

<b>31 July 2020</b>		<b>ITEM: 8</b>
<b>Health and Wellbeing Board</b>		
<b>Thurrock Health and Wellbeing Strategy refresh – Post COVID-19</b>		
<b>Wards and communities affected:</b> All	<b>Key Decision:</b> Key	
<b>Report of:</b> Roger Harris – Corporate Director for Adults Housing and Health		
<b>Accountable Head of Service:</b> Roger Harris, Corporate Director Adults Housing and Health		
<b>Accountable Director:</b> Roger Harris, Corporate Director Adults Housing and Health Ian Wake Director for Public Health		
<b>This report is</b> Public		

## 1. Introduction and Background

1.1 Section 194 of the Health and Social Care Act 2012 requires Thurrock Council to establish a Health and Wellbeing Board. The Health and Wellbeing Board is the primary partnership body in Thurrock that is responsible for creating and overseeing Thurrock's Statutory Health and Wellbeing Strategy.

1.2 The Health and Wellbeing Strategy identifies priorities for reducing inequalities in health and wellbeing and improving the health and wellbeing of the local population. The Strategies are prepared jointly by the Council and CCG and owned by Health and Wellbeing Boards who are then responsible for overseeing their delivery.

1.3 The second and current Strategy was launched in July 2016 and its lifespan was extended from 3 to 5 years. This was because the action necessary on the wider determinants of health, which supports the achievement of good health and wellbeing for all Thurrock people is reflected in the current strategy, which take some time to impact on the life chances of the population.

1.4 Since the Strategy's launch in 2016 there have been nationally driven changes made to local health structures and the creation of the Mid and South Essex Health and Care Partnership and further development of Integrated Care Systems. Further evidence has emerged on the wider determinants of health and wellbeing and potential new priorities cannot be incorporated into the current Strategy Framework. Given the current Strategy was subject to extensive public and partner engagement, the refresh exercise will consider how the framework can be tweaked to incorporate current and future health and care priorities.

1.5 The COVID-19 Pandemic resulted in action has impacted on the planning and delivery of services and future operation models and a refreshed Strategy will take into account the impact of COVID-19, including utilising the positive lessons learned from COVID-19, while addressing some of the potential challenges. We are now also aware of over 4000 people in Thurrock who were required to adopt shielding to reduce the impact of catching the virus. Priorities identified within the refreshed Strategy will need to continue to consider how to tackle health inequalities and provide health and care support to the most vulnerable residents of Thurrock.

## **2. Recommendation(s)**

2.1 It is recommended that Board members:

- Agrees that Thurrock Health and Wellbeing Strategy 2016-2021 is refreshed along the lines of proposals set out within this report.
- Agrees that a task and finish group should be established to drive forward the refresh of the Strategy.
- Considers how the HWB Strategy is resourced post September 2020 to support the delivery of the refresh and continued oversight, engagement, and driving forward of the strategy once the refresh is launched in July 2021.

## **3. Issues, Options and Analysis of Options**

### Summary

3.1 The Health and Wellbeing Strategy is live and organic and has been amended to reflect new priorities and reinforced links with programmes that impact on people's the health and wellbeing. However, there is an increasing risk that emerging priorities and programmes being developed cannot be incorporated or reflected within the current strategy framework.

3.2 The Strategy is scheduled to be refreshed in July 2021. However, there have been significant national policy drivers that affect people's health and wellbeing and the planning and commissioning of services provided to support improved outcomes. These include:

- The NHS Long Term Plan, which is already impacting on the future planning, commissioning and provision of services for the residents of Thurrock. This includes the establishment of the Mid and South Essex Health and Care Partnership (previously referred to as the Mid and South Essex Sustainability and Transformation Partnership) and a shift towards planning and commissioning services at the different geographical levels (System (STP), Place (Thurrock CCG and Council) and Neighbourhood /Locality level/Primary Care Network). Subject to the Board's approval the refreshed Health and Wellbeing Strategy will reflect the MOU being considered by members at today's meeting.
- Homelessness regulations introduced in April 2019, placing a duty on local authorities to support residents who are homeless or at risk of homelessness, which impacts on their health and wellbeing. Refreshing the Strategy will provide an opportunity to capture more action on housing that impacts on health and wellbeing including the quality of housing and tackling fuel poverty.
- The Local Plan and how commitments to regeneration and planning - particularly around the potential adverse and positive impacts of the Lower Thames Crossing and the regeneration of Grays Town Centre on the populations health and wellbeing.
- Emerging priorities for specific services including implementing the SEND Written Statement of Action and the emerging Transition Strategy.

