

# CABINET

21 FEBRUARY 2024

## REPORT OF THE PORTFOLIO HOLDER FOR PARTNERSHIPS

### A.7 HEALTH & WELLBEING DRAFT STRATEGY FOR TENDRING

#### PART 1 – KEY INFORMATION

##### **PURPOSE OF THE REPORT**

To present a draft Health and Wellbeing Strategy for Cabinet approval to then be consulted on through a stakeholder and public consultation process.

##### **EXECUTIVE SUMMARY**

Cabinet is presented with a new evidence-based Health and Wellbeing Draft Strategy, to support delivery of the Council's priorities as set out in the Corporate Plan. This draft Strategy will set the direction for the Council's focus on supporting residents to live a healthier, independent and fulfilling life.

Evidence from data shows that although there are some improving figures, when compared to other areas in Essex, Tendring still has higher than average levels of certain preventable long-term conditions, poorer mental health, overweight/obesity and lower physical activity levels.

Adoption of this Strategy and the action plan within it, will help support partnership working to deliver improvements around the wider determinants of health in our area which will have a direct impact on health and wellbeing outcomes.

Taking into account the data and partner feedback as detailed in the draft Strategy, the following strategic objectives are considered key to improving the health and wellbeing of residents:

1. *The Wider Determinants of Health*
2. *Improving Wellbeing & Resilience*
3. *Encouraging a healthier lifestyle*
4. *Improve Long Term Condition Prevention and Management*
5. *Suicide Prevention*

The draft Strategy is presented with an action plan, to impact on all of the objectives set out above. Although it will not be possible for the Council to fund all the actions listed, adopting an action plan will allow the Council to proactively look for external funding opportunities.

A key focus of this work is to ensure that all residents feel represented by the draft Strategy and are supported in living a healthier, independent and fulfilling life.

This can be achieved by working closely with health partners to deliver initiatives that help to tackle some of our district's health needs. Understanding how the wider determinants of health

can have a real impact on health outcomes is critical to improving the quality of life for many of our residents.

The draft Health and Wellbeing Strategy aligns with the Sport and Physical Activity Strategy. The feedback from the consultation showed that the majority of participants took part in 150+ minutes of exercise a week, using cycle paths, footpaths and recreation grounds. The main barriers to exercise were shown to be access to facilities close to where the participants lived. We will continue to work in partnership across the organisation to connect the health and physical activity agendas.

The draft strategy sets out a plan for considering funding some projects through the public health grant which is allocated by Essex County Council (ECC). Working within the agreed priorities within the grant, projects could be funded that deliver health improvements. We will share significant projects with our partners at the Community Safety Partnership and Health and Wellbeing Board to help facilitate success in delivery.

Subject to Cabinet agreement, it is important to seek comments on the draft Strategy from partners in the Health Alliance, the Community Safety Partnership and Health and Wellbeing Board, stakeholders and residents. This will ensure that partners can scrutinise, comment and make suggestions for the completed Strategy, prior to adoption.

Upon approval of the draft Strategy, an eight-week consultation process will begin. The findings of the consultation will be analysed and included when the final Strategy returns to Cabinet for adoption. This Strategy has been set without an end date but is due for review in three years' time.

Following an announcement by the Deputy Prime Minister in February 2025, six new areas have been confirmed to join the government's Devolution Priority Programme, which includes Greater Essex. As such, Mayoral elections will take place in 2026 and in addition, local government reorganisation is likely to be implemented in Greater Essex during the period of this Strategy. In terms of any reorganisation, the Strategy will allow for consistency whilst any new unitary authority considers its health and wellbeing priorities.

The Strategy aligns with partners such as ECC and the Alliance in terms of their emerging place plan approach and supports a wider determinants, prevention and early intervention model. This model recognises the Government's thinking around its 10 Year Health Plan which as one of the strands includes tackling the causes of ill health and therefore is well placed to ensure an ongoing consistent approach is maintained during any period of local government reorganisation.

