Kirklees Joint Health and Wellbeing Strategy 2014-2020

Version 2
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1. Prologue

Two things will be pivotal to making Kirklees a better place in the future - healthy people enjoying a great quality of life for longer via a strong and growing economy.

Those goals are not only crucial, but intimately bound together. A successful economy that offers good jobs and incomes for all of our communities makes a huge contribution to prosperity, health and wellbeing of all age groups. Likewise, confident, healthy, resilient people are better able to secure a job and are more productive in the workplace. Both strategies focus on building resilience in business, communities and people in order to increase independence.

Because of the importance of these issues and the connections between them, Kirklees Council and its partners are focusing on two complementary strategies that will set our future priorities and guide action:

**The Kirklees Joint Health and Wellbeing Strategy**

**The Kirklees Economic Strategy**

These two strategies respond to the challenges and opportunities that apply to them individually and set their own priorities and actions accordingly. They cover different ground and do different things, yet are fundamentally connected. Two way discussion, shared analysis and a rounded understanding of how health and the economy are mutually supportive have been central to the development of both strategies. At the heart of both is commitment to achieve a **shared aim**. That is:

*Kirklees is a District combining great quality of life and a strong and sustainable economy – leading to thriving communities, growing businesses, high prosperity and low inequality and where people enjoy better health throughout their lives.*

A coordinated governance framework will oversee the implementation of the Economic Strategy and the Joint Health and Wellbeing Strategy. This will ensure that they continue to support one another through their delivery. Both strategies will also use a similar ‘strategic thinking framework’ to help to develop initiatives and make decisions.

There are specific, practical ways in which work on economic development and health and wellbeing will deliver the stated shared aim for Kirklees. Examples are shown in the tables opposite.

*Thriving communities, growing businesses, high prosperity and low inequality - where people enjoy better health throughout their lives*
### Achieving Shared Outcomes on Economy, Health and Wellbeing

#### Economic development will support health and wellbeing by:

<table>
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<th>Description</th>
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<tr>
<td>Resilient businesses creating good, fulfilling and long term employment opportunities.</td>
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<tr>
<td>Supporting higher incomes and reducing poverty.</td>
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<tr>
<td>Building skills that aid employability, career progression and life chances, thereby reducing inequalities and ensuring there is the workforce necessary to deliver effective health and social care in the future.</td>
</tr>
<tr>
<td>Business support offer to promote healthy, safe, diverse workforces and workplaces.</td>
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<td>Having a spatial planning policy that increases connectivity whilst improving health and wellbeing, air quality and reducing accidents.</td>
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<td>Open spaces and green infrastructure that encourage physical activity and support positive emotional wellbeing.</td>
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<tr>
<td>Good quality housing and high energy efficiency/standards supporting affordable warmth, good health and reduce living costs.</td>
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<tr>
<td>Access to suitable, good quality homes and neighbourhoods providing a secure place for families to thrive and promote good health, wellbeing and independent living.</td>
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<tr>
<td>A quality residential and neighbourhood offer impacting on quality of life and attracting people and businesses to locate there.</td>
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<tr>
<td>Encourage sustainable business practices, e.g. those which cut waste and enhance air and water quality.</td>
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<tr>
<td>Development that respects and creates attractive places, thriving communities and supports health and wellbeing.</td>
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#### Health and wellbeing will support economic development by:

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
<td>Resilient people powering business success.</td>
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<tr>
<td>Enhancing the pool of confident, ambitious, healthy people able and willing to work.</td>
</tr>
<tr>
<td>Better health for longer meaning more productive employees and volunteers able to work for longer.</td>
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<tr>
<td>People being increasingly independent and resourceful thereby developing a supportive, positive, self-sufficient culture.</td>
</tr>
<tr>
<td>Ensuring people have the best possible start in life and are therefore enabled to fulfil their potential and become productive members of society.</td>
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<tr>
<td>Creating opportunities for community economic development that reduce the cost to the public sector.</td>
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<tr>
<td>Improved perceptions of places and communities helping to support enterprise and investment.</td>
</tr>
<tr>
<td>Ensuring the local health and social care sector considers the impact of the decisions it makes on the local economy.</td>
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<tr>
<td>Growth in the health and social care sectors provides major opportunities for new business activity, innovation and employment.</td>
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2. Introduction and Purpose

