

## **Divisions Affected - All**

### **Oxfordshire Health and Wellbeing Board**

**7<sup>th</sup> December 2023**

## **UPDATING OXFORDSHIRE'S HEALTH AND WELLBEING STRATEGY**

**Report by Ansaf Azhar, Corporate Director of Public Health and Community Safety**

### **RECOMMENDATION**

**The Health and Wellbeing Board is RECOMMENDED to**

- Note the content of the public consultation report (Annex 1) which contains the consultation methodology, summary of feedback received and how it has informed the strategy.
- Approve the content of the full final strategy (Annex 2) as the final version of the Board's Health and Wellbeing Strategy for 2024-2030.
- Support plans to publicise the Strategy in January 2024 when it is fully launched
- Note that Officers plan to bring to the Board meeting in March 2024 a delivery plan and outcomes framework to support strategy implementation.

### **1. Executive Summary**

1.1. Organisations across the Health and Wellbeing Board have developed a new Oxfordshire Health and Wellbeing Strategy for 2024-2030 (Annex 2), which has been informed throughout by the Integrated Care System (ICS) Strategy and the Oxfordshire Joint Strategic Needs Assessment (JSNA). The strategy content has been developed through a process of early engagement with people and communities across Oxfordshire, a workshop with the Health and Wellbeing (HWB) Board, full public consultation and several HWB Board discussions. A cross-organisational Task and Finish group has led the work on behalf of the HWB Board throughout the process.

1.2. The strategy offers a strong, unified vision for improved health and wellbeing and will act as the primary *place* strategy for health and wellbeing in Oxfordshire. Officers now propose to publish the final version of the strategy (in Annex 2) after final production work is complete- this will be launched in Jan 2024. The Task and Finish group will then develop a delivery plan and outcomes framework which will be presented to the Health and Wellbeing Board in March 2024.

## 2. Background and Process

- 2.1. **Initial planning & data:** On 16 March 2023, the HWB approved initial plans to update Oxfordshire's Health and Wellbeing Strategy and form a cross-organisational Task and Finish group to drive progress between meetings. The Task and Finish Group has overseen the publication of JSNA 2023 and used its findings to inform emerging themes for the Health and Wellbeing Strategy. All organisations on the Health and Wellbeing Board helped draw up a longlist of priorities, principles, and enablers and helped determine the strategy's structure, informed by the ICS Strategy published in March 2023.
- 2.2. **Priorities and structure:** On 29 June 2023, the Health and Wellbeing Board reviewed and commented on the longlist of draft priorities, principles, and enablers—as well as a draft structure. The Board emphasised the need to achieve focus by outlining a limited list of priorities. The Task and Finish Group led a process of refinement, considering the longlist against the priorities of people across Oxfordshire, the needs as outlined in the JSNA, and considering where we can make greatest contribution in partnership.
- 2.3. **Extensive early engagement:** The Task and Finish group oversaw a thorough process of early public engagement, led by Healthwatch and Oxfordshire County Council, to ensure that residents' views informed the strategy's approach and priorities. Healthwatch Oxfordshire's work engaged residents from all backgrounds across the entire County on streets, at events, and via an online survey. To complement this, the County Council led detailed focus groups with seldom heard communities to ensure the strategy is informed by residents at greatest risk of poor health outcomes. Engagement reports from both pieces of work were brought to Oxfordshire's Joint Health Overview and Scrutiny Committee
- 2.4. **Draft strategy:** The Task and Finish Group worked together to develop a draft strategy which was shared with Health and Wellbeing Board members on 1<sup>st</sup> September before a workshop of Board members on 7<sup>th</sup> September. The output from that workshop was used to refine the strategy further and build the full draft that was reviewed and approved for public consultation at the Health and Wellbeing Board on 5<sup>th</sup> October 2023.
- 2.5. **Consultation:** A full public consultation was undertaken in October and November. This included using a consultation web-platform, a public webinar and, several face-to-face meetings with stakeholder groups. The findings of this consultation have been used to inform the final version of the strategy.

## 3. Public Consultation

- 3.1. **Consultation process-** A full public consultation was undertaken between 9th October and 12th November 2023. This included using a consultation web-platform (Let's Talk Oxfordshire) which yielded 435 responses, a public webinar with 68 participants, several face-to-face meetings with stakeholder groups and an easy read version distributed to organisations and individuals on request. The consultation was promoted key networks and partnerships, social media, staff communications, e-newsletters such as Your Oxfordshire and the GP bulletin, councillors, parish/town councils and council teams (e.g. housing, adult social care, children's services etc.) and other partner organisations such as the third sector, healthcare settings and the universities. All partners on the Health and Wellbeing Board also promoted the consultation survey through their networks.
- 3.2. **Consultation engagement-** More than 500 people feedback on the content of the strategy, some from the perspective of individual residents, some as organisations that work with specific groups of residents or provide health and care services locally, meaning the reach of the consultation was significantly greater than 500. An easy read version of the strategy was made available for groups or individuals who needed this to enable consultation engagement. As was expected, the following resident groups where more likely to respond; people of white ethnicity, female gender and aged between 55-74.
- 3.3. **Consultation findings-** The vast majority (90-95%) of respondents fully or partly agreed with the strategy's principles, priorities and enablers. A full breakdown of responses per priority is available in the full consultation report. Residents where able to provide free text comment on each section too. Some cross cutting themes emerged from feedback that apply to the strategy throughout. These include;
- The importance of ensuring delivery with clear goals
  - Budget and workforce being needed to ensure strategy is delivered
  - Allowing freedom of choice whilst supporting healthy lives
  - The centrality of mental wellbeing
  - Access to healthcare services
  - Needs of children with Special Educational Needs or Disability

