













# Lincolnshire District Councils' Health and Wellbeing Strategy



- Lincolnshire district councils are committed to developing an ambitious agenda for improving health and wellbeing in Lincolnshire.
   To achieve this, they are focusing on:
  - a strategic, long-term approach to improving outcomes
  - a sense of opportunity and ambition, district collaboration
  - a holistic view based on social determinants
  - developing system leadership
- 2. The 2021 Health and Care White Paper and establishment via the NHS of Integrated Care Systems (ICS) underline the vital importance of health and care partners working together to focus on prevention and addressing the wider determinants of health.
- Districts have timely opportunity to directly influence and shape the system approach to tackling wider determinants of health, ensuring services and functions are effectively linked at place and system level to deliver on district priorities.
- 4. Integrated Care Systems are being designed to serve four key purposes:
  - improving population health and healthcare
  - tackling unequal outcomes and access
  - enhancing productivity and value for money
  - helping the NHS to support broader social and economic development



- Districts have sought to address central questions around employment and jobs, place shaping, active and creative places, homelessness and participation in developing the strategy.
- 6. The programme of work has been structured in four phases:
  - Diagnostic: benchmarking, governance mapping and system health check
  - Governance development: focus on most impactful interventions to ensure district involvement in strategic decision making
  - Development of district health and wellbeing agenda
  - Identification of key next steps and supporting action plan
- 7. Districts have developed the strategy around five 'lever' areas in which they are uniquely positioned in the system to influence and can most effectively articulate their offer and work with partners to deliver sustainable change.
- 8. For each lever area, districts have defined:
  - An overarching objective, themes and strategic framework of activity and output for each lever area
  - Supporting activities and outputs linked to each objective



9. Summary of overarching objectives and themes by lever area:

Housing and homelessness: Improve the supply, quality and coordination of services to meet housing needs and demands

- Address the underlying causes of homelessness so that it becomes rare, brief and non-recurring
- Improving the supply of housing needs and demands
- Improving the quality of existing accommodation to secure an overall improvement in the health and wellbeing of residents
- Coordination of partnership activity to provide improved housing choices

**Activity and wellbeing**: To address inactivity across the county – improving access and opportunity for all residents to be active and participate

- Active place Creating environments for people, of all ages, to have equitable access to safe places and spaces, in which to take part in regular physical activity
- Active people Providing opportunities across the county for residents to participate in activity on a regular basis
- Active system Working across the system in a co-ordinated way to tackle health inequalities, address long term health conditions and improve opportunities for prevention



9. Summary of overarching objectives and themes by lever area: (continued)

**Environment and climate**: Improve understanding of the links between environment and health and maximise opportunities to deliver on both simultaneously

- Tackle climate change including improving air quality and reducing carbon emissions
- Awareness and education
- Maximise potential of Local Plan reviews to improve open / green space provision
- Licensing and provision of healthy, sustainable food options

**Economic inclusion**: Reducing economic inequality and alleviating poverty as a fundamental driver for improving mental and physical health and wellbeing

- Support people in employment to improve health & wellbeing
- Support for those most susceptible to economic change and transition
- Develop innovative programme with partners to enable residents to improve digital skills and access
- Increase the number of residents who are economically active by ensuring those that have health conditions/disabilities can take advantage of the opportunities for more flexible/remote employment opportunities
- Interventions to develop the health and care sector to increase recruitment and retention and support business growth



9. Summary of overarching objectives and themes by lever area: (continued)

#### Working with Communities: Leverage unique links at place level to engage with communities

- Capture and build on district community engagement, knowledge and expertise
- Expand district participation in current sector discussions / forums
- Strengthen sector oversight and assurance
- Enhance and sustain voluntary sector engagement and contribution
- A strategic commissioning approach in Lincolnshire
- Review opportunities to further develop districts preventative approach, engaging Wellbeing Lincs as a vehicle for coproduction, collaboration and innovation
- 10. Key enablers for the work include:
  - system leadership
  - relationships, governance data and analytics
  - funding
  - impact evaluation

# 01

**Background and context** 

## 1.1 Background to this programme of work

Lincolnshire district councils are committed to developing an ambitious agenda for improving health and wellbeing in Lincolnshire.