2.1 The Kirklees Joint Health and Wellbeing Strategy (JHWS)

The purpose of the JHWS is to:

- Provide a context, vision and overall focus for improving the health and wellbeing of local people and reduce inequalities at every stage of people’s lives by 2020.
- Identify shared priorities and clear outcomes for improving local wellbeing and health inequalities.
- Support effective partnership working that delivers health improvements.
- Provide a framework to support the innovative approaches required to enable change, given the changing needs of local people and the current economic climate.

It recognises the need to understand where single agency action may have significant impact for other partners and focuses on wider issues of transformation, including the system changes required, and not just the population outcomes identified in the JHWS.

For organisations it provides direction and a framework for them to review their commissioning and service planning. With its focus on tackling inequality, the JHWS also enables organisations to fulfil their statutory equality duties.

2.2 Making this a reality

The Kirklees JHWS has two broad components:

- The Policy which includes:
  - The JHWS Vision and Outcomes - designed to describe our aspirations of the future.
  - System Change Priorities - provide the foundation for change across organisations in order to enhance systems, have shared expectations for behaviour in planning and delivering change and build more productive relationships.
- The Implementation Plan which includes the overall approach to making change happen during 2014 - 16 across partnership organisations, with a focus on the system change priorities and Joint Strategy Needs Assessment (JSNA) issues. This work is supported by the:
  - Strategic Thinking Framework - designed to ensure plans and actions use an approach designed to ensure the achievement of the JHWS outcomes.

All these have been reviewed and refined for 2014 - 2016 in light of experience, changes to policy and funding and the 2013 refresh of the JSNA.

The Implementation Plan continues to evolve as we all become more familiar with ‘working in a JHWS way’ and as new challenges and opportunities emerge. The Kirklees Economic Strategy (KES) also includes a Strategic Thinking Framework, and a coordinated governance framework for that strategy and the Kirklees JHWS will ensure joined up delivery.

“The Joint Health & Wellbeing Strategy focuses on improving health and wellbeing and tackling inequalities.”
3. The Policy: Vision and Outcomes

3.1 The Joint Health and Wellbeing Strategy Vision

Our vision is that by 2020:

**No matter where they live, people in Kirklees live their lives confidently, in better health, for longer and experience less inequality.**

This is ambitious especially given the number of very significant factors affecting local health and wellbeing. These include the economic challenges facing the country and thus those who are more vulnerable, the increasing numbers of older people and their needs for care and support; and taking advantages of opportunities, for example, the Care Act (2014).

3.2 The future state of Kirklees people and their communities by 2020

What difference are we trying to make for whom?

1. People in Kirklees are as well as possible, for as long as possible, both physically and psychologically, through:

   - Having the **best possible start in life** through every child and young person being safe, loved, healthy, happy, supported to be free from harm; and have the chance to make the most of their talents, skills and qualities to fulfil their potential and become productive members of society.

   - Encouraging the **development of positive health and social behaviours**.

   - Identifying issues **as soon as possible** that affect health and wellbeing.

   - Enhancing **self-care**: people being increasingly independent, self-sufficient and resourceful so able to confidently manage their needs and maximise their potential.

2. Local people can **control and manage life challenges** through:

   - **Being resilient**: having a sense of purpose, self-esteem, confidence, adaptability; be emotionally aware; taking responsibility for their own physical and emotional needs; being supportive and compassionate; being **connected to others**. So resilience is developed in individuals, families, communities and organisations.

   - Feeling **safe** and positively **included**.

