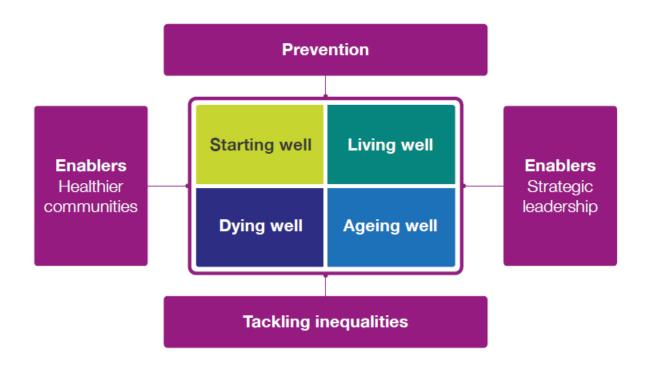
### Hampshire Health and Wellbeing Board Business Plan - DECEMBER 2019

This business plan responds to the key priorities set out in <u>A Strategy for the Health and Wellbeing of Hampshire 2019–2024</u>. It outlines the key areas for the Board's focus and attention to support the delivery of the first year of the Strategy.

The Strategy has four key priority areas, in addition to two 'enabling' priority areas which span the whole Strategy. Prioritising prevention, tackling inequalities and taking a place-based approach are also golden threads running through all areas of the Strategy and this Plan.



## **STARTING WELL**

SPONSOR: STEVE CROCKER, DIRECTOR OF CHILDREN'S SERVICES, HAMPSHIRE COUNTY COUNCIL

No.	Priority	Key actions for 2019/2020	Lead + other key partners	Success measures	Key timescales
1.	Improve mental health and emoti	onal resilience for child	Iren and young people	and their families	
	Build capacity across the system to for access in the first place	ensure children and you	ng people can access se	ervices as early as possib	e and reduce the need
1a	Implement the Emotional Wellbeing & Mental Health Strategy recommendations	In year 1 of the Strategy implementation, the HWB Board will focus on the following:  Develop a strategy to reduce hospital admissions for self-harm over the next 3-5 years  Health in educational settings	Public Health, Children's Services, Schools, CCGs, Starting Well for Emotional Wellbeing & MH Partnership	Children with increased resilience through improved access to services  Approval of the strategy, with outputs to start being delivered in 2020/21  Online training for early years settings	Strategy launch by end 2019  Survey to go to all schools (years 5,7 and 10) by end November, with results early 2020
41			0.44410		
1b	Increase mental health support in schools	Implement Mental Health Support	CAMHS and schools	Teams are established and training is	

		Teams within two areas where funding has been secured (Gosport and Havant)		underway for mental health workers	
1c	Use technology to support better mental health	Make better use of technology and connectivity to support children and young people's (CYP) mental health and wellbeing	CCGs	Testing and roll out of Think Ninja app Increased access to DadPad (an app to support new fathers) Reduced referrals to counselling or Child and Adolescent Mental Health Services (CAMHS)	
2.	Improve physical health through	prevention and early in	ntervention		
2a	Promote physical activity	Promote physical activity both in and outside schools through increased partnership working and exploiting our resources to best effect	Public Health, Energise Me, Active Travel team, Children's Services (Outdoor Ed), Schools, Outdoor Centres	Sport and Physical Activity Levels (CYP in school years 1-11) Hampshire (2019 data release) Increase in the number of CYP active every day (18.5% baseline) Increase in the number of CYP active across the week (26.2% baseline)	Lifetime of the strategy (progress can be monitored every 6/12 months)

