

Item No.	Classification: Open	Date: 4 July 2022	Meeting Name: Health and Wellbeing Board
Report title:		Updated Joint Health and Wellbeing Strategy	
Ward(s) or groups affected:		All	
From:		Jin Lim - Deputy Director of Public Health	

RECOMMENDATION(S)

1. The Southwark Health and Wellbeing Board is asked to adopt the updated Joint Health and Wellbeing Strategy.

BACKGROUND INFORMATION

2. Southwark's Joint Health and Wellbeing Strategy was adopted by the Health and Wellbeing Board in 2015 and ran until 2020. In June 2021, the Board agreed that a steering group would be established to develop an updated strategy.
3. A steering group was established comprising leadership from Southwark Council's Public Health Team, Partnership Southwark, South East London CCG, Healthwatch Southwark and Community Southwark. The Strategy has been developed by the steering group and shaped in the following ways:
 - A review of data, research and needs assessments;
 - Reviewing local strategies, plans and partnerships that are relevant to the priority objectives;
 - Collation of community and stakeholder engagement including Understanding Southwark research, engagement through Southwark Stands Together and South London Listens;
 - A workshop with the Board in December 2021;
 - Feedback from the Board on a previous draft in March 2022;
 - Meetings with colleagues across the system to ensure that the strategy objectives reflect priorities in their areas of expertise;
 - Feedback from colleagues across the system on content and wording of draft versions.
4. The focus of the strategy is on tackling health inequalities that lead to differences in health and life expectancy within the borough. This was agreed by the Board in June 2021.

KEY ISSUES FOR CONSIDERATION

The strategy's approach to addressing inequalities

5. Reducing the inequality gap between the neighbourhoods and population groups with the poorest outcomes and the rest of the borough, whilst improving outcomes for all residents, is the strategy's central purpose. Through each of the Drive areas, the Strategy commits to targeting action in those areas of greatest need, ensuring we continually focus on closing the inequality gap both in access to services and outcomes.

The delivery approach – 'Drive, Sponsor, Observe'

6. The Strategy takes a three-tiered approach which captures the Marmot evidence base:
 - **Drive:** These areas will be the focus of the delivery and monitoring of the Strategy. Focusing on driving activities in these areas will help to reduce inequalities in the borough.
 - **Sponsor:** Work is already taking place in these areas; there are existing strategies or action plans. The named lead organisation will monitor progress and highlight when the Health and Wellbeing Board needs to consider aspects of this work in detail.
 - **Observe:** Although these areas are important to population health, the decision-making sits outside of the Health and Wellbeing Board. The Board's role is to observe and influence.
7. The five 'Drive' areas are set out as follows:
 - Drive 1: A whole-family approach to giving children the best start in life;
 - Drive 2: Healthy employment and good health for working age adults;
 - Drive 3: Early identification and support to stay well;
 - Drive 4: Strong and connected communities;
 - Drive 5: Integration of health and social care.

The monitoring approach and governance

8. Outcomes will be monitored in three ways:
 - An annual Joint Strategic Needs Assessment (JSNA) report, providing the story of health and wellbeing in Southwark;
 - A borough level outcomes framework, tracking key indicators associated with the drive areas of the Strategy;
 - A series of themed 'deep dives', enabling the Board to review specific areas of health and wellbeing.
9. The priorities and objectives in this strategy tackle complex issues that are shaped by multiple factors. Many of them will require the whole system to work together to achieve progress.

10. The Board will maintain strategic oversight over delivery of the Strategy, through the approach to monitoring outcomes described above. Where appropriate or necessary, the Board will also make use of other existing partnerships or forums to ensure monitoring.
11. Partnership Southwark Executive will maintain oversight of 'operational' aspects:
 - 1) The development and implementation of the Health and Care Plan which will set the blueprint for integration;
 - 2) The delivery and the impact of the Transformation Fund Programme (discussed below);
 - 3) The development and adoption of good community governance and representation mechanisms so that communities remain at the core of what we do.

Transformation Fund

12. A Transformation Fund is being developed and will be launched later in the year. The fund will seek to embed the five strategy principles and transform day-to-day work: tackling health inequalities, addressing climate change, place based and targeted approaches, empowering communities and delivering high quality joined-up, person-centred health and social care. The purpose of the fund will be to support the development of new ways of working, rather than small-scale health initiatives.
13. Applications will be invited from the Council, NHS and Community, Voluntary and Faith organisations. A collaborative approach between the Voluntary and Community Sector (VCS), Faith Organisations, the Council and the NHS will be encouraged.
14. This will be funded by Southwark Council and the CCG and seek to align investment in integration to the Health and Wellbeing Board and SEL ICS priorities.

Community empowerment and coproduction

15. Community empowerment and coproduction is a principle underpinning the strategy, and a key factor in how the strategy will be delivered. The strategy includes a commitment to embed community voices into the work of the Health and Wellbeing Board, creating lasting commitments to work together.
16. This will be supported by delivery of a coproduction programme in the first year of delivery, to co-produce specific actions for priority objectives. This work will have two strands – engagement on the Strategy, delivered by a team of local community researchers, to identify opportunities to work with local communities in driving health improvements. The second strand will

involve workshops with Partnership Southwark Strategic Board, and the Health and Wellbeing Board, to identify opportunities to embed community voices into our local system.

Community, equalities (including socio-economic) and health impacts

Community impact statement

17. The focus within the Strategy is to tackle health inequalities in the borough by addressing and improving the determinants of health for our most vulnerable populations and community groups. This should have a positive community impact, by reducing inequalities within the borough and empowering communities to help drive that change.
18. The Public Sector Equality Duty has been considered and the impact of the Strategy on people possessing “protected characteristics”, as outlined in the Equality Act 2010.
19. An Equality and Health Impact Analysis has been completed during the development of the Strategy. Owing to the Strategy’s focus on targeting population groups to tackle health inequalities, it is expected that the strategy will have a positive impact on people with protected characteristics. There is a need to ensure that, in the delivery of the Strategy, the voices of people who are often underrepresented in decision-making are amplified.

Climate change implications

20. Tackling the climate emergency is one of the key principles underpinning the Strategy. This will require joint working on key areas such as improving air quality and consideration of sustainability in areas of service design and delivery.

Resource implications

21. The Transformation Fund is in development to support the delivery of this Strategy. This will align investment from the NHS and the Council to deliver shared priorities.
22. Any new projects/initiatives that arise through the Strategy which require additional or reallocation of funding would need to be considered through the normal budget, monitoring and governance processes.
23. Officer time will be required to support the delivery of the Strategy, including the establishment working group and oversight from Partnership Southwark Executive.

Consultation

24. This Strategy has already been shaped by extensive community

engagement. It is proposed that further consultation on the content of the Strategy does not take place, to avoid consultation fatigue in relation to these issues.

25. Community engagement and co-production will shape the delivery of the strategy by identifying shared actions linked to the objectives.

Background Papers	Held At	Contact
Equality Impact Analysis	Public Health Division / Southwark Council	Rebecca Harkes, 07936 036116
Annual JSNA Report	Public Health Division / Southwark Council	Chris Williamson, 020 7525 1774

APPENDICES

No.	Title
Appendix 1	Draft Joint Health and Wellbeing Strategy

AUDIT TRAIL

Lead Officer	Jin Lim, Deputy Director of Public Health	
Report Author	Rebecca Harkes, Public Health Policy Officer for Health Inequalities	
Version	Final	
Dated	15 th June 2022	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Director of Law and Governance	No	No
Strategic Director of Finance and Governance	No	No
Cabinet Member	No	No
Date final report sent to Constitutional Team		23 June 2022