   - **Being able to navigate through life**: being able to participate and contribute to society by being able to:

     - **Understand and communicate**;
     - Take advantage of opportunities and **achieve goals**;
     - **Increase their potential**, including for work;
     - **Constantly learning and adapting**.

3. People have a **safe, warm, affordable home** in a **decent physical environment** within a **supportive community** through:

   - Continuing to work in partnership to deliver an appropriate supply of homes and jobs to meet the needs of a growing and ageing population.

   - Working with communities and individuals to enable and support independent living and an environment which promotes good physical and emotional health and wellbeing.

   - Improving homes and neighbourhoods through encouraging greater involvement and joint action.
3.3 How do the JHWS and the KES complement each other

Achieving the KES outcomes of a stronger business base, more and better jobs, enhanced skills and resilience, quality green infrastructure and reduced inequalities will also help in delivering health and wellbeing outcomes.

This focus on people is complimented by the KES focus on sustainable economic growth which supports business competitiveness and benefits people through jobs, housing, skills and incomes. To achieve this, the KES has 5 priorities:

- **Precision engineering and innovative manufacturing**: strength in depth and excellence;
- **Innovation and enterprising businesses**: championing creativity, entrepreneurship and resilience;
- **Workforce, skills and employment**: extending opportunities and powering business success;
- **Infrastructure**: making it easier for businesses to succeed and for people to access work;
- **Quality places**: locations of choice for people, business and investment.

A particular challenge will be ensuring we have a health and social care workforce with the skills and capacity to deliver the JHWS.

Its focus on these factors reflects and complements the JHWS, whilst both strategies place focus on resilience - that of individuals, communities or businesses.

This is shown by the rainbow for Health and Wellbeing on page nine, opposite.
4. What should the Health and Wellbeing Board partners be doing to realise this future state?

**System Change Priorities – Thinking the Joint Health and Wellbeing Strategy way**

Tackling local health and wellbeing inequalities as public sector funding decreases is a significant challenge. To best support local people and their needs, this challenge needs to be owned across the partnership and include agreed and shared behaviour in achievement of outcomes.

All partners recognise that this challenge of delivering services in the future can only be met by fundamental system change, i.e. different, better and cheaper. The key changes and areas for development to achieve the outcomes for local people are:

1. **Being Person-centred** through:
   - Taking an early **holistic view** of the individual in their context in order to appropriately signpost and/or access the broadest range of support to improve their resilience.
   - **Valuing people** for their strengths, gifts, differences and diversity.
   - **Involving** people and communities in creating and delivering solutions for themselves.
   - Helping people to help themselves to increase their sense of **control, independence and resilience**.
   - Creating a **clear way** for individuals to navigate through services and systems.
   - Having consistent and appropriate **quality information**.

2. **Changing the relationship** between citizens and the public sector to shared responsibility:
   - Making best use of the strengths/assets existing in all **communities**.

3. **Improving the quality of, and access to, services** and reducing variation across them through:
   - Use of the Joint Strategic Needs Assessment (JSNA) to **identify needs and priorities**.

4. **True collaboration** and thinking through:
   - Being clear what difference is being made for whom, i.e. **outcomes**, and how do they address any issues in the JSNA?
   - **Prevention** - focussing on stopping issues starting, minimising consequences when they happen.
   - Eradicating **duplication**.
   - ‘Do it once and do it right’ approach.
   - **Using consistent messages** and language across services and organisations.
   - **Innovation** - Identify effective systems, processes and products that meet new or existing requirements, including technological solutions.
   - A **shared** approach to **digitisation** including data sharing, infrastructure and culture.
   - Building a **workforce** that is adaptable, compassionate and uses technology to its maximum extent (linked to delivery of skills and ICT elements of the KES).
   - Considering all **resources**: Private, Public, Voluntary, Individual, Community.

5. Additionally, for health and social care:
   - **Integration** of systems, resources, capacity and finances.
   - People receiving **coordinated care** at home as appropriate for their needs.
   - A **workforce that can span health and social needs** and support a 24/7 service.
   - Recognising and supporting the **contribution of informal carers**.

