



Although a formal committee of Brighton & Hove City Council, the Health & Wellbeing Board has a remit which includes matters relating to NHS Sussex, the Local Safeguarding Boards for Children and Adults and Healthwatch.

Title:	Joint Health and Wellbeing Strategy – Starting Well update	
Date of Meeting:	March 2024	
Report of:	Alistair Hill, Director of Public Health	
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Wards Affected:	All	
FOR GENERAL RELEASE		
Executive Summary		
<p>Health and Wellbeing Boards have a duty to prepare a Joint Health and Wellbeing Strategy to describe the vision and strategic aims to address the population needs identified in the Joint Strategic Needs Assessment (JSNA).</p> <p>The Brighton & Hove Health and Wellbeing Strategy 2019-30 was approved by the Board in March 2019. It sets out the vision: ‘Everyone in Brighton & Hove will have the best opportunity to live a healthy, happy and fulfilling life’.</p> <p>To deliver the ambition, the strategy identifies a number of outcomes for local people that are reflected under four key areas or themes in the Strategy known as the ‘Wells’: starting well, living well, ageing well, and dying well.</p> <p>The Health and Wellbeing Board has chosen to receive updates on a specific strategy theme at each Board meeting. This will enable the Board to receive a</p>		

richer picture of health and social care activity in Brighton & Hove relating to the specific 'Well'.

This paper aims to provide the Board with an overview of the Starting Well strategy focus.

The Board will be asked to note the Starting Well update and services in place to deliver the strategic aims.

Glossary of Terms

JHWS - Joint Health and Wellbeing Strategy

JSNA - Joint Strategic Needs Assessment

1. Decisions, recommendations and any options

- 1.1 That the Board notes the current status of the Joint Health and Wellbeing Strategy outcome measures and activity relating to Starting Well.

2. Relevant information

The Joint Health and Wellbeing Strategy

- 2.1 Health and Wellbeing Boards have a duty to prepare a Joint Health and Wellbeing Strategy (JHWS) to describe the vision and strategic aims to address the population needs identified in the Joint Strategic Needs Assessment (JSNA).
- 2.2 The Brighton & Hove JHWS was approved by the Health and Wellbeing Board in March 2019. It is a high-level strategy that sets out the vision of the Board for improving health and wellbeing and reducing health inequalities in Brighton & Hove.
- 2.3 The JHWS was developed by a panel nominated from the Health and Wellbeing Board and, in addition to Board representative, included representation from voluntary and community services, Brighton & Hove Chamber of Commerce, and the Brighton & Hove economic partnership. The views of local people and organisations were instrumental in developing the strategy.
- 2.4 The vision of the Board as set out in the JHWS is that: 'Everyone in Brighton & Hove will have the best opportunity to live a healthy, happy and fulfilling life'.
- 2.5 The strategy details the challenges and health and wellbeing needs faced by the city: the growing population, and the predicted change to the age profile with greater proportion of older people.
- 2.6 It considers the health and wellbeing needs of the population and the corresponding health and care services and focuses on improving health and

wellbeing outcomes for local residents across the key stages of life reflected as the four 'Wells': starting well, living well, ageing well, and dying well.

- 2.7 The strategy provides a bridge between local health and care services' plans and strategies which will impact on health and wellbeing, where partners across the city understand that we all have a part to play in ensuring that everyone in Brighton & Hove has the best opportunity to live a healthy, happy and fulfilling life.

Development of the outcome measures

- 2.8 The Board agreed an initial set of outcome measures against which to monitor the delivery and impact of the strategy. These were updated in July 2021 with minor amendments in October 2022.
- 2.9 The criteria for inclusion as an outcome measure are:
- where they are population level outcomes (not system or process indicators)
 - where Brighton & Hove performs poorly against defined comparators
 - where there are significant inequalities within the city, and
 - now also where the Covid-19 pandemic response is likely to have had a significant impact eg: physical activity.
- 2.10 The outcome measures are predominantly taken from: the Public Health Outcomes Framework; NHS Outcomes Framework; Adult Social Care Outcomes Framework; and Office for Health Improvement and Disparities (OHID) Wider Impacts of Covid-19 dashboard.

Monitoring the outcome measures

- 2.11 The outcome measures are ideally presented to reflect the status and trend of the measure i.e.: whether the trend is worsening or improving.
- 2.12 For this report it is not possible to reflect trends for all indicators. This is due to the re-basing of Office of National Statistics (ONS) mid-year population estimates following the 2021 Census. The current data points use the new ONS population estimates to provide current rates, but the historic population data has not yet been updated to enable comparable assessments over time. When the historic population data are updated trend data will be reinstated.
- 2.13 Trends are shown where the denominator is not based upon an ONS population figure, for example for flu immunisation where the denominator is those eligible for immunisation recorded on GP practice records. Where cohorts are sampled, for example adult social care survey data, then the denominator data will not be affected by the ONS changes and so these outcomes will continue to show trend data.