2b	Reduce the proportion of women	Embed brief advice and referral into	HCC Public Health + all acute trusts + NHS	Number of schools selected to be part of the Active Lives (CYP) Survey completing the survey  Number of schools that meet the requirement of the Department for Education to publish their PE and school sport and swimming plans (Energise Me audit)  17/18 8.7% - Reduction	
	smoking at the time of delivery	maternity services	commissioners		
2c	Support breast feeding	Improve breastfeeding sustainability at 6-8 weeks	HCC Public Health and NHS maternity providers	Increase in mothers continuing to breastfeed at 6-8 weeks	
3.	Maximise effectiveness and effic	iency of partnership wo	orking		
3a	Co-design, collaboration and procurement to enable system integration	Redesign partnership governance arrangements across the system for children and young people's services	Suzanne Smith, HCC Children's Services and Angela Murphy, HIOW CCG Partnership	System agreement of new streamlined structure of governance and meetings Rationalisation of meetings New CYP commissioning/	

				partnership board to be set up and KPIs to be agreed to evaluate benefits and impact of improved integrated working	
3b	Partnership working on continuing health care	Deliver improvements to the way in which Children's Services and CCGs work together for children with continuing health care and complex health needs	CCGs and Children's Services	Increase in jointly commissioned packages of care  Mapping of business processes and improved understanding of Care, Education and Treatment Review (CETR) and Section 117 pathways within Children's Services	

4.	Resilience in families: maximise op	portunities for early interv	ention and prevention of	f need	
4a	Work with partners to build resilience in children and their families	Increase participation of families in parenting programmes or other support to improve skills of parents	Children's Services and Public Health	Number of parents who have completed parenting programmes run by Family Support Service (FSS) or other support services  Number who evidence progress made from their starting point	
4b	Improve support to families and young people with problematic	Enable more young people with	Children's Services and Public Health	Number of young people accessing the	

	drug and alcohol use to mitigate the impact of substance misuse and domestic violence	problematic drug/alcohol use to access specialist substance misuse treatment  Increase the number of young people whose parents are accessing substance misuse services who are offered support		specialist young people's substance misuse service (Baseline 317; target 315)  No Baseline - new measure. Target 30  Percentage of service users with a reduced Domestic Abuse, Stalking and Honour Based Violence (DASH) Risk Identification Checklist (RIC)  Successful completions of those who are parents and living with children:  Opiates Non-opiates Alcohol Alcohol and non-opiates	
4c	Improve outcomes for children in receipt of children's social care through technology-enabled care (TEC) and collaborative working	Accelerate joint working on TEC to increase uptake and trial new ways of working	Children's Services and HCC TEC Partner	Increase in number of TEC packages in homes  Pilot of TEC in residential care homes	

		Complete business case for use of TEC in	
		supported accommodation for	
		young people aged 16+	

# **LIVING WELL**

SPONSOR: DR BARBARA RUSHTON, CLINICAL CHAIR, SOUTH EASTERN HAMPSHIRE CCG

No.	Priority	Key actions for 2019/2020	Lead + other key partners	Success measures	Key timescales		
1.	Work together to enable people	to live healthier lives					
	Systemwide action with targeted interventions to stop people starting to smoke and to help smokers to quit						
1a	Reduce the proportion of women smoking at the time of delivery	Embed brief advice and referral into maternity services	HCC Public Health + all acute trusts + NHS commissioners/maternity providers	17/18 8.7% - Reduction			
1b	Reduce the gap in smoking between people in routine and manual occupations & the general population	Marketing and engagement Targeted work with primary care in deprived areas Full implementation of Commissioning for Quality and	HCC Public Health + all acute trusts + Primary Care Networks	Percentage of people from routine and manual backgrounds successfully quitting at 4 weeks (target to achieve and maintain at least 60%			

1c	Align with community enablers to to the Implement whole systems approach to childhood obesity in one area of Hampshire	Innovation (CQUIN) in acute trusts  ackle the wider causes of Develop action plan on food environment in one area of Hampshire	f obesity and physical inact  HCC Public Health +  District/Borough Council	successful quit rate by Q4 2019/20)  ivity  Work to halt the rise in prevalence of excess weight in Reception Year and Year 6 (Baseline Public Health Outcomes Framework 2017/18)	
1d	Work with the wider health and social Implement the Hampshire Physical Activity Strategy with a specific focus on enabling the workforce to be competent to promote physical activity for life	Develop training and signposting from NHS providers to community physical activity offers  Encourage uptake of the 'Moving Health Professionals' programme and further work on incorporating physical activity guidance into the work of clinicians and other professionals, eg in social care	Energise Me + HCC + Clinical Commissioning Groups	vity amongst adults  Decrease in % people physically inactive  Number of health and care professionals trained  Participation in key interventions	