- **Being evidence based** in outcomes and what works. Learn from evaluation and perceptions of users/communities.
- **Considering current provision of service vs need and effectiveness**, as well as horizon scanning for future risks to achieving the JHWS outcomes and potential changes in need.
- **Minimising unintended consequences** of changes in service provision. Identify the potential impact of any change, e.g. on other services, increasing inequalities.
- **Prioritisation according to need and impact**, e.g. risk stratification, soft intelligence, etc.
The leadership challenge is:

- Committing to energetic and sustained leadership, starting with the Health and Wellbeing Board but supported by a wide range of leaders at all levels, spreading clear and consistent messages about what we want to achieve with leaders continually articulating the vision and outcomes and reinforcing their commitment to it through their day-to-day transactions with colleagues.

- Investing in training, organisational and leadership development and bringing together capacity across partners to drive the vision and fully embed the integration message in our organisations.

- Making space for creative thinking and taking risks.

- Forming constructive relationships and breaking down barriers, such as culture and language, across the system.

- Building collective responsibility across the most significant planning systems for achieving the Vision.

- Enabling the leaders to hold each other to account for the delivery of this Strategy.

Coordination of governance structures for the JHWS and the KES will help to implement both in a joined up manner.

5.2 Strategic Thinking Framework – a tool for robust planning and review

The Strategic Thinking Framework is a set of questions developed from the JHWS system change priorities. It is a tool to use in developing robust plans that meet the health and wellbeing needs of local people and identifying gaps in current plans. It enables insight into current practices and signposts areas to be considered in future planning.

This framework should be used:

- To embed the system change priorities into significant local plans;

- To plan action for key health and wellbeing issues;

- By the Board to identify gaps, pull out interdependencies and to ensure that the key local plans / systems contribute to the achievement of the JHWS vision and outcomes;

- By commissioners and service planners to inform the development or review of key strategies and plans.
Supporting people to have more control and independence, and increased resilience

JHWS Strategic Thinking Framework

Outcomes
Q1. What difference are you trying to make for whom?
Q2. Why does change need to happen?
Q3. What are the main factors affecting these outcomes?
Q4. How will you know what difference you have made?

Resources
Q15. How can you use resources to reflect differing levels of need between groups/communities?
Q16. How can you change the use of resources?
Q17. How can you use resources to support prevention – to stop something happening in the first place and earlier intervention when issues do occur?
Q18. What are the implications of your actions for the workforce?

Increasing independence and resilience
Q19. How do your actions support people to have more control and independence, and increased resilience?
Q20. How do your actions support a holistic view of the individual and their life?
Q21. How do your actions enable people to access appropriate information and enable them to navigate through services?
Q22. How do your actions build community and organisational resilience?

Impact
Q8. What impact have your actions had on the desired outcomes?
Q9. How will your actions reduce variability of quality between providers?
Q10. How will you plug any gaps in your understanding of the outcomes and the impact you are having on them?
Q11. What are unintended consequences and what have you done to mitigate against them?

Collaboration
Q23. How do your actions promote collaboration, shared responsibility; integration of systems, technology, resources, capacity and finances where appropriate?
Q24. How will your actions impact on other services and possible duplication of provision?
Q25. How do your actions help people to help themselves?

Involvement
Q12. Who else should be involved in order to achieve the outcomes?
Q13. Think individual (including carers/family), the community, voluntary, private and public organisations.
Q14. What community strengths or assets are there, and how can they be used and developed to build community resilience?

Using this framework will also contribute to ensuring organisations fulfil their statutory equality duties.
5.3 What are the main health and wellbeing factors affecting the outcomes?

Focusing on improving significant issues

The Kirklees Joint Strategic Needs Assessment (JSNA) describes a wide range of health and wellbeing issues affecting people across Kirklees and identifies key themes that impact locally.

