# Health and Wellbeing Board Thurrock Health and Wellbeing Strategy Performance Framework Wards and communities affected: Key Decision: All Non-key Report of: Councillor James Halden, Portfolio Holder for Education and Health and Chair of Thurrock Health and Wellbeing Board Accountable Head of Service: N/A Accountable Director: Roger Harris, Corporate Director of Adults, Housing, Ian Wake, Director of Public Health and Health and Mandy Ansell, Interim Accountable Officer Thurrock CCG This report is Public

# **Executive Summary**

The Health and Wellbeing Strategy 2016-2021 was approved by the Health and Wellbeing Board in February 2016 and the CCG Board and Council in March 2016.

At its meeting in February, the Health and Wellbeing Board agreed that action plans and an outcomes framework should be developed to support the delivery of the Strategy and to measure its impact.

The report details the action plans that have been developed – one per objective, and the outcomes framework which contains a range of key performance indicators and targets for 2021 against each objective.

The report also notes the vital role of engagement in measuring success and further developing the supporting action plans.

It is suggested that the Health and Wellbeing Board measures the Strategy's progress and impact in a number of ways:

- Through a mid-year and end-of-year performance report;
- Through key strategies and plans being included as part of the Board's work plan as specific agenda items; and
- Through a specific focus on one of the Strategy's five goals and supporting objectives at each of the Board's meeting.

- 1. Recommendation(s)
- 1.1 That the Board agrees the Outcomes Framework supporting the delivery of the Health and Wellbeing Strategy;
- 1.2 That the Board agree and comment on the action plans supporting the achievement of goal A; and
- 1.3 That the Board endorses arrangements for monitoring the implementation of the Health and Wellbeing Strategy.
- 2. Introduction and Background
- 2.1 Thurrock's Health and Wellbeing Strategy was refreshed and agreed in early 2016. The refreshed Strategy has five goals with each of the goals supported by four objectives:

Goals	Objectives
A. Opportunity for All	A1. All children in Thurrock making good educational
'.'	progress
	A2. More Thurrock residents in employment,
	education or training
	A3. Fewer teenage pregnancies in Thurrock
	A4. Fewer children and adults in poverty
B. Healthier	B1. Create outdoor places that make it easy to
Environments	exercise and be active
	B2. Develop homes that keep people well and
	independent
	B3. Building strong well-connected communities
	B4. Improve air quality in Thurrock
C. Better Emotional	C1. Give parents the support they need
Health and Wellbeing	C2. Improve children's emotional health and
	wellbeing
	C3. Reduce social isolation and loneliness
	C4. Improve the identification and treatment of
	depression particularly in high risk groups
D. Quality Care Centred	D1. Create four integrated healthy living centres
Around the Person	D2. When services are required, they are organised
	around the individual
	D3. Put people in control of their own care
	D4. Provide high quality GP and hospital care to
	Thurrock
E. Healthier for Longer	E1. Reduce obesity
	E2. Reduce the proportion of people who smoke
	E3. Significantly improve the identification and
	management of long-term conditions
	E4. Prevent and treat cancer better

- 2.2 It was agreed by the Board when the Health and Wellbeing Strategy was signed-off, that there would be an Outcomes Framework. This would contain a number of related performance indicators and would provide members of the Board with a means of measuring the impact of the Strategy.
- 2.3 It was also agreed that each of the objectives would be supported by an action plan containing the key actions needed to meet the objective.
- 2.4 Subsequently, the Health and Wellbeing Board's Executive Committee has overseen the development of both the Outcomes Framework and supporting action plans. This has included each goal having a 'goal sponsor', and each objective having an 'objective lead'. Goal sponsors are responsible for ensuring that action plans are developed and performance indicators and related information are signed-off. Objective leads are responsible for developing the action plan to support their respective objective and supplying information relevant to their objective's performance indicators. A list of goal sponsors and objective leads is attached at appendix A.