2.	Improve population level mental wellbeing					
2a	Take a community approach to resilience, supporting the 5 ways to wellbeing initiative	Promote 5 ways to wellbeing  Implement Connect 5 training across organisations	Communication leads in HWB organisations; HCC Public Health Frontline staff in all organisations	Number of views / click throughs  Number of people trained		
2b	Work in partnership with local stakeholders to understand and take action on the wider determinants of health as a major influence on mental wellbeing	Collaborative working with partners, with specific reference to the Communities	CCGs, HCC, District Councils, CVS	Number of shared action plans		
3.	Enable people with long-term co	nditions to live healthic	er lives for longer			
3a	Signpost to and encourage the systematic use of effective tools/initiatives (including digital) that will enable people to improve their self-management and provide peer support for long-term conditions	Year 1: research effectiveness of available resources and tools that could be used	CCGs/Public Health/Adults' Health and Care			

**AGEING WELL** 

SPONSOR: GRAHAM ALLEN, DIRECTOR OF ADULTS' HEALTH AND CARE, HAMPSHIRE COUNTY COUNCIL

No.	Priority	Key actions for 2019/2020	Lead + other key partners	Success measures	Key timescales
1.	Continue to develop connected con	nmunities which can supp	oort people to live happy,	healthy lives in the place	of their choosing
1a	Promote strength-based community approaches to support health and wellbeing	Develop joined up social prescribing and connector models across health and social care to provide support for people who need help outside formal services	HCC and CCGs – joint leads District/borough councils and VCS additional partners	A joint model tested in each CCG area during 2019/20 Evaluation framework developed and data analysed	Review progress in Spring 2020
1b	Improve accessibility of communities and services	Improve community access and reduce barriers for older people, eg accessible transport, better facilities for people with impairments, dementia friendly communities and digital inclusion  Encourage businesses to sign up to their local Dementia	All HWB partners  Public Health and dementia partners	Increase in number of businesses signed up	

		Action Alliance to commit to making their services easier to use for people affected by dementia			
1c	Improve workforce skills	Upskill the workforce to better support the needs of older people, building on existing good practice.	Public Health, other HWB Board partners	Number of dementia friends trained Number of falls friends/champions trained	March 2020
2.	Enable people to plan for a fulfilling	, purposeful older age			
2a	Maintain positive mental health and reduce social isolation	Seek to reduce social isolation for groups who are at risk, including people about to retire, who live alone, have been bereaved or have a long-term condition or disability	Voluntary and community sector	Evidence of volunteer recruitment  Number of volunteers recruited from different groups  Percentage of adult social care service users who have as much social contact as they would like  Percentage of adult carers who have as much social contact as they would like	Ongoing

			Success measures could include monitoring the number and role of individuals trained by October 2020, whether there is adequate coverage countywide of Approved Mental Capacity Professionals	
Monitor pensioner poverty levels in Hampshire	Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up	HWB organisations working with voluntary and community sector	No. of Lower Super Output Areas in the 10% Most Deprived areas in each Hampshire district  No. of Lower Super Output Areas in the 11-20% Most Deprived areas in each Hampshire district	
Create healthy home environments	which allow people to sta	ay well and independent		
Better understand the factors that enable people to be independent at home for longer	Conduct a healthy homes needs assessment to understand what more we can do to help	Public Health + districts/boroughs	Needs assessment complete  Workshop to share findings with HWB	Autumn 2019  December 2019
	Create healthy home environments Better understand the factors that enable people to be independent	in Hampshire  Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up  Create healthy home environments which allow people to state the people to be independent at home for longer  Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up  Create healthy home environments which allow people to state the people to be independent at home for longer	Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up  Create healthy home environments which allow people to stay well and independent People to be independent at home for longer  Deprivation Affecting Older People (IDAOPI) and community sector alleviate poverty/encourage benefit take-up  Working with voluntary and community sector alleviate poverty/encourage benefit take-up  Create healthy home environments which allow people to stay well and independent Public Health + districts/boroughs assessment to understand what more we can do to help	Monitor pensioner poverty levels in Hampshire   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older Steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and consider steps to alleviate poverty/encourage benefit take-up   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and community sector   Monitor Income Deprivation Affecting Older People (IDAOPI) and communi