<table>
<thead>
<tr>
<th>Wider factors</th>
<th>Networks</th>
<th>Behaviours</th>
<th>Biological issues</th>
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<tbody>
<tr>
<td>Income and debt</td>
<td>Family</td>
<td>Food</td>
<td>Infant Deaths</td>
</tr>
<tr>
<td>Learning</td>
<td>Social Connectedness</td>
<td>Physical Activity</td>
<td>Cancers</td>
</tr>
<tr>
<td>Work and skills</td>
<td>Dependency</td>
<td>Alcohol</td>
<td>Long Term Conditions, esp.:</td>
</tr>
<tr>
<td>Housing</td>
<td>Community Capacity</td>
<td>Tobacco</td>
<td>Cardiovascular Obesity</td>
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<tr>
<td>Being/feeling safe</td>
<td></td>
<td>Sexual health</td>
<td>Depression/Anxiety</td>
</tr>
<tr>
<td>Obesogenic Environment</td>
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<td>Dementia</td>
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<td></td>
<td></td>
<td></td>
<td>Chronic Lung Disease</td>
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<td></td>
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<td>Asthma</td>
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<td></td>
<td></td>
<td></td>
<td>Diabetes</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>Pain/Musculo-Skeletal</td>
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</tbody>
</table>

Vulnerable groups

- Families with complex needs
- Women of child bearing age
- Dependent disabled children
- Looked after children/care leavers
- Offenders
- People on low incomes
- People with mental health issues
- Adults with physical disabilities or sensory impairments
- Adults with learning disabilities
- Carers
- Older people

The JSNA identifies issues where:
- There is a significant local impact in terms of size and severity.
- The issue itself or its consequences are comparatively worse, either compared with other areas or between different areas/groups within Kirklees.
- Impact of the issue is not improving or is worsening compared with other areas or over time.

For example, the key issues identified by the JSNA:

The JSNA should be used:
- a) As a starting point for planning;
- b) As part of the Strategic Thinking Framework;
- c) To consider how resilience is built into planning.

The JSNA is available online at www.kirklees.gov.uk/jsna
5.4 Tools to enable people to implement the Joint Health and Wellbeing Strategy (JHWS)

The following areas of work are crucial to support the implementation of the JHWS:

- Developing a **coherent and co-ordinated approach to creating and using intelligence** about health and wellbeing needs and assets, effective action and local impact. High quality, easily accessible intelligence is essential in tackling both the system changes and key health and wellbeing issues.

- Developing a **coherent and co-ordinated approach to commissioning** through increasing awareness of the commissioning discipline, the local skills and capacity to undertake it effectively for health and wellbeing.

- Developing a consistent approach across partners **identifying, involving, engaging with communities and building community assets**. This is a shared area of work with the Safer Stronger Partnership.

- Identifying what **type of action** is necessary:
  - **Evolutionary** improvement: work will continue to be undertaken and improvement will be on a steady, continuous trajectory;
  - **Revitalisation**: focussed action should achieve significant improvement;
  - **Transformation**: a complete review and potential redesign.

Action should be prioritised where:

- There is local **capacity to change** and the potential **return on investment**.

- **Quality of local action** is compromised because there is considerable scope for reducing inequality in appropriate access or quality of local service provided; care pathways or specific service redesign is required.

- **Change is feasible** in the shorter term.

- It is **timely** to take action now.

- Action on this issue will improve the overall **JHWS vision and outcomes**.

5.5 How will we know what impact our actions have had on the outcomes?

Assessing the success of the implementation approach of the JHWS includes:

- Achievement towards the overall vision and outcomes are assessed by the outcome indicators.

- To assess the implementation of the system change priorities, the key plans will be prioritised for importance and assessed using the strategic thinking framework and evidence provided to support this. A briefing paper will then go regularly to the Health and Wellbeing Board outlining the changes resulting from using the framework and any outstanding action which may need partnership solution, i.e. what are they doing differently as a result, and is this achieving the desired outcomes.

**Involving, engaging with communities and building community assets**