To achieve this, they are focusing on:

- a strategic, long-term approach to improving outcomes
- a sense of opportunity and ambition
- district collaboration
- a holistic view based on social determinants
- developing system leadership
- The recent Health and Care White Paper and most recent NHS integrated care system policy underline the vital importance of health and care partners working together to focus on prevention and addressing the wider determinants of health.
- Overall, the current system working and collaboration across Lincolnshire is relatively new in it's development compared to other
  Integrated Care System footprints. Coupled with poor health outcomes overall for communities across Lincolnshire, and as the
  County has recently begun to think through the post-Covid strategy, the districts have a great opportunity to take a proactive role at
  this pivotal stage for Lincolnshire in reshaping policy, strategy and delivery and improving outcomes.
- Building on strong cross-district relationships already in place, and following ICS designation in April, districts have timely opportunity
  to directly influence and shape the system approach to tackling wider determinants of health, ensuring services and functions are
  effectively linked in at place and system level to deliver on all district priorities.

## 1.2 Districts have a key role to play in delivering on the core purposes of the ICS

Integrated Care Systems (ICS) are being designed to serve **four purpose**s – and districts will be key to delivering on these, working in partnership with the NHS, County Council and other key system partners:

#### Improving population health and healthcare

Districts already play a key role in supporting the system to deliver targeted interventions in response to population health needs – from system to neighbourhood level. They bring a depth of understanding and connection with residents which has proven invaluable in Lincolnshire's Covid-19 response and 'cost of living' challenges.

#### **Enhancing productivity and value for money**

By coordinating district interventions at system level there is a huge opportunity to make better use of Lincolnshire resources. In addition to a substantial combined budget across the seven district councils, coordination with districts on specific interventions and schemes such as the Towns Fund, homelessness and Homes for England has unlocked >£100m of funding.

#### Tackling unequal outcomes and access

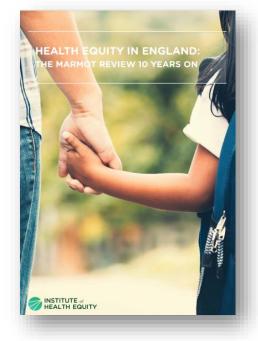
Reducing inequalities is central to the work districts do. For example the work between NHS and district Councils to address inequalities in vaccine uptake, utilising the local knowledge, networks of districts to reach, engage with and influence identified groups. There is a huge opportunity to build on this work and use the strengths of the districts in improving the health of the population across Lincolnshire.

# Helping the NHS to support broader social and economic development

A strong district focus on economic inclusion and working with communities will be in key to delivering on this ambition as a system.

## 1.3 Five central questions Lincolnshire districts are seeking to address

- In 2010, the Marmot Review concluded that health in England had a distinctive gradient: the lower one's social and economic status, the poorer one's health is likely to be.<sup>1</sup>
- The original review argued that health inequality could be alleviated by acting within six policy areas and it foresaw Local Government as a pivotal partner in tackling the social determinants of ill-health.
- 10 years on, Marmot reviewed the situation again.<sup>2</sup> Although the
  review noted that some local authorities had established effective
  approaches in addressing health inequality, it also found that for
  the first time since 1900, life expectancy and health outcomes
  were no longer rising across the board and for some
  demographics, they were in decline.
- These same inequalities contributed to a high and unequal death toll from COVID-19, whilst the pandemic itself revealed both the tight coupling between health and the economy, and the capacity for all levels of government, and actors across sectors, to work together to address complex and urgent problems.<sup>3</sup>





<sup>&</sup>lt;sup>1</sup> Marmot Review report – 'Fair Society, Healthy Lives'; <sup>2</sup> Health Equity in England: The Marmot Review 10 Years On; <sup>3</sup> Build Back Fairer: The COVID-19 Marmot Review.