3.3 Since the Health and Wellbeing Strategy was launched in July 2016, there has been substantial additional research on areas affecting the health and wellbeing of the population of Thurrock, which cannot be easily reflected in the current Strategy framework. This includes evidence provided by Public Health Joint Strategic Needs Assessments on bespoke subject matters including the sexual violence and abuse JSNA, the Young Person's Substance Misuse needs assessment. A refresh of the

Strategy will facilitate the continued public commitment of working with the Health and Wellbeing Board to make sure the JSNA informs the Health and Wellbeing Strategy<sup>1</sup>.

3.4 The refreshed Strategy will reflect lesson's learned from the COVID-19 Pandemic set out below.

#### 4. COVID-19 Pandemic

4.1. The Covid 19 pandemic is different from other disaster recovery scenarios for a number of reasons. The scale, effects and length of time of the emergency created by the pandemic are more far reaching than anything experienced globally since the World Wars of the last century.

4.2 Transformation of the Thurrock Health and Well-being system has been predicated upon a number of key principles, which have been instrumental in our ability to respond quickly and effectively as a system to the pandemic, which will be reflected in the refreshed Health and Wellbeing Strategy:

- **A coherent, shared vision.** This has enabled the whole system to respond as one with no disagreement between partners and a common understanding of what was necessary to achieve results. The refreshed Health and Wellbeing Strategy will reinforce the shared vision for the people of Thurrock that is informed by the people of Thurrock.
- **Outcomes not outputs.** The future performance management systems to focus on collecting data that provides evidence of success in terms that service recipients would identify with. Of course systems and organisations need to measure success. However, these should focus upon outcomes and not on inputs or outputs, such a focus too often drives perverse behaviour that does little or nothing to improve real performance. Performance is also too often inward looking and service focused, rather than recognising that a number of factors contribute towards the achievement of an individual's health and wellbeing, and all of these factors need to push in the same direction. This will be even more important as we move in to a recovery phase, there will be significant challenges to resolve with extreme pressure upon resources; this will require certainty that activity is focused upon achieving the right outcomes with the greatest efficiency. The refreshed Health and Wellbeing Strategy Outcome Framework will reflect the shift to outcome based measures.
- **The importance of technology.** Technology enabled care and support is a work stream already central to transformation in Thurrock. The speed with which technology has been utilised in dealing with the response to Covid suggests that much more could, and should, have been achieved in the health and well-being field to date. There are numerous reasons, human and technical, which have slowed the use of technology in this field. However, as is often the case, the scale of the crisis has forced the issue. This is an area that we need to understand better to ensure that the potential that technology affords us to improve recovery is fully utilised. It will also be important to ensure that the refreshed Health and Wellbeing Strategy considers how future operating models and therefore potential outcomes may be impacted on by technological developments. It will also be important to ensure any challenges that may be created by technological advances are identified and addressed.

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<sup>1</sup> As set out on JSNA page of council website

- **Collaboration through strong, trust based partnership arrangements.** Utilising and building on existing relationships has been a major feature of the local response. Creating an agile and collective reaction to the issues as they emerged. The refreshed Health and Wellbeing Strategy will reflect partnership and governance arrangements that have been agreed across the wider health and care system and within and across Thurrock.
- **Flexible and Adaptable Workforce.** The response to the pandemic has shown the ability of and importance of staff across the system to be flexible and adaptable. This will challenge us to remove the divide between health and care and between provider and commissioner. Health and care staff will work in partnership with the third sector and the community and focus on the totality of assets available to them and to the person
- **Asset based/strength based approaches.** At both an individual and at a system level asset based working is another feature of the transformation model in Thurrock. The concept of doing with rather than to sits at the heart of every aspect of our change journey. This has enabled a truly collaborative response to be introduced whereby we have supported communities to take action rather than imposed a service type solution on them. The success of the Thurrock Coronavirus Community Action (TCCA) response, which mobilised volunteers to support the vulnerable and shielded in our communities quickly and effectively, is a strong example of the asset based approach in action. The refreshed Health and Wellbeing Strategy will build on the success of collaborative working with communities and the VCS.
- **Community embedded practice.** Possible the strongest single feature of the Thurrock transformation of health and well-being is the commitment to work within and alongside our communities. The fact that we had already established such a strong community presence, via our Local Area Coordinators, Community Led Support social work teams and our Social Prescribers, amongst others, enabled us to meet the challenge set by the uncertain period that existed between the lockdown and having the structures in place to deal with the consequences. This provides a strong evidence base for the effectiveness of knowing the communities you work alongside, and is another feature that must be further developed to secure successful recovery.

