



Wellbeing Board

Date: Friday 5 April 2019

Time: 10.00 am **Public meeting** Yes

Venue: Room 116, 16 Summer Lane, Birmingham B19 3SD

Membership

Councillor Izzi Seccombe (Chair)	Warwickshire County Council
Councillor Paulette Hamilton (Vice-Chair)	Birmingham City Council
Councillor Kamran Caan	Coventry City Council
Councillor Les Caborn	Warwickshire County Council
Councillor Karen Grinsell	Solihull Metropolitan Borough Council
Councillor Marco Longhi	Walsall Metropolitan Borough Council
Councillor Barry Longden	Nuneaton and Bedworth Borough Council
Councillor Hazel Malcolm	City of Wolverhampton Council
Councillor Gaye Partridge	Dudley Metropolitan Borough Council
Councillor Ann Shackleton	Sandwell Metropolitan Borough Council
Andy Hardy	STP Systems Leader NHS
Helen Hibbs	STP Systems Leader NHS
Paul Jennings	STP Systems Leader NHS
Sarah Norman	WMCA Chief Executive Lead
Alison Tonge	NHSE
Sue Ibbotson	Public Health England
Guy Daly	Universities (Coventry)
Sean Russell	Director of Implementation for Mental Health, Wellbeing & Radical Prevention
Gary Taylor	West Midlands Fire Service
Sarah Marwick	West Midlands Police

Quorum for this meeting shall be seven members.

If you have any queries about this meeting, please contact:

Contact Wendy Slater
Telephone 0121 214 7016
Email wendy.slater@wmca.org.uk

AGENDA

No.	Item	Presenting	Pages
1.	Apologies for Absence	Chair	None
2.	Declarations of Interest Members are reminded of the need to declare any disclosable pecuniary interest they have in an item being discussed during the course of the meeting. In addition, the receipt of any gift or hospitality should be declared where the value is thought to have exceeded £25 (gifts) or £40 (hospitality).		None
3.	Chair's Remarks (if any)	Chair	None
4.	Minutes of the last meeting	Chair	1 - 6
5.	Matters Arising	Chair	None
6.	Birmingham Commonwealth Games 2022 and Benefits Programme	Simon Hall & Cat Orchard (BCC)	None
7.	Progress on wellbeing input into new housing delivery	John Berry (PHE)	None
8.	Wellbeing Activity Plan	Sean Russell	7 - 32
9.	Thrive Update <ul style="list-style-type: none"> • Community Sentence Treatment Requirements • Thrive Into Work (verbal report) • Thrive At Work (verbal report) 	Sean Russell	33 - 36
10.	Presentation : Childhood Obesity Action Plan	Sean Russell	37 - 76
11.	Sports and Physical Activity <ul style="list-style-type: none"> • West Midlands On The Move • Disability • Walking & Cycling Offer 	Simon Hall/Mark Fosbrook/Claire Williams	77 - 84
12.	Update Coventry and Warwickshire Year of Wellbeing	Cllr Les Caborn/Cllr Kamran Caan	None
13.	Date of next meeting - To be advised		None



**West Midlands
Combined Authority**

Wellbeing Board

Friday 18 January 2019 at 10.00 am

Minutes

Present

Councillor Izzi Seccombe (Chair)	Warwickshire County Council
Councillor Les Caborn	Warwickshire County Council
Councillor Paulette Hamilton	Birmingham City Council
Councillor Hazel Malcolm	City of Wolverhampton Council
Councillor Ann Shackleton	Sandwell Metropolitan Borough Council
Alastair McIntyre	STP Systems Leader NHS
Rachel O' Connor	STP Systems Leader NHS
Alison Tonge	NHSE
Sue Ibbotson	Public Health England
Sean Russell	Director of Implementation Wellbeing

In Attendance

Councillor Cathy Bayton	WMCA Overview & Scrutiny Committee Wellbeing Lead
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Item No.

22. Apologies for Absence

Apologies for absence were received from Councillors Caan, Grinsell and Partridge and Sarah Norman, Guy Daly and Gary Taylor.

23. Chair's Remarks

(i) Appointment of Vice-Chair

The Chair nominated Councillor Hamilton to the position of Vice-Chair to broaden and strengthen the work of the board. Councillor Caborn seconded the appointment and this was endorsed by the board.

Resolved: That Councillor Hamilton be appointed to the position of Vice-Chair for 2018/19.

(ii) Thrive Mental Health Awards

The Chair reminded the board of the Mental Health Commission Star Awards ceremony on 31 January 2019 at West Bromwich Albion football ground to celebrate West Midlands 'Mental Health Stars'

(iii) Financial Times Feature on Thrive

The Chair advised the board that she was very pleased to report

that Sean Russell and some of the Thrive programmes had been included in a health and wellbeing spread in the Financial Times recently; a link to the feature would be circulated to the board.

(iv) Go Green on Monday 21 January for 'This is Me' Campaign

Sean Russell advised the board that 21 January was officially the most depressing day of the year (Blue Monday) and this year, to raise awareness of 'This is Me' mental health campaign, public buildings such as Birmingham Library and New Street Station would be turning green. He asked that colleagues wear something green on 21 January to lend their support for the campaign.

(v) Ways of Working

The Chair reported that workshop sessions would be arranged between meetings to consider the direction of travel for the board. This would include looking at improving links between this board and local authority health and wellbeing boards and STPs.

The Chair added that also she wanted members to take on a portfolio lead role for specific work areas they had an interest in and referred to Councillor Caan championing physical activity and Councillor Hamilton taking forward the child obesity agenda. It was noted that portfolio leads/sponsors would be sought as part of reports being considered further on the agenda.

24. Minutes of the last meeting

The minutes of the meeting held on 31 October 2018 were agreed as a correct record.

25. NHS Long- Term Plan

Alison Tonge, gave a presentation to the board on Integrated Care Systems and delivering the NHS Long-Term Plan.

The presentation provided an overview of Integrated Care Systems (ICSs), changes that would support the development of system working, population health and prevention and the next steps for ICS/STP systems.

Alison Tonge introduced Michelle Kane who was in attendance from the National Team - System Transformation to respond to any queries/questions.

The board considered that whilst the Long-Term Plan represented a positive opportunity, concern was expressed that the plan did not include reference to local government, adult social care, nor focus on prevention and the wider determinants of health.

However, it was recognised there were synergies between the Long-Term Plan and this board and there was need for all partners to work together to deliver the best possible outcomes.

The Chair thanked Alison Tonge for her presentation.

Resolved: That the presentation be noted.

26. Population Intelligence Hub and 2019/20 Work Plan

Stella Botchway presented a report that set out a proposed work plan for the financial year 2019/20, to be led by the Population Intelligence Hub and delivered by partners across the West Midlands.

It was noted that the Population Intelligence Hub is a virtual intelligence hub established by PHE in collaboration with WMCA and is a resource for the whole of the West Midlands and a focal point for place based intelligence outcomes.

The report outlined the completed projects during 2017-18, ongoing activities, summarised the proposed projects for 2018-19 along with the delivery arrangements and sought a sponsor to support the development and implementation of this work.

The board supported and endorsed the proposed work plan.

In relation to agreeing a sponsor for the work plan, the Chair reported that she had Councillor Grinsell in mind for this role as she had expressed an interest in this work area and undertook to contact her in this regard.

Stella Botchway also informed the board of the Department for Education's healthy schools funding programme that would provide disadvantaged children with free meals and activities during school holidays. Stella Botchway advised that the bidding process would close on 7 February and asked that colleagues interested in submitting a collaborative bid to contact her on the matter.

Sean Russell added that further details of the funding programme would be emailed to board members and the relevant Directors of Public Health would be copied into the email.

Resolved:

- (1) That the proposed Population Health Intelligence Hub projects for the Wellbeing Board work programme be supported and endorsed and
- (2) That Councillor Grinsell be nominated as the sponsor from the board to support the development and implementation of this work plan be agreed subject to the Implementation Director Wellbeing confirming this proposal with Councillor Grinsell.

27. Thrive Update

The Implementation Director Wellbeing, Sean Russell, presented a report that provided an update on progress in implementing the commitments made through the Thrive Programmes.

The report outlined progress with regards to Thrive into Work – Individual Placement Support (IPS) trial, Thrive at Work, mental health and justice and mental health awareness.

In relation to the Thrive into Work trial that had helped 100 people get back into paid employment by Christmas time, the Chair commended the team on this fantastic achievement.

The Implementation Director Wellbeing conveyed his thanks to PHE in assisting in delivering training to almost 26,000 people in the West Midlands on mental health first aid training.

Resolved: That the update on the implementation of Thrive be noted.

28. West Midlands On the Move Progress & 2019/20 Priorities

The board considered a report of the Physical Activity Policy and Delivery Lead, Simon Hall that provided an overview of the progress in delivering the 'West Midlands On the Move' including the emerging work on the Birmingham Commonwealth Games benefits programme.

In relation to the planned presentation of the Commonwealth Games benefits programme to the next meeting, the Chair asked that Simon Hall invite Commonwealth Games Officers to attend for the discussion.

Resolved:

- (1) That progress in the delivery of 'West Midlands on the Move' be noted and
- (2) That a report on the Birmingham Commonwealth Games and proposed benefits programme be submitted to the next board meeting be agreed.

29. Healthy and Inclusive new places to Live- embedding wellbeing within the WMCA role in new housing delivery

The board considered a report of the Implementation Director Wellbeing that outlined progress on work to develop strategic health and wellbeing principles to embed within the WMCA's approach and role in the delivery of new housing and the next steps that would be undertaken.

The board received a presentation from John Berry, PHE, on the developing strategic health and wellbeing principles. It was noted that further progress updates would be submitted to future meetings of the board.

Resolved: That progress to date in developing the wellbeing input to the WMCA's enabling role in the delivery of significant new housing be noted.

30. Youth Justice/Childhood Adversity; ALTAR

The board considered a report of the Implementation Director- Public Service Reform and Inclusive Growth that updated the board on the ongoing research into childhood adversity and the ALTAR™ framework (Abuse, Loss, Trauma, Attachment and Resilience) and emerging findings from the research.

In relation to an enquiry from Councillor Malcolm as to whether research has been undertaken with regards to dyslexia, Sean Russell undertook to look into this.

Sue Ibbotson noted that adverse childhood experiences were not always connected to ALTAR™ and reported of the need to give consideration to the narrative for childhood adversity.

Rachel O'Connor reported of the need to support early interventions.

In relation to a member lead within the Wellbeing Board to support the wider link to local authority health and wellbeing boards, Councillor Malcolm undertook to take forward this role.

Resolved:

- (1) That progress in the reform of the youth justice system in the West Midlands be noted ;
- (2) That Councillor Malcolm be appointed as the member lead of the Wellbeing Board to support the wider link to local wellbeing boards and
- (3) That a further report be submitted to the next meeting prior to the publication of the final results.

31. Date of next meeting - 5 April 2019

The meeting ended at 12.00 pm.