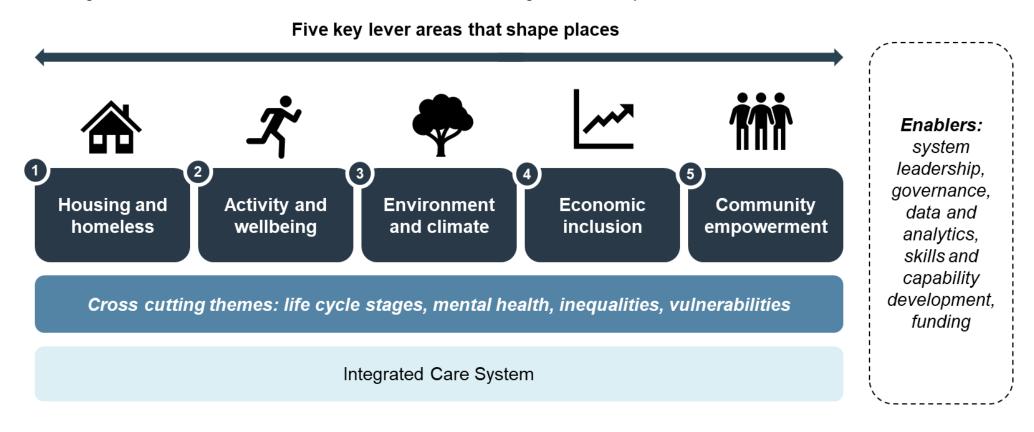
## 1.3 Five central questions Lincolnshire districts are seeking to address

In this context, Lincolnshire districts are planning to 'build back better' from the pandemic in designing their health and wellbeing agenda – through a coordinated approach to health and care. They are seeking to address five key questions:

2 3 5 **Active and creative Employment / jobs** Place shaping **Homelessness Participation** places How do we shape housing strategy, How do we enhance How do we address How do we shape How do we focus planning policy, and participatory homelessness. plans linked to our leisure, arts and our economic democracy and civic inequality and development environment and culture services 'to engagement to disadvantage to enable people and activity 'to create regeneration, 'to ensure healthy strengthen 'the role fair employment and create and develop standard of living communities to and impact of ill good jobs for all'? healthy and for all'? 'have control over health prevention'? sustainable places their lives'? and communities'?

## 1.4 Development through five key lever areas that shape places

- Districts structured development around five 'lever' areas in which they are uniquely positioned in the system to influence and can
  most effectively articulate their offer and work with partners to deliver sustainable change
- Cross-cutting themes, enablers and interaction with the wider integrated care system were also considered



02

Strategic framework:
Overview and objectives

## 2.1 Strategic Framework Overview

In the following section we have set out:

- Objectives districts have defined for each lever area
- A strategic framework that includes overarching desired outcomes for each lever area
- Partners that will be engaged to delivery the outcomes
- Workstream leads have developed detailed supporting activities and outputs linked to each objective
- In each area, districts have captured both existing work and future strategic priorities
- In developing the strategy districts have taken a system-facing approach whilst focusing on the interventions they are uniquely positioned to drive through local voice.
- Objectives are numbered linking to detailed activities in the Lincolnshire District Health & Wellbeing Strategy Action Plan.

Housing & homelessness

Activity & wellbeing

Environment & climate

Economic inclusion

# 2.2 Objectives by lever area

# Housing and homelessness



Overall objective: Improve the supply, quality and coordination of services to meet housing needs and demands

Address the underlying causes of homelessness so that it becomes rare, brief and non recurring

1. Coordinate the effective delivery of homelessness services through a partnership driven and evidence based homelessness strategy

Improving the supply of housing needs and demands

- 2. Establish future investment strategies to meet current and emerging needs for care and support
- 3. Bring more empty homes into use in order to improve the supply of properties available within the county
- 4. Deliver new housing to meet housing needs and demands, meeting zero carbon targets and recognising all levels of affordability

Improving the quality of existing accommodation to secure an overall improvement in the health and wellbeing of residents

- 5. Improve the quality of existing properties across all tenures and reduce the cost of poor housing to health, care and society
- 6. Reduce levels of overcrowding as means of reducing health risks

