board would receive annual reports about progress on the delivery plan and outcomes framework.

#### Content

29. All organisations have contributed, and continue to contribute, to discussion around the content of the Health and Wellbeing Strategy. These discussions are early and ongoing. All organisations have had the opportunity to submit written documentation outlining what they want to see in the updated Health and Wellbeing Strategy. All organisations have also contributed to ongoing discussions about what the updated Health and Wellbeing Strategy ought to include. This ongoing dialogue has allowed the group to propose principles and enablers to guide and support the strategy; priorities within each Life Course theme; possible additional themes/content; and strategies/plans/policies they wish to contribute to the Health and Wellbeing Strategy. The collation of submitted documents and ongoing dialogue has informed the 'emerging themes' outlined below:

Principles	Enablers	Themes spanning entire life course
<ul> <li>Tackling health inequalities</li> <li>Prevention &amp; early intervention—whole system approach</li> <li>Collaboration &amp; partnership between organisations</li> <li>Healthy place shaping</li> <li>Value-led &amp; insight/evidence-informed <ul> <li>Led by values of residents</li> <li>Informed by qualitative &amp; quantitative data insight &amp; evidence</li> </ul> </li> <li>Empowering communities <ul> <li>Community resilience</li> <li>Asset based community development (ABCD)</li> </ul> </li> <li>Co-production, lived experience, &amp; community engagement</li> <li>Person-centred care</li> <li>Daring to do differently</li> </ul>	<ul> <li>Data &amp; digital         <ul> <li>Shared data &amp; records</li> <li>Data insight &amp; intelligence</li> <li>Accessible population health data</li> <li>Digital inclusion</li> </ul> </li> <li>Workforce         <ul> <li>Staff health wellbeing—without workforce wellbeing we cannot deliver better health &amp; care</li> <li>Recruitment &amp; retention</li> </ul> </li> <li>Vibrant communities         <ul> <li>Community resilience</li> <li>Opportunities &amp; strengths among people &amp; places</li> </ul> </li> <li>Anchor institutions, including 'One Public Estate'</li> <li>Communication &amp; language</li> <li>Innovation and research</li> </ul>	<ul> <li>Prevention &amp; inequalities         <ul> <li>Equality, diversity, and inclusion</li> <li>Health inclusion groups</li> </ul> </li> <li>Climate, nature, and clean air         <ul> <li>Climate related health risks e.g., heat</li> <li>Climate mitigation</li> <li>Biodiversity</li> <li>Protecting nature &amp; increasing access to nature</li> <li>Green prescribing</li> </ul> </li> </ul>
Start Well	Live Well	Age Well
<ul> <li>Mental health &amp; emotional wellbeing (including CAMHS)</li> <li>Early years—first 1001 days &amp; perinatal support</li> <li>Food, nutrition, &amp; FSM—tackling childhood obesity</li> <li>Physical activity &amp; active travel</li> <li>0-5 school readiness, especially among areas of deprivation and for children eligible for Free School Meals</li> <li>Educational attainment</li> <li>SEND (special education needs &amp; disability)—community resilience</li> <li>Lost opportunities due to Covid/cost of living crisis</li> </ul>	<ul> <li>Adult mental health &amp; wellbeing, including suicide &amp; self-harm</li> <li>Key behavioural determinants e.g., tobacco control, alcohol, healthy weight &amp; food</li> <li>Being active &amp; active travel</li> <li>Adults with learning disabilities, disabilities, &amp; neurodivergent adults</li> <li>Stronger links between health, housing and mental health</li> <li>Accessible, affordable, quality housing</li> <li>Poverty, deprivation, &amp; financial resilience—foundational economy</li> <li>Available, quality employment</li> <li>Domestic abuse</li> </ul>	<ul> <li>The Oxfordshire Way (helping residents to help themselves)</li> <li>All ages carers, including unpaid carers</li> <li>Preventing unnecessary hospital admissions &amp; anticipatory care</li> <li>Dementia &amp; falls</li> <li>Rurality and social isolation</li> <li>Reducing preventable mortality</li> <li>Local Area Coordinator programme &amp; integrated neighbourhood teams around PCNs</li> <li>Keeping active</li> </ul>

## **Financial Implications**

30. There are no direct financial implications associated with this report. The Officer resource required to develop the work will need contribution from partners of the Health and Wellbeing Board.

## Legal Implications

31. The development of Oxfordshire Health and Wellbeing Strategy will meet the Health and Wellbeing Board's statutory duty to publish a strategy to address health needs of the local population, as described above. The publication of the JSNA 2023 will enable the Board to meet its duty that its strategy addresses resident needs as outlined in the JSNA.

## Staff Implications

32. The Officer resource required to develop the work will need contribution from partners of the Health and Wellbeing Board, as agreed by the HWB on 16<sup>th</sup> March 2023.

## **Equality & Inclusion Implications**

- 33. Tackling health inequalities will play a key role in the eventual Health and Wellbeing Strategy. This includes inequalities in health outcomes, experiences, and access to health and care services. This priority will be driven by insights from JSNA 2023.
- 34. It is important that residents from disadvantaged groups have a chance to help shape the Health and Wellbeing Strategy. As outlined above, officers will engage with residents from disadvantaged groups across Oxfordshire during the process of updating the strategy, especially those whose health is adversely impacted by their respective disadvantage. Officers will draw on existing networks and community groups to run targeted focus groups to ensure their voice is heard.

# **Sustainability Implications**

35. The process of updating the strategy itself has no direct sustainability implications. However, it is anticipated that the strategy will also consider the impact of climate change on health, including air quality, access to nature, and the built environment. It is anticipated that the strategy will build on and affirm existing partnership-wide climate action commitments, recognising the impact this has on residents' health and wellbeing.

## **Risk Management**

36. A detailed risk assessment is not required for this work. Regular oversight and input on the strategy development will be provided by the Health and Wellbeing Board and the Task and Finish group.

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HEALTH

Annex: Annex 1\_Communications and Engagement Plan\_HWS

Annex 2\_Terms of Reference\_HWS Task & Finish group

Background papers: Final ICS Strategy: <u>Buckinghamshire</u>, <u>Oxfordshire &</u>

Berkshire West Integrated Care Partnership

http://yourvoicebob-icb.uk.engagementhq.com

Oxfordshire Joint Health and Wellbeing Strategy 2019-

<u>2023</u>

Joint Strategic Needs Assessment | Oxfordshire Insight

Statutory guidance on joint strategic needs assessments and joint health and wellbeing strategies

(publishing.service.gov.uk)

Health and wellbeing boards - guidance - GOV.UK

(www.gov.uk)

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