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West Midlands
Combined Authority

Wellbeing Board

Date	5 April 2019
Report title	Wellbeing Board Activity Plan
Portfolio Lead	Cllr Izzi Seccombe – Wellbeing
Accountable Chief Executive	Sarah Norman – Chief Executive Dudley Council Email sarah.norman@dudley.gov.uk Tel:- (01384) 815201
Accountable Employee	Sean Russell Email s.russell@west-midlands.pnn.police.uk Tel: 07818276259
Report has been considered by	Dr Stella Botchway – PHE Population Health lead

Recommendation(s) for action or decision:

The Wellbeing Board is recommended to:

- 1. Adopt a work plan for WMCA Wellbeing Board until 2021**
- 2. Develop an implementation programme for the adopted work plan**
- 3. Agree upon a dedicated stream of work to generate capacity**
- 4. Utilise the Childhood Obesity Action Plan as a pilot approach to working within and across the health and wellbeing system**

1. WMCA Wellbeing Board Activity Plan – 2019-2021

This activity plan proposes a framework and plan of action to deliver the stated priorities of the WMCA Wellbeing Board. It was developed in partnership with Public Health and England with input from the wider West Midlands system.

2. Background Summary

A healthy population is vital for the growth and prosperity of the West Midlands Combined Authority area.

This activity plan takes a complex system approach to improving health and wellbeing.

Reducing health inequalities and maximising inclusive growth are core ambitions.

The plan builds upon existing place based work across the region.

Successful delivery Board will require partnership working with organisations across the West Midlands.

3. Why is the wellbeing of the West Midlands Population important to the WMCA?

The WMCA is committed to transforming lives in the West Midlands by improving life chances for everyone, especially those facing multiple disadvantages¹. The Strategic Economic plan sets out a bold ambition to reduce the productivity gap between the West Midlands and the UK average, by recognising that productivity is constrained by poor life chances caused by issues like poor mental health, worklessness in households and complex needs.

¹ WMCA Strategic Economic Plan, 2016

To achieve this ambition, the WMCA has set out to make the West Midlands a great place to live, work and grow. Central to this is supporting healthier, happier lives for all and reducing inequalities in life outcomes.

Health and wealth are 'two sides of the same coin', and a healthier, more resilient population are more likely to achieve greater productivity and make the most of available opportunities.

Behind geographical areas of strong economic growth are populations that are healthy and have strong communities. Improving the health of a population not only produces a healthy workforce. For those who are economically inactive, better health increases individual resilience, promotes independence and reduces reliance on health and care services.



The ultimate aim for the WMCA population is healthier adults and children.

4. The WMCA Wellbeing Board

The Wellbeing Board of the West Midlands Combined Authority was established in June 2016 with the aim of supporting the West Midlands to achieve its ambition of improving health outcomes for its residents. To achieve this, the board set out to understand and influence the interdependent health and social care system within the West Midlands. The board works to add value to existing health and wellbeing activities through political influence, creating alliance across the system where possible and developing new programmes of work.

5. The WMCA Wellbeing Board Action Plan

This action plan sets out the activities the Wellbeing Board will support over the next two years. It provides a rationale for these activities and describes how the programmes of work fits within the existing health and wellbeing system of the West Midlands.

Adding value to the health and wellbeing system through the WMCA

The WMCA works across its constituent and non-constituent local authority areas to coordinate and enhance activity aimed at improving the lives of its residents. The WMCA is relatively new to this system, and seeks to add value to the existing work undertaken by partners.

Devolved powers across transport, housing, land, skills and employment; and a track record of convening bodies across the public, private and charitable sector gives the WMCA a unique position to influence the lives of West Midlands residents for the better.

Within the influence of the WMCA are a set of regeneration projects, large and small, designed to transform the region from its current position to one of unrivalled strength and innovation. These include:

- Delivering HS2 and extensions to the local and national transport network
- Building 215,000 new homes and repurposing land
- Creating new communities and destination areas
- Fostering community resilience, connection and pride in the West Midlands
- Producing a step change in the creative and digital industries of the West Midlands, and pioneering 5G connectivity for the UK

- Implementing a Skills for Growth strategy

These major developments have the potential to improve health and wellbeing outcomes for all those who work and live within the West Midlands. It is the role of the WMCA Wellbeing Board to make the most of these opportunities. A health in all policies approach influences the wider the determinants of health, by embedding health and wellbeing outcomes into the decisions that affect the fabric of people’s lives.

This activity plan is designed to describe how the work of the WMCA Wellbeing Board contributes to the work of the existing West Midlands health and wellbeing system. Many of the existing and proposed activities are linked to place based programmes that are delivered locally.

Organisations across the West Midlands are engaged in exciting programmes and initiatives that have the potential to change the landscape of the region for years to come. The WMCA Wellbeing team have the opportunity to contribute to these activities and will need to navigate how they manage their contribution to joint objectives.

6. Major programmes across the West Midlands and the potential for WMCA contribution

Activity	WMCA Contribution
<p>Commonwealth Games</p> <p>The international sporting event will be held in Birmingham and other West Midlands locations in 2022. Organisations across the region are working together to ensure the Games leave a lasting legacy for residents and future generations. The bid for the Games focused on three outcomes: better health and wellbeing; better prospects; and better lives.</p>	<p>Working with Sport England and PHE to ensure the legacy of the Commonwealth Games leads to the aspiration of healthy lifestyles amongst residents from all walks of life.</p>
<p>Regional health promotion campaigns</p> <p>Health promotion is a vital part of changing the knowledge and attitudes required for people adopt healthier lifestyles.</p>	<p>Thrive West Midlands has successfully translated national campaigns into local versions.</p>

<p>The West Midlands was the pilot site for PHE's national '<i>One Mind</i>' campaign. PHE have introduced successful social marketing campaigns at target groups and the general public.</p>	<p>There is the opportunity to adapt other existing campaigns to better reflect the communities and cultures of the West Midlands.</p>
<p>Childhood Obesity reduction The government's childhood obesity reduction plan aims to significantly reduce the number of obese children over the next 10 years. It calls upon local authorities, schools, businesses and the wider public sector to coordinate action across several spheres.</p>	<p>WMCA owned childhood obesity action plan which provides system leadership to influence the environment to encourage physical activity and healthier diets for children.</p>
<p>Violence prevention Public health approach to violence prevention led by PHE. This is a multiagency, place based approach. It will be delivered locally in partnership with West Midlands Police. The work is driven by a novel approach to sharing data and using intelligence to pilot a small number of specific interventions.</p>	<p>The WMCA with the support of the Mayor can help to scale up the successful components of this approach.</p>
<p>Mental health promotion and Zero Suicide Ambition</p>	

7. Achieving the health and wellbeing goals of the WMCA

The Wellbeing Board will take a complex systems approach to promoting good health and wellbeing and tackling the causes of poor health. This approach recognises that population outcomes are a result of a multitude of interacting and competing factors.

As Public Health England has described, the ‘wider determinants, also known as social determinants, are a diverse range of social, economic and environmental factors which impact on people’s health.’²

Some determinants of health are unchangeable, such as person’s genetics and biological makeup. Other determinants can be influenced, including access to health services, policy decisions, communities, the environment, social structure, income and individual lifestyle habits^{3,4}.

These factors are the circumstances which people live, work, play and learn.

Healthy adults and children are the outcome of resilient communities, good quality work, good environment and good individual habits.



² PHE, 2017. The Wider Determinants of Health

³ Dahlgren and Whitehead.

⁴ Choosing health Whitepaper.

Therefore, the spaces within which the WMCA would have the most impact are:

Facilitate a best start in life by laying the groundwork for an active, healthy and productive future.

Use planning decisions to make spaces in the West Midlands more conducive to healthier lifestyles.

Remove barriers to healthy work and ensure more residents benefit from inclusive growth

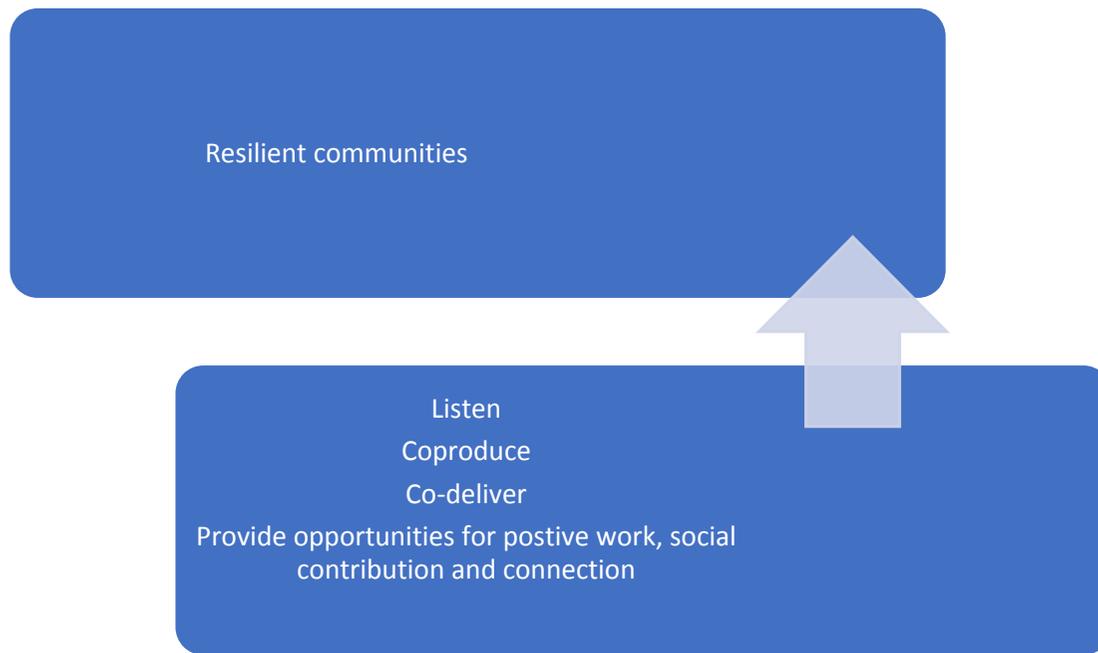
8. Resilient Communities

Resilient individuals, families and communities are more able to deal with difficulties and adversity, and are therefore more likely to experience conditions which are positive for health. In the face of adversity, resilient individuals, families and communities may show better outcomes than those who are more vulnerable, including⁵:

- lower incidence of unhealthy or risky behaviours
- higher attainment at school, qualifications, and skill levels
- better employment prospects
- higher mental wellbeing and flourishing
- improved recovery from illness

Community resilience can be achieved by a spectrum of activities that range from engagement to co-producing and co-delivering services.

