

Building Wellness and Wellbeing

A stronger Sandwell– from the Towns to the borough of Sandwell



The need

Social economic challenge of ill health

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graph TD; A[Social economic challenge of ill health] --> B[Shift the system from treatment to Prevention, Self care, condition management and independence]; B --> C[Reduce possible silos between prevention, Voluntary sector, community, primary care, MDTs, social prescribing, condition management, patient information]; C --> D[Target interventions in areas of high prevalence and/or poorest condition management];
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Shift the system from treatment to Prevention, Self care, condition management and independence

Reduce possible silos between prevention, Voluntary sector, community, primary care, MDTs, social prescribing, condition management, patient information

Target interventions in areas of high prevalence and/or poorest condition management

Where we are:

Reports of Silos

People not knowing what is available

Reports of gaps in the system

Increase in ill health and disability

Increase in waiting times

Increase in socioeconomic need

Demand on adult social care

Lack of understanding of pathways and systems

The plan

Vision

Buy in partners

Objectives, accountability and roles

Times scales

- End points
- Outcomes/ measurable impact

Reviews and deep dives of key drivers of poor health management

Vision- Building Wellness and Wellbeing.



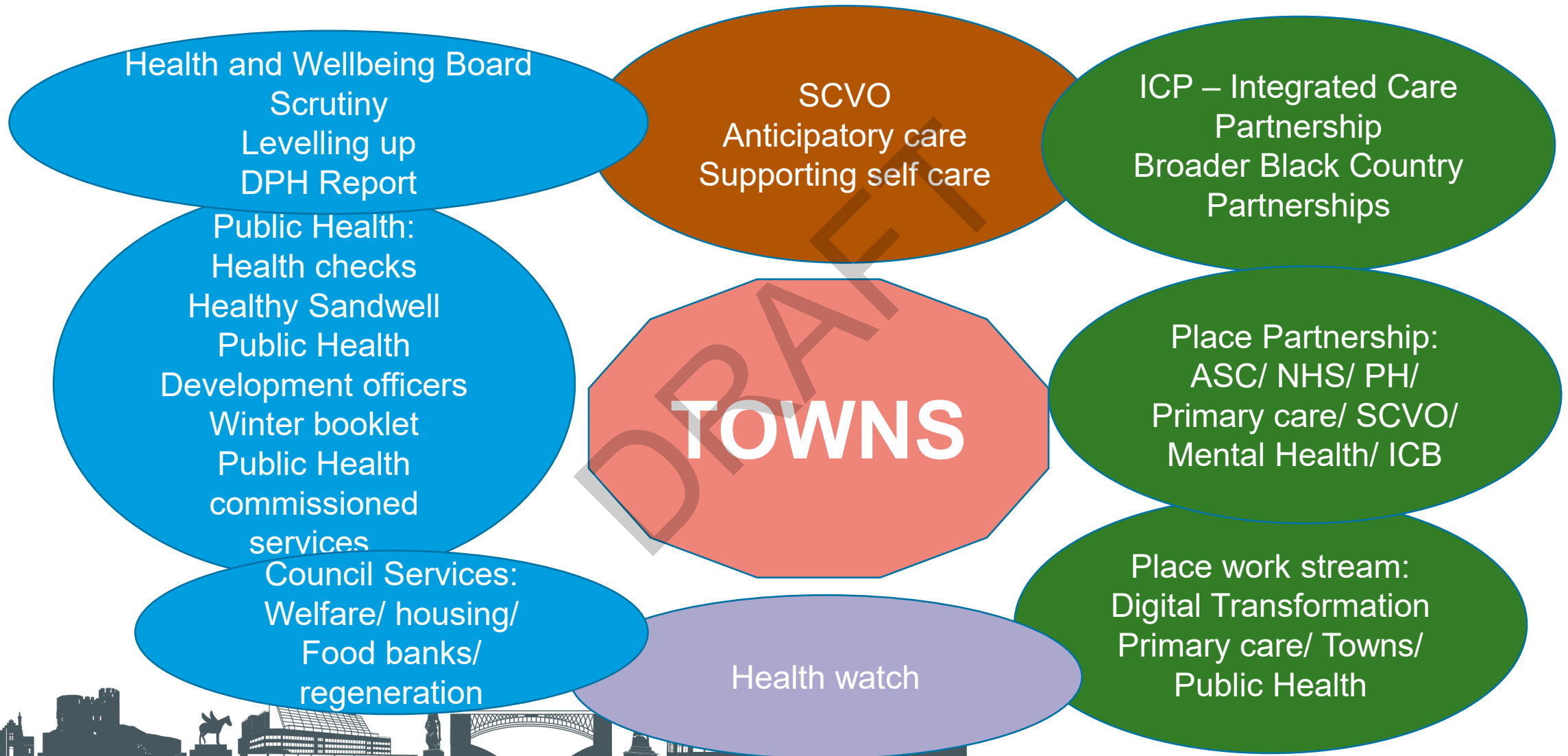
Prevention, Integration,
Person centred.



For a stronger
Sandwell, we need
the principles and
focus of:

Inequalities
Sustainability
Flexibility
outcomes

How this would work in Sandwell



Building the strategies

- Updated HWBB strategy for 2025
- DPH report for 2024 – Building wellness and wellbeing – a stronger Sandwell from the towns to the borough of Sandwell
- Levelling up programme plan
- Towns plans for place based work
- Scrutiny reporting
- Infant mortality
- Prevention needs assessment.
- Various strategies to include such as ASC workforce, mental health etc

LINE OF SIGHT ACROSS ALL STRATEGIES