# 3. Issues, Options and Analysis of Options

# **Supporting Action Plans**

- 3.1 Attached at appendix B are the action plans supporting goal A of the Health and Wellbeing Strategy. Action plans relating to the other four goals (B E) will be considered as part of the 'item in focus' at each subsequent Board meeting. The Board's Executive Committee is overseeing the development of all action plans. Action plans will contain actions at a variety of levels, as activity support the delivery of some of the objectives is well underway whereas activity to support other objectives is in development.
- 3.2 Whilst the Health and Wellbeing Board's Executive Committee will take an active role in both monitoring and overseeing the further development of action plans, the Board will be able to assess progress in a number of different ways:
  - Through key pieces of work contributing towards the delivery of objectives included as part of the Board's Forward Plan – e.g. Thurrock Obesity Strategy, Active Places Strategy, Air Quality Strategy;
  - Mid-year and end-of year performance reports detailing progress on action plans and performance indicators; and
  - The first part of each Board meeting being used to have greater Board discussion on a particular goal and also to ensure views gathered through engagement activity can be reported and used as a means of measuring progress and developing further actions.
- 3.3 Further work will take place with action plan leads to develop supporting action plans. For example a workshop is being organised to enable objective leads to come together and identify any interdependencies between action

- plans. It is also expected that action plans will be updated as work progresses throughout the life of the Strategy.
- 3.4 The Health and Wellbeing Board is asked to agree and comment on the action plans supporting Goal A and also agree the process by which monitoring will take place.

# **Outcomes Framework**

- 3.5 An outcomes framework has been developed with includes a number of performance indicators to support each objective. The intention is that the performance indicators enable the Board to identify whether the Strategy is having a positive impact, and also to identify areas that are not having the desired impact. It is important that views provided through engagement activity are also used as the litmus test as to the Strategy's success.
- 3.6 The Health and Wellbeing Strategy Outcomes Framework is attached at appendix 3. The Framework includes:
  - Key performance indicators to support each objective;
  - A baseline figure (where available); and
  - A target for 2021 (where available).

Some information is unavailable where indicators are either new or being developed.

- 3.7 The Executive Committee will monitor progress via the Outcomes Framework, but an update by exception will be provided to the Board as part of the Board's mid-year and annual performance reports. Relevant performance updates will also be provided as part of the Board's 'item in focus' agenda item.
- 3.8 The Board is asked to agree the Outcomes Framework.

# **Engagement**

3.9 Capturing the views of Thurrock people is an essential part of developing action plans and measuring success. On-going engagement managed and facilitated by Healthwatch and Thurrock Coalition will be used to further develop action plans and also help measure success.

# 4. Reasons for Recommendation

4.1 To ensure that the Health and Wellbeing Board is able to both ensure delivery of the Health and Wellbeing Strategy and effectively monitor its impact in terms of improving the health and wellbeing of Thurrock's population, and reduce inequalities in the health and wellbeing of Thurrock's population.

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

- 5.1 Engagement activity was carried out to support the development of the Health and Wellbeing Strategy. On-going engagement activity is taking place to inform the development of action plans and to be a key part of measuring the success of the Strategy.
- 5.2 A workshop will be organised with all objective leads to identify interdependencies and potential areas of conflict between action plans.

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

6.1 'Improve health and wellbeing' is one of the Council's five corporate priorities. The Health and Wellbeing Strategy is the means through which the priorities for improving the health and wellbeing of Thurrock's population are identified.

### 7. **Implications**

### 7.1 **Financial**

Implications verified by: Jo Freeman

> Management Accountant - Social Care & Commissioning

There are no financial implications. The priorities of the Health and Wellbeing Strategy will be delivered through the existing resources of Health and Wellbeing Board partners.

### 7.2 Legal

Implications verified by: Solomon Adeyeni

Solicitor

There are no legal implications. The Council and Clinical Commissioning Group have a duty to develop a Health and Wellbeing Strategy as part of the Health and Social Care Act 2012.

### 7.3 **Diversity and Equality**

Implications verified by: **Becky Price** 

> **Community Development Officer I Community Development and Equalities Team I Adults, Housing and Health Directorate**

Action will need to be taken to improve the health and wellbeing of Thurrock's population and reduce inequalities in the health and wellbeing of Thurrock's

population. Being successful will include identifying sections of the population whose health and wellbeing outcomes are significantly worse, and taking action that helps to ensure the outcomes of those people can improve. This will be supported by information contained within the Joint Strategic Needs Assessment.

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
  - Appendix 1 Health and Wellbeing Strategy Goal Sponsors and Objective Leads
  - Appendix 2 Health and Wellbeing Strategy Action Plans (Goal A)
  - Appendix 3 Health and Wellbeing Strategy Outcomes Framework

# **Report Author:**

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