

Name of meeting: Council (Reference from Cabinet)

Date: 7th September 2022

Title of report: Kirklees Joint Health and Wellbeing Strategy Refresh

Purpose of report:

The purpose of this paper is to seek the endorsement of Council for the draft refreshed Joint Health and Wellbeing Strategy (JHWS) prior to the final version being presented at the September Health and Wellbeing Board meeting for final approval.

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No
Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)</u>?	Key Decision – No Private Report/Private Appendix – No
The Decision - Is it eligible for call in by Scrutiny?	Yes
Date signed off by <u>Strategic Director</u> & name	Rachel Spencer-Henshall Strategic Director of Corporate Strategy, Commissioning and Public Health
Is it also signed off by the Service Director for Finance?	Eamonn Croston, 26th August 2022
Is it also signed off by the Service Director for Legal Governance and Commissioning?	Julie Muscroft, 26th August 2022
Cabinet member portfoliohttp://www.kirklees.gov.uk/you-kmc/kmc-howcouncilworks/cabinet/cabinet.asp	Cllr Viv Kendrick Chair, Health and Wellbeing Board

Electoral wards affected: All

Ward councillors consulted: Yes – via political groups

Public or private: Public

Has GDPR been considered? Yes, no personal or sensitive data is included in this report.

1. Summary

The Council, along with NHS partners, has a statutory duty to work together through the Health and Wellbeing Board to agree and implement a Joint Health and Wellbeing Strategy (JHWS) for the district.

The JHWS is a high-level strategy which sets out the vision, ways of working and priorities for health and wellbeing in Kirklees. Responsibility for delivery of the JHWS rests across a wide range of local partner organisations and partnerships with oversight by the Kirklees Health and Wellbeing Board.

The current JHWS is being refreshed and the Board expects to approve the new JHWS at its meeting on the 22nd September.

The JHWS is in the Council's Policy Framework as per Article 4 of the constitution. For this reason, the decision about whether the Council adopts the JHWS must be made at Council.

The report was submitted to the meeting of Cabinet on 9 August. Cabinet resolved that Council be recommended to adopt the strategy, subject to final approval by Health and Wellbeing Board.

Council are asked to:

- a) Note and comment on the content of the Joint Health and Wellbeing Strategy, recognising that further minor amendments may be necessary to take account of feedback from Council and other key partners, and that a set of materials to help communicate the JHWS is being developed
- b) Adopt the Joint Health and Wellbeing Strategy, subject to final approval by the Health and Wellbeing Board.

2. Information required to take a decision

2.1. Background

The Health and Wellbeing Board has a statutory responsibility to develop, publish and own the Joint Strategic Assessment and Joint Health and Wellbeing Strategy for Kirklees. Taken together these provide the overarching framework for planning, commissioning and delivery of services that impact on the health and wellbeing of the whole population, not just health and care services. The JHWS is a high-level strategy which sets out the vision, ways of working and priorities for health and wellbeing in Kirklees. The detail of how these will be delivered is in the plans and strategies for specific issues that sit underneath it. The current JHWS has been in place since 2014.

The JHWS is being refreshed as one of the four top tier strategies for Kirklees, alongside the Inclusive Economy Strategy the Environment Strategy and the Inclusive Communities Framework. Officers have been working together to ensure alignment between these four strategies, and this work is continuing.

Since Autumn 2021 a wide range of engagement activity has been undertaken, including

- Feedback from local partner organisations through engagement sessions, online feedback, presentations at a range of boards/forums etc.
- Survey and engagement data, including 2021 Currently Living in Kirklees (CLiK), Place Standard, Healthwatch Kirklees engagement activity.
- In the Council through discussions at service/directorate leadership teams, Political Groups, Scrutiny and the Health and Wellbeing Board.

This has enabled us to identify how we should approach improving health and wellbeing and the priorities, along with the factors that make a difference to our health and wellbeing, both positively and negatively, from what people who live, work and study in Kirklees have told us.

The full draft Joint Health and Wellbeing Strategy is attached as Appendix 1.

Responsibility for delivery of the JHWS rests across a wide range of local partner organisations, partnerships with oversight by the Kirklees Health and Wellbeing Board.

The new Kirklees Health and Care Partnership will have a key role in shaping the health and care services to deliver the JHWS.

