

Health and Wellbeing Board

24 April 2017

The Walsall Plan: Our Health and Wellbeing Strategy 2017 - 2020

1. Purpose

This paper is intended to report on the process followed in developing the Walsall Plan: Our Health and Wellbeing Strategy 2017 – 20, including a workshop event on 29th March. (Feedback in appendix 1)

The final version of the Walsall Plan is going to all the Partnership Boards identified in the Partnership structure for sign-up (Appendix 2). It is important that the members of the Health and Wellbeing Board (HWB) consider the Walsall Plan, the priorities identified and for which priorities the HWB will be taking the lead. In addition, the HWB obsession needs to be agreed.

Once the priorities and obsession for the HWB have been accepted, then the processes for identifying actions, audit and performance management need to be discussed (Appendices 3 and 4)

2. Recommendations

2.1 That the Health and Wellbeing Board approves, and signs up to, the final version of the Walsall Plan shown in appendix 2 and agrees that they will take the lead on the key priorities identified for the HWB within the Plan.

2.2. That the HWB agrees the Obsession upon which it will lead “To support the capacity of VCSEs in Walsall, and greater connectivity between the VCS and partners, in order to improve health and wellbeing for all, by increasing the number of Walsall residents who volunteer, in particular around loneliness and isolation and physical activity”.

2.3 That the HWB notes the next steps for developing both the Obsession action plan (appendix 3) and reporting arrangements for the HWB priorities (appendix 4).

3. Report detail

The Health and Wellbeing Strategy (HWS) is a key document for the Health and Wellbeing Board, identifying the priorities for current and future focus. These priorities should not be about work already being covered by LA and partner services, but should identify any gaps or where the connectivity between partners on the HWB can make a positive difference.

At the Health and Wellbeing Board on 27th January it was agreed that the Health and Wellbeing Strategy and the Walsall Plan would be integrated into a single plan covering the wider determinants of health.

The Walsall Plan: Our Health and Wellbeing Strategy (Appendix 2) has been developed using several key sources of information:

- Local strategic needs assessments (JSNA, Economic Needs Assessment, Strategic Assessment for the Community Safety Plan)
- Work for the Strategic Partnership Group identifying cross-cutting themes within partnership and organisational plans
- Current work on the Council's Corporate Plan

The wider determinants of health are recognised, and three overarching priorities have been identified to improve the health and wellbeing of our population:

- Increasing economic prosperity through increased growth
- Maximising people's health, wellbeing and safety
- Creating healthy and sustainable places and communities

A life course approach has been taken, with reducing inequalities as a key theme across all areas. Key priorities have been identified underneath each overarching priority. These priorities are the focus of work for our Partnership Boards - appendix 1 of the Walsall Plan identifies which Board is accountable for each priority. Alongside these priorities, a number of key target groups have been identified.

In addition, each Board has identified an "obsession", a key issue where the whole Partnership can work together to make more of a difference to the outcomes for our local population. These "obsessions" are:

- To support the capacity of VCSEs in Walsall, and greater connectivity between the VCS and partners, in order to improve health and wellbeing for all, by increasing the number of Walsall residents who volunteer, in particular around loneliness and isolation and physical activity (**Health and Wellbeing Board**)
- All children are safe, happy and learning well (Children and Young People's Partnership)
- Quality apprenticeships for all ages (Walsall Economic Board)
- Address the issue of homelessness / rough sleepers to improve outcomes (Safer Walsall Partnership)
- "If it doesn't feel right, then act on it" (Safeguarding Boards)

3.1 Involvement of partners and consultation

Partners have been involved throughout the development of the Walsall Plan, through individual meetings and through discussion in various partnership forums including:

- Health and Wellbeing Board
- Strategic Partnership Group
- Council Management Team
- Cabinet-Council Management Team
- Borough Management Team
- Walsall Economic Board

A workshop event for partners was held on 29th March where there was further opportunity to contribute to the development of The Walsall Plan and to consider its delivery. All members of the HWB were invited to attend this event. Feedback is given in appendix 1.

Engagement with the public will be crucial in shaping delivery of the specific actions identified in the plan.

3.2 Governance arrangements

The Walsall Plan will need to be approved by each partner organisation in Walsall, and also by the Walsall Partnership Boards as the overarching plan for Walsall. All Partnership Boards and partner organisations will be responsible for ensuring that their own plans reflect and deliver against the priorities in the Walsall Plan. The Walsall Plan has been developed in conjunction with the Corporate Plan.

The Partnership Boards will continue their own monitoring and performance management arrangements for their action plans to deliver the key priorities in the Walsall Plan. It is not planned to duplicate existing performance management and governance arrangements. Delivery plans will continue to be managed through the relevant Partnership Boards and partner organisations. The Partnership Boards will continue to hold individual organisations accountable for delivery of their action plans. Accountability for each organisation will be through its own governance structure - for Council this will be through Cabinet.

3.3 Next steps:

All of the Partnership Boards and partnership organisations will be asked to sign-up to the Walsall Plan and work within their existing governance arrangements to monitor progress against the priorities for which they take the lead.

Appendix 3 includes a draft template to promote discussion about the reporting arrangements for the HWB priorities. Further consultation is required on this to identify the key strategies and plans involved and agree the focus of each area of work for the HWB.

Appendix 4 is a draft action plan for the HWB obsession. This requires identification of a named lead and further development, perhaps through a small working group.

Subsequent versions of both appendices 3 and 4 need to be brought back to the next meeting of the HWB.

4. Implications for Joint Working arrangements:

The Walsall Plan (appendix 2) is the primary partnership document identifying the shared key priorities for Walsall, all of which contribute to improving the health and wellbeing of the population. Partnership discussions, influence and drive will be channelled through the Partnership Boards identified within the Plan, all of which lead on one, or more, of the key priorities. It is expected that the members of those Partnership Boards will decide how best to pool their resources to lead and support the work being undertaken to tackle priorities.

5. Health and Wellbeing Priorities:

The Walsall Plan has been developed recognising that, in order to enable people to live healthy, safe, independent, prosperous and fulfilling lives, we need to work together in partnership to co-ordinate an holistic approach to the challenges we identify, covering the socioeconomic, cultural and environmental elements determinants of health.

Within the Plan, due consideration has been given to the six Marmot objectives as listed below:

1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill-health prevention.