## **RECOMMENDATION(S)**

**It is recommended that Cabinet:**

- (a) approves the Health and Wellbeing Draft Strategy for consultation;**
- (b) agrees that Officers initiate a minimum eight-week consultation process and seek stakeholder comment on the Health and Wellbeing Draft Strategy, in consultation with the Portfolio Holder for Partnerships; and**
- (c) agrees that following consultation the final Health and Wellbeing Strategy is presented to Cabinet for approval and adoption.**

## REASON(S) FOR THE RECOMMENDATION(S)

For the Council to adopt a strategic approach towards Health & Wellbeing, to support local people and local communities to live healthier, independent and fulfilled lives.

## ALTERNATIVE OPTIONS CONSIDERED

To work without an approved Health & Wellbeing Strategy. This would limit the ability to share our stated objectives with partners, and lead to a potential lack of direction for the Council's work on health & wellbeing. Without an adopted Strategy, and delivery plan, funding opportunities would be minimised.

## PART 2 – IMPLICATIONS OF THE DECISION

### DELIVERING PRIORITIES

Delivering the strategic objectives and accompanying targets set out in the delivery plan will impact on the following themes, from the Council's Corporate Plan:

- Pride in our area and services to residents.
- Championing our local environment
- Raising aspirations and creating opportunities.
- Working with partners to improve quality of life.

As a Community Leader the Council will support, influence and facilitate improved health and wellbeing across the district. Through the consultation process, it is imperative that the views of residents, organisations and local businesses are taken into consideration in the formation of the final Strategy.

In addition, the Health & Wellbeing Draft Strategy should be considered in conjunction with a range of approved and emerging Council strategies and a range of national and regional strategic documents.

**OUTCOME OF CONSULTATION AND ENGAGEMENT** (including with the relevant Overview and Scrutiny Committee and other stakeholders where the item concerns proposals relating to the Budget and Policy Framework)

The important link with the priorities within the Health and Wellbeing Alliance and the Essex Health and Wellbeing Strategy has been considered in the production of this draft Strategy.

The next stage will be to consult with a full range of partners and the wider community on the content. The outcome from that consultation process and respective changes made as a result, will be set out in the covering report when the final Strategy returns to Cabinet for adoption.

### LEGAL REQUIREMENTS (including legislation & constitutional powers)

<b>Is the recommendation a Key Decision (see the criteria stated here)</b>	<b>Yes</b>	<b>If Yes, indicate which by which criteria it is a Key Decision</b>	<b>X Significant effect on two or more wards</b> <input type="checkbox"/> <b>Involves £100,000 expenditure/income</b> <input type="checkbox"/> <b>Is otherwise significant for the service budget</b>
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		<p><b>And when was the proposed decision published in the Notice of forthcoming decisions for the Council (must be 28 days at the latest prior to the meeting date)</b></p>	
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Partnerships and Community Engagement is one of the strands expected for demonstrating the Council’s Best Value Duty under Local Government Act 2003. In the draft Statutory Guidance published in May 2024, government has described a number of expected standards for Councils to be meeting as a Best Value authority. Authorities should have a clear understanding of and focus on the benefits that can be gained by effective collaborative working with local partners and community engagement in order to achieve its strategic objectives and key outcomes for local people.

Key characteristics for Partnership and Community Engagement are:

- Early and meaningful engagement and effective collaboration with communities to identify and understand local needs, and in decisions that affect the planning and delivery of services; and
- Evidence of joint, planning, funding, investment and use of resources to demonstrate effective service delivery, but transparent and subject to rigorous oversight. The Council needs to be clear.

Through the consultation and engagement process on the draft Strategy, the Council needs to be clear what it is intending to be responsible for in delivery and areas it will work together with others to take forward.

The approval of a draft Strategy for consultation does not commit the Council to its aspirations and further decisions will be required within the Council’s Constitution and governance framework to take the projects forward once adopted.

<b>YES</b>	<b>The Monitoring Officer confirms they have been made aware of the above and any additional comments from them are below:</b>
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The Local Government Association produced a Guide in September 2024 **“Empowering healthy places: Unveiling the powers and practices of local councils in fostering healthy neighbourhoods”**. Extracts have been included to show the input local government can and should have in consideration to Health and Well-being practices.