⁵ PHE and UCL Institute of Health Equity, 2018. Local action on health inequalities: Building children and young people's resilience in schools



9. Good Work

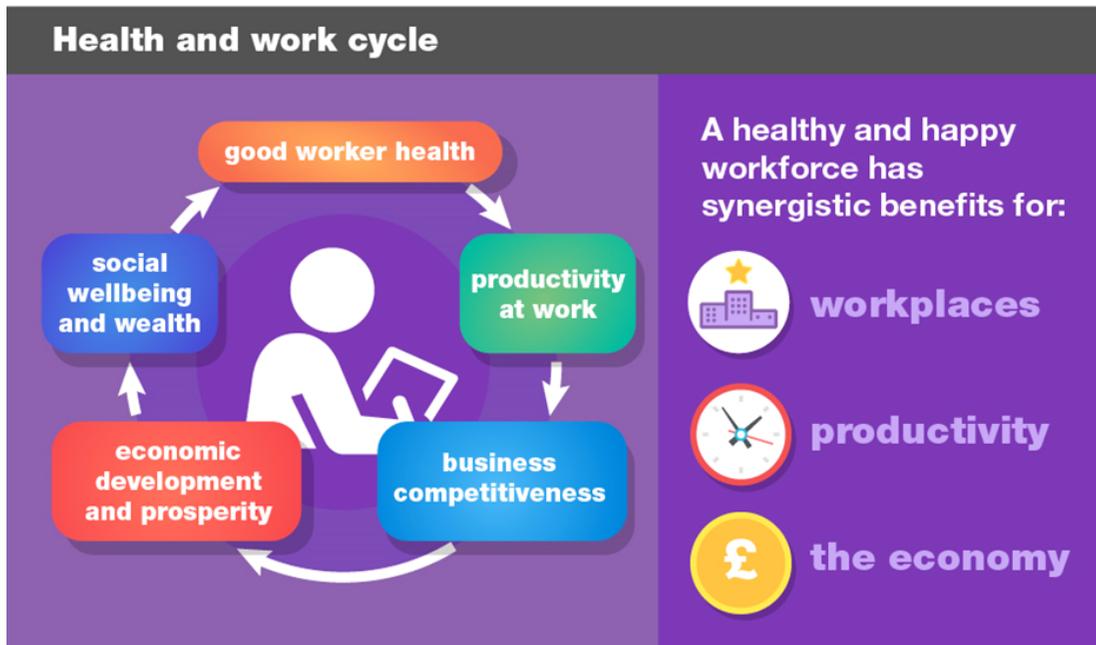
Access to safe, fulfilling and well-paid employment has benefits for both individuals and communities.

Recent guidance from PHE describes the strong evidence demonstrating that employment improves health and wellbeing, boosts quality of life and protects against social exclusion. Conversely, unemployment is associated with poor mental and physical health⁶.

⁶ PHE 2019. Health Matters: Health and Work

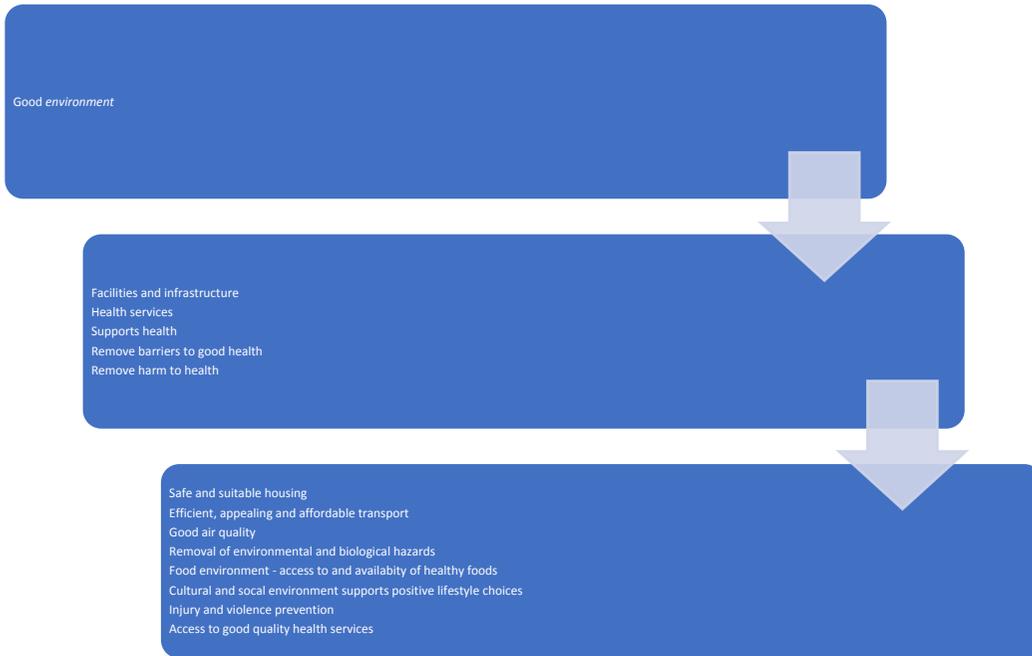
Healthy workforces support economic growth and development through supporting businesses and the economy.

Increasing the numbers of parents and carers in adequately paid job helps to reduce the levels of children in poverty.



The environmental contribution to health includes physical, cultural and social aspects. Our environment is made up of both the natural and built environment. An environment that supports healthy people and communities is one that supports healthy lifestyles, removes barriers to adopting healthy habits and has minimal exposures to harm.

Good environments are linked to improved wellbeing in residents. Environments can be designed to promote safety, prevent accidents and prevent accidents⁷.

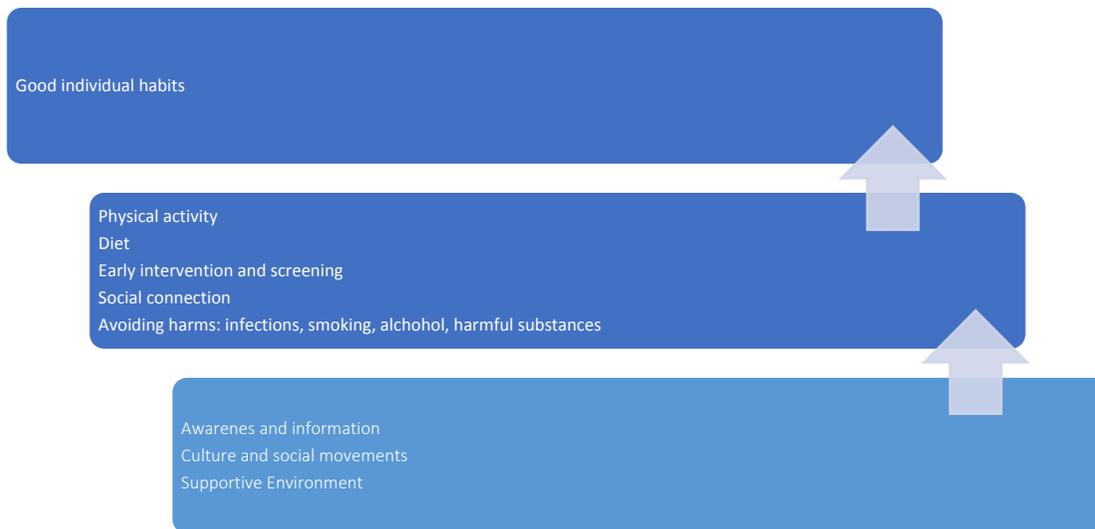


⁷ Urban Design Group, 2018. Healthy Places: Code for councils

The WMCA will be involved in major decisions which will affect the built and natural environment over the next few years. Major development and regeneration projects are planned over the next few years, affecting both existing and future environments.

11. Good individual habits

Lifestyle habits are currently the leading causes of disease and premature death⁸. Lifestyle habits such as diet, physical activity, smoking and alcohol intake can be difficult outcomes to influence. Adopting healthier lifestyles involves individual choice, but is also the product of the environment in which people live.



⁸ Global Burden of Disease Study, 2017.

Improving outcomes for populations involves influencing the whole system, rather than looking for interventions that act in isolation.

12. Supporting the system through a dedicated program of work

Taking a systems approach to improving health and wellbeing means understanding that many of the outcomes described above are achieved through collective action across a wide range of partners. No one organisation can do everything by themselves. Each part of the system has a part to play and has objectives that are naturally within their gift. The WMCA Wellbeing Board has an opportunity to contribute to the overall health and wellbeing landscape but recognises that there is little value in duplicating existing achievements. The Wellbeing Board can support current efforts to achieve to improve population outcomes by focusing its activities on those areas that align with the remit and stated objectives of the WMCA. When applied to health and wellbeing, these areas are:

- Healthy new homes fit for the future
- Regeneration of existing communities
- Transport and active travel
- Air quality
- Physical activity
- Work, skills and productivity
- Social connection
- Social and cultural movements to change beliefs and attitudes towards lifestyles

Conversely, the following activities will be outside the remit of the WMCA Wellbeing board as they are under the remit of other parts of the health and care system:

- Delivering health and social care services
- Screening
- Providing information on what constitutes a healthy lifestyle
- Influencing food composition
- Removing biological and chemical hazards from the environment
- Turning ambitions into actions

The Wellbeing Board will seek to maximise the opportunities for health and wellbeing across the spectrum of programs undertaken by the WMCA. To add value to the existing health and wellbeing system the WMCA Wellbeing Board will focus on areas of activity that they are uniquely placed to influence.

The Wellbeing Board can work to improve population health with partners within and through the WMCA by:

- Levering health effects of active travel and transport
- Ensuring new regional plans and developments embed health and wellbeing at its core
- Making the link between health, work and skills and sustaining the opportunities good work offers to health and wellbeing
- Cross-sector convening, particularly across public sector bodies and between the public, private and charitable sector
- Region-wide social and cultural campaigns, capitalising on the influence and visibility of the Mayor
- Focusing on improving opportunities of the most disadvantaged and closing the gap between the most well off and the least well off

The areas of activity of the Wellbeing Board are best placed to fit into three broad areas of work:

- Environment and infrastructure
- Cross-sector convening
- Community resilience

These are designed to be complimentary and amplify existing efforts to improve the health and wellbeing of the West Midlands Population.

13. Activity streams of the WMCA Wellbeing Board



14. Key activities under each work stream:

Environment
and
Infrastructure

- Planning, development and regeneration
- Health in all policies

Cross-sector
convening

- Collaboration
- Strategic support and oversight
- Covering and brokering

Community
Resilience

- Social and cultural campaigns
- Obtaining community insights

15. Work programmes, 2019 – 2021

Environment and Infrastructure

Environment and infrastructure	
What will we do?	<p>Prevention and wellbeing in all WMCA policies Focus on health inequalities and the most disadvantaged New frameworks for embedding wellbeing and prevention into a range of work areas Develop incentives for non-health departments to meaningfully comply with wellbeing policies and frameworks</p>
Why?	<p>Departments without a stated remit for health and wellbeing often have a large and unappreciated influence over health outcomes.</p>
How?	<p>Existing work Housing and Land design principles WMCA Inclusive Growth Framework Transport for Health strategy</p> <p>New work Review of current policies as a target for prevention Develop novel methods to support uptake and innovation of wellbeing frameworks and policies Digital approaches to collecting live data on the usage and compliance with wellbeing frameworks and principles Reduce incentives for unhealthy food within the transport network.</p>
Who will do it	<p>WMCA teams Inclusive Growth Unit</p>

	External partners ADPH network PHE
Outcomes	Change in the perception of the value of health and wellbeing. Effective policies and frameworks being used.