Coordination of partnership activity to provide improved housing choices

#### **Partners**

Housing & homelessness

# Housing and homelessness



- District Councils
  - Housing services
  - Homelessness and allocations
  - Revenue & Benefits
  - Enforcement
  - Planning and enabling
  - Wellbeing services
- Lincolnshire County Council
  - Public health
  - Adult social care
- Housing Associations
- Homes England
- Private developers

#### NHS

- Clinical Commissioning Group
- Lincolnshire Partnership Foundation Trust
- Primary Care Networks
- Neighbourhood Teams
- Lincolnshire Police
- Lincolnshire Fire and Rescue
- Third sector providers
- Money advice
- Energy advice
- Private Sector Landlords

**Active system** 

# 2.3 Objectives by lever area

# Activity and wellbeing



Overall objective: To address inactivity across the county – improving access and opportunity for all residents to be active and participate

#### Active place

Creating environments for people, of all ages, to have access to equitable access to safe places and spaces, in which to take part in regular physical activity.

#### **Active people**

Providing opportunities across the county for residents to participate in activity on a regular basis

- 4. Provide opportunities and programmes across communities to enable all residents to take part in regular activity
  - in
- 5. Creating leadership, governance and partnerships, and workforce capabilities across sectors to use resources in a more coordinated way to reduce inactivity

Working across the system in a co-ordinated way to

tackle health inequalities, address long term health

conditions and improve opportunities for prevention

- 6. Each district council to develop opportunities to positively influence internal / corporate decision making in their local area and embed in governance processes
- 7. Proactive and inclusive approach to sharing learning, best practice and opportunities for collaboration
- 8. Proactively engage across the NHS to encourage innovation and creativity to enable health, wellbeing and physical activity within planning consultations

- 1. Develop a plan to be able to positively influence the planning system / external decision making in the local area
- Make better use of green spaces across
   Lincolnshire and maximise opportunities for residents and visitors to be active in Lincolnshire
- Widen the focus from commercial leisure offer and asset-based physical activity to activity outside, in the home and in the workplace

#### **Partners**

# Activity & Wellbeing



- Leisure
- Communities
- Planning
- Wellbeing Service

## Lincolnshire County Council

- Public health
- Communities
- Education
- Highways and Transport
- Adult Services
- Children's Services

#### **Parish Councils**

#### NHS

- Clinical Commissioning Group
- Lincolnshire Partnership Foundation Trust
- Primary Care Networks
- Neighbourhood Teams
- Active Lincolnshire
- Sport England
- National Governing Bodies
- Sports Clubs
- Community and Voluntary Sector
  - Infrastructure Organisations
  - Local groups

# 2.4 Objectives by lever area

### **Environment and climate**



Overall objective: Improve understanding of the links between environment and health and maximise opportunities to deliver on both

#### Tackle climate change

#### Improve air quality

- Improve air quality, particularly in designated management areas
- 2. Accelerate transition towards active travel
- 3. Promote and increase uptake of electric vehicles
- Mobility: provision and uptake of public transport services

#### Reduce carbon emissions

- 5. Improve domestic energy efficiency, reduce fuel poverty, and reduce carbon emissions
- Joint work to reduce carbon emissions from all Councils (Lincolnshire County Council and districts)
- Reduce carbon emissions across all services to meet national carbon reduction targets

#### Awareness and education

- 8. Understand the local impacts of a changing climate to improve community resilience
- Education and behaviour change around sustainability and climate change
- 10. Reduce waste output across the county and tackle key issues

# Green spaces Local Plans

- 11. Improved open space provision that recognises the role of improved biodiversity, carbon sequestration and health and wellbeing benefits
- 12. Maximise potential of Local Plan reviews

Licensing and provision of healthy, sustainable food options

13. Influence provision of healthy and sustainable food options

#### **Partners**

#### **Environment and Climate**



- District Councils
  - Environmental Health
  - Licencing
  - Housing services
  - Planning Policy and Development Management
  - Fleet management
- Lincolnshire County Council
  - Public health
  - Highways
  - Environment and Sustainability

- **NHS** 
  - Clinical Commissioning Group
  - Lincolnshire Partnership Foundation Trust
- **Lincolnshire Police**
- **Lincolnshire Fire and Rescue**
- **Lincoln Climate Commission**
- **Private Sector Landlords**
- **Housing Associations**