*The importance of health and wellbeing of the population has been recognised within Council duties and powers since the 19th century when reforms brought about by town planners and public health practitioners resulted in improved health and life expectancy. In 1848, a new Public Health Act was introduced which established local health boards to oversee a coordinated water, sewerage and drainage scheme to overcome the persistence of cholera outbreaks and prevent ill health. This was followed by the 1858 Local Government Act which extended the powers of these boards.*

*The later emergence and expansion of the NHS has meant that councils have a less direct role in tackling ill health. Healthcare is considered as a tool to treat illness, rather than a system that*

*can create the conditions for people to be healthy and prevent illness in the first place.*

*The 2010 Marmot Review and [2020 update](#), drew attention to the flaws of this approach, which has contributed to declining life expectancy in some communities and specific groups and [widening health inequalities](#) across England. The Marmot Review significantly raised the profile of the ‘wider determinants of health’. These are the social and economic conditions that influence people’s health and wellbeing and are shaped by where and how we live. These wider determinants include factors such as having access to safe and secure housing, quality employment, access to green and open spaces and a sense of community.*

*The NHS was not set up to influence these wider determinants of health, however many can be influenced to some degree by councils. In recognition of this, all stakeholders who can influence the wider determinants of health must work together, expanding the definition of “healthcare” to capture activities and opportunities that can positively “create health”. Creating health, as defined by Lord Nigel Crisp, former CEO of the NHS, “means providing the conditions in which people can be healthy and helping them to be so”.*

*Councils are well placed to lead on health creation given their historic scope, current practices and potential. Councils have, for example, significant influence over our health through their planning functions. An objective of England’s planning system, as defined by the [National Planning Policy Framework](#) (NPPF), is to ‘support strong, vibrant and healthy communities’. Furthermore, public health powers were transferred to councils (\*) from the NHS through the 2012 Health and Social Care Act. As a result, councils have a duty to take appropriate steps to improve the health of people in their area, through various powers and practices.*

*Notwithstanding the extreme funding pressures being faced, and the need for this to be resolved to allow councils to realise their potential, reconsidering existing powers and practices available to local government through the lens of health creation, facilitated by strong leadership and partnership working that puts health and wellbeing first, has the power to create significant and positive change.*

Health and Wellbeing can be wide reaching, and it is recognised as good practice to have a strategy showing how the Council wishes to contribute to this agenda and support decision making.

## **FINANCE AND OTHER RESOURCE IMPLICATIONS**

With Local Authorities under increasing financial pressures and competing priorities for expenditure, it will not be possible for the Council to fund all the proposed actions in this draft Strategy. Adopting a final action plan however, will ensure the Council and other partners are able to maximise opportunities from emerging external funding bodies, as and when they become available.

The adoption of an action plan will ensure the Council and partners, can move quickly in making cases to funders, that there is a considered, evidence-based plan to improving health inequalities, wellbeing and quality of life.

<b>YES</b>	<b>The Section 151 Officer confirms they have been made aware of the above and any additional comments from them are below:</b>
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There are no further comments over and above those already set out elsewhere within the report.

### **USE OF RESOURCES AND VALUE FOR MONEY**

The following are submitted in respect of the indicated use of resources and value for money indicators:

A) Financial sustainability: how the body plans and manages its resources to ensure it can continue to deliver its services;	Although a delivery plan is identified in the draft Strategy, implementation will only proceed should funding be available.
B) Governance: how the body ensures that it makes informed decisions and properly manages its risks, including; and	Once adopted by Cabinet, each individual project will be subject to stand alone governance arrangements and in some cases, business plans. This will highlight any risks and financial resources, including sustainability.
C) Improving economy, efficiency and effectiveness: how the body uses information about its costs and performance to improve the way it manages and delivers its services.	This draft Strategy will ensure good value for money, by focussing attention on objectives approved by the Council.

