Agenda Item 8





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Title: Health and Wellbeing Strategy

Report of: Rachel Soni – Bi-Borough Director of Health

Partnerships

Wards Involved: All

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1. Executive Summary

- 1.1 The Joint Westminster and Kensington and Chelsea Health and Wellbeing Board (HWBB) agreed in 2021 to undertake a refresh of their individual strategies to reflect learning from Covid 19 and to set out a direction of travel that would have an impact on health inequalities in our boroughs.
- 1.2 This report presents the draft 10-year Health and Wellbeing Strategy (HWBS) and seeks approval to consult for the next 8 weeks on the strategy.

2. Key Matters for the Board

- 2.1 The Board is asked to:
 - Note the work carried out to date to develop the draft 10-year health and wellbeing strategy.
 - Approve the draft strategy for consultation and
 - Endorse and promote the consultation through your local networks and partnerships.

3. Developing the Health and Wellbeing Strategy

- 3.1 When agreeing to the development of a new joint Strategy the Board Members set out several principles, including:
 - The strategy statement/vision covers a chosen 10 years with medium term organisational plans providing the detail and the delivery focus.
 - Keeping residents at the heart of what we do
 - Taking an evidence-based approach using local data sets, quantitative and qualitative
 - Being accountable to residents with shared ownership of decisions in an open and transparent way through the HWB board
 - Working across organisation boundaries in a collaborative way by focusing on residents and not the organisation
 - To challenge inequalities by sharing, disseminating, and championing learning and evidence.
- 3.3 Additionally, the HWBB requested that the strategy development utilises existing evidence and engagement findings. This work involved a comprehensive literature review (Appendix A) to identify priorities and best practice to address health inequalities and to identify areas and issues that would impact people's lives by addressing the wider determinants of health.
- 3.4 The strategy has been informed by evidence throughout through the development of the he Joint Strategic Needs Assessment (JSNA) "Borough Stories" and other engagement activities with residents and partners. This information has provided much of the evidence informing the drafting of the strategy.

Planning Workshops

3.4 After the initial research period a working group of HWBB partners was established with representatives drawn from the local authorities, NHS and VCS organisations. Following a series of workshops, 10 Ambition statements / policy areas covering the wider determinants of health and wellbeing were agreed and developed.

Engagement

- 3.6 To test the emerging priorities and ambition statements a programme of wider engagement with residents, business and other partners was carried out. The key aim of the objectives of the engagement and consultation has been to:
 - Understanding the voice of residents.
 - Share information and understanding.
 - Be collaborative in the development of the HWB strategy.
- 3.7 The development of the Strategy used a variety of engagement methods to reach as many people as possible to further develop the ambition statements of the strategy (see below). This has involved a mix of quantitative (feedback forms/ surveys) and qualitative (focus groups/ deliberative events/ workshops), for example,
 - Workshops to identify the priorities, structure and themes of the strategy.
 - Summer Inequalities Programme engagement.
- 3.8 This was supported by an online survey 51 responses were received made up of:

- 23 Westminster Residents.
- 13 Kensington and Chelsea Residents.
- 10 people who work in either borough.
- 9 other.

4. Draft Health and Wellbeing Strategy

Our overall vision

Our overall vision for health and wellbeing on our boroughs

Outcome

The key outcomes we want to achieve

Ambitions

• The specific areas that help us achieve our outcomes

Indicators

 The data sets we will use to monitor progress against our outcomes and determine work programmes

Work Programme 2 to 3 year programmes of work for the Health and Wellbeing Board to achieve our outcomes

- 4.1 The draft strapline for the Health and Wellbeing Strategy is 'Healthier and Happier Lives'. This encapsulates our aims to tackle health inequalities, improve health and wellbeing and make sure everyone can live happy fulfilling lives.
- 4.3 Our co-produced vision outlines our approach to working with communities and across partners to make a difference to people's lives.

"People live healthy and happy lives to their fullest and in ways they choose in communities that are fair and safe."

- 4.3 Supporting the vision are the outcomes that matter to people and to be what we are all working to achieve.
 - Residents live longer and in a way that allows them to fulfil their lives.
 - Residents have their mental wellbeing seen as important as their physical health.
 - Residents live in communities that are healthy, safe and with good quality schools, housing and environment.
 - Residents have access to good quality and fairer services that meet their needs.
- 4.4 These outcomes will be how the HWBB measures its success in achieving the strategy's vision. An outcomes framework is being developed that will facilitate the principle that we are accountable to residents with shared ownership of decisions in an open and transparent way through the HWB board.

