

To the Chair and Members of Full Council

DONCASTER HEALTH AND WELLBEING STRATEGY 2016-21

EXECUTIVE SUMMARY

1. The purpose of this paper is to present a revised final draft of the Doncaster Health and Wellbeing Strategy 2016-21. To fulfil its statutory duties, the Doncaster Health and Wellbeing Board are required to produce a Health and Wellbeing Strategy and this revised strategy replaces the first Health and Wellbeing Strategy (2013-16) endorsed in 2013. The revised strategy (following a comprehensive public and stakeholder consultation) is now a more up to date reflection of the Health and Wellbeing Board's strategic priorities and changing health and social care landscape. The accompanying Due Regard Statement reflects the feedback from the consultation and areas for development in relation to the needs of protected groups.

The revised Health and Wellbeing Strategy 2016-21 is a high level document underpinned by a number of technical plans and delivery mechanisms and is aligned with the Doncaster's Borough Strategy Refresh (2014) and other strategic plans. The strategy has **3 key aims**:

- The strategy presents a high level vision for health and wellbeing in Doncaster and describes the locally adopted model for health and wellbeing
- The strategy outlines the roles and ways of working for key partners to play in ensuring the effective delivery and implementation of the Health and Social Care Transformation Fund which will focus on developing early interventions and lower level wellbeing support in communities
- The strategy has identified **4 key themes** for development to improve health and wellbeing outcomes in Doncaster:
 - Wellbeing
 - Health and Social Care Transformation
 - Five Areas of Focus
 - Reducing Health inequalities

These 3 aims form the work plan of the Health and Wellbeing Board which will continue to be the key partnership for health and wellbeing in Doncaster and is part of the wider Team Doncaster Strategic Partnership.

EXEMPT REPORT

2. N/A

RECOMMENDATIONS

3. The Council is asked to:
 - a **CONSIDER** and **ENDORSE** the final strategy report with recommendation for final publication of the Health and Wellbeing Strategy (2016-21) in January 2016
 - c **CONSIDER** and **ENDORSE** the Due Regard Statement (2015-21)

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The Health and Wellbeing strategy provides an overarching strategy for the Health and Wellbeing Board and is the link between the Borough strategy and more detailed operating plans of both partnerships and individual organisations. The strategy is not meant to include everything that is happening in health and wellbeing but serves to focus the work of the board.

BACKGROUND

5. **Strategy Refresh**– following the feedback from the Health and Wellbeing Board Peer Challenge review in December 2013 it became apparent that in view of the changing membership of the board, and the changing landscape in recent months it would be timely now to refresh the current Joint Health and Wellbeing Board strategy. It was also pertinent in that the Borough strategy, the Council Corporate plan and the JSNA were also under review and have since been refreshed in 2014 as part of a wider Partnerships Improvement plan and therefore it would make sense that the Health and Wellbeing strategy is aligned with these corporate strategies. It is also significant in terms of the developing Integration (Better Care Fund) agenda now called the *Health and Social Care Transformation Programme*.

At the **13th March 2014** Board meeting it was agreed that the proposal to provide a review of the current strategy and to determine if there are any gaps; which elements of the strategy are still current and identify any new areas for development was approved. The following areas/priorities were considered:

- *Vision*
- *I statements*
- *Areas of Focus – review of current areas particularly personal responsibility*
- *Alignment with other strategies and Corporate Plan*
- *Refresh of the JSNA*
- *Wider partnership links*
- *Wider Determinants model*
- *Links to Better Care Fund*
- *Links to TLAP/Community Capacity building*
- *Community engagement*
- *Work plans for the Areas of Focus and programme areas*

6. In **June 2014** a stakeholder event was held at the Hub and the report Presented to the board in **September 2014** where a further update paper was presented outlining the proposal for the refresh and was endorsed by the Board. The outcomes of the June Stakeholder event were collated and presented to the Board and were agreed alongside the vision, the mission statement and the I Statements as the overarching framework. Further work was proposed to develop the 4 strategic priorities which included the following 4 themes:

- **Wellbeing** including the themes identified from the June event
- **Areas of Focus** – refresh of current priorities
- **Health and Social Care Transformation Programme**
- **Reducing Health Inequalities**

7. In **June 2015** a draft Health and Wellbeing strategy was presented to the Health and Wellbeing Board following a series of workshops and conversations in February 2015 with a caveat that further amendments would be made, graphical design input would be implemented and the proposed consultation plan would be delivered over the 12 week period from July to early October 2015. Final revisions would be made following the consultation and a final draft presented to the Health and wellbeing Board in November 2015.

8. In **July 2015** the consultation plan for the Health and being Strategy was executed through the Public Health team and the Officer group and consisted of a two staged process – an online survey monkey targeting over 400 stakeholders and third sector networks/groups, a social media campaign implemented through local bulletins, Facebook, social media. local libraries, GP practices, area teams and a targeted consultation with 11 protected groups. The detailed consultation plan is available on request. As a result of this **256** responses were received consisting of:

- 131 survey monkey responses
- 91 protected groups responses
- 34 hard copy and email responses

Although 28 groups were contacted (and the invite extended to further groups through Third sector emails and lead contacts) in the end **11** groups were consulted with using a variety of methods including focus groups, 1:1 interviews, easy read presentations and group discussions. All consultations were tailored to group and individual need. With this in mind, an easy read version and dictionary of the strategy was produced in conjunction with service users and a summary was also made available on the website in response to early feedback through consultation. The targeting of groups with protected characteristics was deliberately chosen to gain representation and feedback from those groups who are usually unrepresented.