All the key priorities have been mapped across the life course and a review has been conducted to ensure all the Marmot objectives are represented within the key priorities identified for Walsall. All six objectives have been covered.

Safeguarding has also been a focus for consideration and it is recognised the work involved is implicit within the list of priorities. Both Safeguarding Boards (children and adults) are included in the Partnership diagram within the Walsall Plan and members have been consulted in the various drafts of the document. In addition, the Safeguarding Boards have chosen their own obsession for focus during the lifetime of the Walsall Plan.

Authors

Cath Boneham
Health and Wellbeing Programme Manager
☎ 653738
✉ Catherine.bonehamc@walsall.gov.uk

Rachel Chapman
Specialty Registrar – Public Health
☎ 650324
✉ Rachel.chapman@walsall.gov.uk

Feedback from The Walsall Plan: Our Health and Wellbeing Strategy workshop (29th March 2017).

Specific responses to comments are in bold

How does The Walsall Plan fit with your organisation/partnership board?

Specific Board comments:

- SWP members have been instrumental in the initiation and forward drive of the development of greater coordination and alignment of priorities, funding and engaging Accenture in the first instance. Walsall Plan incorporates the SWP Plan – safety a key part of well-being.
- Walsall Plan will give WEB a sense of purpose/direction and help shape its agenda. We need to ensure it adds value to WEB rather than increase burden. One of the strengths of WEB is in being non-statutory: it's not the 'Council's' board and so the private sector feels a great sense of ownership. A lot of its value is that it has 2 very basic priorities at its core – creating local jobs and helping local people get those jobs. We don't want to lose this simplicity.
- CYPP needs refresh – real opportunity to embed these priorities into the refreshed CYPP and then see any gaps.
- Safeguarding Boards have an assurance role, not an operational role
- Aspects of the Walsall Plan fit the Police and Crime Plan, which also takes a holistic approach

General comments:

- Interrelationships within Plan are vital, with many of the priorities dependent on one another. Communication + collaboration between Boards is key. Other Boards have role to play in delivering improvements to achievements. **(Role for SPG in identifying synergy, challenging interrelationships and enabling information sharing)**. Examples identified:
 - Wider cultural change needed – e.g. learning and skills agenda for up to 25 years, not enough opportunities in Walsall – priority sits with WEB.
 - Adults emotional wellbeing and resilience sits with HWB – connected to CYP emotional health and wellbeing (do these adults have children? How are they affected? Opportunity – to position CYP issues better with HWB)
 - Keep vulnerable people safe – early help connection to CYPP but should stay with WCSB.
 - Opportunity to rewrite Youth Justice plan – can build in Walsall plan – shared objectives fitting into boards
 - Monitoring and oversight issues falling out – CYPP e.g. teenage pregnancy and infant mortality could feed into HWB
 - Need to follow the whole pathway through e.g. apprenticeships through to jobs in Walsall.
 - Improving air quality – role of WEB – need to recognise this – local jobs in Walsall.
 - Tackle the harms of substance misuse – link with HWB?

- Better continuity of education and skills into increase access to skills and learning

- Need for greater and appropriate information sharing – ‘permission to share’ – not be parochial **(a role for SPG to ensure information sharing protocols are in place)**.
- What is our target? Need to set ourselves some concrete targets/ambitions (e.g. help community sector to set up 25 new businesses this year) so that everyone can work towards a common goal and we can see tangible progress.
- Challenge recognised of how you do all of this alongside everything else. Boards don’t do the work – lead organisations do it.
- How do we deal with challenge and contradictions when there is limited funding?
- Feels like business as usual – this is good thing. Helpful that Plan is based on wider determinants – link to Marmot
- Obsessions are the added value of the Plan – the collective is greater than the parts. But they need to be explained in terms of outcomes.
- How will we know we are successful? – balance of being ambitious enough but not too ambitious.
- Health Impact Assessment should be used more to assess organisational decisions and how they contribute to the Walsall Plan
- Must engage around priority actions with public. Check that they ‘own’ the priorities/actions.
- Synergy in training is required across partners
- Where possible use a common language and a common way of working

Are there any priorities identified for your board where you would not see your board taking a lead?

- The priority around ensuring services are accessible and culturally appropriate etc. should underpin ALL delivery, but who will OWN this? How will it be measured? **(This has now been made a priority for all Boards, everyone should own and report on this through the Strategic Partnership Group)**
- NB Safeguarding Board role is oversight rather than operational
- Still need to fine-tune the specific priorities adopted by SWP to enhance clarity, especially the ‘violence’ priority **(this will be done as part of the work of the SWP)**.
- Tobacco needs to be included in the ‘drugs, alcohol, and substance misuse priority.’ **(Tobacco control will be considered by SWP when appropriate, there may be overlap with other Boards eg HWB)**

Do you have robust governance arrangements in place to oversee your lead priorities?

- Significant work is underway to reshape SWP Board, making it more dynamic, holding people to account, performing a scrutiny focused role, maintaining stronger community links.
- Need to revisit the relationship diagram – Local Resilience Forum may not need to be part of that list. We also need to develop our own for the

revised ToRs. **(Local Resilience Forum removed. Please note that the relationships diagram is a dynamic structure that will change and develop over time)**

- Need to be clear on our own accountability and our new sub groups.
- Some consideration needs to be given to where sub-groups fit and the role they play– certain priorities could be owned by sub-groups, e.g. Employment & Skills Board already have activity around skills agenda
- We need to be action-orientated, recognising commercial drivers. Where is the accountability and monitoring for Walsall Plan going to sit?
(Accountability sits with each Partnership Board and their own action plans, oversight will be through the SPG)
- Each Board needs to consider its membership (ensure that membership includes the right people that can make the decisions), balance of organisational representation, terms of reference and reporting. This includes a decision on the role of Provider organisations on partnership Boards **(Each Board should review their membership, members should identify substitutes when not available)**
- It would be helpful to have a consistent reporting format for Boards without creating a whole industry of reporting. Need to focus on a few issues (obsessions) for long enough. Plans need to have timescales so we can see results. (Safeguarding Boards have developed a scorecard and are now revisiting their priorities)
- Are reports just to SPG? Could they be shared with all Boards? **(This should be co-ordinated by Board officers on the SPG)**
- Consider timetable of reporting to ensure partnership inputs.
- Need to have locality model lead by an identified board.