## 5. How the refreshed Strategy will reflect changes to the NHS operating landscape

5.1 The refreshed Health and Wellbeing Strategy refresh will identify health and wellbeing priorities for the population of Thurrock over a five years period, many of which will be joint partnership priorities across system, place and locality levels.

5.2 The refreshed Health and Wellbeing Strategy will reinforce the Mid and South Essex Partnership MOU that is being considered by members at today's meeting.

5.3 At Mid and South Essex level:

- Digital technology will be used to drive change and ensure systems are interoperable, including the development of the integrated shared care record would support the identification and treatment of long term conditions across Thurrock.
- The CCG Joint Committee has delegated authority to take decisions collectively on matters relating to areas that are likely impact on the achievement of outcomes within the refreshed Health and Wellbeing Strategy including:
  - Acute hospital services
  - NHS 111 services

- Ambulance services
- Patient transport services
- Acute mental health services

#### 5.4 At place level:

- Thurrock is one of the four Places across the (Mid and South Essex Health and Care Partnership) that have established Integrated Care Partnerships. Political leadership for each ICP will be provided through the relevant Health and Wellbeing Board. For Thurrock, this will be through the Thurrock Integrated Care Partnership arrangements, being considered separately by members at today's meeting. Each ICP will be accountable to the Health and Wellbeing Board for delivery of its locally agreed plan. Each ICP will also have a line of accountability to the System (Partnership Board) for delivery of agreed system transformation, finance, quality and performance priorities.
- The ICP locally agreed plan will reflect appropriate priorities identified through the Health and Wellbeing Strategy refresh.

#### 5.5 At Locality / PCN level

- Action taken at locality and PCN level will be crucial to delivering priorities contained in the refreshed Health and Wellbeing Strategy. PCNs will be responsible for the delivery of locality based healthy lifestyle services (eg. self-care/patient education, smoking cessation, sexual health (spoke services), cervical screening, weight management)
- As set out in the MOU, PCNs will also be responsible for delivering a wider range of services closer to people's homes, which are likely to be aligned with the refreshed Strategy priorities including:
  - Minor operations coordinated across GP practices (eg. lumps and bumps, vasectomy services )
  - Long Term Conditions case-finding programmes including hypertension, AF and depression screening.
  - Delivery of dental care and improved oral health programmes
  - Single, integrated 'one stop shop' clinics for the management of diabetes, cardio-vascular disease and respiratory long-term conditions with input from secondary care consultants.
  - New model of care for Common Mental Health Disorders and some mental health services for patients with SMI including IAPT, Dementia and Psychiatric Nursing
  - Adult Social Care assessment/fieldwork services
  - Social Prescribing
  - The Schools Wellbeing Service (defining a school as a community)
  - Children's Centres – a wide range of services and support for families with young children.

5.6 The refreshed Strategy will identify the health and wellbeing priorities for Thurrock and should be integral part of determining and informing both system and PCN level priorities.