### **MILESTONES AND DELIVERY**

Following agreement by Cabinet to seek stakeholder comments on the Health & Wellbeing Draft Strategy through consultation process, the milestones will be as follows:

March 2025 Consultation Commences

May 2025 Consultation Closes

June 2025 Consideration of consultation responses

July 2025 Health & Wellbeing Strategy presented back to Cabinet with consultation responses and any changes made as a result.

### **ASSOCIATED RISKS AND MITIGATION**

Risk: The delivery plan is unable to be implemented due to lack of funding.

Mitigation: It is clear in the draft Strategy that the implementation of the delivery plan is subject to funding, therefore the Council is not committed to delivery where there are no funds. Being part of the Health Alliance, and working closely with ECC Public Health team, means that opportunities for future funding are shared.

Risk: Health & wellbeing needs change at short notice.

Mitigation: The Covid 19 Pandemic highlighted how quickly priorities can change in health. However, the vision to ensure residents live a healthier, independent and fulfilled life will remain the same, and the delivery plan can be updated to reflect changing needs.

In addition, the Strategy focusses on a partnership approach which allows for a combined response to changing demands.

### **EQUALITY IMPLICATIONS**

Reducing health inequalities is an integral part of this draft Strategy as improving health in the most deprived communities and working in a partnership approach will help address inequality.

Any significant changes to service provision can be considered through an equality impact assessment prior to implementation.

**SOCIAL VALUE CONSIDERATIONS**

The draft Strategy sets out the need to work closely with partners and the community through the adoption of a place-based approach. This will ensure that services and opportunities are delivered where they are most needed.

The Strategy highlights the importance of the wider determinants of health such as housing and skills and employment which will help deliver improved social value and opportunity.

**IMPLICATIONS FOR THE COUNCIL'S AIM TO BE NET ZERO BY 2030**

There are no risks associated with this Strategy

**OTHER RELEVANT CONSIDERATIONS OR IMPLICATIONS**

**Consideration has been given to the implications of the proposed decision in respect of the following and any significant issues are set out below.**

<b>Crime and Disorder</b>	Close working links with Police through the Community Safety Partnership and Health & Wellbeing Board facilitates an understanding of the impact that Crime and Disorder has on Health and Wellbeing and the close links in respect of areas such as mental health. Work highlighted in the delivery plan can help seek to address some of these issues.
<b>Health Inequalities</b>	The draft Strategy recognises that whilst there are some areas of improvement in health data, health inequalities are still an issue in Tendring. The draft Strategy uses data in order to set objectives that will help to reduce the inequalities over time.
<b>Subsidy Control (the requirements of the Subsidy Control Act 2022 and the related Statutory Guidance)</b>	There are no subsidy control issues anticipated through this draft Strategy and any funding issued as a result, will be subject to competition and the Council's procurement rules and with reference to the Subsidy Control Act 2022 to ensure the Council is compliant. Allocation of any funding will also follow the external funding review approved by Cabinet in September 2024
<b>Area or Ward affected</b>	This draft Health & Wellbeing Strategy will impact on all wards in the district.

**PART 3 – SUPPORTING INFORMATION****BACKGROUND**Draft Health & Wellbeing Strategy

Since the last Strategy, Tendring has faced many challenges, such as the Cost of Living crisis and the Covid 19 Pandemic. Evidence shows that those living in the most deprived areas of England face the worst health inequalities, for example in relation to healthcare access,

experience and outcomes.

There are some areas in Tendring with significant deprivation and 28% of Tendring's neighbourhoods (Lower Super Output Areas, or LSOAs) are in the most deprived 20% nationally.

Tendring District has the largest Old Age Dependency Ratio (OADR) compared to other areas in Essex with an estimated rate of 544 in 2019. Estimated figures up to 2034 indicate that this trend is forecast to continue. If a healthier lifestyle is not adopted, there is a risk that there will be more people living with long term conditions, and fewer people able to live healthy independent lives.

Data has identified that there are some areas of improvement in the health and wellbeing of residents. Most notably, the Health Index Score has improved from a score of 85 in 2015 to 93 in 2023.