Cross-sector Convening

Cross-sector Convening	
What will we do?	Collaborate across the economic and wellbeing sectors to promote physically and mentally healthy lifestyles. Convene activities across the criminal justice and health landscapes to prevent violence. Bring together the health and planning communities to maximise the current regulatory powers around planning. Take a strategic approach to facilitating solutions to complex problems affecting the wellbeing of the WMCA population, and the wider West Midlands.
Why?	Combined Authorities have a natural advantage in encouraging collaboration across large geographies. A complex system approach has the potential to tackle difficult population-level problems
How?	Existing work Thrive Into Work – IPS Trial Thrive at work – Wellbeing Charter

	<p>Thrive at work – Fiscal Incentive trial Violence Prevention Alliance Mental health and justice</p> <p>New work Broker partnerships between LA public health teams and planning regulators. Gamify active travel. Digital interventions to incentivise physical activity through commercial partnership.</p>
Who will do it	<p>WMCA Thrive Transport for West Midlands West Midlands on the Move</p> <p>External Local authorities Violence Prevention Alliance PHE Digital exemplar programme</p>
Outcomes	<p>System approach to tackling entrenched health inequalities. Goals and objectives shared across organisations and sectors. Benefits to population health and wellbeing seen as a common good. Shared activities lead directly to population improvements in health and wellbeing.</p>



Community Resilience	
What will we do?	<p>Harness the social power of the West Midlands Mayor to highlight issues affecting population wellbeing.</p> <p>Use the WMCA brand to promote social campaigns of population value within the West Midlands.</p> <p>Use digital technologies to deliver programs that foster connectedness and participation.</p> <p>Ensure communities feel engaged with and can influence the activities of the wellbeing board.</p> <p>Take a violence prevention approach</p>
Why?	<p>Community engagement increases the likelihood of effective delivery and uptake.</p> <p>Participation with the making of decisions affecting them encourages community resilience.</p>
How?	<p>Existing work</p> <p>Mental Health awareness - "This is Me" and Mental Health First Aid Training</p> <p>Disability and Physical Activity Alliance</p> <p>Securing the legacy of the Commonwealth Games</p> <p>Qualitative insights from adults experiencing multiple and complex needs.</p> <p>Qualitative insights from children within the criminal justice system</p> <p>Thrive Citizen's Jury</p> <p>New work</p> <p>WMCA Wellbeing Board community engagement strategy</p> <p>WMCA Physical activity social media Campaign (with This Girl Can, Sport England)</p> <p>Using 5G to enhance physical activity in schools</p>

	Using 5G to reduce social isolation and loneliness Digital tools to obtain and use community insights Children and Young People’s Jury
Who will do it	WMCA Thrive at Work West Midlands on the Move Wider Public Sector Reform Team External Sport England Wolverhampton University PHE
Outcomes	Change in perceptions Change in behaviours An understanding of individual and collective experience of residents. Evidence of community involvement in the WMCA Wellbeing Board

The activities described above require partnership working and system leadership. Many of the activities will be initiated and delivered by the core Public Sector Reform team of the WMCA; some work will be new ventures that are developed and implemented in collaboration with partners; other activities will be supporting priorities owned by the established health and wellbeing system and delivered as business as usual.

16. System ownership and delivery

WMCA Wellbeing Team

System Business as Usual
WMCA Supporting

New Joint Endeavours

Environment and Infrastructure

Housing and Land design principles

Transport for Health strategy
Transport for West Midlands

Convene activities across the criminal justice and health landscapes to prevent violence.
PHE Leading, Violence Prevention Alliance

WMCA Inclusive Growth Framework

Review of current WMCA policies as a target for prevention

Develop novel methods to support uptake and innovation of wellbeing frameworks and policies across the WMCA

Remove HSSF advertising across the West Midlands transport network and around schools

Cross-sector Convening

Thrive Into Work – IPS Trial

Thrive at work – Wellbeing Charter
Businesses and PHE

Maximise the current regulatory powers for planning

Thrive at work – Fiscal Incentive trial

Multi-partner collaborative group for

LA CEO group leading, support from ADPH and PHE
Gamify active travel

holiday activities and food provision
Local authorities, schools and businesses

Digital interventions to incentivise physical activity
through commercial partnership
PHE and WMCA partnership

Developing plans for devolved funds and single
investment pots

Community Resilience

Disability and Physical Activity Alliance

Mental Health awareness - "This is Me"
and Mental Health First Aid Training
Businesses and PHE

Securing the legacy of the Commonwealth Games
Joint PHE and WMCA

Qualitative Insights and engagement
strategy

WMCA branded 'One You' campaigns
PHE

The Mayor's West Midlands 3 Million Pound
Challenge

Black Country Place Based Fund

WMCA Physical activity social media Campaign
New use of 5G to provide wellbeing interactions

(with This Girl Can, Sport England)

17. System Leadership and collaboration

Intelligence, evaluation and impact

In delivering these activities, it is essential to measure progress, monitor outcomes and evaluate impact. Decisions and activities will be rooted in the best available evidence and local insights. To achieve this, the Wellbeing Board is supporting the development of an intelligence function delivered through the WMCA's Population Health Intelligence Hub and Office of Data Analytics (ODA).

The Population Health Intelligence Hub will be central to how this action plan will be delivered, evaluated and refreshed. The hub will use regional and local intelligence to illuminate areas of need and inequality. These population needs determine future priorities and activities. Further information on the work of the population hub can be found within the hub's yearly work plan.

18. Resources and partnership

The challenge will be to clarify and agree upon defined contributions from respective organisations.

To date, the WMCA has partnered with public and private organisations such as PHE, local authorities, Sport England, Metro Dynamics and the West Midlands Combined Universities to deliver shared objectives. Much of these collaborations have enabled through secondments, good will and matrix working. Moving forward, the WMCA Wellbeing Board will need to instigate a programme of capacity generation and resource building.

It is recommended that the WMCA Wellbeing Board consider the future model of how it delivers against its priorities and ambitions. The Board needs to conceptualise the desired model for the Board's way of working. This could be considered as a 'mature' system for the WMCA Wellbeing function. Potential options are:

- The full component of staff are employed and managed by the WMCA
- Staff with the required skills are employed by partner organisations and embedded into the WMCA
- Work is commissioned from partners by the Wellbeing Board in order to fulfil their defined objectives
- The wellbeing function of the WMCA primarily exists to influence the work programmes of other WMCA departments, and partner organisations, and therefore requires a minimal number of WMCA employed staff

19. Implementation, oversight and governance

Oversight and governance of this work programme is provided by the WMCA Wellbeing Board. The board receives regular updates from activity leads, and the overall work of the board is a part of the WMCA governance and scrutiny process.

The Wellbeing Board has representation from the political wellbeing leads of the constituent and non-constituent local authorities. The Board also receives representation from the NHS, Public Health England, local universities, West Midlands Fire Service and West Midlands Police.

To successfully implement this activity plan the Wellbeing Board will need to ensure that there is sufficient capacity to work with partners in delivering the described components. There needs to be adequate resources in terms of time, programme funding, organisational infrastructure, staff numbers and required skills.

Embarking on a dedicated programme of work to build capacity is essential for the sustainability of these ambitions.

20. Working with partners to build capacity and sustainability

- Robust system of forward planning
- Shared objectives and work plans with partners

- Collaborate on joint funding bids
- Advanced preparation for potential opportunities to draw down national funds through devolution, research partnerships and single investment pots

21. Recommendations

The following recommendations are suggested to the Wellbeing Board:

- Adopt a work plan for WMCA Wellbeing Board until 2021
- Develop an implementation programme for the adopted work plan
- Agree upon a dedicated stream of work to generate capacity
- Utilise the Childhood Obesity Action Plan as a pilot approach to working within and across the health and wellbeing system

22. Reviewing the plan

This activity plan is intended to be in place for two years, from 2019 to 2021. It is recommended that progress against the plan is reviewed after one year, in 2020, and is refreshed for 2022.

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WMCA Wellbeing Board

Date	5 April 2019
Report title	Birmingham and Solihull CSTR Test Bed Pilot
Portfolio Lead	Cllr Izzi Seccombe - Wellbeing
Accountable Chief Executive	Sarah Norman – Chief Executive Dudley Council Email sarah.norman@dudley.gov.uk Tel:- (01384) 815201
Accountable Employee	Sean Russell Email s.russell@west-midlands.pnn.police.uk Tel: 07818276259
Report has been considered by	Not applicable

1.0 Recommendation(s) for action or decision:

1.1 The Wellbeing Board is recommended to:

- Note the progress in implementation of the commitment to help implement a programme to increase the number of Mental Health Treatment Requirements and alignment with the national Community Sentence Treatment Requirement programme in the Birmingham and Solihull test bed pilot.

2.0 Purpose

- 2.1 The purpose of this report is to update the Board on the implementation of the programme to increase the use of Mental Health Treatment Requirements (MHTRs) as a sentencing option at the courts in Birmingham and the alignment of this work with the national Community Sentence Treatment Requirement (CSTR) test bed pilot programme.

3.0 Background

- 3.1 The Mental Health Commission recognised that offenders and ex-offenders are at increased risk of poor mental health and people leaving prison are at an increased risk of suicide and self-harm. Persistent offenders are likely to have experienced severe and multiple disadvantage. Poor mental health and/ or substance abuse increases the risk of re-offending, strengthening the case for effective mental health support, including early intervention, family-based approaches and increasing capacity across the criminal justice system to identify and respond to poor mental health. The report also found that based on the conservative assumption that the proportion of crime attributable to mental ill health, including personality disorder and substance misuse, is around 20%, the mental health-related cost of crime in the WMCA comes out at about £0.98 billion a year.
- 3.2 To address this issue the Thrive Action Plan included a commitment to help implement a programme to make more regular and widespread use of the Mental Health Treatment Requirements. The MHTR is a sentencing option which offers offenders with mental health problems the option of a treatment plan that addresses the underlying causes of offending. The focus has been on offenders with primary level mental health needs who would benefit from therapeutic support. Nationally the number of MHTR orders has been low and the Birmingham pilot was established in 2018 to put the services and processes in place to embed this within the courts in Birmingham and provide evidence to support the case for wider roll out of this support.
- 3.3 The first phase of the pilot from January – October 2018 was successful in achieving 28 MHTR orders at court. However, as reported to the January Wellbeing Board meeting one of the key learning points from this phase of the pilot was the need to establish better processes to enable offenders with substance misuse and alcohol problems to receive dual orders as an MHTR can be given jointly with either an Alcohol Treatment Requirement (ATR) or a Drug Rehabilitation Requirement (DRR).

4.0 Phase 2 of the Community Sentence Treatment Requirement Pilot

- 4.1 Based on the partnerships that have been developed during Phase 1 and the increase in the number of MHTR orders achieved NHS England has provided £80k to fund phase 2 of the pilot as part of the national CSTR programme. In recognition of the scale and complexity of the processes at Birmingham Magistrates Court the WMCA Mental Health Commission has contributed an additional £20k to commission the service and the NHSE Health and Justice Service in the West Midlands has allocated a further £20k for mobilisation, communication and training costs. Some of the key developments for Phase 2 are:

- 4.2 A revised service specification has been developed to address the learning from Phase 1 and will be commissioned by Birmingham and Solihull CCG. This will extend the number of offenders eligible to those registered with a GP within this area.
- 4.2 The partnership Steering Group has agreed to align with the national CSTR programme and review the number of MHTR, DRR and ATR orders made at the Birmingham courts. The terms of reference for the group has therefore been updated to include local authority substance misuse commissioners.
- 4.3 The service to carry out the MHTR assessments at court and provide the therapeutic treatment will be commissioned from the Birmingham and Solihull Mental Health Foundation Trust with a commitment to explore future opportunities for partnership working with the 3rd Sector.
- 4.4 Phase 2 of the Birmingham and Solihull testbed pilot will continue to inform the national CSTR programme. This phase of the pilot will commission the assessment process at court for 7 months with the delivery of the treatment for MHTR orders over a 12 month period. There is a continued national focus on the use of community orders as highlighted in the NHS Long Term plan (reported to the last Board meeting) and more recently in a speech by the Secretary of State for Justice:

“Underpinned by evidence of what works to reduce reoffending, we are also increasing the treatment requirements of community orders. Our research shows that nearly 60% of recent offenders who engaged with a community-based alcohol programme did not go on to reoffend in the two years following treatment. Offenders given a community sentence including mental health treatment have also shown to be significantly less likely to reoffend. That’s why we have worked with the Department of Health and Social Care, NHS England and Public Health England to develop a Treatment Requirement Programme which aims to increase the number of community sentences with mental health, drug and alcohol treatment requirements.