		independent at home for longer (looking at data on falls risks, fuel poverty, damp housing, overcrowding, repairs etc).		Action plan based on recommendations in place	By March 2020
3b	Work together to support an effective adaptations process	Work together to support effective disabled facilities grant process across the county to enable older people to remain at home for longer with disabilities	Districts/boroughs and HCC leading	TBC but could look at: improved timeframes for: days from initial request to works agreed; days from application for grant to decision; days from works agreed to works being completed; total length of process	
3c	Collaborate with Hampshire Fire and Rescue Service	Increase referrals from partners for HFRS Safe and Well visits	HFRS + other partners	Increase in number of Safe and Well visits	March 2020
3d	Support wider use of technology	Raise awareness of the use of technology to enable people with dementia to remain as independent as possible	HCC/Argenti partnership, working with HWB partners and voluntary/ community sector	Some examples of data that could be reported:  Number of referrals made as percentage of Older People's assessments undertaken  Percentage of teams receiving training	

				Number of referrals converted into installations
4.	Enable older people to lead heal	thy, active lives		
4a	Support falls prevention initiatives	Upscale opportunities for strength and balance exercise for people over 50  HWB members to promote communication campaigns (especially digital) around strength and balance for 50+ group who are too young for most Older People's activities (yoga/pilates etc)	HCC Public Health + NHS (CCGs and providers) + districts and boroughs + voluntary and private sector	Hip fractures in people aged 65 and over  Emergency admissions due to falls in people aged 65 and over
4b	Support delivery of the Physical Activity Strategy	Implement the Physical Activity Strategy, targeting specific cohorts, eg those with long-term conditions/disabilities; older adults (especially women)	HCC Public Health + NHS (CCGs and providers) + districts and boroughs + voluntary and private sector	Healthy life expectancy at age 65 years  Gap in life expectancy between people living in the most and least deprived areas

		Embed physical activity into long-term condition management and pathways      Collaborate with community, sport and leisure providers to adapt the physical activity offer to meet the needs of people with long-term conditions		Reduction in inactivity rates within two key groups: those with long-term conditions/disabilities and women including older adults (Active Lives Survey)	
4c	Ensure the workforce is better protected to reduce flu incidence amongst vulnerable groups, particularly older people	Increase uptake of flu vaccination in health and care frontline staff groups	HCC, NHS Trusts, CCGs and other health/care providers	Organisations to monitor and report uptake against their target	Ongoing monitoring through winter period

### **DYING WELL**

SPONSOR: DR PETER BIBAWY, CLINICAL CHAIR, NORTH EAST HAMPSHIRE AND FARNHAM CCG

#### Introduction

Dying Well is a new priority area for the Health and Wellbeing Board, with the aim of improving the experiences of people in Hampshire at the end of their life, whatever their age. The aspiration is that more people will die at home or in the place that they choose. Support for families, carers and the bereaved will be enhanced.

The first year of the Business Plan will be developmental, to agree an approach and understanding of the issues and data at a Hampshire level. This will review and build on the needs assessment undertaken by Public Health in 2015, and look to review policies, workforce skills and implementation of palliative care services at all levels throughout Hampshire.