2.2. Key messages

Rainbow model

There are a wide range of influences on health and wellbeing, and that these impact on people in different ways across their life course. Tackling the 'causes of the causes' is essential in tackling poor health and inequalities. Poverty is the most significant challenge in improving health and wellbeing.

Vision, values and ways of working

The JHWS vision is that

'People who live, work or study in Kirklees live their best lives with good health and wellbeing, free from inequality, stigma, discrimination and barriers, so they can do and enjoy the things that matter to them.'

Delivering this vision is underpinned by a set of values and ways of working – these need to be embedded across partners and partnership in Kirklees.

Using 'I statements' which are built by listening to local people will help ensure we focus on what is important to them.

Shared Outcomes

The focus of the JHWS is on 4 of the 8 Kirklees shared outcomes

<i>Best Start</i>	Children have the best start in life
<i>Well</i>	People in Kirklees are as well as possible for as long as possible
<i>Independent</i>	People in Kirklees live independently and have control over their lives
<i>Shaped by People</i>	We make our places what they are

Recognising that action on these outcomes are both influenced by the other 4 shared outcomes (Safe & Cohesive; Achievement; Economic; Clean & Green), and in delivering the JHWS we can make a significant contribution to these other shared outcomes.

Priorities and factors

To achieve the shared outcomes across the life course we will focus on **3 priorities**

Mental wellbeing	Our ambition is that everyone in Kirklees achieves good mental wellbeing and has a good quality of life with purpose and fulfilment throughout their lives.
Healthy places	Our ambition is that the physical and social infrastructure and environment supports people who live, work and study in Kirklees to maximise their health opportunities and to make the healthy choice the easy choice.
Connected care and support	Our ambition is that organisations and professionals across the health and care system work together to ensure people are able access the right care/support for their needs, when they need it, making the best use of all available resources.

In delivering each of the JHWS priorities and the supporting strategies and plans we will use the lens of the life course and these **6 key factors**

- Poverty
- Inequalities & inclusion
- Shaped by people
- Digital
- Housing
- Climate emergency

As the JHWS is a high-level strategy – the detail is in the plans and strategies for specific issues that sit underneath it.

2.3. Key issues

a) Flightpath

The Health and Wellbeing Board has the statutory responsibility for the JHWS as the senior partnership body for health and wellbeing in Kirklees.

The Board agreed a path that gave all partners, including the Council, an opportunity to endorse the JHWS before it receives final approval by the Board on 22nd September 2022.

The JHWS is in the Council's Policy Framework as per Article 4 of the constitution. For this reason, the decision about whether the Council adopts the JHWS must be made at Full Council.

b) Embedding the JHWS and ways of working

The engagement activity has highlighted a range of issues about how we work with individuals, families, communities, and partners. These are all consistent with our existing commitments to place-based working, restorative approaches, and the wider shift to collaborative approaches such as personalisation and co-production.

This culture change will be as important as the focus on the priorities and will require determined and consistent effort over the lifetime of the JHWS.

c) Developing headline actions for each priority

The JHWS is a high-level strategy.

Throughout the engagement phase lots of ideas for action have been identified and collated. Leads for each of the priorities have brought these together with existing plans and ambitions. These are summarised in the JHWS Appendix 1.

There are a suite of plans and strategies for specific issues that sit underneath the JHWS. The team working on the 4 top-tier strategies are pulling together the full range of strategies and plans across the partners that can support the implementation of the strategies.

d) Tracking delivery and impact

Delivery of the Strategy will largely be through the wide range of partnership strategies and plans we are currently mapping. Plus individual organisations corporate plans. Each of these will have its own arrangements for tracking delivery and impact.

At a strategic level there are two strands to the proposed approach

- Monitoring the Kirklees Shared Outcomes through the indicator framework.
This is currently being refined and updated by the Corporate Data and Insight Team
- The Health and Wellbeing Board holding partners to account on delivery against the JHWS ways of working and priorities.
The details of the approach are being developed but the Board's expectation in that having set the strategic direction through the JHWS, partnerships and partners take responsibility for delivery and the Board receives regular updates on delivery and provides 'check and challenge' to the system.

e) Presenting the top tier strategies and the action to deliver them

The process of developing the JHWS has generated a wealth of ideas and comments, and these are reflected in the current full draft. The final version will consist of

- a narrative document (current draft is Appendix 1)
- a set of supporting materials that provide 'easy read' versions of the strategy, examples of the strategy in action, tools to enable partners to consider their current and future contribution to the JHWS etc.

