Staying Healthy Partnership 6-month plan

The below plan sets out a 6 month action plan to develop and start delivering on two key workstreams – tackling health inequalities and a whole system approach to obesity.

Workstream 1 – tackling health inequalities

Purpose

Workstream 1 will focus on engaging senior leadership, developing insight and agreeing an approach to tackling health inequalities across all service areas. There will be clear evaluation to monitor progress in support those populations and areas most in need.

| Six month action plan | | | | | | | |
|-----------------------|---|------|---|-------------------------------|----------|--|--|
| Action | | Aims | | Responsible | Due date | Progress | Outcomes |
| 1. | Complete Health Needs Assessment for Rutland Health Inequalities. | • | Develop a greater insight into health inequalities across Rutland. | Public Health and partners | Oct 22 | Complete | Needs Assessment complete and published online. HWB approval in October for a Board development session. |
| 2. | 1:1 partner engagement on current work supporting population groups and geographical areas highlighted in the needs assessment. | • | Understand the current position across partners supporting those most in need. Understand where gaps exist supporting populations and identify opportunities to work across partners where a population/area is already engaged. Use examples within the development session. | Public Health and partners | Jan 23 | | |
| 3. | Health & Wellbeing Board development session on health inequalities. | • | Gain Senior buy in for Rutland to tackle inequalities. Share insight from the Needs Assessment. Gain insight into current work supporting different populations | HWB, wider partners | Jan 23 | Ongoing - board session booked for end of Jan 23. | |

| | | | and geographical areas identified as | | | |
|----|----------------------------|---|--------------------------------------|---------------|----------|--|
| | | | most in need, supporting action 2. | | | |
| | | • | Discuss and agree priority areas | | | |
| | | | with clear actions to take forward. | | | |
| 4. | Develop actions from the | • | Have a clear, coherent plan for | Staying | March 23 | |
| | development session | | Rutland to support those most in | Healthy | meeting | |
| | recommendations with | | need across all services. | Partnership | | |
| | oversight from the Staying | • | Enable collaborative working on | | | |
| | Healthy Partnership. | | inequalities. | | | |
| | | • | Develop shared responsibility and | | | |
| | | | accountability. | | | |
| 5. | Develop a framework to | • | Produce a clear process to monitor | Public Health | March 23 | |
| | monitor and evaluate | | and evaluate progress. | and Staying | meeting | |
| | progress. | • | Develop a clear understanding on | Healthy | | |
| | | | the progress and impact made | Partnership | | |
| | | | delivering the action plan. | | | |
| | | • | Continuously assess priority groups | | | |
| | _ | | and gaps as time progresses. | | | |
| 6. | Partners to start | | | All partners | April 23 | |
| | implementing actions into | | | | onwards | |
| | their services. | | | | | |

Workstream 2 – whole system approach to obesity

Purpose

Workstream 2 focuses on a whole system approach to obesity model, factoring in a range of obesity causes and mapping current activity and gaps across each (food environment, physical activity provision, schools, workplaces etc). The purpose is to map the local system to collate current actions and provide recommendations where there are gaps.

Development and implementation will focus on the Office for Health Improvement and Disparities (previously PHE) guidance https://www.gov.uk/government/publications/whole-systems-approach-to-obesity. Phases 1 to 3 focus on mapping, evidence and partner buy in. Phases 4 to 6 over action, monitoring and evaluation.

| Six month action plan | | | | | | | |
|--|---|----------------------------|----------|--|----------|--|--|
| Phases of development | Aims and actions | Responsible | Due date | Progress | Outcomes | | |
| Phase 1: Setup – Secure senior-level support and establishes the necessary governance and build the narrative. | Build a narrative around why we need to focus on obesity in a whole system approach. Engagement with senior leaders. | Public Health | Jan 23 | Ongoing – Senior engagement and narrative is being developed to support the 'why'. | | | |
| Phase 2: Building the local picture – Gather information required to understand the local picture of obesity, including its prevalence, local impact, relevant organisations and people, community assets and existing actions to address. | Collate local information about obesity. Establish an overview of current actions across Rutland organisations. Start to understand local | Public Health and partners | March 23 | Ongoing - local intelligence being collated | | | |

| | assets including community capacity and interest. | | |
|--|---|----------|--|
| Phase 3: Mapping the local system - Bring stakeholders together to create a comprehensive map of the local system that is understood to cause obesity. | Map of the local system understood to cause obesity. Run a workshop with wider stakeholders. | March 23 | |

Future phases to be incorporated into the plan after 6 months:

Phase 4 – Action

Phase 5 – Managing the system network

Phase 6 – Reflect and refresh