

## **Health & Wellbeing Board Member Consultation Feedback**

**Monday 9<sup>th</sup> January 2023**

### **Background**

The ICP draft strategy consultation period began on December 13<sup>th</sup>, 2022, the engagement for this will run until January 29<sup>th</sup>, 2023. Feedback is being sought from the public and partners. Feedback will inform the final version of the strategy which is scheduled to be published at the end of February.

As part of this process an extraordinary meeting of members of the Health & Wellbeing Board met on Monday 9<sup>th</sup> January 2023 to capture the views of the members of this group.

### **Introduction**

A presentation was delivered setting out the purpose of the ICP strategy, these being,

- Improve the public's health & wellbeing
- Reduce health inequalities in access, experience and outcomes across our system
- Bring learning from across places and the system to drive improvement and innovation
- Addresses the problems that would benefit from a system response and multiple partners

The strategy has been developed through several expert working groups in discussion to agree the priorities across six key themes:

- Start well
- Live well
- Age well
- Promoting healthy behaviours
- Health protection
- Improving quality and access to services.

### **Feedback**

The feedback from the group fell into three categories.

1. How does the ICP strategy sit alongside the Joint Health & Wellbeing Strategy
2. Representation of the community
3. Wider influences on health

#### **1. How does the ICP strategy sit alongside the Joint Health & Wellbeing Strategy**

### **Comments**

The Joint Health and Wellbeing Board Strategy 21-30 is already in place and is a partnership document, this is potentially duplication.

## **Discussion**

The Integrated care Strategy, like the Health and Wellbeing Board Strategy is a Mandated document and is intended to complement other strategies and to contribute to the activities of other organisations and partnerships. There are common partners involved at a partnership level which will help in the strands of work being complementary rather than duplicating. They have different perspective but a shared aim of improving the health of the population and reducing inequalities.

## **2. Representation of the community**

### **Comments**

How are we getting to grass roots and hearing from our communities? Much of what is in strategy around inequalities have been issues for a long time and we don't give the communities the opportunity to be part of the solution. The strategy has been developed without contribution from communities.

### **Discussion.**

Getting peoples voices heard is important and public engagement events are part of the consultation process. Opportunities are available for feedback online through virtual meetings and existing communication opportunities will be used through VCSE and Healthwatch to capture views. Existing networks through partners is another opportunity to ensure views and experiences can influence priorities and how we work in the future.

## **3. Wider influences on health**

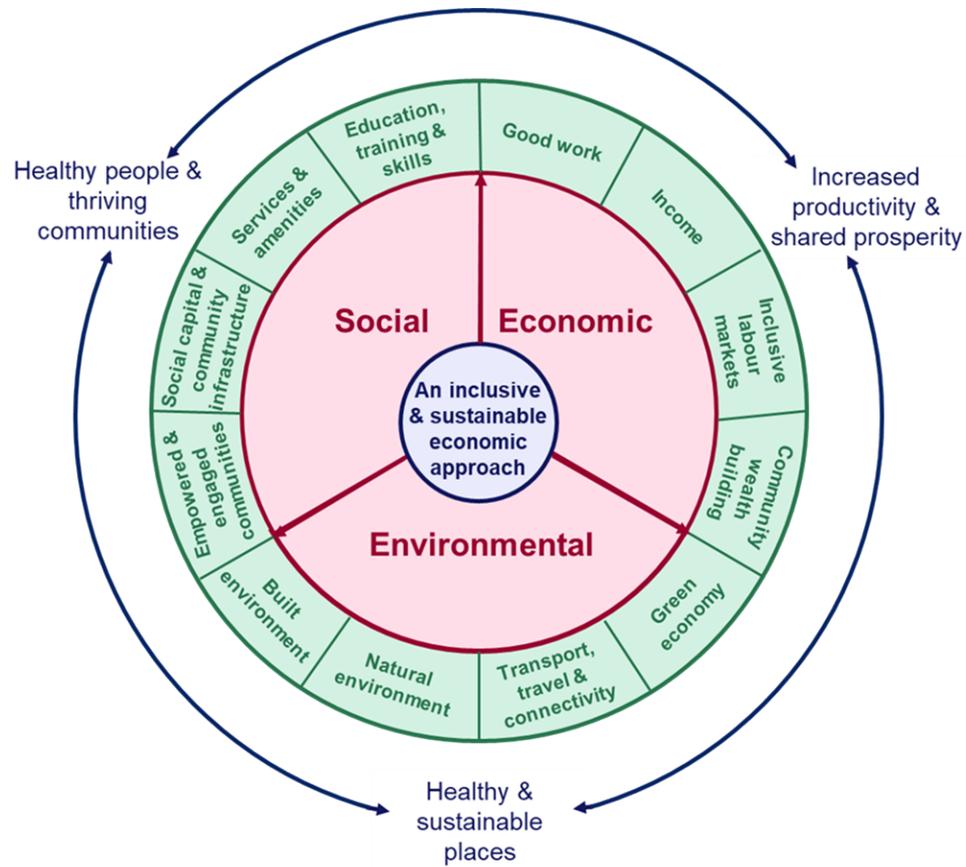
### **Comments**

Thinking about the influences on health and how populations can improve health and health inequalities, how does the strategy enable this? There is more than health services required to keep people well and to achieve equality and equity across and within our communities.

### **Discussion**

This is the greatest opportunity for partner discussion. The strategy includes wider determinants in several aspects in terms of recognising that good health does not occur through good health services alone and there needs to be emphasis on primary, secondary and tertiary prevention to stop people becoming ill in the first place, or to prevent the escalation of illness or best care in cases of long-term conditions. Primary prevention needs a cross partnership approach and co-production with our communities as good health begins in healthy behaviours, healthy homes, community connectivity, good jobs, education. Therefore, partnership working and meaningful community influence and engagement will achieve this.

An approach to the wider determinants of health can be shown through Inclusive, Sustainable Economies model, which is delivered through a social, environmental, and economic lens. (Described by the DPH in the discussion and included below for illustration)



Through action within and across these three domains, an inclusive and sustainable economy strives towards the following vision: healthy people & thriving communities; healthy and sustainable places; and increased productivity and shared prosperity (outer blue layer)

(PHE, 2020)