The programme is currently being tested in courts across five areas in England – Milton Keynes, Northampton, Birmingham, Plymouth and Sefton. It dictates a new minimum standard of service, with additional training for staff to improve collaboration between the agencies involved – all of which is increasing confidence among sentencers to use them. I look forward to seeing the outcomes of those trials shortly.”

(Speech: Beyond prison, redefining punishment, 18th February 2019)

9.0 Financial Implications

- 9.1 The 18/19 WMCA Mental Health Commission Budget for non-staffing is £130,000. This included £20,000 allocated for the costs associated with the MHTR work stream.

10.0 Legal Implications

- 10.1 There are no immediate legal implications flowing from this report

11.0 Equalities Implications

- 11.1 MHTR orders are a sentencing option available for offenders aged 18 and over. Of the MHTR orders during Phase 1 where the gender was recorded 69% were male and 31% were female. This reflects the national pattern of convictions, in 2017 there were 1.1 million convictions, of which, 27% of convictions were of female offenders and 73% were of male offenders. Further analysis of the proportion of Community Sentence and Suspended Sentence Orders in 2017 shows that male offenders accounted for 85% and female offenders accounted for 15% of these orders. (Statistics on Women and the Criminal Justice System 2019, A Ministry of Justice publication under Section 95 of the Criminal Justice Act 1991).
- 11.2 Due to the small cohort it is difficult to make a valid comparison to national data in relation to other groups with protected characteristics.
- 11.3 The equalities data of offenders given an MHTR order will continue to be recorded and analysed in Phase 2.

12.0 Geographical Area of Report's Implications

- 12.1 During Phase 2 of the CSTR test bed the option for MHTR orders will be extended to offenders who fall within the sentencing guidelines and are assessed as suitable who are registered with a GP within the Birmingham and Solihull CCG area.

13.0 Other Implications

- 13.1 None

14. Schedule of Background Papers

- 14.1 None

Reducing childhood obesity to support healthier lives – an Action Plan for the WMCA Wellbeing Board

Dr Stella Botchway
Consultant in Public Health, WMCA
PHE

An Obesity Action Plan for the WMCA Wellbeing Board

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The WMCA Wellbeing Board has agreed to develop an approach to supporting system change to achieve healthy weight for more residents across the West Midlands.

Along with health and wellbeing partners across the region, the WMCA WM will work with partners to support the reduction in obesity across the West Midlands.

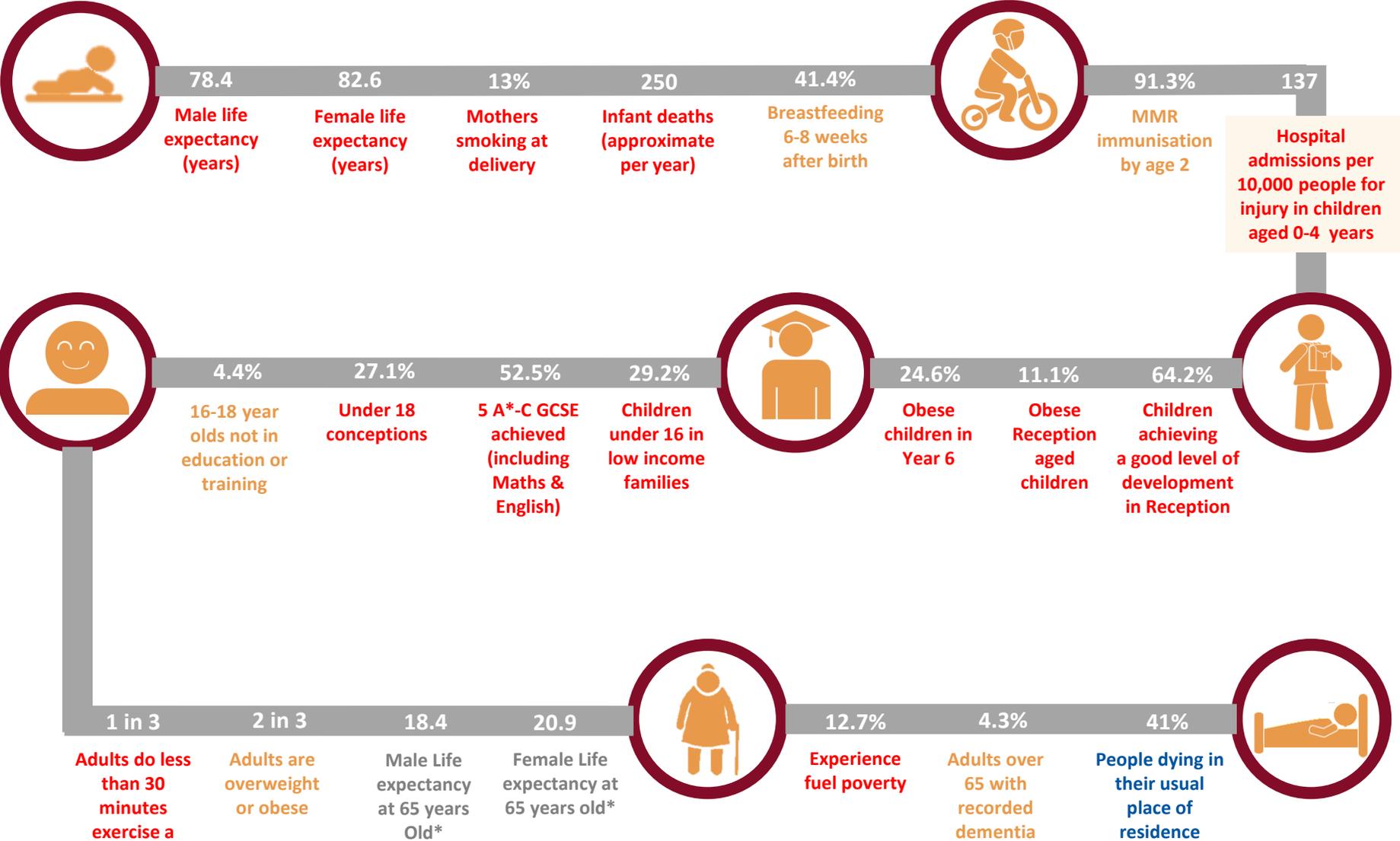
Working with the WMCA Mayor, we have the opportunity to increase the visibility of healthy weight

Why Obesity

Obesity is a cause of poor health and life limiting illnesses.

Obesity has a detrimental effect on the development of children and young people, affecting their mental and physical health.

Life Course Summary



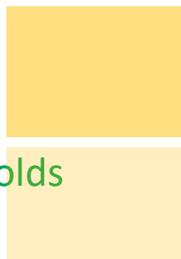
*Data for West Midlands region

What if West Midlands local authorities were the best?

If **all** of our authorities were the top-performing authority in their respective comparator groups, there will be...



2,054 more five year olds ready for school



1,509 fewer 16-18 year olds not in education, employment or training



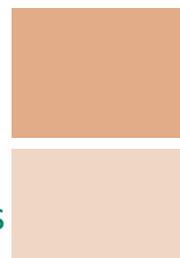
3.6 years additional healthy life expectancy for males (average)



207 more five year olds on free school meals ready for school



3,018 more pupils achieve 5+ good GCSEs inc/I English & Maths



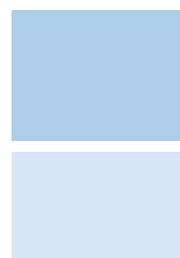
3.2 years additional healthy life expectancy for females (average)



1.1% fewer working days lost (average)



20,316 fewer people on employment and support allowance



181,780 more people who are economically active



Obesity harms children and young people

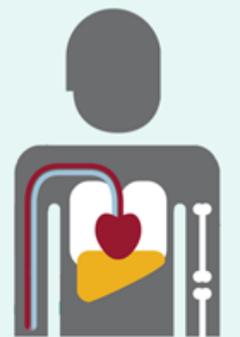


Emotional and
behavioural

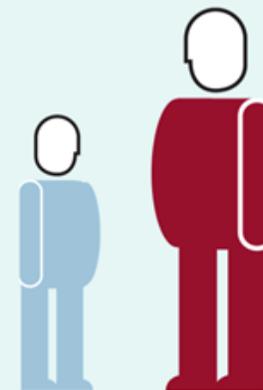
- Stigmatisation
- bullying
- low self-esteem



School absence



- High cholesterol
- high blood pressure
- pre-diabetes
- bone & joint problems
- breathing difficulties



Increased risk of
becoming overweight
adults

Risk of ill-health and
premature mortality in
adult life

Obesity harms adults



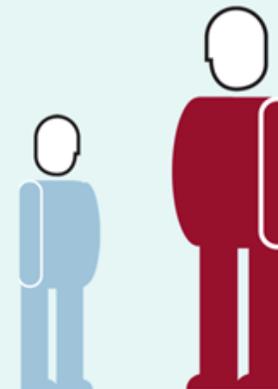
Less likely to be in
employment



Discrimination
and
stigmatisation



Increased risk of
hospitalisation



Obesity reduces life
expectancy by an
average of 3 years

Severe obesity reduces
it by 8-10 years

Obesity across the lifecourse

In 2016 in the West Midlands:

- 24% of 4 & 5 years olds overweight or obese.
- This rose to 37% of 10 & 11 year olds and
- 66% of the adult population

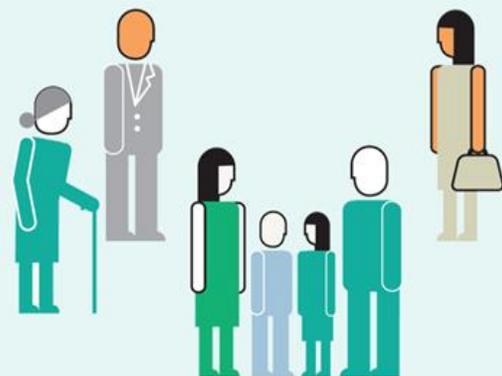
At each age group referenced, levels of obesity in the West Midlands stood above the national average.