# 2.5 Objectives by lever area

## **Economic inclusion**



Overall objective: Reducing economic inequality and alleviating poverty as a fundamental driver for improving mental and physical health and wellbeing

1. Embed strong strategic narrative to promote the links between economic inclusion and health inequality to deliver better outcomes

	People in employment	Support for those most susceptible to economic change and transition	Digital skills programme	Eliminate poor health from being a barrier to employment	Support development of the health and care sector to improve service provision
	2. Work with Lincolnshire employers to improve employee working conditions / environment, particularly within low paid and insecure employment, to improve health and wellbeing, prevent health issues developing, and improve business productivity  3. Improve skills for those currently in work, enabling career progression, greater wage levels, better job security, greater productivity development - good for people and business - part of tackling in-work poverty	<ul> <li>5. Increase core sector resilience in Lincolnshire by supporting employers to adapt and respond to economic transitions caused by the pandemic, through addressing skills gaps with employees</li> <li>6. Employee upskilling and retraining programmes for those in industries exposed to long-term change and decline</li> </ul>	<ul> <li>7. Residents have the digital skills to access health services, everyday services and employment opportunities</li> <li>8. Fully enabled digital FFTP (fixed fibre to premises) infrastructure across the county using place appropriate technologies.</li> </ul>	9. Create an intervention programme that supports residents with ill-health into employment  Output  Description:	Creating an environment to support development of the health and care sector to improve health related service provision
•	<ol> <li>Increase volunteering to support the community and increase well-being for the volunteers themselves</li> </ol>				

#### **Partners**

### **Economic Inclusion**



- District Councils
  - Economic Development

#### Parish and Town Councils

- Lincolnshire County Council
  - Public health
  - Communities
  - Education
  - Safer Communities
  - Children Services
  - Adult Services

- Community and Voluntary Sector
  - Infrastructure Organisations
  - Local groups
- NHS
  - Clinical Commissioning Group
  - Lincolnshire Partnership Foundation Trust
  - Primary Care Networks
  - Neighbourhood Teams
  - Lincolnshire Financial Inclusion Partnership

# 2.6 Objectives by lever area

# Working with Communities



Overall objective:	Leverage unique links at	place level to enga	ge with communities

1	Capture and build on district community
	engagement, knowledge and expertise

Combine the District's knowledge and approach to community engagement, building on success and experience gained during the pandemic

2 Expand district participation in current sector discussions / forums

Bring together current discussions and approaches around community development with regard to the pandemic response and future collaboration

3 Strengthen sector oversight and assurance

Work with partners (sector representative groups and County) to develop an agreed approach to sector oversight and assurance, harnessing community potential in a safe, effective way

4 Enhance and sustain voluntary sector engagement and contribution.

Building on success during the pandemic, develop and formalise mechanisms to draw on volunteer capacity quickly and efficiently in response to emerging community needs e.g. flooding, pandemic)

5 A strategic commissioning approach in Lincolnshire

To maximise impact and reach of commissioned services across the Lincolnshire system

6 Wellbeing Lincs as a proven and trusted mechanism for collaboration and innovation

Review opportunities to further develop districts preventative approach, engaging Wellbeing Lincs as a vehicle for co-production, collaboration and innovation.

#### **Partners**

# Working with Communities



- District Councils
  - Communities
  - Planning
  - Wellbeing Service

#### **Parish and Town Councils**

- Lincolnshire County Council
  - Public health
  - Communities
  - Education
  - Safer Communities
  - Children Services
  - Adult Services

- Community and Voluntary Sector
  - Infrastructure Organisations
  - Local groups
- NHS
  - Clinical Commissioning Group
  - Lincolnshire Partnership Foundation Trust
  - Primary Care Networks
  - Neighbourhood Teams

**Sport England** 

**Arts Council England** 

**Lincolnshire Police** 

**Police and Crime Commissioner** 

03

**Key enablers** 

## 3.1 Key enablers

#### System leadership and relationships

- Strong system leadership will be critical to delivering a true shift in focus of health and care to prevention and addressing the wider determinants of health.
- There is an inherent level of complexity to developing integrated care systems with a lack of clarity in some key areas such as governance, accountability and funding models at different levels of the system.
- Leaders across the system will need to work collaboratively and constructively to navigate these issues as the system continues to develop, focusing on innovation and improvement, relationships and connectivity, individual effectiveness, and learning and capacity building.

