## 10 March 2016

ITEM: 7

## Health and Wellbeing Board

## Health and Wellbeing Strategy Engagement Report

Wards and communities affected:	Key Decision:
All	Non-key

Report of: Ceri Armstrong, Directorate Strategy Officer

Accountable Head of Service: n/a

**Accountable Director:** Roger Harris, Corporate Director of Adults, Housing and Health

This report is public

#### **Executive Summary**

Engagement activity was undertaken as part of the development of the 2016-2021 Joint Health and Wellbeing Strategy. This resulted in 539 surveys being completed, mostly through face-to-face facilitation undertaken by Healthwatch Thurrock and Ngage. Additional engagement activity was undertaken through attendance at existing community meetings, and also through key stakeholder meetings.

The results of the engagement exercise have influenced the shape and focus of the final Strategy document. This includes strengthening parts of the Strategy to reflect the key themes to emerge from engagement.

Whilst the period of engagement was relatively short (23<sup>rd</sup> November 2015 – 22<sup>rd</sup> January 2016), further dialogue will take place to develop the Strategy's action plans and also as part of ensuring the community voice is part of measuring the Strategy's success.

#### 1. Recommendation(s)

# 1.1 That the Board agree the Health and Wellbeing Strategy Engagement Report

#### 2. Introduction and Background

2.1 Thurrock's current Joint Health and Wellbeing Strategy will expire at the end of March 2016, and work has taken place to renew the Strategy for 2016 – 2021.

- 2.2 The work carried out to refresh and renew the Strategy included engagement activity with both stakeholder organisations and with Thurrock people.
- 2.3 The purpose of the engagement activity was to test draft priority areas and to gain views about the actions people thought would improve the health and wellbeing of Thurrock's residents.
- 2.4 Throughout the period of engagement which commenced on the 23<sup>rd</sup> November and ended on the 22<sup>nd</sup> January, 539 surveys were completed – the majority of which were completed through face-to-face dialogue facilitated by Healthwatch Thurrock and Ngage.
- 2.5 Additionally, views were also sought via attendance and presentations at both community and stakeholder forums including:
  - Community Forums (namely Chadwell and Stifford Clays);
  - Thurrock CCG Practice Managers' meeting;
  - Thurrock CCG Commissioning Reference Group;
  - Stronger Together Board;
  - CVS Chief Officer Meeting;
  - Clinical Engagement Group;
  - Children and Young People's Partnership Board;
  - Head Teachers' Forum;
  - Corporate Working Group;
  - Staff Forum Chairs' Group;
  - Youth Cabinet; and
  - Children's Services Overview and Scrutiny Committee and Health and Wellbeing Overview and Scrutiny Committee.
- 2.6 The appended Engagement Report analyses the responses gained from the period of engagement, identifies how views have been used, and also suggests next steps. The Board are asked to agree the Report and in doing so, commit to ongoing engagement as part of developing action plans and measuring success.
- 2.7 The report was considered by the Health and Wellbeing Engagement Group at its meeting on the 25<sup>th</sup> February.

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

- 3.1 The appended Engagement Report analyses feedback received from Thurrock residents and details how this has been used in developing the Strategy. This includes identifying the key themes to emerge through the period of engagement. The Report also commits to involving Thurrock people in future work as it develops.
- 3.2 One of the areas the Board needs to consider over the coming months is how to best involve Thurrock people on an ongoing basis. This includes considering how to better communicate and publicise what the Board does.

These were areas also flagged for further development at the Board's recent development session.

3.3 Work will take place through the Board and the Engagement Group to develop the best method for engagement with residents and stakeholders, and as part of that, how to best communicate what the Board does.

#### 4. Reasons for Recommendation

4.1 Engagement was carried out to ensure that the refreshed Health and Wellbeing Strategy reflected the views of the community. Through the engagement activity conducted, a number of key themes emerged. These themes have informed the final Strategy – detail of which is included within the Engagement Report. Engagement also led to the Strategy itself being presented in a more accessible way than previous versions.

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

- 5.1 The Engagement Report and also paragraph 2.5 of this report detail examples of where engagement has been carried out.
- 5.2 The Engagement Report was considered at the meeting of the Health and Wellbeing Engagement Group on the 25<sup>th</sup> February, with some amendments to the report being made as a result.

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

6.1 The Health and Wellbeing Strategy outlines how the Community Strategy priority and Corporate priority 'improve health and wellbeing' is defined and will be delivered.

#### 7. Implications

#### 7.1 Financial

Implications verified by: Roger Harris Corporate Director of Adults, Housing and Health

None identified.

#### 7.2 Legal

Implications verified by: Roger Harris Corporate Director of Adults, Housing and Health None identified.

### 7.3 **Diversity and Equality**

Implications verified by:

### Natalie Warren Community Development and Equalities Manager

The Health and Wellbeing Strategy has two key aims – to improve the health and wellbeing of the local population, and to reduce inequalities in the health and wellbeing of the local population. Engaging with the local population is a key part of ensuring that the Strategy is able to achieve its aims. The Health and Wellbeing Board has committed to engaging with Thurrock's communities on an on-going basis, to ensure that their views are reflected in and help to shape how the Strategy is delivered, and also as part of measuring success.

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

None.

8. 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):

None.

#### 9. Appendices to the report

• Thurrock Joint Health and Wellbeing Strategy Engagement Report

#### **Report Author:**

Ceri Armstrong Directorate Strategy Officer Adults, Health and Housing