Public Health
England

Obesity does not affect all groups equally

Obesity is more common among:



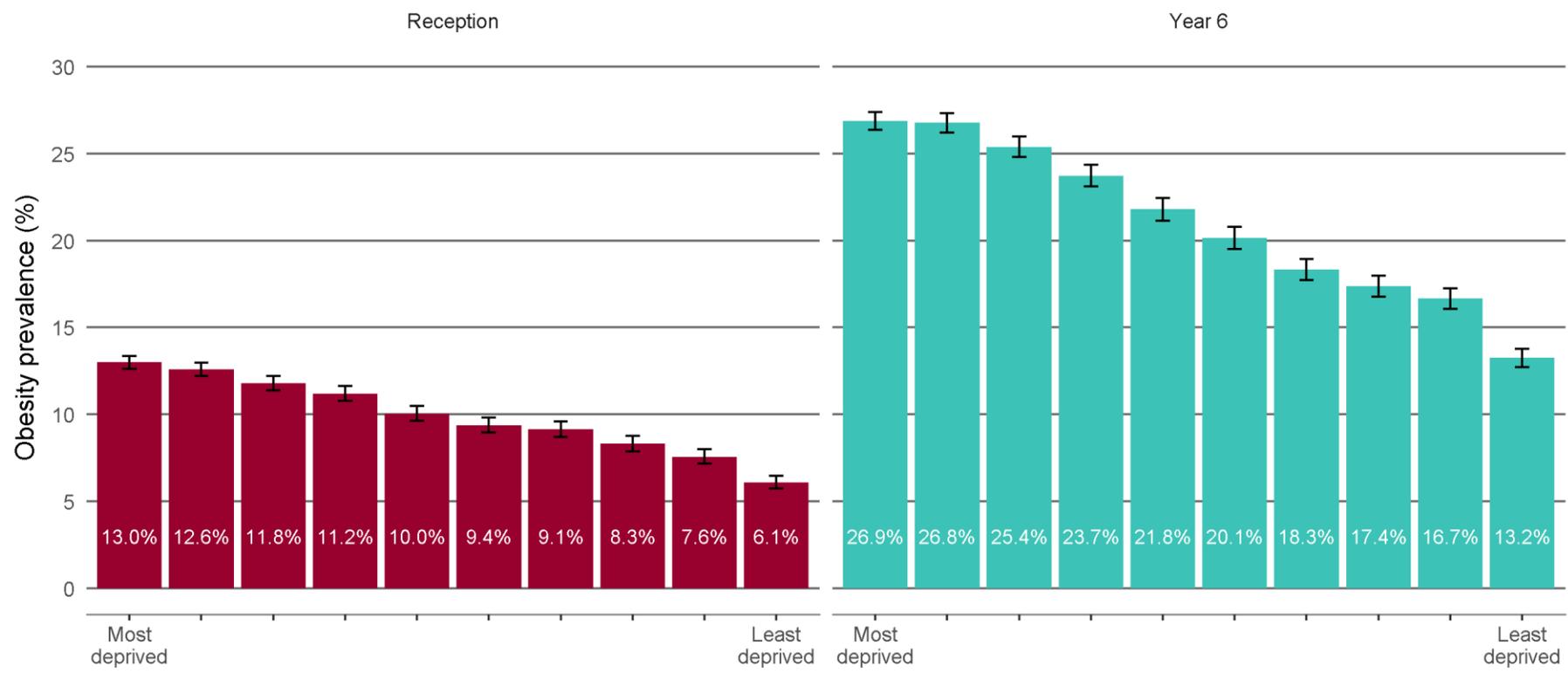
People from more deprived areas

Older age groups

Some black and minority ethnic groups

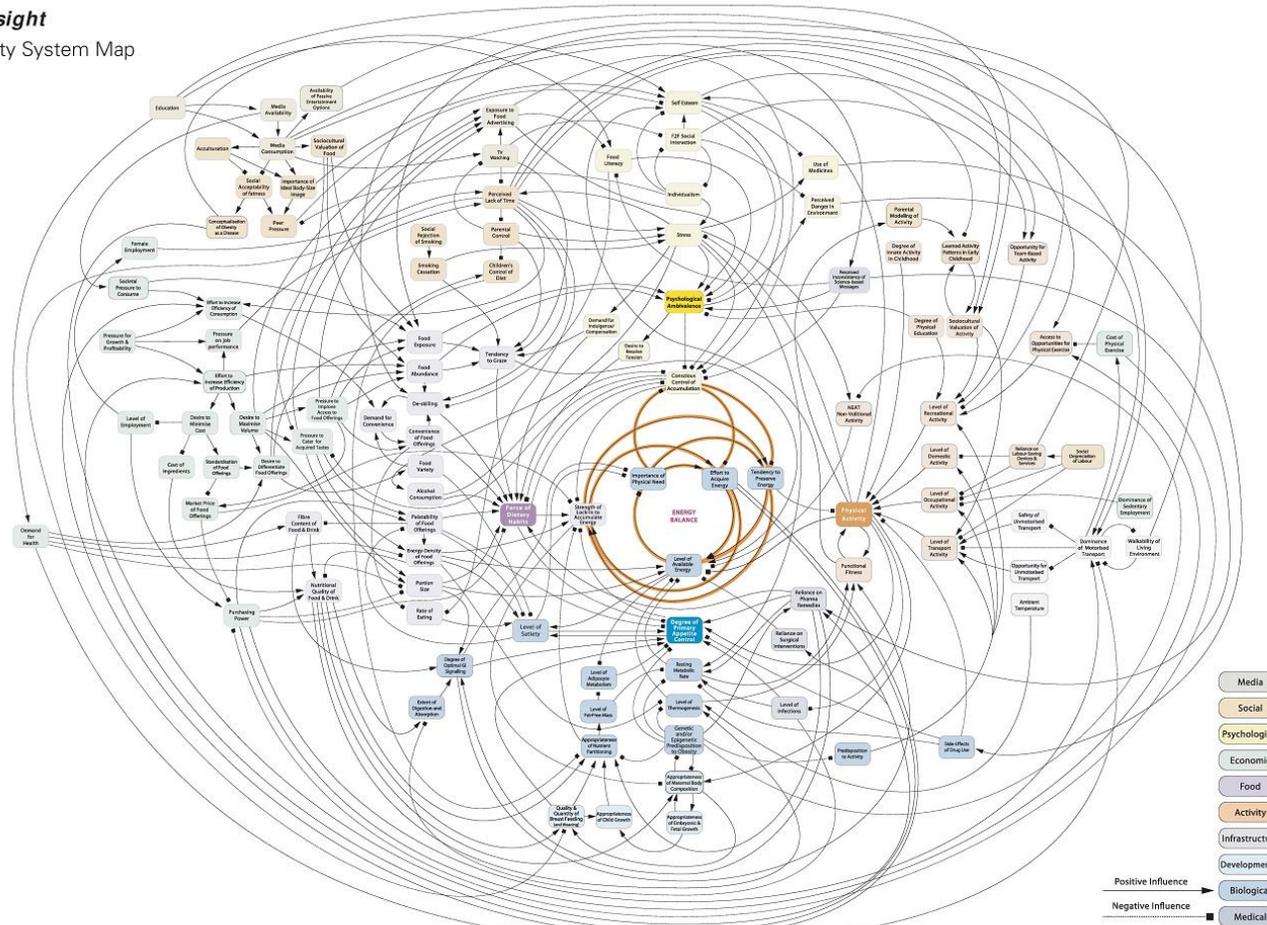
People with disabilities

Childhood Obesity in the West Midlands, 2016



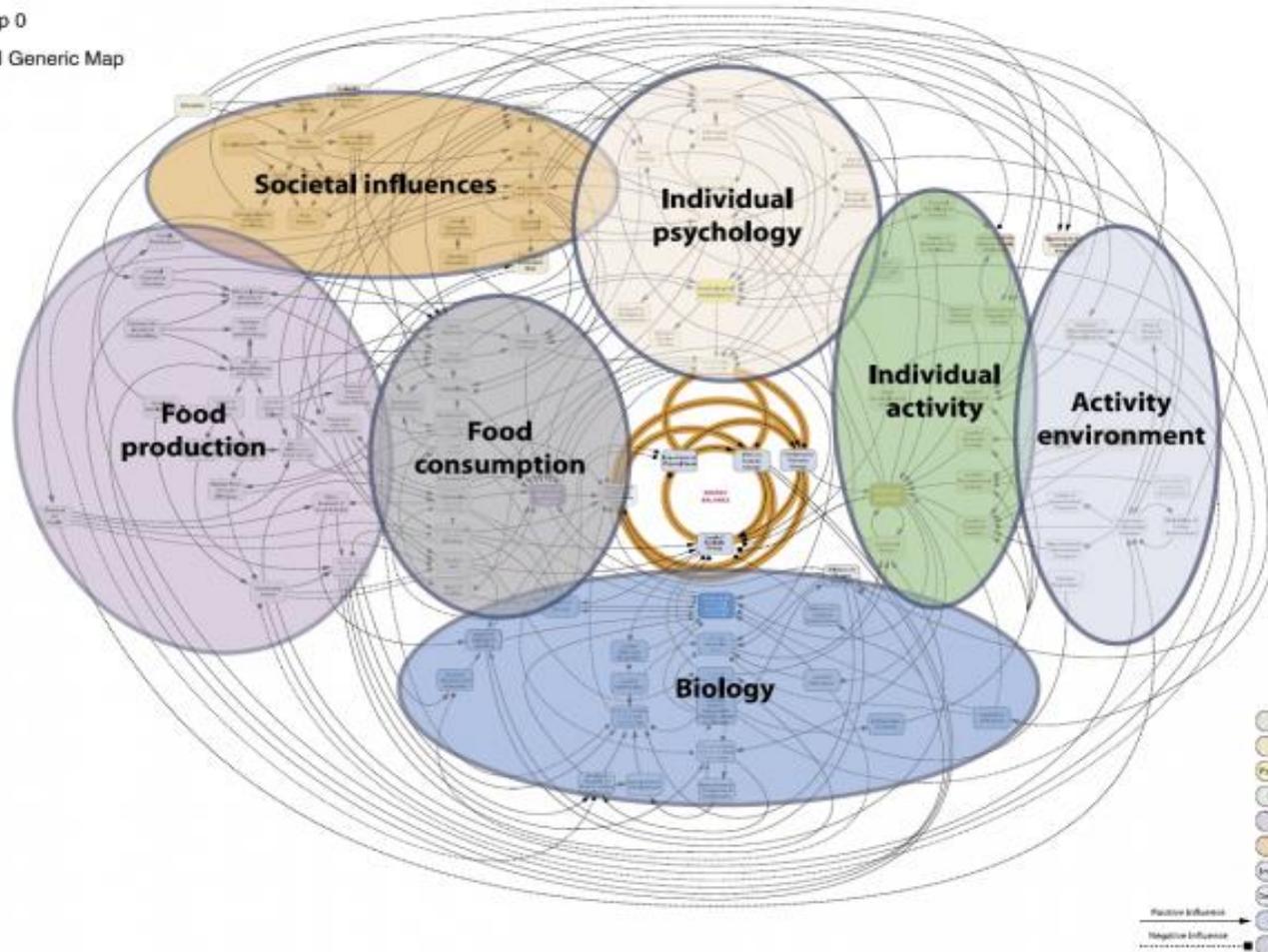
System approach

Foresight
Obesity System Map



Systems Approach

Map 0
Full Generic Map



UK Government Childhood Obesity Action Plan

Action

Make healthier food more easily available

Promote and enable physical activity for children

Improve the customer's power to make health choices

Make every professional contact count

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WMCA Opportunities

Convening power of the Mayor

Major transport regeneration

New houses

Digital and 5G pilots

Skills strategy and devolution

Existing focus on physical activity, mental health and work

Value added from WMCA

Environment
and
Infrastructure

Cross-sector
Convening

Community
resilience

Links to existing WMCA Wellbeing Activity

Thrive West Midlands:

- Workplace Wellbeing Charter

West Midlands on the Move:

- Good Gym
- Black Country Place Based Fund
- Disability Alliance

Links to existing WMCA Wellbeing Activity

Healthy Housing Design Principles

Social Investment Fund

Population Health Intelligence Hub

- Inequalities in healthy life expectancy across the West Midlands

UK Government Childhood Obesity Action Plan

Action	Owner
Introducing a soft drinks industry levy	UK Government
Taking out 20% of sugar in products	UK Government
Supporting innovation to help businesses to make their products healthier	UK Government (and PHE)
Developing a new framework by updating the nutrient profile model	UK Government and PHE
Making healthy options available in the public sector	Public Estate Owners
Continuing to provide support with the cost of healthy food for those who need it most	UK Government, local organisations that support individuals
Helping all children to enjoy an hour of physical activity every day	Local authorities WMCA

UK Government Childhood Obesity Action Plan

Action	Owner
Improving the co-ordination of quality sport and physical activity programmes for schools	Local authorities WMCA
Creating a new healthy rating scheme for primary schools	UK Government
Making school food healthier	Schools
Clearer food labelling	UK Government and food business
Supporting early years settings	Local authorities
Harnessing the best new technology to enable consumer choice	Cross-sector including industry and PHE WMCA
Enabling health professionals to support families	Health care providers and professionals

Engagement with partners for collective action

Findings from engagement with partners and stakeholders:

- WMCA seen as ideally placed to provide leadership and share good practice
- Behaviour change and a whole systems approach is needed
- It will be important to work directly with children and involve schools in any new initiatives
- Currently, there has been little engagement with businesses in addressing childhood obesity

A WMCA approach to reducing childhood obesity

Action	WMCA Potential
Page 57 Helping all children to enjoy an hour of physical activity every day	Social campaigns to promote physical activity Wellbeing built into future housing and communities
Improving the co-ordination of quality sport and physical activity programmes for schools	Provide coordination and leadership to support existing work on school holiday activities provisions
Harnessing the best new technology to enable consumer choice	Use digital technology including 5G, apps and games to incentive active travel and physical activity. Work across sectors to reduce exposure to unhealthy foods Community engagement and consultation

Stage 1

Environment and Infrastructure

- Remove HSSF advertising across the West Midlands transport network
- Healthy Housing Design Principles

Cross-sector convening

- Establish West Midlands Obesity Taskforce
- Multi-partner collaborative group for holiday activities and food provision
- Design of Social Investment Fund

Community Resilience

- The Mayor's West Midlands 3 Million Pound Challenge – promote the 'Daily Mile'
- Black Country Place Based Fund

Stage 2

Environment and Infrastructure

- Extend the HFSS advert ban around schools
- Healthy messages on WM transport network (TfWM Bus and Metro route healthy and active campaign)

Cross-sector convening

- Collaborate across central government and local authorities to maximise the powers of planning regulations
- Work with PHE and digital enterprises to trial new approaches to behaviour change

Community Resilience

- Regional active and healthy campaign – “This West Midlands Can!”
- Young people’s engagement programme

Stage 3

Environment and Infrastructure

- Improve the food environment around schools through partnership with public health and planning teams

Cross-sector convening

- Work with schools, local authorities and PHE to design potential uses of devolved funds dedicated to reducing obesity in young people

Community Resilience

- Regional campaign – “This West Midlands Can!”
- Implementation of the social investment prevention fund

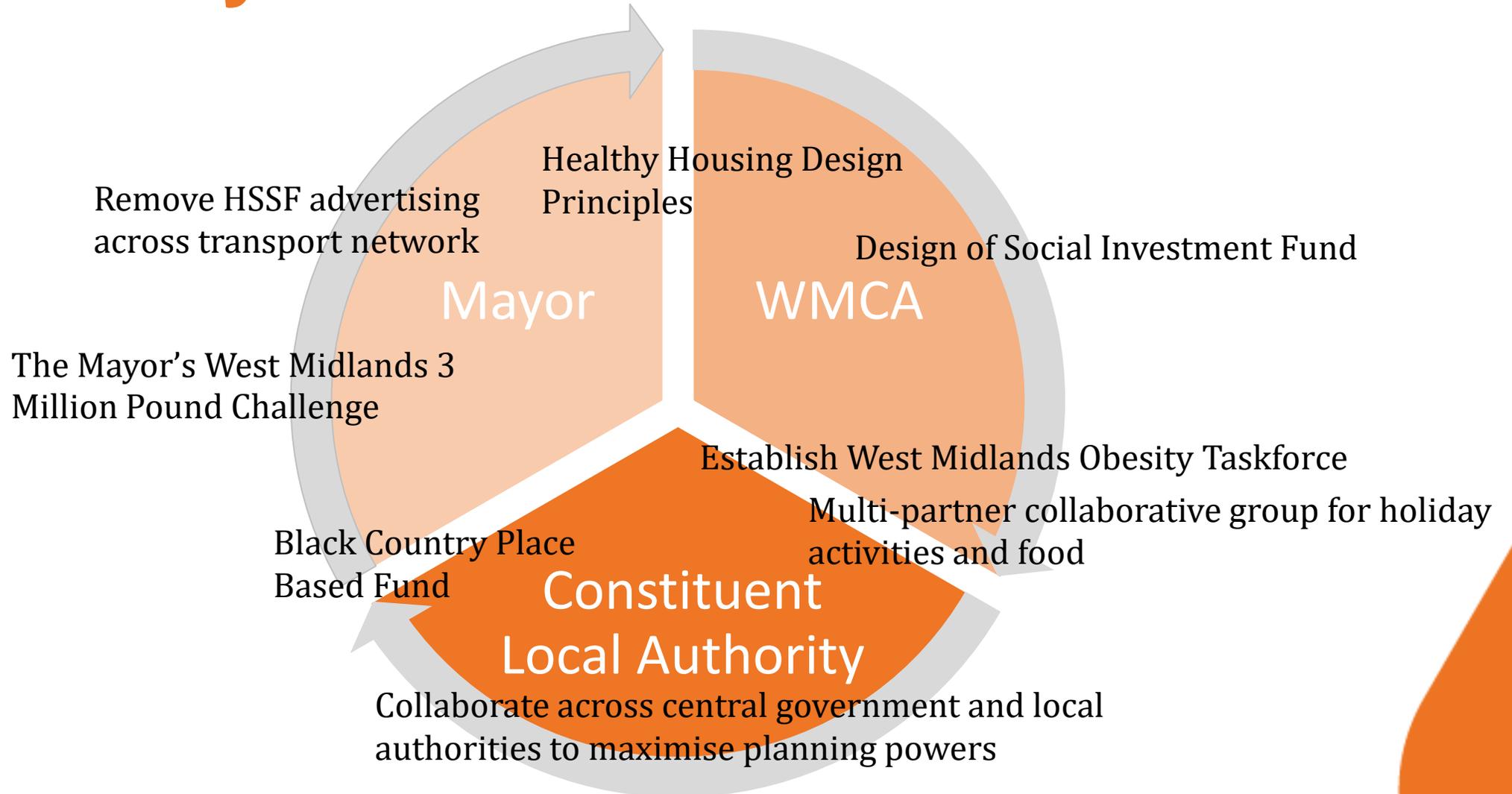
The Mayor's Five Key Actions

1. Junk food adverts off bus tickets
2. Healthy Housing by Design
3. Black Country Placed Based Fund
4. The West Midlands 3 Million Pound Challenge
5. Take to the streets

Whole System Collaboration



Whole System Collaboration



Aiming for success

Any halt or reverse in the trends of obesity rates in West Midlands children would be a major achievement.

The Action Plan has three long term goals:

1. Halt the progression of childhood obesity in the WMCA area
2. Narrow the gap between the West Midlands and the England
3. Reduce inequalities in overweight and obesity rates across the West Midlands

Aiming for success

Page 65



Preventing new cases
of obesity between
Reception and Year 6

...Would **halve** the future rate of obesity in Year 6 children,
preventing almost **5,000** Year 6 children from being obese

Aiming for success



**650 obese
children achieving
a healthier weight**

...Would bring the WMCA level of obese reception age children to national levels

Aiming for success



**Replicating Amsterdam's
success of a 2% childhood
obesity reduction in the most
deprived areas**

...Would reduce the gap between the WMCA's most well off and least well off areas by one third

Aiming for success

Medium term goals:

1. More children taking part in physical activity at school
2. Healthier environments that promote physical activity and healthy food choices
3. Residents are engaged with the issue of obtaining a healthy weight for children, and attitudes towards achieving this are aspirational

Aiming for success

Short term goals:

1. The West Midlands has a systematic approach to reducing childhood obesity that crosses sectors and organisations
2. There are more opportunities for children to take part in physical activity in locations that suit them
3. Children, their families and those that support them are engaged with the creation of environments that influence their weight

Demonstrating Impact

Document and celebrate system change and cross-sector collaboration.

Show evidence of actions to influence the environment towards supporting more physical activity for children and making healthy food choices easier.

Demonstrate engagement with target groups and communities.

Evaluation opportunity

Potential NIHR funding:

“Systems Approaches to Local Influences on Food Choices and Diet”

What are the impacts of changing the local advertising of foods high in saturated fat, salt and/or free sugars (HFSS) foods, or healthier foods such as fruits and vegetable, at a local level?

Deadline for expressions of interest – 30th July 2019

Next steps – Convening the WMCA Obesity Task Force

To convene by the start of the next financial year.