The full report from this consultation can be found in Annex 1

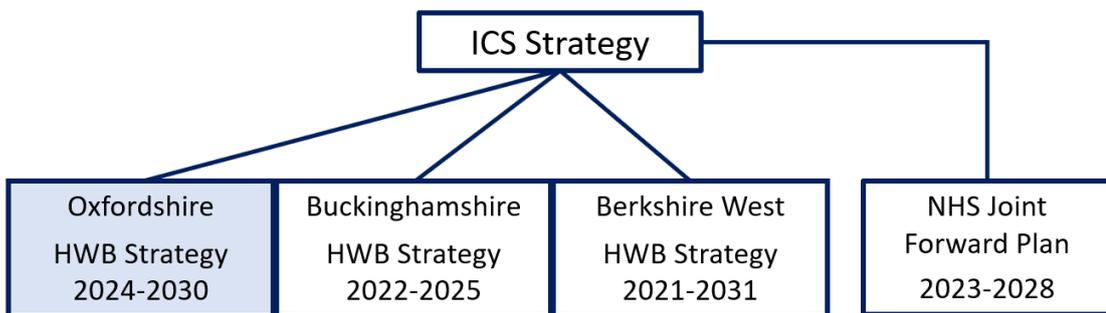
## 4. Strategy Content

- 4.1. **Oxfordshire's One Place Strategy-** The Health and Wellbeing Strategy will act as the primary **place** strategy for health and wellbeing in Oxfordshire, bringing together partners to deliver a shared ambition: our "true north". Whilst a Buckinghamshire Oxfordshire Berkshire West Integrated Care Strategy and

an NHS Joint Forward Plan have been published in the last 12 months for the overall Integrated Care System, this will be the single strategy at the Oxfordshire Place footprint that all local partners, including our Place Based Partnership, are signed up to.

**4.2. How this relates to the Integrated Care Strategy-** The new Health and Wellbeing Strategy aligns closely with the ICS strategy—both adopt a life course approach, focus on the need for prevention, and target health inequalities, highlighting Oxfordshire’s 10 priority wards.

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



**4.3. A broad view of wellbeing-** The Health and Wellbeing Strategy will focus on wellbeing in its broadest sense, moving beyond a clinical or service-oriented view, towards a community-oriented view. The strategy therefore reflects the building blocks of health, e.g., deprivation, housing, employment, which significantly influence health and wellbeing—and are drivers of increasing need for services. Ensuring these building blocks of health are in place in Oxfordshire is a fundamental role of the Health and Wellbeing Board

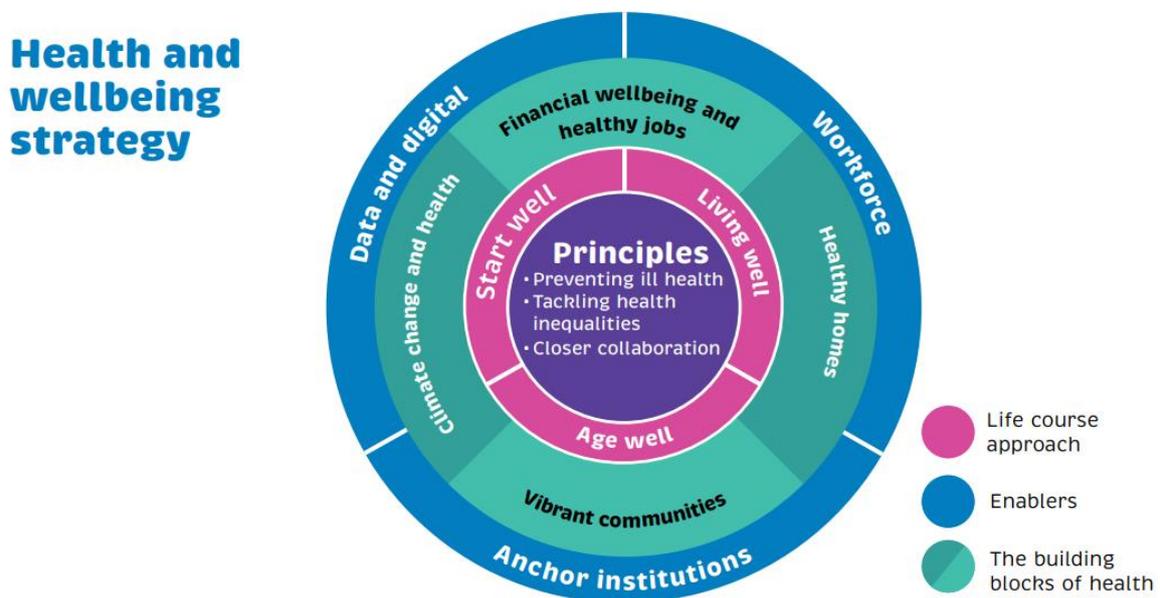
*Figure 2: Dahlgren and Whitehead rainbow to illustrate wider determinants of health and scope of the health and wellbeing strategy*