It is proposed to bring together a steering/subgroup of the HWB Board, to undertake this work, including NHS, HCC, districts and boroughs, hospices, voluntary and community sector and other HWB partners.

The group will consider a Hampshire approach to the priorities identified in the HWB Strategy:

- 1. Ensure person-centred care, choice and control is consistently in place to help people live well with life-limiting conditions
- 2. Support people at end of life to return to or remain in their preferred setting in the last days and hours of life
- 3. Improve skills and capacity to ensure people are encouraged and supported to have early and timely conversations about end of life wishes and choices
- 4. Work together effectively across organisations to provide well integrated care and consistent palliative care
- 5. Improve access to bereavement support and services locally, for all age groups

Short-term priorities for the first year will focus on setting up the steering group, producing a year 2 Dying Well action plan and monitoring the progress of existing work:

Identify lead to coordinate a Dying Well Steering Group to shape the approach. Group to be chaired by the Board sponsor, Dr Peter Bibawy	Initial scoping workshop to take place in January 2020
Steering Group to develop an action plan for year 2	Start Jan 2020
This will include some engagement and coproduction with frontline staff and communities in order to better understand different perspective on death, loss, and grief, involving carers, those who are bereaved, and those with life limiting conditions	
HWB organisations to seek continued improvements in key relevant performance targets, such as:	Regular performance reporting to the HWB Board as part of dashboard
<ul> <li>Proportion of people dying in the place of their choosing</li> <li>Improved timeliness of CHC fast track assessments and increase in number completed outside an acute hospital setting</li> <li>Reduction in emergency admissions</li> </ul>	
Steering Group to facilitate learning and sharing of developments and good practice already happening across different parts of Hampshire, eg around workforce, training, use of EOL Care tools and pathways (eg Gold Standards Framework, Six Steps Programme and the ReSPECT tool)	Jan-June 2020
Develop an approach to supporting bereaved families, as part of the suicide prevention programme across the STP	by April 2020
Take learning from child deaths and embed the new Child Death Overview Review process throughout Hampshire (+IOW, Portsmouth and Southampton).  Bereavement support is a key part of this work, led by Child Death Overview Panel (CDOP)	Review April 2020

# **HEALTHIER COMMUNITIES**

SPONSOR: CLLR ANNE CRAMPTON, CHAIR OF THE DISTRICTS HEALTH AND WELLBEING FORUM

No.	Priority	Key actions for 2019/2020	Lead + other key partners	Success measures	Key timescales
1.	Health and wellbeing priorities in all	local policies			
1a	Ensure health and wellbeing is 'everyone's business'	Scope and develop proposals for how a 'health and wellbeing' in all policies approach could be implemented across HWB Board organisations. Share good practice on what is already working well.	HCC and districts HWB Forum joint lead		
2.	Family, friends and community				
2a	Promote strength-based community approaches to support health and wellbeing	Develop joined up social prescribing and connector models across health and social care to provide support for people who need help outside formal services:	HCC AHC and CCGs  – joint leads District/borough councils and VCS additional partners	A joint model tested in each CCG area during 2019/20	District HWB Forum workshop on 'Friends, family and community' to be arranged in Spring/Summer 2020
		Year 1 focus will be development of an evaluation framework		Evaluation framework developed and data analysed	Review progress Spring 2020

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2b	Improve accessibility of communities and services	Improve community access and reduce barriers for older people, eg accessible transport, better facilities for people with impairments and dementia friendly communities  Use insight to develop a community-based approach to increasing physical activity in one district area in Hampshire that has high levels of inactivity	HCC, Energise Me, TVBC and primary care		Insight report by end 2019/20, with measures and work programme to be developed in year 2
3.	Housing				
3a	Homelessness reduction: Improve partnership working so that Local Authority Housing services assistance is sought as early as possible when someone is at risk of homelessness	Embed the Homelessness Reduction Act Duty to Refer consistently in all relevant public bodies  Work to secure buy-in to the Commitment to Refer from health.	District/borough housing exec leads, working with HWB partners	Outcome is increased tenancy sustainment Increase in the number of referrals to housing authorities from other statutory referees  Number of organisations signing up to the Commitment	