## **6. Outline approach for refreshing Thurrock's Health and Wellbeing Strategy**

### Activity completed to date to support the refresh

6.1 A light touch project management approach has been created to support the delivery of the Health and Wellbeing Strategy refresh which includes a broad timeline, setting out

key deliverables and products and identifying key milestones to ensure the refreshed strategy can be launched no later than July 2021. A snapshot of the key milestones is provided at **Annex A**

- 6.2 An analysis of progress made against current Health and Wellbeing Strategy priorities has been completed. This helps to inform discussions with system partners when considering whether they should continue to be reflected in the refreshed Strategy, ensuring it continues to focus on the areas that matter most.
- 6.3 A review of recent policy developments and key literature (including JSNAs) has been undertaken and has helped to inform discussions with key partners about future priorities and how the findings of JSNA's and other research will be reflected in their priorities.
- 6.4 A draft communication strategy has been created and plan will be created to support the identification of key stakeholders, provided at **Annex B**. Following the establishment of a Task and Finish Group a detailed activity engagement plan will be developed to underpin and deliver the communication strategy.

#### *Review of Health and Wellbeing Strategy Framework*

- 6.5 Consideration has been given to how the Health and Wellbeing Strategy's 5 Strategic Goals and Objectives framework, with some slight tweaking, will enable the refreshed strategy to continue to focus on existing Strategy priorities, as well as any emerging and future priorities that impact on people's health and wellbeing.
- 6.6 A new Framework has been created comprising seven domains which incorporate the current Strategy's 5 Strategic Goals as well as the 25 priorities (otherwise referred to as objectives) that underpin them. The newly created framework provides a wider focus on the key determinants of health and comprises 7 Strategic Domains. Potential priorities are still being established and subject to public and partner consultation.
- 6.7 The new Framework has been largely welcomed by system partners who have been initially engaged to inform the direction of travel of the refresh. The draft Framework is provided at **Annex C**.

#### *Initial system partner consultation and key findings*

- 6.8 Over the last month feedback has been sought on the current Health and Wellbeing Strategy. from officers across the council and some key system partners, including Thurrock CCG and Thurrock CVS, Some key themes have emerged from feedback received to date:
- The draft Strategy framework has been widely welcomed by system partners to date
  - The refreshed Strategy should focus on wider determinants of health particularly around the impact of housing and safety on health and wellbeing
  - Governance processes in the refreshed Health and Wellbeing Strategy should be established, building on existing governance arrangements
  - The Strategy should be embedded into the day to day work of system partners at all levels
  - The refreshed Strategy should reflect lesson's learned from COVID-19
  - Resources should be identified to ensure that the Strategy remains on system partner radars and effective oversight can be provided and driven forward.

- Many of the existing priorities should remain in the refreshed Strategy along with additional priorities that have been identified

### Looking forward

6.9 In addition to engaging specific partners to understand the future operating landscape and identify priorities to be included in the refreshed Strategy, a Task and Finish Group will be established to help drive forward and inform the refresh exercise by:

- Finalising the refreshed Health and Wellbeing Strategy framework and establishing potential priorities that are agreed by system partners and subject to public consultation.
- Considering and refining the proposed governance structure for providing oversight of and reporting against agreed health and wellbeing strategy priorities.
- Creating a communication activity plan to underpin the Communication Strategy and necessary support materials such as the online and hard copy consultation documents, press releases and promotional material to stimulate interest and engagement in the consultation exercise.
- Supporting the delivery of the public consultation exercise
- Leading the development of the refreshed Strategy which reflects feedback received from the people of Thurrock.

6.10 A public consultation exercise comprising face to face and online activities will be delivered in early 2021.

6.11 A refreshed Health and Wellbeing Strategy will be launched by July 2021.

## **6. Reasons for Recommendation**

6.1 Refreshing the Strategy will:

- Build on the current Strategy and focus more widely on the key determinants of health.
- Continue to comprise priorities that focus on population health management as well as more targeted health and wellbeing priorities.
- Reflect changes in the health landscape and the planning and commissioning of services and support at system and place levels. The refreshed Strategy will support locking in service design and commissioning at Place level and reinforcing the Mid and South Essex system partner MOU
- Address changes in future operational models and approaches and lessons learned from the COVID-19 Pandemic.
- Create a framework that is flexible enough to respond to future health and care challenges, ensuring the five year strategy remains fit for purpose.
- Provide an opportunity to review the outcome framework and agree an approach for monitoring the implementation of the refreshed Strategy and achievement of improved outcomes and key performance indicators; and
- Review and improve Governance arrangements for the Strategy and consider resources necessary to oversee the Strategy, ensuring regular activity and reporting against key deliverables and commitments is maintained.

