

# **BE BIRMINGHAM WELLBEING STRATEGY FOR OLDER CITIZENS**

**November 2008**

## **1 Introduction**

The enclosed strategy is a draft three year strategy for consultation identifying a model for and actions to deliver better wellbeing in the City of Birmingham. The strategy is primarily focussed on older citizens, but is relevant to all of the community. The strategy gives a message from the 'Be Birmingham' partnership that we are serious about shifting investment and gives a vehicle for all parts of the system, including the entirety of City Council provision, to articulate their contributions.

Wellbeing is difficult to define, but the model selected is taken from the Young Foundation report 'Local wellbeing: Can we measure it?' (September 2008).

The model is formed in three parts which are interrelated with wellbeing at the centre. The component parts:

### **Personal**

- Material and financial wellbeing
- Engaging activities and achievements
- Health and mental wellbeing

### **Place**

- Safety and security
- Access and opportunities
- Quality of the local area and environment

### **Social**

- Family and relationships
- Social support and engagement
- Sense of belonging and community cohesion

We feel this model gives a holistic view of things that are important to individuals and communities.

## **2 The Strategy**

The draft strategy outlines a vision for future delivery, then identifies a whole set of outcomes, actions and priorities. The strategy was informed by the priorities identified in the national policy document in 2005 'Opportunity Age' and more recently the BACOP priorities for action. These are summarised in Appendix D of the strategy.

There are a number of areas, where collaborative work across partner agencies would improve citizen experience and be efficient. One such area is information and engagement, where a truly joint strategy would add considerable benefit.

### **3 Measuring Success**

It is imperative in an area such as 'wellbeing' we consider how we know if we have been successful. Section 7 of the strategy, therefore, focuses on measurement of progress. This identifies quantitative metrics but also highlights work which will need to be further developed through the implementation strategy to measure people's subjective view of wellbeing. We are considering using a standard measure and carrying out regular surveys.

### **4 Governance/ Reporting**

At its inception, the executive lead for delivery of the strategy was Paul Dransfield, Director of Resources at the City Council. A Board was established with very wide membership to develop this draft strategy. This leadership has now passed to Peter Hay in Adults and Communities. The work now reports to the Health and Wellbeing Executive through the older people's priority areas, led by Rita Symons, Director of Strategy and Commissioning in NHS South Birmingham. Progress will continue to be reported through the Health and Wellbeing Executive, with reporting to Cabinet and PCT boards at key points in time.

### **5 Next Steps**

The strategy gives a good basis on which to engage with the community around priorities with a common understanding of what we mean by 'wellbeing'. It also expressly states our commitment to moving investment to preventative and wellbeing services.

In terms of future work, the immediate action is to consult widely on the strategy. This involves engagement with user groups and service users, but we also intend to carry out survey work to identify what areas those who do not currently engage with services consider important for their wellbeing. We will join up consultation, wherever possible for example will link to focus groups already set up for the 'Supporting People' review.

It is important that from the range of priorities, we get a sense of which should be immediately implemented.

Further work will also need to be carried out to inform the implementation planning process. A working group has been established across the City council and PCTs.

### **6 Recommendations**

The Board are asked, if thought fit, to :-

- Endorse the draft Be Birmingham strategy
- Commit to the PCT's involvement in the consultation process
- At the end of the consultation period, consider the PCT's response in terms of priorities for implementation.