#### Governance

- District Councils are reflected in the governance arrangements for the ongoing development of the ICS and tackling health inequalities in Lincolnshire.
- District Councils have member representation at the Lincolnshire Health and Wellbeing Board and Integrated Care Partnership
- Senior Leaders represent Districts on the Better Lives Lincolnshire working group
- All district councils have active relationships with the relevant Primary Care Networks (PCNs) to better understand population health and support action at a local level

## 3.1 Key enablers

#### Data and analytics

- Data and analytics will be increasingly central to design and delivery of targeted models of health and care meeting the needs of the population in Lincolnshire
- Districts have identified a number of areas where increased sharing of data would enable them to work with system partners in a more proactive and targeted way, but where there have been challenges to accessing or sharing data with other organisations in the system
- Districts advocate for wider data sharing across partner organisations, linked into target outcomes for the HWB strategy and population health improvements
- System partners should, as a priority, work towards an integrated system data sharing agreement to unlock existing barriers and ensure that all organisations have timely access to the insight they need to plan, design and track performance of interventions.

#### Funding

- A collaborative approach has been key to recent successful bids for funding (for example Towns Fund)
- Districts should build on these successes and seek to collaborate in a more structured way with system partners to secure future funding
- Longer term, districts should engage in system-level discussions on funding models

04

Key data, indictors and 'levelling up'

# 4.1 Lincolnshire's current 'levelling up' position – by District

District	Negative indicators	Positive indicators		
	Employment rate	Overweight adults		
Lincoln	Overweight children at reception age	Life satisfaction		
	Anxiety	Feeling life is worthwhile		
	Gross Value Added per hour worked	Cigarette smokers		
Boston	Public transport/ walk to employment centre with 500 to 4999 jobs			
Doston	Overweight children at reception age			
	Overweight adults			
	GCSEs (and equivalent) in English and Maths by age 19			
	Gross Value Added per hour worked	Feeling life is worthwhile		
East Lindsey	Gross median weekly pay	Happiness		
	Employment rate			
	Public transport/ walk/ cycle/ drive to employment centre with 500 to 4999 jobs			
	Overweight adults			

# 4.1 Lincolnshire's current 'levelling up' position – by District

District	Negative indicators	Positive indicators
	Employment rate	Feeling life is worthwhile
West Lindsey	Public transport/ walk/ cycle/ drive to employment centre with 500 to 4999 jobs	
	Overweight children at reception age	
South Holland	Public transport/ walk/ cycle/ drive to employment centre with 500 to 4999 jobs	Life satisfaction
	Overweight children at reception age	Feeling life is worthwhile
	Anxiety	
South Kesteven	Cycle/Drive to employment centre with 500 to 4999 jobs	Happiness
		Anxiety
North Kesteven	Public transport/ walk/ cycle/ drive to employment centre with 500 to 4999 jobs	Cigarette smokers
		Feeling life is worthwhile
		Happiness