		care and voluntary sector partners that are not bound by the Duty to Refer, and support organisations to implement this at an operational level		to Refer– if not already bound by Duty to Refer	
3b		Develop stronger mechanisms between districts and county and national park authorities to cooperate on the development of specialist housing programmes, eg supported or extra care housing schemes across all client groups.	HCC AHC, districts and boroughs, National Park Authorities	Possible housing metrics:  No of supported accommodation units completed by end 2019/20  No of people who move into new builds out of residential care 2019/20  No of people coming through transition moved into new build accommodation in 2019/20	
3c	Better understand the factors that enable people to be independent at home for longer	Begin the implementation of recommendations from Public Health's healthy homes needs assessment	Public health, district housing/planning teams	District HWB Forum workshop planned to discuss findings and action plan	District HWB Forum workshop planned for January 2020 March 2020

				Action plan based on recommendations in place	
4.	Built and natural environment				
4a	Recognise health and wellbeing as priorities in local planning	Encourage SPD development collaboration (and Local Plan, when due) between Districts and Public Health.	Public Health and planning authorities		District HWB Forum Planning workshop planned for 2020
4b	Work together to make Hampshire a more sustainable place through:  • Active travel	Facilitate active travel ('making active travel easier') in HWB member organisations, commissioned providers and to service users.  HWB Board members to actively engage in	HWB organisations, leads tbc		
		the development of Hampshire's new Local Transport Plan – eg via a workshop session with HCC Transport lead			

a zero carbon economy in line with Government legislation	Promote energy efficiency/hybrid technology in Facilities Management, vehicle fleet, and supply chain within HWB member organisations		
quality mitigation work	Demonstrate the positive impact of transport policy/programmes on delivering active travel opportunities or air quality mitigations (Air Quality Supplementary Planning Document, Clean Air Zones, HCC active travel team etc).		
health and wellbeing, promote community cohesion and maximise use of natural resources	Engage residents in actions to reduce consumption and reuse items which deliver carbon reduction as well as health and wellbeing outcomes (eg portion control, household		

	budgeting, volunteering and upskilling, reducing		
	hoarding etc)		

## STRATEGIC LEADERSHIP

SPONSOR: DR NICK BROUGHTON, CHIEF EXECUTIVE, SOUTHERN HEALTH NHS FOUNDATION TRUST

No.	Priority	Key actions for 2019/2020	Lead + other key partners	Success measures	Key timescales
1.	Deliver care closer to home		1		
1a	Deliver the Patient Flow and Onward Care programme (Hampshire Together)  Universal adoption of the 'New Care Models'	Primary care networks in place Integrated care teams in place Demand management and prevention programme underway Self care	HCC, Hampshire CCGs, NHS trusts (acute and community)	Metrics:  Reduction in emergency admissions  Reduction in Delayed Transfers of Care (DToC) to agreed local system targets  Reduction in proportion of patients where length of stay is > 7 days	

1b	Implement a countywide Integrated Intermediate Care (IIC) Service	Hampshire County Council and Southern Health NHS Foundation Trust to develop a jointly led and integrated health and care urgent response, rehabilitation and reablement service	HCC and Southern Health	Increase in the number of individuals starting HCC reablement  Reduction in number of patients placed by AHC in permanent res/nursing care  Increase in percentage of CHC decision support tools completed in the community  Executive approval of the new service (HCC and SHFT)  Proposed launch of new IIC service	March 2020 April 2020	
2.	Harness the potential of digital solutions					
2a	Use data to better understand needs and target interventions more effectively	Deliver a Population Health Management (PHM) Strategy and action plan to provide analytical capability to clinicians, building on CHIE (Care and Health Information Exchange)	Public Health and NHS	Successful delivery against the PHM action plan		