The team working on the top-tier strategies are very aware that previously there has been no consistent core narrative or look and feel to our partnership strategies. This has not helped create the sense that the relationships and dependencies between the strategies are critical to

achieving the Shared Outcomes. We are working with the Corporate Communications Team to develop a consistent look and feel, initially for the core texts.

Building on this we will also be exploring more creative and engaging ways of sharing the strategies and crucially how these are being turned into action to improve people's lives.

3. Implications for the Council

- **Working with People & Working with Partners**

The development of the JHWS has been through working with people and partners. We are seeking endorsement from partners, including the Integrated Care Board, before the JHWS is approved by the Health and Wellbeing Board in September.

Working with people and partners is embedded in the commitments in the JHWS and most of the implementation will be reliant on continued improvements in partnership working, including co-production.

- **Place Based Working**

Place based working is embedded in the proposed ways of working, priorities and factors of the JHWS.

- **Climate Change and Air Quality**

Climate change is recognised as one of the key factors impacting on health and wellbeing. On that basis the expectation is that all plans/strategies that are enabling the delivery of the JHWS will considered and respond to the implications of climate change.

Similarly the expectation is that the key cause of poor air quality, transport, and the wider natural and built environment are considered as parts of the 'rainbow' model of health and wellbeing.

- **Impact on cost-of-living crisis**

Poverty is recognised as one of the key factors impacting on health and wellbeing. On that basis the expectation is that all plans/strategies that are enabling the delivery of the JHWS will considered and respond to the implications of poverty and the current cost of living crisis.

- **Other (eg Legal/Financial or Human Resources)**

No immediate financial or legal implications.

Do you need an Integrated Impact Assessment (IIA)?

An IIA has been carried out and is included in the documents. The Stage 1 Assessment does not indicate that a full Integrated Impact Assessment is required.

4. Consultees and their opinions

As described above a wide range of engagement activity has been undertaken. This has included:

- Several discussions at the Health and Wellbeing Board, most recently at the June Board meeting
- Consultation sessions with Political Groups, Adults and Health Scrutiny and a joint Scrutiny workshop with representatives from all Panels.
- A wide range of engagement activity with partnership groups including the Kirklees Partnership Executive, Health and Care Partnership Forum, Mental Health Partnership etc, and with individual organisations/services.

A central element of the process of developing the JHWS has been the work done by Healthwatch Kirklees to engage directly with local people about what is important to them. This work also drew on existing engagement activity undertaken by partners, including the Place Standard work done by the Council. The key themes from this work have informed the draft JHWS and led directly to the creation of the 'I statements'.

The current draft has been shared widely with partners to gather their support and give them a final opportunity to comment on the content, reflect on how the JHWS can be used to shape their work, and share examples of good practice.

5. Next steps and timelines

The Health and Wellbeing Board expects to approve the new JHWS at its meeting on the 22nd September.

6. Officer recommendations and reasons

Council are asked to:

- a) Note and comment on the contents of the Joint Health and Wellbeing Strategy, recognising that further minor amendments may be necessary to take account of feedback from Council and other key partners, and that a set of materials to help communicate the JHWS is being developed.
- b) Delegate authority to the Strategic Director of Corporate Strategy, Commissioning and Public Health to make any further minor amendments which may be necessary to take account of feedback from Council and other key partners.
- c) Adopt the Joint Health and Wellbeing Strategy, subject to final approval by the Health and Wellbeing Board.

7. Cabinet Portfolio Holder's recommendations

That Council accept the Officer recommendations.

8. Contact officer

Rachel Spencer-Henshall
Strategic Director of Corporate Strategy, Commissioning and Public Health

9. Background Papers and History of Decisions

Kirklees Health and Wellbeing Board report, 30th June 2022:

Kirklees Joint Health and Wellbeing Strategy Refresh

[Item 7 Kirklees JHWS - report to HWBB June 2022.pdf](#)

10. Service Director responsible

Emily Parry-Harries, Head of Public Health