The feedback from the consultation is available on request. The results show representation from different areas of Doncaster, different age groups, gender and ethnic status and from those with learning and physical disability and different sexual orientations.

9. Consultation feedback and Strategy revision – following the 12 Week consultation period a Public Health task group who implemented the consultation process met to discuss the findings and to pull together a consultation report (available on request). The main themes identified from the consultation were as follows:

- The need to include **substance misuse (Drugs and alcohol)** - a recurring theme;
- The need to include **children and young people** – make it more explicit around children’s health and wellbeing;
- The needs of **minority ethnic groups** -this will be picked up through the health inequalities section and the delivery plan;
- The need to ensure **user friendly versions of the strategy** are available and to ensure a **delivery plan** is in place.

The key issues raised from the consultation from the protected groups is also captured in the Due Regard statement (attached) where real consideration has been applied in relation to the impact of the strategy on certain groups including veterans, minority ethnic groups, individuals with physical or learning disability, sex workers, immigrants and refugees . These will be further explored through the proposed delivery plan

Other issues raised were around the varying definitions of wellbeing; cultural and spiritual wellbeing and the need to include ‘**feeling safe**’ in the overall vision. These changes have already been incorporated into the final version of the strategy. Issues were also highlighted around mental health and the Crisis team and these will be picked up through the Mental Health work streams.

At the January 2016 Health and Wellbeing Board the draft strategy was approved subject to a few minor amendments for recommendation to Full Council on 28th January 2016 for adoption.

The timescale proposed for the strategy development is as follows:

- **Revised draft to 7th January 2016 Health and Wellbeing Board – completed and endorsed subject to minor amendments**
- **Presentation to Full Council – 28th January 2016**
- **Final publication of document – January 2016**
- **Development of Strategy Implementation/ Delivery plan January – March 2016**

OPTIONS CONSIDERED

10. a Endorse the final strategy document and Due Regard Statement following recent amendments and endorse final publication by January 2016
- b Propose further amendments before final publication in January 2016

REASONS FOR RECOMMENDED OPTION

11. The current strategy reflects the health and wellbeing needs of Doncaster people and is based on the Joint Strategic Needs Assessment and public consultation. The strategy refresh is based on similar inputs and production will be aligned with the borough strategy, the Corporate Plan ,The Health and Social Care Transformation Programme and the refreshed JSNA bringing it up to date. The Think Local Act Personal (TLAP) framework and the Health Improvement Framework will provide the underpinning delivery mechanism for the implementation of the strategy and will further enhance community engagement and wider consultation with key stakeholders in Doncaster. A delivery plan will be developed following its publication and a wider public engagement strategy will be explored in line with the Board's self- assessment process.

IMPACT ON THE COUNCIL'S KEY OUTCOMES

12.

	Outcomes	Implications
	<p>All people in Doncaster benefit from a thriving and resilient economy.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> • 	<p>The dimensions of Wellbeing in the Strategy should support this priority.</p>
	<p>People live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>The Health and Wellbeing Board strategy will contribute to this priority</p>
	<p>People in Doncaster benefit from a high quality built and natural environment.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>The Health and Wellbeing Board strategy will contribute to this priority</p>

	<p>All families thrive.</p> <ul style="list-style-type: none"> • Mayoral Priority: Protecting Doncaster's vital services 	The Health and Wellbeing Board strategy will contribute to this priority
	Council services are modern and value for money.	The Health and Wellbeing Board strategy will contribute to this priority
	Working with our partners we will provide strong leadership and governance.	The Health and Wellbeing Board strategy will contribute to this priority

RISKS AND ASSUMPTIONS

13. Doncaster requires a health and wellbeing strategy and reviewing the current strategy will fulfill the Board's statutory duty.

LEGAL IMPLICATIONS

14. N/A

FINANCIAL IMPLICATIONS

15. N/A

HUMAN RESOURCES IMPLICATIONS

16. N/A

TECHNOLOGY IMPLICATIONS

17. Nil.

EQUALITY IMPLICATIONS

18. The work plan of the Health and Wellbeing Board needs to demonstrate due regard to all individuals and groups in Doncaster through its work plan, the Joint Health and Wellbeing Strategy and Areas of focus as well as the Joint Strategic Needs Assessment. The officer group will ensure that all equality issues are considered as part of the work plan and the underpinning delivery mechanisms.

A Due Regard statement is presented alongside the Health and Wellbeing strategy for consideration and will be revisited during its life course. A number of groups have been consulted as part of this process and the feedback has informed the amendments in the strategy as well as informing future work programmes and approaches to health inequalities. The need to continually update the statement is highlighted and the recommendation to review the needs of protected and minority groups in the strategy delivery plan.

CONSULTATION

19. This report has significant implications in terms of the following:

Procurement		Crime & Disorder	
Human Resources		Human Rights & Equalities	
Buildings, Land and Occupiers		Environment & Sustainability	
ICT		Capital Programme	

BACKGROUND PAPERS

20. Health and Wellbeing Strategy 2013-16
Consultation Plan 2015 (Available on request)
Consultation Summary 2015 (Available on request)
Due Regard Statement March 2015-21 (attached)

REPORT AUTHOR & CONTRIBUTORS

Louise Robson
Public Health Specialist
01302 734015 louise.robson@doncaster.gov.uk

Dr Rupert Suckling
Director Public Health