Representation to include:

- PHE
- Local authority DPH champion
- Community paediatrician
- West Midlands Headteachers' Board
- University of Birmingham – health economics
- West Midlands Combined Universities

Next steps – Delivering the first actions

1. Business case for transport network junk food ad removal
2. Finalise Regional Design Charter
3. Community consultation for Black Country Placed Based Fund
4. Audit of Daily Mile and Active Street initiatives across the WMCA
5. “What works” evidence review for regional campaign
6. Progress discussion on digital pilot with PHE and Sport England

WMCA Wellbeing Scrutiny Review

- This draft plan has been reviewed by the wellbeing scrutiny board following a formal presentation in early March 19
- Recommendations have been developed for the Wellbeing board in line with the scrutiny review

The Wellbeing Board Considerations

1. *At a regional level the West Midlands Combined Authority had an opportunity to influence supermarkets in the redistribution of surplus food to provide a more holistic solution for the community.*
2. *WMCA to lobby Central Government to maximise powers under planning rules to enforce a ban of high fat, salt or sugar (HFSS) adverts within the vicinity of schools, and to identify exclusion zones around schools for fast food outlets.*
3. *In addition to working with local schools and local authorities and Public Health England to design potential uses of devolved funds dedicated to reducing obesity in young people, the WMCA should also work with the academies.*
4. *Membership of the WMCA Obesity Task Force to include:*
 1. *Teachers from primary and secondary schools, including academies*
 2. *Practitioners*
 3. *Clinical Commissioning Groups*
5. *The West Midlands Combined Authority to ensure that the composition of the members on the WMCA Obesity Task Force reflects the ethnicity and diversity of the region.*
6. *To explore and better understand the links between obesity and mental health issues.*

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Wellbeing Board

Date	5 April 2019
Report title	West Midlands on the Move Delivery & Impact
Portfolio Lead	Cllr Izzi Seccombe – Wellbeing Cllr Kamran Caan- Physical Activity Champion
Accountable Chief Executive	Sarah Norman – Chief Executive Dudley Council Email sarah.norman@dudley.gov.uk Tel:- (01384) 815201
Accountable Employee	Simon Hall Physical Activity Policy & Delivery Lead Email: simon.hall@wmca.org.uk Tel: 0121 214 7093
Report has been considered by	

Recommendation(s) for action or decision:

The Wellbeing Board is recommended to:

1. Support the significant work and investment into cycling and walking and the joint Transport for West Midlands and West Midlands on the Move Group work to develop an offer to get more people walking and cycling, coming back with details at a later date for approval.
2. Approve the work proposed in this report to strengthen the physical activity governance with Cllr Caan chairing a Cabinet Members for Wellbeing and Active Partnership Chair Steering to ensure that there is an improved flow from the West Midlands on the Move Implementation Group to the Wellbeing Board.
3. Approve the 2019/20 refresh of West Midlands on the Move Strategic Framework setting out next 3 years priorities, reporting to the Wellbeing Board by Autumn 2019.
4. Agree to receive reports on the work priorities set out in this report including the important role that the Wellbeing Board should play in evaluating impact and learning.

- 5. Note the Include Me West Midlands 10 and 11 May launch dates and the Dementia trial launch on 24 May 2019.**
- 6. Approve the continued support for the roll out of social movements such as GoodGym and to support the BBC Radio WM's Let's Get Moving "Mid day mile" campaign.**

1. Purpose

This paper summarises the progress in the impact of delivering priorities and how the secured funding will be used to get more people active. It sets out how the Wellbeing Board will play a key role in evaluating impact and supporting the collaborative leadership approach needed to realise the benefits of working at scale.

2. Background

2.1 In February 2019, the WMCA Board agreed a common approach to walking and cycling which includes:

Themes:	Actions
Leadership & Raising Profile	Appointment of a Cycling and Walking Ambassador Co-ordinate leadership for walking and cycling.
Cycling and Walking Network	Deliver a flagship corridor as identified in the Local Cycling and Walking Infrastructure Plans (LCWIP). Support local authorities to support local schemes Signposting and wayfinding regional strategy.
Promoting and encouraging cycling and walking	Ensuring capital schemes have adequate revenue, expand the walk to school offer, launch the walking and cycling brands, a walking action plan, and expand the Velo Birmingham and Midlands events.

2.2 To deliver these ambitions, in March 2019, WMCA Board approved £17m into prioritised cycling and walking routes and programmes. This takes WM spending on walking and cycling to £10 per head up to April 2021.

2.3 On 22 March 2019, ex BMX and track cycling World Champion Shanaze Read was announced as the West Midlands first Cycling and Walking Ambassador to champion delivery.

2.4 This funding also includes a “Better Streets Fund” working with local communities principally in the most deprived areas to develop small scale capital improvements to the street environment, encouraging community connectivity, improved sense of local pride and wellbeing and access to green spaces.

2.5 This commitment and investment provide an excellent opportunity to influence behaviour change to support modal shift and contribute to reducing levels of physical inactivity and childhood obesity. There is a growing commitment from the West Midlands on the Move Implementation Group to work alongside Transport for West Midlands to work towards a West Midlands cycling and walking offer. This offer will be brought to the Board for approval at its next meeting.

2.6 In February 2019, the WMCA secured £425,000 Sport England to deliver specific West Midlands on the Move actions in the following areas:

Addressing the identified barriers that disabled people and organisations told us preventing them being active by working at scale (Include Me WM Fund).

At the Autumn 2019 Wellbeing Board meeting, members discussed the priorities coming from the WM Mayor's Working Group and to secure Sport England funding, the WMCA has:

- 2.5.1 Secured the yearlong secondment of Mark Fosbrook from Activity Alliance, part funded by Sport England.
 - 2.5.2 Gained officer support to take forward wider actions and secure investment.
 - 2.5.3 Led work with the NHS, Birmingham Vision and British Blind Sport on link worker physical activity training.
 - 2.5.4 Started work with Sport England and UK Active to work together to set out how we will land the leisure operators "Everyone Can" and "IM West Midlands Campaigns.
 - 2.5.5 With the WM Mayor's office continue to promote this work to the Disability Minister and the alignment to the Minister's new Regional Disability Networks.
 - 2.5.6 Discussions with the mental health charity Mind, of landing their "Get Set to Go" West Midlands wide. The WMCA seeks the Wellbeing Board's approval to work with partners to bid for resources to land this programme across the West Midlands getting people with poor mental health doing sport.
 - 2.5.7 Agreed to trial impact an adapted sports programme has supporting people with the early onset of dementia at Juniper Centre, Birmingham in partnership with the Bounce Alzheimer Therapy Foundation and Birmingham & Solihull Mental Health NHS Foundation Trust and launched on the 24 May 2019.
- 2.6 In partnership with Sport England, the WMCA will invest in:
- 2.6.1 The delivery of a "**Include Me WM**" campaign to adopt a more inclusive approach to programme and delivery with the ambition of getting over 50 sport and physical activity operators and providers delivering positive change. This will be launched on the 10 and 11 May 2019.
 - 2.6.2 The funding the delivery of "**IM WM Workforce 5000**" training programme to raise the skills and awareness in mental health and inclusive programming and communications, with approaching 700 health and sport staff including eye care link workers, social prescribing link workers and social workers upskilled in the first year. This will also be launched on 10 and 11 May 2019.
 - 2.6.3 The development of a "**WM Citizens' Network**" connecting disabled people and networks, co-designing services and realising change. This will be established in Summer 2019.
 - 2.6.4 A behaviour change trial project with Transport for the West Midlands to encourage **more disabled people using public transport**. Our consultation told us for many disabled people this was a barrier to getting active. This will start in early Summer 2019.

- 2.7 The Sport England funding will also provide the WMCA with a **Black Country Place based Fund**, to initially develop an in depth understanding of people and communities within the existing Black Country growth corridors. The Black Country continues to have the highest levels of physical inactivity in the West Midlands. Managed by Black Country Consortium Limited, the insight will inform a Black Country social prescribing campaign and the delivery priorities for 2 Community Connectors. This is supported by an evaluation of metrics, behaviour and system influence and will work towards sharing learning with other locality based work in the West Midlands.
- 2.8 In addition, the WMCA will invest in partners to test the impact of **redesigning public spaces and using digital/5G** to encourage behaviour change and develop our understanding customers, learning from practice to consider at how we can deliver at scale. We know there is no single solution to getting people active and the West Midlands on the Move Strategy set out actions on the role digital and 5G and using public spaces could have to stimulate behaviour change. We have been working with Birmingham City University, the Association of Directors of Public Health WM Health and Planning Group and private sector partners such as Arcadis to define the purpose and objectives.
- 2.9. To inform this work, Sport England and the WMCA will jointly invest in strengthening the **Collaborative Leadership** for physical activity to realise the impact in influencing behaviour and system change to get more people active and reduce the inequalities in those who take part. We are seeing progress with the support for the work areas above and in new physical activity strategies such as for Coventry CC, where this is strong alignment to West Midlands on the Move.
- 2.10 Discussions with Cllr Caan, Coventry CC Cabinet Member for Health and Sport & WMCA Political Physical Activity Champion, the WMCA are convening work with partners to look at a multi-layered approach focusing on embedding a clear direction and learning; shared accountability and shaping the values, cultures and behaviours which will inform the way in which we work. This will have a positive impact on strengthening the governance for physical activity and to support this the WMCA seek the permission of the Wellbeing Board for Cllr Caan to bring together a meeting of Local Authority members with the Active Partnership Chairs and officers to take this work forward.
- 2.11 The **evaluative impact** for all of this work will help inform and influence policy and practice moving forward and the WMCA intend to provide a progress report and learning at its future meeting to inform discussions on behaviour and system influence.
- 2.12 As part of our commitment to make **physical activity and active lives a social movement**, 19 and 20 March 2019 saw the GoodGym first runs and launches of its community tasks in Coventry and Solihull respectively for which over 70 people took part. The run included helping a local community projects to clear, clean and improve their sites. The older adult befriending service, which is critical to our funding commitment will be starting in the next couple of months after for instance Goodgym Solihull and Age UK putting in place a Partnership Agreement. This is the third Goodgym in the West Midlands, along with Birmingham and the WMCA is seeking Wellbeing Board approval to work in partnership with Warwickshire CC and part fund

(£12k) its development in Warwick/Leamington Spa, the next area with the highest registered interest, subject to approval of local partnership funding. The WMCA intends to bring an impact report to the Wellbeing Board's Autumn meeting.

- 2.13 As part of the WMCA's Thrive at Work programme, the WMCA has started work with BBC WM (Birmingham, Black Country and Solihull) to look at how businesses could be encouraged to do the "midday mile" which will be launched in June 2019 as part of the BBC WM "**Let's Get Moving Campaign**". This is a beneficial opportunity to encourage change in employers and contribute to meeting the Thrive at Work Commitments. The Wellbeing Board is asked to support this campaign.
- 2.14 Along with strengthening of the governance for physical activity, the implementation and impact of these work streams and partnerships, the City of Culture and the Birmingham Commonwealth Games prompts the WMCA to seek the Wellbeing Board's approval to refresh of "West Midlands on the Move Strategic Framework 2017-2030" setting out headline priorities for the next 3 years. This should be presented to the Wellbeing Board by the Autumn 2019 for approval.

3. Financial Implications

- 3.1 Funding for the delivery of the Sport England partnership and for social movements form part of the 2019/20 budget.
- 3.2 Any additional funding will be externally sourced.

4 Legal Implications

- 4.1 WMCA legal team have approved the acceptance of the Sport England Award and have issued specific Memorandum of Understanding and Grant Agreement documents associated with this funding and the contracting or grant aiding of services.

5. Equalities Implications

- 5.1 An Equality Impact Assessment has been undertaken for WMCA and Sport England funded projects and actions will be taken forward and impact monitored.

6. Inclusive Growth Implications

- 6.1 Data and intelligence has driven the development of targeted inclusivity and geographical areas to reduce levels of inactivity and inequalities in those who take part.

7. Geographical Area of Report's Implications

7.1 Delivery is either West Midlands or in targeted locations as a trial or where evidence suggests impact could be greatest.

8. Other Implications

None

9. Schedule of Background Papers

[WMCA Board Agenda and Minutes February 2019](#) [Agenda 8 Cycling and Walking and Agenda 13 Wellbeing Board](#).

[Activity Alliance 10 Principles \(2014\)](#)

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