- 4.4 Following the HWBB meeting on 15 September 2022 feedback on the draft ambition statements have been incorporated to form the basis of the strategy. The 10 ambition statements are the specific policy areas that contribute to the outcomes:
 - Our children and young people are healthy, safe and happy and can achieve their full potential.
 - 2. We can all be active in our health.
 - 3. We support people to look after their mental wellbeing.
 - 4. We have a good quality home.
 - 5. We feel safe and part of our communities.
 - 6. Our boroughs are healthy environments.
 - 7. We have access to the best services when and where needed.
 - 8. We are all treated with fairness and able to shape the decisions that affect us.
 - 9. We are all financially stable and have access to enriching opportunities and good jobs.
 - 10. We are supported and empowered to live as independently as possible.
- 4.5 Following the last discussion at the board of the strategy on 24 November 2022 a series of workshops were held on each of the 10 ambitions with colleagues from the Health and Wellbeing Board Members to test and refine the content of each statement.
- 4.6 Addressing health inequalities is complex and in the HWB Strategy there was a commitment to visualise what good health and wellbeing means for people. A visual artist was commissioned to work with a range of people and organisations to develop this visual including:
 - Session with local residents identified through the Local Account Group and partners.
 - Session with local organisations working across our boroughs.
 - Session with young people.
 - Session with senior managers.
- 4.7 The visual is within the document and helps to tie in the 10 ambition statements to reinforce how we all need to work collaboratively and with our residents to make a difference to the lives of local people.
- 4.7 The strategy commits to developing an outcomes framework that will include a two-to-three-year work programme setting out what the board will focus on during that period. These decisions will be based on a set of indicators data sets that will show the progress we are making towards achieving our outcomes. The development of this framework will take place once the strategy has been approved.

5. Consultation

- 5.1 Subject to the board's approval, the Health and Wellbeing Strategy will be consulted on for 8 weeks. The draft consultation plan is attached at appendix C.
- 5.2 The consultation plan is built around 6 key activities/channels:
 - In-person workshops across each borough
 - Virtual workshops
 - Online survey (including easy-read version)

- Hard copy survey (available in libraries, GPs etc)
- Attendance at strategic partner meetings and community groups
- Comprehensive comms plan to promote the consultation
- 5.3 The key audiences identified in the consultation are:
 - Residents
 - VCS and community organisations
 - Strategic Partners
 - Staff.
- 5.4 The consultation plan has been presented to the Westminster Quality Improvement Board and is currently going through the RBKC consultation gateway. Feedback received so far has focused on the need to make sure that we target the consultation at groups that are particularly affected by health inequalities and who are typically underrepresented in consultation responses.

6. <u>Financial Implications</u>

6.1 There are no direct financial implications arising from this report. Implementing our plans to achieve our strategy ambitions requires resources and investment over the long term as part of business and budget planning.

7. <u>Legal Implications</u>

7.1 The Health and Wellbeing Board has a statutory duty to prepare a joint health and wellbeing strategy under s116A of The Local Government and Public Involvement in Health Act 2007.

8. <u>Carbon Impact</u>

8.1 Health and Wellbeing outcomes include environmental impact. It is believed that there is no direct carbon impact as a result of this report, however the strategy will aim to bring positive indirect impacts.

9. Consultation

9.1 The Health and Wellbeing Strategy will be subject to formal consultation before being agreed by the Health and Wellbeing Board.

10. Equalities Implications

- 10.1 The Health and Wellbeing Board must have due regard to its public sector equality duty under Section 149 of the Equality Act 2010. In summary section 149 provides that a Public Authority must, in the exercise of its functions, have due regard to the need to:
 - (a) eliminate discrimination harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - (c) foster good relations between persons who share a relevant protected characteristics and persons who do not share it.

- 10.2 Section 149 (7) of the Equality Act 2010 defines the relevant protected characteristics as age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- 10.3 An initial screening has been completed. The Council believes there are no negative direct equalities implications arising from this report. An Equalities Impact Assessment will be undertaken as part of each policy review and is underway for the strategy.

If you have any queries about this Report or wish to inspect any of the Background Papers, please contact:

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Appendices

- Appendix A Literature Review
- Appendix B Summary of engagement activity to date
- Appendix C Consultation Plan