What has worked well before? Are there any gaps?

- Good, solid and effective partnerships are already in place
- Need to have the right discussions at the right time.
- Avoiding duplication is key and should be supported by the Strategic Partnership Group.
- Need to develop a consistent and meaningful performance management model. **(Responsibility of each Board, to be shared with SPG)**
- Still need to flesh out how we understand and recognise what our partners are doing. **(This will be supported by 6 monthly reporting to SPG and annual partnership summit)**
- Risk in having a great plan – there's a danger of lots of words, but no action
- Need to try not to be all things to all people. Must be 'impact focussed' – asking ourselves where we can make a difference, and all focus on that.
- So what is the 'big thing' we can do that will create change. Possible link with Social Value.
- Specific gaps identified by CYPP:
 - Oversight for Young Carers
 - Connection to corporate parenting board
 - Toxic trio group cease broader agenda to be picked up (by) CYPP Board - part of neglect **(removed from Partnership diagram)**
- How connected Plan is to WMCA?

- Challenge to demonstrate added value of working together. How to connectively know Walsall Plan has made a difference
- Need appropriate resource to deliver on priorities
- Gap identified regarding housing in Partnership structure (gap in current Plan)

Table discussions on specific obsessions – to be developed into action plans by each Board

Address the issue of homelessness and rough sleeping to improve outcomes

- Need to promote and drive greater coordination across agencies and sectors.
- Improve sustainability of support.
- Support and awareness raising around safeguarding for voluntary agencies.
- Channel and direct the support that's available to those in greatest need.
- Need to really UNDERSTAND the multiplicity of issues faced by the homeless and those who sleep rough – no 'one size fits all.'
- Are we sufficiently resourced to make this happen and get to know those individual stories?
- Do we really know the extent of the issue? Intelligence and knowledge held in different places.
- Homeless triage.
- Need to work with others on early intervention.
- SWP will provide a platform for partnership discussion and delivery of tasks, but the casework should be addressed at locality panel level.

Apprenticeships

- Recognise that partners themselves are employers – all will have budgets and we need to think collectively about workforce development and how we spend our Apprenticeship Levy
- Some people might not be ready to go into an apprenticeship – so how do we plan for pre-apprenticeships/traineeships?
- How do we link to other priorities/obsessions – e.g. Looked After Children?
- Proactive vs reactive – we need to be working with young children to develop their aspirations and broaden horizons, for example with effective information, advice & guidance (IAG)
- Where do schools feature in the Partnership? [this is a question that was being asked 10 years ago!] Especially engagement with independent schools/academies. Schools are incentivised to encourage students to stay on at school rather than take up apprenticeships
- Enterprise events could give young people an introduction into the world of work, and change mindsets. Engaging with the VCS would be really helpful in this regard.
- Need to focus on people achieving their full potential – which isn't always the same thing as a focus on qualifications.

All Children are safe, happy and learning well

- Does this sit with CYPPB OR WCSB?
- Strap line in presentation "safe, happy and learning well" supports / aligns

with Walsall Plan priorities – is the obsession for CYPP Board?

New Obsession wording : All children are safe, happy and learning well

- There is a role for all partners/boards
- Obsession must be recognised by HWB, SWP, WEB, WCSB. All have a different role to play in different aspects of the obsession.
- Connectivity
 - – e.g. Apprenticeship (economic board) – role of schools – need to change this being seen as a vulnerable pathway for CYYP – Apprenticeships need to become norm as curriculum offer.
 - Pathway from Youth Justice route into apprenticeships – connect to employers.
- Thinking as family – some focus on adults – consider are they parents? How does fixing issues for adult's impact on family.

Key element is early intervention

What is going to be different that hasn't happened before?

- Simplified governance structure
- Need to be willing to challenge each other and hold to account
- Fundamental to obsession is having a 'home' – connects back to economic board as well.
- Link of pupil place planning to housing need and provision
- Gaps – engagement of head teachers and young people represented
- Role of Head Teacher rep on CYPPB and Young Person rep – do we engage? Need to engage and listen to YP and families in right way
- How to utilise locality model support delivery ?
- Role of 6th form provision in engaging younger people e.g. Duke of Edinburgh

Cultural shift needed in schools (see earlier re apprenticeships)

- Ofsted inspection considers p/ships and engage in localities – schools can get on board

Strand in strategy (Walsall Plan)

- Engagement of 'providers' not represented e.g. schools
- Capture/engage voice of C+YP

Focus on issue – track delivery + impact

Package engagement of partners for schools to encourage them in

A strong, professional and vibrant voluntary and community (VCS) sector within Walsall that meets the needs of our communities, and is supported by a credible VCS infrastructure organisation

- Need to get synergy about schemes we already have – build on these. Tap into resource with skill share etc. Post resources – infrastructure.
- Consider LETS/Timeshare schemes.
- Timeshare between statutory partners etc.
- Need to consider what people are attracted to dependant on skills to

share.

- Link with housing/affordable housing
- Consider similarities of mission – who is best placed to deliver what? What is the IMPACT and what people want?

ACTIONS

- Orgs – supporting volunteers/3rd sector
- Volunteering policy
- Shadowing/working between statutory organisations.
- Reviewing of commissioning process in conjunction with voluntary sector.
- External funding to support voluntary sector & commissions – work in partnership. Challenge that Borough boundaries don't mean a lot. Think about wider boundaries. Walsall needs presence, there is a "Wellbeing Board" within Combined Authority structures – could look at this.
- Strong partnership to build links to help people to stay healthy & independent.
- NEED TO DESCRIBE OUTCOMES WE WANT i.e. Capacity/Help individual.
- Need consideration of 'need' rather than 'want'.

