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| Committee: Safeguarding Sub-Committee | Dated: 08/02/2021 |
| Subject: City of London Joint Health and Wellbeing Strategy (JHWBS) refresh – update and engagement | Public |
| Which outcomes in the City Corporation’s Corporate Plan does this proposal aim to impact directly? | 1, 2, 3, 4, 5, 8, 9, 11, 12 |
| Does this proposal require extra revenue and/or capital spending? | N |
| If so, how much? | N/A |
| What is the source of Funding? | N/A |
| Has this Funding Source been agreed with the Chamberlain’s Department? | N/A |
| Report of: Andrew Carter, Director of Community and Children’s Services | For Information |
| Report author: Zoe Dhami, Strategy Officer | |

Summary

The City of London Joint Health and Wellbeing Strategy (JHWBS) must be refreshed for 2021–24. The JHWBS reviews the needs of our population and reflects the priorities set by the Health and Wellbeing Board (HWBB) for that strategic period. The JHWBS is of particular importance as its priorities span all City of London Corporation departments, the voluntary and community sector, and the Integrated Care Partnership.

This report will update Members on the work undertaken to date on developing this strategy, and invites recommendations on engagement.

Recommendations

Members are:

1. asked to note the progress made on developing the 2021–24 JHWBS; and,
2. invited to provide any recommendations on engagement in establishing the JHWBS priorities.

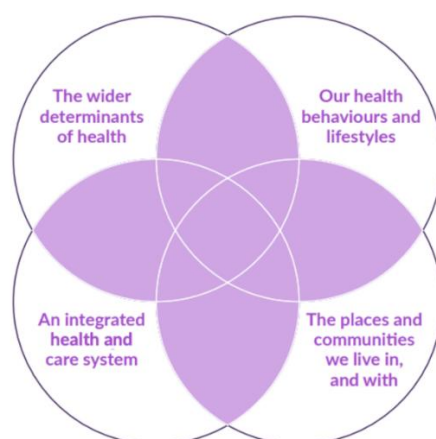
Main Report

Background

1. The unequal distribution of population health outcomes is driven by a complex interaction of individual, community and structural factors. Tackling health inequalities and improving population health requires action at multiple levels and across all sections of society. This means addressing all four ‘pillars’ of a

population health system, as described by the King's Fund (see Figure 1 below).

Figure 1: King's Fund Population Health Framework¹



2. An effective, integrated health and care system is key to meeting population health needs and tackling inequalities, but is insufficient on its own. The biggest drivers of population health outcomes are linked to social, economic and environmental conditions (income, employment, education, housing, transport, and so on). Structural inequalities linked to these 'wider determinants' make the most significant contribution to health inequalities – as has been illustrated by the current COVID-19 pandemic.
3. As well as health behaviours (including smoking, physical activity, diet and alcohol), which themselves are socially patterned, this framework also emphasises the importance of 'place' – our neighbourhoods and communities – as key drivers of health and wellbeing at an individual and population level. Therefore, working with and drawing on the assets within our local communities must be central to our response to tackling health inequalities.
4. In September 2020, the HWBB endorsed the recommendation to use the King's Fund population health framework to support co-ordinated local action to tackle health inequalities, and to guide the development of the JHWBS. Further, it was endorsed that a 'health in all policies' approach should be adopted to help inform the priorities for the 2021–24 JHWBS.
5. An engagement session was held with the HWBB on 10 November 2020. The outcomes from the session were:
 - agreement to extend and align the sign-off date with Hackney's JHWBS development (November 2021)

¹ Buck et al (2018), [A Vision for Population Health: Towards a healthier future](#), King's Fund

- agreement to co-ordinate and work with Hackney on engagement and key areas of crossover between the two JHWB strategies
- consensus that engagement for the strategy must be far-reaching, ensuring that methods are used to engage with hard-to-reach groups.