## **7. Consultation (including Overview and Scrutiny, if applicable)**

7.1 Initial consultation and engagement has been carried out on the development of the refreshed strategy framework.

7.2 A task and finish group will be established comprising key strategic partners to help drive forward the strategy refresh, described within the timeline at Annex A..

7.3 Communication and engagement activity will be taking place throughout 2020. A formal consultation period, running for approximately 8 weeks, commencing in January 2021.

## **8. Impact on corporate policies, priorities, performance and community impact**

8.1 The Strategy will drive the Council's Health and Wellbeing priorities as set out within the Corporate Plan. It will also act as the Council's 'people' Strategy and make the necessary connections with the 'place' agenda.

## **9. Implications**

### **9.1 Financial**

Implications verified by: **Mike Jones**  
**Strategic Lead – Corporate Finance**

9.2 The cost associated with the strategy refresh will be delivered within existing budgets

### **9.3 Legal**

Implications verified by:

9.4 The Health and Social Care Act 2012 established a responsibility for Councils and CCGs to jointly prepare Health and Wellbeing Strategies for the local area as defined by the Health and Wellbeing Board.

### **9.5 Diversity and Equality**

Implications verified by: **Natalie Smith, Strategic Lead: Community Development and Equalities**

9.6 The aim of the Strategy is to improve the health and wellbeing of the population of Thurrock. Doing so will mean reducing inequalities in health and wellbeing.

9.7 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

9.8 The refreshed Health and Wellbeing Strategy will facilitate crime and disorder priorities that relate specifically to health and wellbeing, further strengthening the relationship between the Health and Wellbeing Board and Community Safety Partnership.

**10. Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Health and Wellbeing Strategy 2016-2021

## **Report Author:**

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Business Manager AHH Directorate



## Snapshot of HWB Strategy refresh

### Thurrock Health and Wellbeing Strategy Key Timescales and Milestones

The Health and Wellbeing Strategy refresh will comprise the following elements:

- \* **Analysis of current Strategic Goals and Objectives to determine which current Strategy Objectives should remain in the refreshed Strategy**
- \* **Consideration of new evidence that has emerged over the last 12 months which includes APHRs, JSNAs, national policy drivers to determine whether there are new challenges and priorities that should be included within the refreshed HWB Strategy**
- \* **Creation of new HWB Strategy Goals and Objectives Framework**
- \* **Consultation with Elected members, partners and the public on proposed HWB Strategy Goals and Objectives**
- \* **Finalising HWB Strategy for 2021-2026 and prepaing and launching refreshed HWB Strategy for Thurrock**

Milestone	Description	Achieved	Owners
	Review of new evidence provided via JSNAs, APHR, National policies and local strategies completed	Yes	Darren Kristiansen and Claire Quinn AHH BMT
	Analysis of current HWB Strategy Goals and Objectives completed	Yes	
	Framework created for HWB Strategy	Yes	
	Draft communication strategy developed	Yes	
	Broad timescales developed	Yes	
	Informal partner and officer engagement to consider current and refreshed Strategy	Yes	
<b>Action taken up until 31 July</b>	Paper developed for consideration by the HWB	Yes	
<b>31-Jul-20</b>	<b>HWB to consider proposals for HWB Strategy refresh</b>		

Milestone	Description	Achieved	Owners
	Task and Finish Group established		
July - Beginning of October	All papers relating to HWB Strategy refresh (Proposed Goals and Objectives widely agreed by partners / Comms Strategy finalised and engagement plan developed / publicity and promotional material /online consultation document/ hard copies available in easy read)		Task and Finish Group and AHH BMT
October - December	Governance approval (DB, HWB, CCG Board, Partner Boards, Overview and Scrutiny Committees)		
January 21 - Feb 21	<b>Public Consultation Period</b>		
Mar-21	Analysis and report writing for both online and face to face consultation		
April / May 21	Creating final version of the HWB Strategy		
June - July 21	Engaging various governance structures (HOSC / HWB / Cabinet / CCG Board / STP Board) to secure agreement on final strategy		
End July 21	Launch of HWB Strategy 2021 - 2026		