"If it doesn't feel right, then act on it"

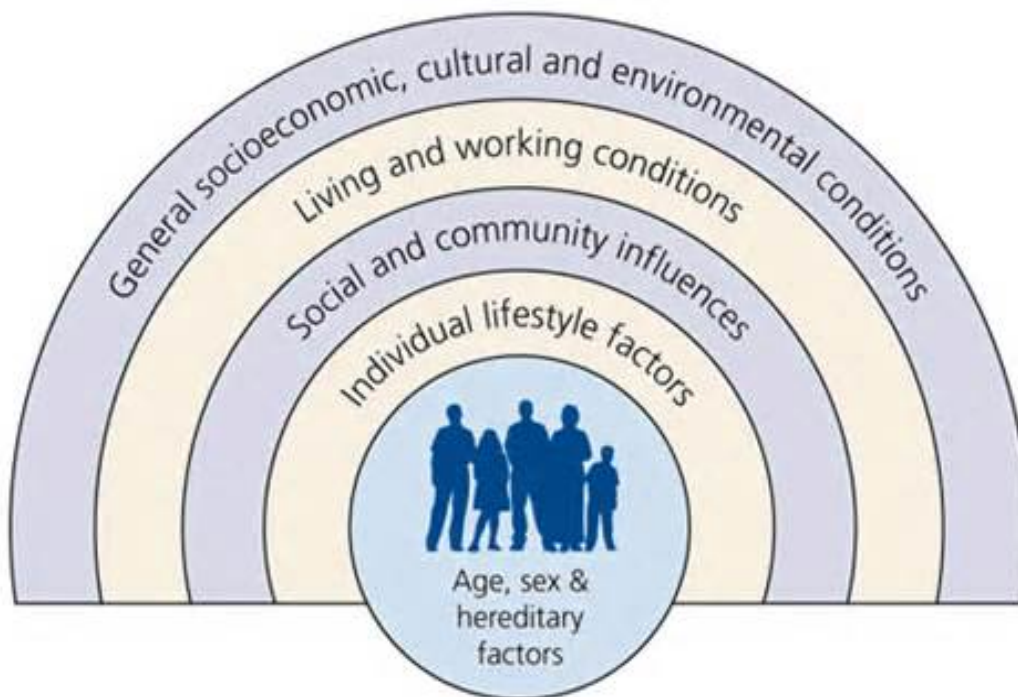
- To embed the message "if it doesn't feel right it may not be". "Don't assume that some is doing something". "You might just save a life, you may well change a life".
- To work collaboratively with Public Health, initially to scope the programme and to agree a communications plan.
- The aim being to increase safeguarding awareness across the community of Walsall and to ensure that clear reporting routes are available.

The Walsall Plan: Our Health and Wellbeing Strategy 2017-2020

Please note: This is the final version as of 12.4.17 but as it is an iterative, living document, there may be future amendments to the Walsall Plan to reflect future context and decision making.

Improving Outcomes for People of Walsall

Whether people are able to live healthy, safe, independent, prosperous and fulfilling lives depends on a number of factors including individual lifestyles, social and community networks and wider living and working conditions (the Dahlgren and Whitehead “Rainbow model”). Local partnerships are crucial to achieving this holistic approach that is needed to deliver improved outcomes. Any work to improve outcomes for individuals must also consider how to reduce inequalities across the population.



Knowing Our Needs

Assessment of need in Walsall is predominantly tackled through three key assessments, the Joint Strategic Needs Assessment (JSNA), the Economic Needs Assessment and the Strategic Assessment to inform the Community Safety Plan. The needs identified in these assessments have been used to inform the development of this Walsall Plan.

The emerging needs identified from the latest JSNA refresh are:

- Emotional health / wellbeing of children and young people, including self esteem and higher aspirations
- Infant mortality, including maternity services
- Obesity in children
- Mental health (all ages)
- Physical activity (all ages)
- Health & Work– including people unable to take up employment due to ill health
- Long term conditions - e.g. cancer, diabetes, asthma and respiratory diseases
- Dementia
- Loneliness & isolation (including carers)
- Substance misuse
- Domestic violence
- Quality housing, appropriate for need & energy efficient
- Infrastructure to encourage active leisure & travel

Emerging needs identified through the Local Economic Assessment centred around:

People

- Demographic change – with a shrinking proportion of working age residents
- Qualifications, skills and behaviours – to equip people to enter and progress in work
- Worklessness – especially youth and long-term unemployment
- Benefit dependency and ill health – particularly those on health-related out-of-work benefits

Business

- Economic output and productivity
- Size and diversity of the local business base
- Number and range of local jobs
- Support for new and existing business growth

Place

- Connectivity and accessibility – by road and public transport
- Supply of quality development sites and premises
- Housing offer – appropriate for existing residents and future demand
- Attractive natural and built environments – including vibrant town and district centres

Summary of the emerging needs identified in the Strategic assessment:

Following the comprehensive strategic assessment of 2016 – 2017, the priorities of Safer Walsall Partnership were identified under four headings: Prevention, Intervention, Reduce Demand and Strategic Themes. Responsibility for delivery

against those themes clearly cut across Adult and Children's Safeguarding, Health and Wellbeing and Safer Walsall Partnership Boards and their sub groups. Ensuring the work delivered across the diverse services supported by this governance structure was captured and recognised, with clear lines of accountability, scrutiny and challenge was a catalyst for the work of the Strategic Partnership Group, which was formed in order to deliver these assurances and achieve better connectivity across the overall governance structure.

Extensive work has since taken place, and is continuing, to align priorities and governance in order to avoid duplication, improve efficiency and efficacy and ensure there are clear lines of accountability and scrutiny.

The strategic themes for Safer Walsall Partnership from 2017 will be:

- Violence
- Contest (the UK's strategy for counter terrorism: Pursue, Prevent, Protect, Prepare)
- Substance misuse (drugs and alcohol)
- Reducing reoffending.

These have been identified utilising local intelligence, risk and vulnerability, together with the knowledge, experience and demand levels of the agencies which form the Safer Walsall Partnership (SWP) Board.

It will be the responsibility of SWP Board to oversee delivery, with each theme having a designated lead who will be responsible for pulling together the work carried out by all partners to achieve the best possible outcomes for our communities.

Knowing Our Priorities

A number of strategies, based on these needs assessments, are already in place across the Partnership in Walsall. The cross cutting themes identified within partnership and organisational strategies have been used to identify three overarching priorities for The Walsall Plan where value can be added by working together in partnership:

1. **Increasing economic prosperity through increased growth (table 1 below)**
2. **Maximising people’s health, wellbeing and safety (table 2 below)**
3. **Creating healthy and sustainable places and communities (table 3 below)**

Reducing inequalities will be a core action within and underlying each of these priorities. The principle of “proportionate universalism” will be applied ie the scale and intensity of effort will be greatest where our need in Walsall is greatest.