Current Position

Research – ongoing

6. A data synthesis has been compiled using local and national data to highlight the gaps in our current knowledge of stakeholders. There are several hard-to-reach groups, including:
 - East City of London residents (which inevitably includes residents registered at Tower Hamlets GP practices)
 - hidden workforce
 - unpaid carers (both adult and child)
 - children living in poverty.
7. Further work will be undertaken to map all existing strategies and formalise how these will contribute to the JHWBS priorities.
8. Existing strategies, services, assets and information gathered through the data synthesis and engagement will be mapped against the four pillars of the population health framework. It is anticipated that priority actions will evolve from areas of overlap in the Venn diagram (see Figure 1).
9. A workshop to bring together members from both Hackney and the City's Health and Wellbeing Boards, plus key stakeholders (including City and Hackney Health Inequalities Steering Group members) is set for April 2021. The aim is to agree a strategic framework for improving population health through two new Health and Wellbeing Strategies.
10. Prior to this workshop, the JHWBS development working group will review the local, regional and national data on health inequalities, as well as evidence on effective interventions for reducing inequalities through local action (in collaboration with City and Hackney Health Inequalities Steering Group). The working group will also review existing community and resident insight in relation to health inequalities in the City, including insight gathered throughout the current pandemic (and collated by the steering group). This insight and intelligence will be presented to delegates at the prioritisation workshop.
11. Using this information as a starting point, the workshop will focus on developing draft priorities for both City of London and Hackney Health and Wellbeing Strategies.

Engagement – Summer 2021

12. After the initial draft priorities have been defined through the workshop and early stakeholder engagement, work will begin with local communities to develop an agreed set of priorities. We will begin this process by working with communities and stakeholders to review the evidence and refine the draft priorities and possible actions related to these priorities together.
13. Strategy engagement work will build on existing assets and resident engagement/involvement mechanisms (for example, neighbourhood conversations and other consultation work).
14. We anticipate that these engagement activities will be delivered over the summer months through face-to-face and online activities if COVID-19 guidelines allow.

Draft strategy write-up – August 2021

15. After the engagement phase ends, a draft strategy will be developed. It is anticipated that it will take one month to write the draft strategy. We will work with the community and stakeholders to ensure that the draft strategy is reflective of the community conversations that took place during the engagement phase.

Formal consultation – September–October 2021

16. The formal consultation of the strategy will take place over a two-month period. It is anticipated that this will take place in September and October 2021. A consultation communications plan will be developed in advance of this timeline, and shared with stakeholders.
17. Virtual methods of consultation and engagement are likely to be used as part of developing the strategies. The scale of virtual consultation will depend on the COVID-19 guidance at the time of the engagement and consultation planning and delivery. However, the working group will ensure that there is a range of inclusive ways for local people to get involved in developing the strategy, wherever possible.
18. The strategy will be edited in early November 2021 and sent for final approval to the City's HWBB and relevant committees before the end of November 2021.

Oversight structure

19. The development of the JHWBS will have strategic oversight from the City and Hackney Health Inequalities Steering Group. The Health and Wellbeing Advisory Group will act as Task and Finish Group. It is anticipated that both

the City Corporation and Hackney Task and Finish Groups will meet and work together.

Corporate & Strategic Implications

20. The JHWBS aligns with and will support the following outcomes of the Corporate Plan:

Contribute to a flourishing society

- 1) People are safe and feel safe
- 2) People enjoy good health and wellbeing
- 3) People have equal opportunities to enrich their lives and reach their full potential
- 4) Communities are cohesive and have the facilities they need

Support a thriving economy

- 5) Businesses are trusted and socially and environmentally responsible
- 8) We have access to the skills and talent we need

Shape outstanding environments

- 9) We are digitally and physically well-connected and responsive
- 11) We have clean air, land and water and a thriving and sustainable natural environment
- 12) Our spaces are secure, resilient and well-maintained.

Equalities implications

21. The JHWBS will be developed through an explicit inequalities lens – to ensure that sufficient focus is placed on inequalities that have deepened as a result of COVID-19 (for example, linked to ethnicity and deprivation), and that our plans are broadened to directly address the needs of vulnerable groups that have not been prioritised previously (such as people living in insecure, overcrowded accommodation who are at increased risk of infection and may have limited access to services).

22. The JHWBS will have strategic support from the City and Hackney Health Inequalities Steering Group and an Equalities Impact Assessment will be undertaken.

Conclusion

23. The JHWBS is an important piece of work for the City Corporation. As part of the Health and Social Care Act 2012, the City Corporation is responsible for promoting the wellbeing of all the people who live or work in the City of London. As the determinants of people's health lie largely outside the healthcare system, it is social, physical and economic policies that can have a substantial impact on health. Developing the strategy within a 'health in all policies' approach requires system-wide action, with a specific focus on

actions in the areas of overlap and intersection of the four 'pillars' of a population health system – where the greatest opportunities to reduce underlying health inequalities are expected.

24. Engagement must be undertaken across all City Corporation departments to ensure that there is understanding of the impact of our work on population health. Such engagement will aid the HWBB in setting the right strategic priorities for 2021–24.

25. Members are asked to note the progress made in developing the JHWBS and are invited to provide any recommendations on ensuring that our engagement is comprehensive.

Appendices

- None

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