- 4.4. **Summary of the strategy-** The Strategy is made up of the following 4 elements;
- 4.4.1. **Principles-** Health Inequalities, Prevention and Closer Collaboration
  - 4.4.2. **Life course priorities-**
    - 4.4.2.1. Start Well- The best start in life, CYP emotional wellbeing and mental health,
    - 4.4.2.2. Live Well- Healthy people and healthy places, physical activity and active travel
    - 4.4.2.3. Age Well- Maintain independence, strong social relationships
  - 4.4.3. **Building Blocks of health-** Financial wellbeing and healthy jobs, climate change and health, healthy homes, thriving communities
  - 4.4.4. **Enablers-** Workforce, data and digital and anchor institutions

Every section of the strategy uses the 3x principles to focus the ambition and content. Each section has an ambition statement, data and insight as to why the priority is important, aspirations of what we want to achieve by 2030 and some initial steps for action.

Figure 3: Summary of Oxfordshire Health and Wellbeing Strategy



## **5. Next Steps and Implementation**

5.1 To be effective, a strategy must translate into action. We have learned from the current Health and Wellbeing Strategy that if this is not in place it is harder to drive forward action. We also know that, due to the Covid-19 pandemic, some of our shared ambition had to change to respond to shared challenges. Therefore, this time round it's very important to have a delivery plan and an outcomes framework that can be monitored to ensure delivery. However, the first step is to develop a set of priorities that partners can sign up to before an action plan or an outcomes framework. We aim to publish an associated delivery plan and outcomes framework in March 2024, following shortly on the heels of the strategy itself. This ensures that, as a system, we can first decide *what* our priorities are, then outline *how* we will deliver them.

5.2 The Task and Finish Group plans to bring an associated delivery plan and outcomes framework for approval in March 2024. The outcomes framework will outline key performance indicators (KPIs) and outcomes for each priority area, we will use insight from the public consultation to ensure they are meaningful to them. The delivery plan will outline in depth how respective organisations will work together to deliver these priorities, KPIs, and outcomes, year-on-year. Implementation of the delivery plan will be the responsibility of existing sub-groups of the Board, which will report directly to the Health and Wellbeing Board. The Health and Wellbeing Board will receive regular reports about progress on the delivery plan and will monitor impact through the outcomes framework.

## **6. Financial & Staff Implications**

6.1 There are no direct financial implications associated with this report. The Officer resource required to develop the work has required and continues to require contribution from partners of the Health and Wellbeing Board, as agreed by the Health and Wellbeing Board on 16<sup>th</sup> March 2023. All partners on the HWB Board will need to use organisational resource to support delivery of this strategy.

## **7. Legal Implications**

7.1 The development of Oxfordshire's 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. 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. The consultation report attached addresses the HWB's legal duty to consult with the public regarding a draft strategy.

## **8. Equality & Inclusion Implications**

8.1 Tackling health inequalities plays a key role in the draft Health and Wellbeing Strategy. The strategy places front and centre the need to tackle avoidable and unfair inequalities in health outcomes, experiences, and access to health and care services. This guiding principle is driven by insights from JSNA 2023.

8.2 Staff across organisations have all emphasised that people from disadvantaged groups should have a chance to help shape the Health and Wellbeing Strategy. As outlined in this report, officers have engaged with residents from disadvantaged groups across Oxfordshire during the process of updating the strategy, especially those whose health has been adversely impacted by their respective disadvantage. Officers have drawn on existing networks and community groups to run targeted focus groups to ensure their voice is heard.

## 9. Sustainability Implications

9.1 The process of updating the strategy itself has no direct sustainability implications. However, the final strategy includes a priority regarding the impact of climate change on health, including air quality, access to nature, and the built environment. The final strategy builds on and affirms existing partnership-wide climate action commitments, recognising the impact this has on residents' health and wellbeing.

## 10. Risk Management

10.1 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.

NAME DAVID MUNDAY, DEPUTY DIRECTOR OF PUBLIC HEALTH

Annexed papers: 1. Annex 1- Oxfordshire Health and Wellbeing Strategy (2024-2030) Consultation Report  
2. Annex 2- Health and Wellbeing Strategy for Oxfordshire (2024-2030) Full Final Version.

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