A Marmot life-course approach has been applied to the three overarching priorities, and key priorities within these have been identified:

Table 1: Increasing Economic Prosperity Through Increased Growth	Children	Young People	Adults	Older People
Reduce inequalities				
Improve school readiness				
Improve education outcomes				
Increase access to appropriate skills and training				
Ensure people possess the skills to enter and progress in work				
Increase opportunities for, and take-up of volunteering				
Build the business environment to create more local, added value, jobs				
Develop strong and sustainable infrastructure				

Table 2: Maximising People's Health, Wellbeing and Safety	Children	Young People	Adults	Older People
Reduce inequalities				
Improve maternal and newborn health				
Improve emotional health and wellbeing of children and young people				
Enable children and young people to be better protected and safeguard themselves				
Enable and empower individuals to improve their physical and mental health				
Maximise emotional wellbeing and resilience of adults				
Support local people to secure and stay in employment				
Reduce loneliness and isolation and increase support through social networks				
Support independent living				
Remove unwarranted variation in health care and ensure access to services with consistent quality				
Enable those at risk of poor health to access appropriate health and care, with informed choice				
Keep vulnerable people safe through prevention and early intervention				
Ensure services recognise cultural barriers, and are inclusive and accessible for existing, new and emerging communities				
Protect communities and individuals from the threat caused by extremist behaviour				
Tackle the harm to individuals and communities caused by substance misuse				
Improving community safety through reducing reoffending				
Reduce the harm to individuals and communities caused by all types of violent behaviour				

Table 3: Creating Healthy and Sustainable Places and Communities	Children	Young People	Adults	Older People
Reduce inequalities				
Develop an environment to enable healthy lifestyles				
Actively support inward investment to make Walsall an attractive place to live and work				
Improve air quality				
Promote environmental sustainability				
Ensure access to appropriate and affordable housing				
Support a sustainable third sector through individual and collective engagement				
Empower connected, inclusive and resilient communities				
Deliver prevention and intervention through locality delivery models				

Key Target Groups in Walsall

In order to reduce inequalities a number of key target groups in Walsall have been identified:

- Looked after children
- NEETs
- Teenage parents
- Families on the edge of care
- Individuals challenged by addictions
- Individuals with mental health disorders
- Offenders and ex-offenders
- Carers – children and adults
- Children and adults with disabilities (including learning disabilities)
- People with long term conditions
- People with complex needs including co-morbidities and frailty
- People lacking cohesive social networks

In addition, there are geographical pockets of high need in communities. A core action underlying the Walsall Plan is to reduce inequalities which will include key target groups, communities and geographical areas.

Walsall and the wider partnership

Walsall is a key player in significant wider partnerships:

- The Black Country and West Birmingham Sustainability and Transformation Plan (STP)
- The West Midlands Combined Authority
- The Black Country Local Enterprise Partnership

The Black Country and West Birmingham STP is a transformational plan for local health and care systems that incorporates 5 areas: Birmingham (West), Dudley, Sandwell, Wolverhampton and Walsall. This will ensure the sustainability of quality services for the population of Walsall by working in partnership with providers across a wider geographical area. The main areas of focus are: local based care; maternity and infant health; mental health and learning disabilities services and extended hospital collaboration. The Walsall footprint of the STP is driven through the Walsall Together partnership group.

The West Midlands Combined Authority incorporates 18 local authorities (including the 7 metropolitan councils of the West Midlands) and 4 Local Enterprise Partnerships. It aims to address the wider determinants of health, in particular: economy, skills, transport and housing.

The Black Country Local Enterprise Partnership (LEP) covers the sub-regional footprint of Walsall, Dudley, Sandwell and Wolverhampton local authorities, and affords an opportunity for business communities and the public sector to effectively work together in a challenging economic climate. The LEP Board – which includes high profile business leaders and education providers, alongside local authority leaders – has set out its ambitions for the Black County in a Strategic Economic Plan (SEP). The SEP made up of a range of strategic programmes relating to one of three pillars – people, business and place – which together are designed to:

- Enable businesses to grow;
- Create the economic, social and physical infrastructure to support that growth.

Our “Obsessions”: Using our partnership to make more of a difference

In developing The Walsall Plan we have mapped the ongoing work of the existing key partnership structures. This has enabled us to identify gaps where all the partners, through the existing partnership structures, can work in tandem to make a visible difference. We are calling these our “obsessions” and each Partnership Board will take a lead on a different obsession to improve outcomes for the population of Walsall. Underlying each obsession will be a 3 year action plan outlining the contributions of each partner and how success will be measured.

The obsessions are:

- To support the capacity of VCSEs in Walsall, and greater connectivity between the VCS and partners, in order to improve health and wellbeing for all, by increasing the number of Walsall residents who volunteer, in particular around loneliness and isolation and physical activity (Health and Wellbeing Board)
- All children are safe, happy and learning well (Children and Young People's Partnership)
- Quality apprenticeships for all ages (Walsall Economic Board)
- To improve outcomes for the homeless / rough sleepers (Safer Walsall Partnership)
- "If it doesn't feel right, then act on it" (Safeguarding Boards)

Recognising and filling the gap

As the Walsall Plan was discussed and developed, partners recognised the importance of appropriate and affordable housing provision across the Borough and the significant impact this has on many other outcomes that the partnership is pursuing. It is felt that the development of a new, strategic level board will most appropriately position housing in our partnership arrangements. It is therefore intended to establish a Walsall Housing Board which will sit alongside other key boards in its own right – i.e. alongside Safer Walsall Partnership, Walsall Economic Board etc (See Relationship diagram at end of Plan). Discussions have been held with the Chairman of the Walsall Housing Partnership (WHP) who supports the new board and is willing to offer representation to it through a nomination from the WHP. It will be made clear, however, that the WHP exists in its own right and the Walsall Housing Board is neither taking on its remit nor expecting WHP to report to the Board.

The Walsall Housing Board's remit will be to focus on strategic housing matters, working with partners from the private and public housing sector, the Council and Walsall partners. Its work will be within the context of the emerging Land & Housing focus of the West Midlands Combined Authority for which Walsall Council Leader, Cllr Sean Coughlan, provides portfolio leadership at the regional level.