Physical Activity levels in young children and adults has increased, and rates of overweight/obesity in reception age children and adults has fallen. However, the data also shows rates of overweight/obesity in year six age children continues to increase, and the number of residents living with certain preventable long term medical conditions is still high, when compared to other areas in Essex.

Looking across the system, it can be noted that the priorities set in partner strategies, there is a cross over with those identified as priorities for Tendring.

During the lifespan of the last Health and Wellbeing Strategy, the Partnership team have implemented a range of projects to help address health inequalities including:

- Seed funding the highly successful Park Run.
- Worked with the Sport England Local Delivery Pilot Scheme to deliver projects that encourage physical activity such as Pedal Power and Beat the Street. Other projects sought to tackle isolation and poor mental health such as Walton's Feel Good Choir.
- Set up Wellbeing Hubs in primary schools, improving resilience in young people.

These projects are ongoing and making real improvements to resident's health & wellbeing.

The Health and Housing Initiative funded jointly funded with the Health Alliance supported the provision of mental health nurses who can work alongside our housing team to address mental health issues identified as part of wider work.

The Council is committed to promoting health and wellbeing, and recognises that the wider determinants of health, such as socio-economic factors and the built environment, are likely to impact an individual behaviour. In turn this leads to poor lifestyle choices, resulting in poorer health.

Addressing the wider determinants of health and utilising this approach is likely to have the biggest impact on the health and wellbeing of our residents.

Many of the Council's services have a direct impact on improving health and wellbeing for example through delivery of good housing provision, physical activity opportunities or the provision of green space.



The Council has long-standing relationships with our partners through our local Alliance, Public Health and Active Essex. As a joint place-based approach develops around the wider determinants of health, building resilience in communities and supporting opportunities for a healthier lifestyle including those with long term conditions, there is huge potential for improving health and wellbeing.

The delivery plan within the Strategy highlights the potential activities that the Council can take including with partners to deliver improvements.

### Devolution and Local Government Reform Implications

The Strategy is set to be reviewed within three years. Following the response from Government, Essex is now on the priority programme and devolution will occur during the period of this Strategy and local government reform (LGR) may occur which may impact on the Strategy.

In particular, devolution would see an elected mayor for Essex who would be the vice chair of the Integrated Care Board which oversees health and so may have a particular way in which they would seek to address health issues.

The Strategy has specifically not been provided with an end date which would have coincided with devolution and potentially LGR. This will allow some consistency to occur over and beyond the timescale of any potential local government changes. This will ensure that any new administration has time to consider if and how it wishes to amend any health and wellbeing approach.

Although it is not possible to determine what health and wellbeing priorities will be important following any possible local government changes, the Strategy takes a wider determinants approach which will support early intervention and prevention and is strongly aligned with our partners particularly in relation to the Alliance and Essex County Council's approach in terms of public health.

In addition, the Integrated Care Board for Suffolk and North East Essex under which the Alliance sits, is regarded as one of the country's leading ICB's developing innovative approaches which are followed elsewhere.

As part of the Government's 10 Year Health Plan, it is currently undertaking a public conversation to deliver a health service fit for the future. Within this the Government is considering three big shifts about how health is delivered and one of these is about a preventative approach to help people stay independent for longer.

The Strategy aligns to the approach by partners and is in line with current government thinking and therefore is likely to form the basis of any actions during and after any potential local government reform.

Colchester City Council as part of the Alliance are also aligned and committed to the developing place plan approach from the Alliance referred to within the Strategy which should help a consistent approach moving forward.

As part of the consultation with stakeholders and partners the approach within the Strategy

can be verified or amended to ensure that it aligns with current partners thinking.

#### PREVIOUS RELEVANT DECISIONS

None

#### BACKGROUND PAPERS AND PUBLISHED REFERENCE MATERIAL

Essex Joint Health & Wellbeing Strategy [Essex Joint Health and Wellbeing strategy | Essex County Council](#)

#### APPENDICES

Appendix A: Health & Wellbeing Draft Strategy for Tendring

#### REPORT CONTACT OFFICER(S)

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