		and CHIA (Care and Health Information Analytics)				
2b	Upscale the use of technology	Make TEC a central plank in the delivery of care services, and offer it to a wider set of organisations	HCC AHC and Argenti	Success measures to include monitoring number of referrals; number of referrals converted to a TEC installation; percentage of teams trained		
2c	Improve access to information to support better outcomes	Deliver an integrated health and care record across Hampshire to provide clinicians with seamless access to a shared care record with a rich data set	HIOW STP Digital programme			
3.	Support a sustainable workforce of paid staff and support unpaid carers and volunteers					
3a	Improve workforce sustainability	Monitor implementation of the Hampshire Care Workforce Strategy 2019–2024	Led by the Workforce Strategy Group, including Hampshire Care Association			
3b	Work together to support carers better	Implement the Hampshire Joint Carers' Strategy 2018– 2023. Actions to be developed around the 4 priority areas in the strategy:	HWB organisations, Carers Strategy group	Proposed metrics:  • Number of carers registered with their GP: currently 1% (13,300) aiming to increase to 1.5% 19,950)		

		<ul> <li>Identifying and recognising carers</li> <li>Carers' health and wellbeing</li> <li>Having a life alongside caring</li> <li>Communications and Carers' Charter</li> </ul>		<ul> <li>Number of organisations signed up to the Carers Charter (currently 12, aiming for 20)</li> <li>Number of staff trained on carer awareness</li> </ul>		
4.	Consistent and accessible information and advice					
4a	Improve the quality and accessibility of information available to the public and partners	Further strengthen & promote the use of Connect to Support Hampshire	HCC working with districts, NHS partners and voluntary/community sector	50% increase in hits on the site:	By April 2020	
5.	Improved health and wellbeing for	people in organisations on	the HWB Board			
5a	Support the workforce to be healthy	Ensure healthy eating options are provided and accessed at HCC and other Board organisations' catered premises. Share the learning with other public sector and commercial providers	Public Health lead, involves all HWB Board organisations			
5b	Build 'healthy conversations' into interactions with residents/patients	Build awareness across all public sector staff and the voluntary sector to have healthy conversations and to	Public Health lead, involves all HWB Board organisations	Number of staff who have had MECC training	Monitor 6/12 monthly	

		Make Every Contact Count (MECC)			
6.	Champion coproduction and engage	gement in service design	L	L	
6a	Develop the Board's approach to coproduction and engagement	Agree a coproduction and engagement approach that HWB Board organisations will adopt – working in partnership with some experts by experience	HWB Board / service user/carer representatives		April 2020
6b	Monitor the involvement of residents/patients in service design	Each HWB Plan theme lead to report back on how service users/patients/residents (as applicable) have been involved in developing new /different services	HWB Board Theme Sponsors		Ongoing – include in regular performance reporting to the Board
7.	Develop leadership capacity and culture change in the Health and Wellbeing Board and wider system to enable the success of the HWB Strategy				
7a	Support the implementation of the Hampshire 2050 Commission's recommendations and in due course Hampshire's planned Climate Change Strategy and Action Plan	Initial actions:  Invite Hampshire 2050 team to present the Hampshire 2050 recommendations to the Board and discuss future collaboration	Board Manager / Chitra Nadarajah, Strategic Manager – Climate Change		December 2019

		HWB Board members to engage with development of Climate Change Strategy and Action Plan for Hampshire	Board Manager / Chitra Nadarajah	
7b	Support opportunities for joint learning programmes across different organisations in the health/care system	Widen the 20:20 system leadership programme to other parts of the system (currently operating in North & Mid Hants and PSEH system, involving NHS, local authorities, Police, Fire and other partners)	Lead: Integrated Care Partnerships, with other HWB Board organisations participating	During 2019 and 2020
7c	Continue to develop the Health and Wellbeing Board	Plan and deliver Board development activity, potentially in conjunction with external partner (eg LGA)	Lead: tbc, with all HWB Board Members participating	To be delivered during 2020