How we will make the Walsall Plan happen: governance arrangements

The Walsall Plan is the overarching strategy for Walsall, with collective ownership by partnerships and partner organisations. The Walsall Plan will need to be signed off by each partner organisation in Walsall, and also by the Walsall Partnership Boards as the overarching plan for Walsall. All Partnership Boards and partner organisations

will be responsible for ensuring that their own plans reflect and deliver against the priorities in the Walsall Plan.

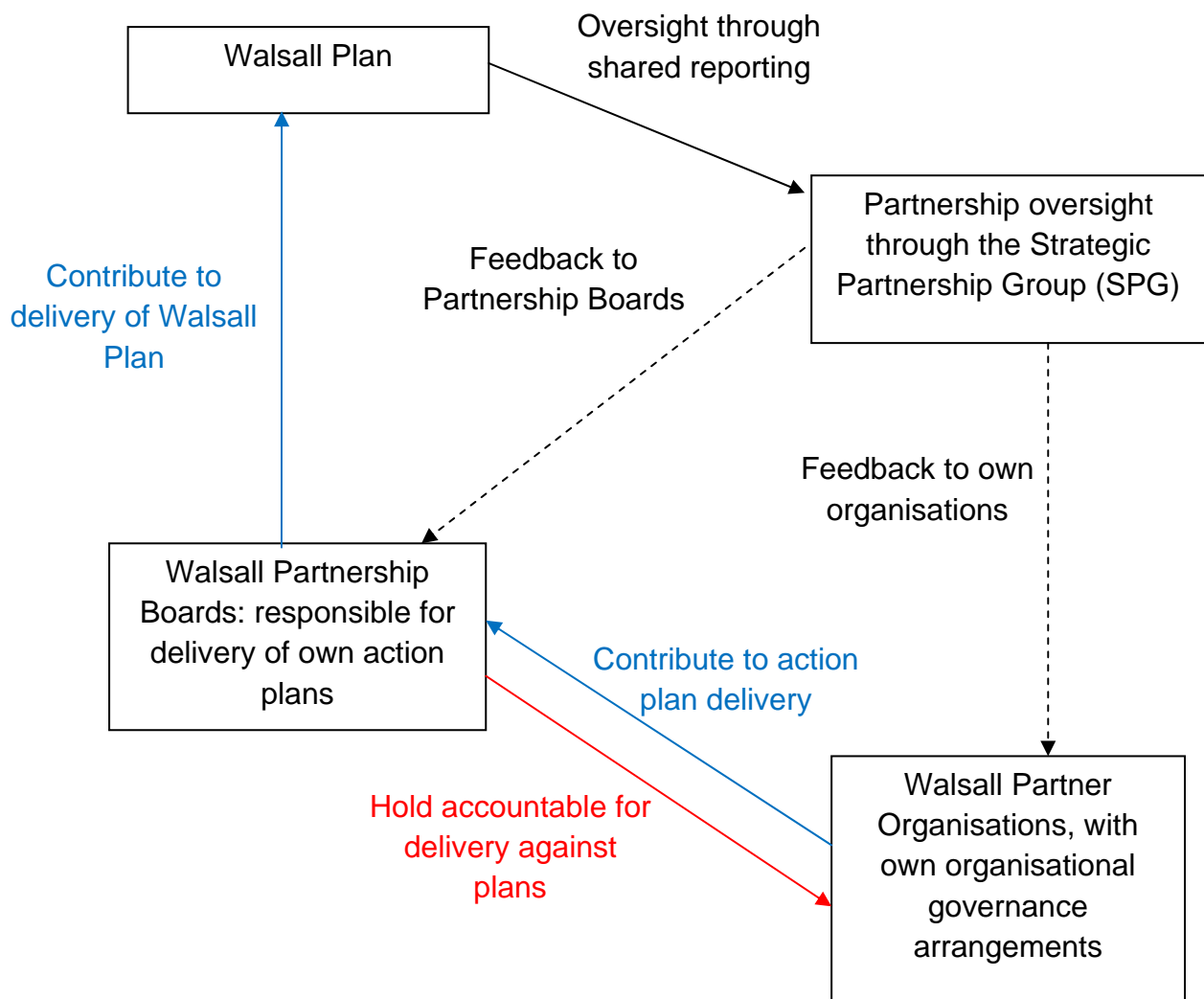
It is recognised that there is significant work already happening in Walsall which will contribute to the priorities identified in the plan. Appendix 1 identifies which Partnership Board is accountable for, and provides the governance for, each priority in the plan although it should be recognised that other Partnership Boards may contribute to priorities where they are not the 'lead'. New or refreshed strategies and plans should reflect the priorities in the Walsall Plan.

The Walsall Partnership relationship model (appendix 2) demonstrates the relationship across the Partnership Boards. This is not a hierarchical model.

The Partnership Boards will continue their own monitoring and performance management arrangements for their action plans to deliver the key priorities in the Walsall Plan. It is not planned to duplicate existing performance management and governance arrangements. Delivery plans will continue to be managed through the relevant Partnership Boards and partner organisations. The Partnership Boards will continue to hold individual organisations accountable for delivery of their action plans.

However, it is important that the whole Walsall Partnership is aware of progress against the Walsall Plan and any gaps or challenges with delivery. To support this approach it is proposed that:

- A six monthly report is presented to the Strategic Partnership Group by each of the Partnership Boards on progress against their priorities, including their obsession. This will identify any issues or challenges with delivery, and highlight key successes.
- A 'Partnership Summit' is held on an annual basis for partners to share their progress, challenges and priorities (first summit in September 2017 to review progress to date)



Outcome indicators can be used to assess progress over time but change is often slow and affected by many factors, resulting in little change in an outcome within a 12 month timescale. Intermediate indicators can be used to measure process or actions eg: smoking cessation rates rather than reduction of mortality from lung cancer and COPD. This will require a shared commitment by partners on what key indicators to measure, how to collect and report these.

Delivery at a locality level: Integrated locality working

The new Locality Delivery Model will provide an opportunity to shape the delivery of The Walsall Plan priorities at a local level. A four-locality footprint has been proposed that reflects the current and emerging service delivery models of a range

of partners. Locality Plans will be developed to reflect the elements of the overarching Walsall Plan as they relate to each area. These Locality Plans will be informed by 'top down' strategic intelligence, while also bringing in community-informed intelligence from 'bottom up' local engagement, to address inequalities and secure better outcomes for Walsall's vulnerable individuals, families and places.