Outcomes measures update

- 2.14 At the Health and Wellbeing Board in November 2022, the Board opted to receive updates on the JHWS outcome measures at each Board meeting, rather than as a single annual update. This would take the form of focussing on one of the 'Wells' at each meeting.
- 2.15 The rationale for this was to enable the inclusion of a brief narrative of the specific 'Well' theme to provide a more integrated city-wide understanding of the outcomes and the actions in place. This will provide assurance to the Board that local programmes such as the Shared Delivery Plan and other local services are addressing the outcomes where there is the greatest need for improvement.
- 2.16 This report reflects the outcome measures and activity updates for the Strategy area 'Starting Well'. The table at paragraph 2.18 below summarises the current status of Starting Well outcomes. The table of indicators identifies where they are significantly better than, worse than, or similar to England and compares Brighton and Hove performance with our 'CIPFA' neighbours (local authorities which are statistically similar in their characteristics to Brighton & Hove).
- 2.17 The Starting Well outcome measures (including the desired direction of travel) are:
- An increase in vaccination coverage for MMR vaccine: 2 doses at 5 years
 - An increase in the percentage of children achieving a good level of development at 2 to and a half years
 - An increase in the percentage of children achieving a good level of development at the end of school reception
 - An increase in the percentage of children with free school meal status achieving a good level of development at the end of reception
 - An increase in the average attainment 8 score (state funded schools) – 'attainment 8' measures the achievement of a pupil across 8 qualifications at the end of Key Stage 4 (aged 15-16 yrs)
 - An increase in the average attainment 8 score of children in care
 - A reduction in the Year six (10-11yrs) prevalence of children who are overweight
 - An increase in the percentage of physically active children and young people (aged 5-16 years)
 - A reduction in hospital admissions as a result of self-harm (10-24 years)

In addition to the national indicators, Brighton & Hove City Council undertake other local surveys to understand better the health and wellbeing of the population. One of these is the Safe and Well at School Survey (SAWSS) which is run every two years across all phases of school and college in the city. The latest survey was undertaken Nov/Dec 2023.

See over the page for a summary of overall trends

2.18 Overall trends across the Starting Well Indicators

Indicator – all 22/23 data unless otherwise stated	Brighton & Hove %	England average %	Brighton & Hove compared to England	Brighton & Hove trend	South East England average %	CIPFA neighbour average %
Vaccination coverage for MMR vaccine: 2 doses at 5 years	84.4	84.5	Similar	No change	87.3	83.8
Percentage of children achieving a good level of development at 2 to 2 and a half years	86.1	79.2	Better	Worsening	79.8	80.5
Percentage of children achieving a good level of development at the end of school reception	69.2	67.2	Better	Unable to calculate trend	69.6	64.7
Percentage of children with free school meal status achieving a good level of development at the end of reception	51.6	51.6	Similar	Unable to calculate trend	49.9	50.2
Average attainment 8 score – this score is an average and not a percentage	47.8	46.4	Not able to compare (statistically)	Unable to calculate trend	47.4	Not used
Average attainment 8 score of children in care (21/22) - this score is an average and not a percentage	16.3	20.3	Not able to compare (statistically)	Unable to calculate trend	18.4	Not used
Year six (10-11yrs) prevalence of children who are overweight	30.8	36.6	Better	Worsening	33.0	38.1

Indicator – all 22/23 data unless otherwise stated	Brighton & Hove %	England average %	Brighton & Hove compared to England	Brighton & Hove trend	South East England average %	CIPFA neighbour average %
Percentage of physically active children and young people (21/22)	46.6	47.3	Similar	Unable to calculate trend	48.1	48.5
Hospital admissions as a result of self-harm (10-24 years) (21/22)	720.1 per 100,000 population	427.3 per 100,000 pop	Worse	Unable to calculate trend	550.0 per 100,000 pop	487.0 per 100,000 pop
Cannabis use – secondary school pupils (SAWSS 2023)	9%	Local indicator	N/A	Same as 2021	N/A	N/A
Smoking prevalence – secondary school pupils (SAWSS 2023)	15%	Local indicator	N/A	Same as 2021	N/A	N/A
Alcohol prevalence – secondary school pupils (SAWSS 2023)	43%	Local indicator	N/A	Increase from 2021 – 38%	N/A	N/A
Percentage of school secondary pupils who feel happy (SAWSS 2023)	82%	Local indicator	N/A	Increase from 2021 – 78%	N/A	N/A

CIPFA - Nearest Statistical Neighbour Model

Brighton & Hove statistical neighbours are: Bournemouth, Christchurch and Poole, Bristol, Coventry, Leeds, Leicester, Liverpool Manchester, Newcastle upon Tyne, North Tyneside, Plymouth, Portsmouth, Salford, Sheffield, Southampton, Southend-on-Sea

Calculating trend

To calculate the trend there must be at least five points in the time series and both the numerator and denominator for each time period, so the trend will be derived using the five most recent indicator values. Local indicators do not currently have trend included.