# **4.2 Key indicators by Life Course**

Life stage	Proposed system outcomes measures		District strategy lever areas					
		Н&Н	A&W	E&C	EI	WWC		
"Start Well"	Reduced still birth rate (23/24: 16)		✓	✓	✓			
	Reduced neonatal mortality rate (23/24: 7)	✓		✓	✓	✓		
	Maternal smoking at delivery (23/24: 10.9%)		✓		✓			
	<ul> <li>Percentage of children aged 10-11 classified as overweight or obese (23/24: 31.5%)</li> </ul>		✓	$\checkmark$	✓			
"Live Well"	Adults who smoke (23/24 11.3%)		✓			✓		
	Hospital admissions due to falls (23/24: 1,470)	✓	✓			✓		
	Adults physically inactive (23/24: 22.7%)		✓	✓	✓	✓		
	Alcohol-caused hospital admissions (23/24: 491)		✓					
	Social prescribing referrals (23/24: 12,194)		✓	✓		✓		
	<ul> <li>Number of people receiving care from new models of integrated primary and community care for adults and older adults with severe mental illness (23/24: 5,151)</li> </ul>					✓		
	<ul> <li>Number of people supported through the NHS Diabetes Prevention programme (23/24: 2,898)</li> </ul>							
	Personal Health Budgets (23/24: 2,970)		✓			✓		
	Delayed transfers of care (23/24: 43)	✓				✓		
	<ul> <li>Length of stay for patients in hospital over 21 days (23/24: 77)</li> </ul>	✓	✓			✓		
"Die Well"	Percentage of deaths with three of more emergency admissions in last three months of life					✓		
	Percentage of people dying in their place of choice	✓				✓		
	<ul> <li>Learning disabilities mortality review - % of reviews completed within 6 months of notification</li> </ul>							

# 05

Methodology, development and next steps

## 5.1 Overview of programme and engagement

#### Diagnostic and mapping

Aims Understand and assess the current system and reform

agenda, its strengths and shortcomings

**Approach** Data analysis and benchmarking of population health data,

review and mapping of key strategies and documentation, CEO and system stakeholder interviews, weekly working

group development sessions

#### **Outputs**



District benchmarking paper – detailed Lincs health outcomes and wider determinants of health (economy, housing)

System health check
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Send 207

Brigged Agencies Lide
Brigged Agencies Lide

System mapping paper – district involvement at system level limited, opportunities for collaboration at county / multi-district level



System health check paper – opportunity for districts to be involved at system-level, examples of collaboration between districts

#### **Governance and development**

Aims Design a collaborative approach to enable greater district

voice and engagement in key system forums

**Approach** Officer working group and CEO design workshops,

supported discussions with system partners, developed proposed approach to future district representation at key system groups (Joint Working Executive Group, Health and

Wellbeing Board) and supporting arrangements

#### **Outputs**



Recommendations to enable greater district voice and engagement at key system forums



Joint Working Executive Group (JWEG)
proposal on district membership – developed
and agreed by JWEG chairs

## 5.1 Overview of programme and engagement

#### Develop health and wellbeing agenda

Aims Develop a five year health and wellbeing agenda

**Approach** CEO and officer working group design workshops, review of exemplars and best practice, facilitated sprint development

sessions, weekly working group development sessions







# Outputs



**Aims** 

Approach

Section in agenda paper summarising priority areas, key steps to mobilisation, links to system outcomes framework and supporting governance

**Next steps and mobilisation planning** 

delivery of the strategy

discussions with system partners

Identify priority areas, set out steps to mobilise and support

Officer working group development sessions, governance

#### Outputs



Health and wellbeing agenda setting out outcomes for each lever area and supporting objectives, activities and outputs

# 5.1 Overview of programme and engagement

#### **Stakeholder Engagement**

**Aims** Provide an overview of the aims and objective of the

strategy, understand the role partners can play in delivering

**Approach** Partners away day - discussions with system partners to

understand barriers, challenges and opportunities.





# **5.2 Next Steps**

#### **Next steps and delivery across Lincolnshire**

**Aims** Lincolnshire Districts formally approve the strategy, agree

and continue to work with partners on local priorities

**Approach** Regular officer working group, understanding and strategic

alignment with partners, engaging internal services to

understand role in health and wellbeing 'levers'

#### **Outputs**



Lincolnshire Districts Health & Wellbeing Strategy approved by all Districts and used as framework to meet local priorities

#### **Next steps and delivery for West Lindsey**

**Aims** West Lindsey formally approves the strategy and continues

to work with partners and stakeholders to deliver local

priorities

Approach This strategy aligns with West Lindsey existing's polices and

strategy's and as such, actions to support the delivery of this strategy can be identified and developed through the councils

business planning framework

**Outputs** Delivery of West Lindsey's Corporate plan, Lincolnshire

Homelessness Strategy, West Lindsey Climate and

Sustainability Strategy, West Lindsey Housing Strategy and

more.