The Locality Model will consist of two key elements, closely aligned and interdependent;

- Locality Panels: multi-agency operational groups, with professionals drawn from across relevant partners. Their focus will be on prevention and intervention, facilitating information sharing, identifying solutions, tasking activity, and reviewing outcomes and impact. This will extend and strengthen existing partnership arrangements that have already demonstrated successful outcomes, such as Early Help Locality Panels and Area Partnership Tasking.
- Locality Partnership Boards: strategically-focused groups, with membership drawn from elected members, other public and voluntary sector partners, community leaders and businesses in the Locality. Their focus will be on identifying how the strategic priorities for the Borough are nuanced with each Locality – and on developing and owning Locality Plans that provide a golden thread from these high level plans right down to the Locality level and below – as well as facilitating a range of community engagement processes, and identifying and supporting Active Citizens to build self-sustaining communities.

The broad elements of the model have been established through consultation with partners. However, the detail is still subject to final approval through Walsall Cabinet and Council.

Opportunities and Constraints

There are opportunities for innovation and delivering differently through the strong partnerships that are already in place in Walsall. Better alignment of our shared priorities will increase integration and reduce duplication. This will be both more efficient and more effective for our local population.

However, we also need to consider the dwindling resources which will require hard choices when looking at where we need to focus our efforts. We recognise that we have a number of vulnerable residents who require services now. Ideally we have enough resource to provide services to those who require them now but also do the preventive work to support our residents to improve their health and wellbeing sufficiently that they do not require those services in the future. In the absence of

sufficient resource, we need to be able to reduce the demand for services as quickly as possible to release resources, so that we can do the preventive work that is vital to the continued health and wellbeing of our population in Walsall.

Appendix 1: Delivering the Walsall Plan: Accountability of Walsall Partnership Boards

	Walsall Economic Board	Safer Walsall Partnership	Children's Safe-guarding Board	Adults' Safe-guarding Board	CYP Partnership	Health and Wellbeing Board	Walsall Housing Board
Increasing Economic Prosperity Through Increased Growth							
Improve school readiness							
Improve education outcomes							
Increase access to appropriate skills and training							
Ensure people possess the skills to enter and progress in work							
Increase opportunities for, and take-up of volunteering							
Build the business environment to create more local, added value, jobs							
Develop strong and sustainable infrastructure							
Maximising People's Health, Wellbeing and Safety							
Improve maternal and newborn health							
Improve emotional health and wellbeing of children and young people							
Enable children and young people to be better protected and safeguard themselves							
Enable and empower individuals to improve their physical and mental health							
Maximise emotional wellbeing and resilience of adults							
Support local people to secure and stay in employment							
Reduce loneliness and isolation and increase support through social networks							
Support independent living							

	Walsall Economic Board	Safer Walsall Partnership	Children's Safe-guarding Board	Adults' Safe-guarding Board	CYP Partnership	Health and Wellbeing Board	Walsall Housing Board
Remove unwarranted variation in healthcare and ensure access to services with consistent quality							
Enable those at risk of poor health to access appropriate health and care, with informed choice							
Keep vulnerable people safe through prevention and early intervention							
Ensure services recognise cultural barriers, and are inclusive and accessible for existing, new and emerging communities	The responsibility of all Boards and partners though their service delivery and commissioning						
Protect communities and individuals from the threat caused by extremist behaviour							
Tackle the harm to individuals and communities caused by substance misuse							
Improving community safety through reducing reoffending							
Reduce the harm to individuals and communities caused by all types of violent behaviour							
Creating Healthy and Sustainable Places and Communities							
Develop an environment to enable healthy lifestyles							
Actively support inward investment to make Walsall an attractive place to live and work							
Improve air quality							
Promote environmental sustainability							
Ensure access to appropriate and affordable housing							
Support a sustainable third sector through individual and collective engagement							
Empower connected, inclusive and resilient communities	Through Locality Delivery Model						

	Walsall Economic Board	Safer Walsall Partnership	Children's Safe-guarding Board	Adults' Safe-guarding Board	CYP Partnership	Health and Wellbeing Board	Walsall Housing Board
Deliver prevention and intervention through health and care locality delivery models							

Appendix 2: Walsall Partnership Relationships & Groups (not a hierarchical structure)

(As at 6.4.17, it is recognised that this will develop and change over time)



Overall aim: To support the capacity of VCSEs in Walsall, and greater connectivity between the VCS and partners, in order to improve health and wellbeing for all, by increasing the number of Walsall residents who volunteer, in particular around loneliness and isolation and physical activity

Specific Outcomes:

1. To increase the level of understanding between partners (as represented on the HWB) and the VCS.
2. To ensure consistency and best practice in relation to volunteering.
3. To support the sustainability and capacity of VCSEs in Walsall working to deliver health and wellbeing outcomes.
4. To increase the number of VCSEs and volunteers engaged in health and wellbeing activity.

Outcome(s)	Action	Who is leading	Year 1/2/3	How this will be measured
1	Develop a programme of skills exchange / shadowing between partners and VCSEs.	HWB task and finish group (including both HWB members and relevant others). Leads will be identified within task group	Year 1	<ul style="list-style-type: none"> • Programme in place • Number of exchanges • Survey of participants on knowledge of partner organisations (pre/post engagement)
2, 4	Develop a shared Volunteering Policy that can be used to replace or augment partner organisation volunteering policies (to include, for example, arrangements for workforce to engage in volunteering, quality, training, support, access to facilities, safeguarding)	One Walsall Volunteer Centre	Year 1	<ul style="list-style-type: none"> • Volunteering policy developed • Number of organisations that have adopted it
3, 4	Develop and implement a plan to support VCSEs to successfully bid for external funding (including sub-regional and regional opportunities)		Year 1	<ul style="list-style-type: none"> • Development of plan • Number of successful bids • Number of cross-sector/collaborative projects securing external funding