The Average attainment 8 score is the average measure of an individual student's progress across their 8 best performing subjects. The average attainment 8 score for Children in Care for 2022/23 is due to be published by DfE in March 2024

Calculating the average attainment 8 score trend Ofqual has announced the return to 2019 (pre-pandemic) grading in 2023, with some protections for students. In 2022 grading was to a mid-point between the standard in 2019 and 2021. No exams were sat in 2020 and 2021 and centre assessed grades with quality assurance by exam boards were used to award students final grades. The Attainment 8 trend is not reliable and the most appropriate comparator to 2023 is 2019.

Commentary

- For two dose MMR coverage, we do not achieve the goal of 95% or greater. Low uptake is a national issue and over the last few years, the national rate has declined and we are similar to the England average
- Brighton & Hove compares well to the England average for the percentage of children at a good level of development at age 2 to 2 and a half years. Whilst there is a worsening trend over 5 yrs which includes the pandemic period, Brighton & Hove is has improved following the impact of COVID 19
- For school readiness at the end of reception we show an improving trend and we are above the England average, and for the cohort of children with free school meal status we are the same as the England average
- Whilst not possible to calculate statistical significant, we are slightly higher than the England average for attainment 8 for all children, but lower for children in care
- We have a lower prevalence of being overweight (Year 6) than England, and similar rates of physical activity
- Brighton & Hove has significantly higher rates of hospital admissions for self-harm in young people than England.

Safe and Well at School Survey

- The percentage of pupils of secondary school pupils who agree or strongly agree that they have often felt happy in the last few weeks shows a small increase on the 2021 survey against a worsening trend overall from 2012 (93%) to 2023 (82%)
- Smoking prevalence for secondary school pupils is the same as the 2021 survey and shows a steadily reducing trend from 2013 (36%) to 2023 (15%)
- Alcohol prevalence for secondary school pupils is worse than the 2021 survey but shows an improving trend from 2013 (49%) to 2023 (43%)
- Cannabis prevalence for secondary school pupils is the same as the 2021 survey and has changed little from 2013 (8%) to 2023 (9%).

2.19 The accompanying presentation at the Health and Wellbeing Board describes in more detail some of the key local health and care services and initiatives for children and young people that support the Starting Well outcomes in relation to:

- Childhood Immunisations
- Health visiting and School Nursing
- Early Years work in relation to school readiness
- Educational attainment of children in care
- Family Hubs Transformation Programme
- Healthy weight in children and young people
- Self-harm and mental health

2.20 This will demonstrate the strong partnership working across the Council, Early Years Providers, Schools and Colleges, Health services and the Voluntary and Community Sector to support the strategic aims and outcomes measures associated with Starting Well.

3. Important considerations and implications

Legal:

- 3.1 Health and Wellbeing Boards have a duty to prepare a Joint Health and Wellbeing Strategy to describe the vision and strategic aims to address the population needs identified in the Joint Strategic Needs Assessment. The report aims to provide the Board with an overview of the Starting Well strategy. The indicators on the report interface with a number of statutory duties, and implications for the wellbeing of residents.

Lawyer consulted: Natasha Watson Date 26 February 2024

Finance:

- 3.2 The Health and Wellbeing Strategy informs priorities, budget development and the Medium-Term Financial strategy of the Council, Health and other partners. There are no direct financial implications from this report. The strategies operate within the resources available.

Finance Officer consulted: Sophie Warburton Date:

Equalities:

- 3.3 The strategy, and the outcomes measures set out within this paper, includes a strong focus on reducing health inequalities. The strategy and its delivery is underpinned by the data within our Joint Strategic Needs Assessment which takes the life course approach identifying specific actions for children and young people; adults of working age and older people; and key areas for action that reflect specific equalities issues including inclusive growth and supporting disabled people and people with long-term conditions into work. An Equalities Impact Assessment is not required for the strategy itself but should be completed for specific projects, programmes and commissioning and investment decisions taking forward the strategy, as indicated within this delivery plan.

Supporting documents and information

Supporting information:

Brighton Health & Wellbeing Strategy 2019-2030

<https://www.brighton-hove.gov.uk/health-and-wellbeing/about-public-health/brighton-hove-joint-health-and-wellbeing-strategy-2019-2030>