Outcome(s)	Action	Who is leading	Year 1/2/3	How this will be measured
	Carry out a needs assessment for volunteering and the voluntary sector to identify what we need in Walsall, what we already have and people’s preferences. Use this to inform a gap analysis and development plans which streamline and reduce duplication.	Work already being undertaken by One Walsall, the results of which will be shared with the HWB as well as the recommendation/actions that will follow		
4	Develop a framework for volunteering that includes models that are community-led as well as organisation-led (eg LETS / timeshare schemes). This could link with the corporate social responsibility of larger organisations as well as individuals in our communities.	The range of models should all be considered when accessing external funding. This may be covered within that work	Year 1	<ul style="list-style-type: none"> • Framework developed and implemented
3	Develop a programme of health and wellbeing training to support VCSEs to deliver impactful activities in this field.		Year 2	<ul style="list-style-type: none"> • Training programme developed • Number of courses offered • Number of attendees • Evaluation of training offered
1, 3, 4	To develop and adopt a framework for working with the VCS that includes how services are commissioned or grant funded, decommissioned, outcomes framework, how VCSEs are consulted, co-production of projects etc.		Year 2	<ul style="list-style-type: none"> • Number of partners that signed up to framework • No of projects developed in line with framework
3, 4	Develop and adopt a standard policy of social value to be used within organisations and in commissioning processes		Year 2	<ul style="list-style-type: none"> • Policy developed • Number of partners who have incorporated it • Support/resources provided to VCSE via policy

Outcome(s)	Action	Who is leading	Year 1/2/3	How this will be measured
4	Create and fill a minimum number of volunteering opportunities within partner organisations		Year 3	<ul style="list-style-type: none"> • Number of volunteering opportunities • Number of participating partner organisations • Number of volunteer recruited/retained
1, 3, 4	Develop a communication plan to promote VCS to partners and volunteering opportunities to individuals and communities		Year 3	<ul style="list-style-type: none"> • Communications plan developed and implemented
1, 2, 3, 4	Carry out a review of the impact of the voluntary sector to inform future plans		Year 3	<ul style="list-style-type: none"> • Review carried out and disseminated

DRAFT

Health and Wellbeing Board Priorities from the Walsall Plan	Lead group / organisation	Contact name and key group	How this will be delivered: Key strategies / action plans (Exception reporting to HWB)	Focus for HWB – key indicators to demonstrate progress (To be agreed)
Increasing Economic Prosperity Through Increased Growth				
Increase opportunities for, and take-up of volunteering	Partnership between PH and Paul Gordon. Commission with One Walsall as provider	Partnership between PH and Paul Gordon. Commission with One Walsall as provider	HWB 'Obsession' action plan	HWB 'Obsession' action plan
Maximising People's Health, Wellbeing and Safety				
Improve maternal and newborn health	Public Health and Children's Services	Uma Viswanathan: Infant Mortality Group (meets quarterly)	Infant Mortality Strategy (2016-19) and Action Plan	
Enable and empower individuals to improve their physical and mental health	PH Team	Barbara Watt Healthy Weight <ul style="list-style-type: none"> • Physical activity • Health and Work • Mental health and Wellbeing • Appropriate use of drugs and alcohol 	PH Performance Dashboard reported to PH Programme Board Green Spaces Strategy	

Health and Wellbeing Board Priorities from the Walsall Plan	Lead group / organisation	Contact name and key group	How this will be delivered: Key strategies / action plans (Exception reporting to HWB)	Focus for HWB – key indicators to demonstrate progress (To be agreed)
Maximise emotional wellbeing and resilience of adults	Public Health	Angela Aitken: Through Healthy Resilient communities Steering Group to Walsall Together	Healthy Resilient Communities Charter which has a number of priorities including Directory Mapping, Improving Health Literacy, Wellbeing Plans and Making Connections Walsall Programme. Action plan in development (Expected Project Launch: July)	<ul style="list-style-type: none"> No of stakeholders engaged in Health Chats training No of older people with a wellbeing plan
Reduce loneliness and isolation and increase support through social networks	Public Health	Angela Aitken: Through Healthy Resilient communities Steering Group to Walsall Together	Resilient Communities Charter which has a number of priorities including Directory Mapping, Improving Health Literacy, Wellbeing Plans and Making Connections Walsall (MCW) Programme. Action plan in development (Expected Project Launch: July)	<ul style="list-style-type: none"> Number of older people supported through MCW programme
Support independent living		Kerrie Allward: Better Care Fund (BCF)		

Health and Wellbeing Board Priorities from the Walsall Plan	Lead group / organisation	Contact name and key group	How this will be delivered: Key strategies / action plans (Exception reporting to HWB)	Focus for HWB – key indicators to demonstrate progress (To be agreed)
Remove unwarranted variation in healthcare and ensure access to services with consistent quality	CCG through Walsall Together	Paul Tulley: Walsall Together		
Enable those at risk of poor health to access appropriate health and care, with informed choice	CCG through Walsall Together	Paul Tulley: Walsall Together		
Creating Healthy and Sustainable Places and Communities				
Develop an environment to enable healthy lifestyles		PH Team: Paulette Myers, Joe Holding and Susie Gill Nicola Morris with Clean and green, Allotments etc	Green Spaces Strategy Tobacco Control Plan	

Health and Wellbeing Board Priorities from the Walsall Plan	Lead group / organisation	Contact name and key group	How this will be delivered: Key strategies / action plans (Exception reporting to HWB)	Focus for HWB – key indicators to demonstrate progress (To be agreed)
Improve air quality	PH, though PH Transformation Fund?	John Grant John Grant Team Leader - Pollution Control	<p>Walsall Air Quality Action Plan http://cms.walsall.gov.uk/air_quality_action_plan_2009.pdf</p> <p>Annual Status Report 2016 http://cms.walsall.gov.uk/air_quality_annual_status_report_2016_walsall_council.pdf</p> <p>Air Quality Page http://cms.walsall.gov.uk/index/environment/pollution/air_quality.htm</p>	
Build a sustainable third sector through individual and collective engagement	Commission through PH with One Walsall	Commissioner: Paul Gordon One Walsall	HWB 'Obsession' action plan	

Health and Wellbeing Board Priorities from the Walsall Plan	Lead group / organisation	Contact name and key group	How this will be delivered: Key strategies / action plans (Exception reporting to HWB)	Focus for HWB – key indicators to demonstrate progress (To be agreed)
Deliver prevention and intervention through health and care locality delivery models (link to STP)	CCG through Walsall Together	Paul Tulley: Walsall Together		

DRAFT