Health and Wellbeing Strategy Refresh Title of Report: Report to be The Health and Wellbeing Board considered by: **Date of Meeting:** September 29th 2016 To agree the draft Health and Wellbeing Strategy **Purpose of Report:** Refresh That the Health and Wellbeing Board adopts the Health **Recommended Action:** and Wellbeing Strategy refresh When decisions of the Health and Wellbeing Board impact on the finances or general operation of the Council, recommendations of the Board must be referred up to the Executive for final determination and decision. Will the recommendation require the matter to be referred to the Council's Executive for Yes: X No: final determination? Is this item relevant to equality? No Please tick relevant boxes Yes Does the policy affect service users, employees or the wider community and: • Is it likely to affect people with particular protected characteristics differently? Is it a major policy, significantly affecting how functions are delivered? • Will the policy have a significant impact on how other organisations operate in terms of equality? • Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics? • Does the policy relate to an area with known inequalities? Outcome Where one or more 'Yes' boxes are ticked, the item is relevant to equality. In this instance please give details of how the item impacts upon the equality streams under the executive report section as outlined. **Health and Wellbeing Board Chairman details** Name & Telephone No.: Graham Jones - Tel 07767 690228 E-mail Address: gjones@westberks.gov.uk **Contact Officer Details** Name: Lesley Wyman Head of Public Health and Wellbeing Job Title: Tel. No.: 01635 503434 E-mail Address: lesley.wyman@westberks.gov.uk

Executive Report

1. Introduction

West Berkshire's Health and Wellbeing Board (HWB) was formally established in 2013 and is a partnership that brings together the leaders of the health and social care system in West Berkshire. The Board is required by legislation to deliver specific responsibilities including the production of a Joint Strategic Needs assessment (JSNA), the development of a Health and Wellbeing Strategy (HWS) and to encourage and enable integrated working between health and social care.

- 1.1 The first Health and Wellbeing Strategy (HWS) was developed in 2013 and an updated version was published in early 2015. Although this amended version still has relevant priorities that were agreed from the Joint Strategic Needs Assessment, it has become apparent following an LGA Peer Review in March 2016 that the strategy needs to be refreshed for a number of reasons:
 - To decrease the number of priorities to a more realistic number,
 - To set out a clearer vision of the Health and Wellbeing Board,
 - To demonstrate how the strategic aims and objectives will be achieved,
 - To demonstrate the governance of the Health and Wellbeing Board,
 - To be clearer about how the Board operates as systems leaders,
 - To ensure that the Health and Wellbeing Strategy drives the commissioning of all partners,
 - To integrate the work of the Building Community Together partnership.
 - To fully integrate work around the wider determinants of health into the strategy.
- 1.2 Many Health and Wellbeing Boards across the country are refreshing their HW strategies to ensure that new changes in systems and structures can be incorporated, new priorities addressed as they arise and to include public feedback. The refreshed HWS will be shorter without the inclusion of all the background data that supports the priorities. Relevant links to JSNA will be included throughout the document.

2. Supporting Information

- 2.1 The Health and Wellbeing Board Governance paper is interlinked with the HWS refresh, demonstrating how the Peer Review recommendations are being addressed. These two papers need to be read and understood together.
- 2.2 Peer review recommendations in relation to the HWS:
 - HWS needs to have clearer outcomes and show how the Board will drive change and act as systems leaders in implementation of the strategy's priorities

- HWS needs to demonstrate how the HWB will hold partners to account for delivering the outcomes.
- Public engagement in the strategy should be integrated across the system and priorities agreed by the public.
- HWS needs to drive health and social care integration
- 2.3 There are options regarding membership of the HWB outlined within the Governance paper. The inclusion of other statutory partners will enable the integration of the wider determinants priorities which have been the focus of meetings and workshops over the past year.
- 2.4 The governance structure showing where the HWB is positioned in the health and wellbeing system, with the inclusion of Boards and groups at the STP, County and Berkshire West level are helpful in understand the health and wellbeing agendas and priorities influencing the HWB. In addition the development of new subgroups, as well as the inclusion of existing groups/partnerships will enable the Board to be clear about how work across the priorities is progressing. A clear and comprehensive reporting system which is currently missing from the strategy can be demonstrated.

3. The Priorities

3.1 The 11 priorities within the current HWS that came out of the JSNA have not changed significantly. There was a paper to the HWB in January 2016 that suggested that the priorities remain the same however the HWB would focus on 2 priority areas in 2016/17 these being mental health and wellbeing for children and young people and older people living independently (includes long term conditions, falls prevention and dementia). The focus for 2017/18 would be prevention of cardiovascular disease and cancer and carers health and wellbeing. Although this approach was agreed there was acknowledgement that for 2016/17 the priority areas were already being addressed in other parts of the system, so it would be difficult for the HWB to add value or lead.

4. HWS workshop

- 4.1 A HWS workshop was held on April 28th for Board members and other key stakeholders. The following issues were discussed:
- 4.2 The process of being involved in the LGA Peer Review and the recommendations
- 4.3 The setting of new priorities
- 4.4 How the Brilliant West Berkshire approach can be incorporated into the HWS and Board
- 4.5 How tackling inequalities in health can be better incorporated into the HWS and Board
- 4.6 How addressing the wider determinants of health can be incorporated into the HWS and Board.

- 4.7 As a result it was agreed that the Peer Review recommendations could be achieved through further Board development work and a HWS refresh; that the number and scope of priorities should be more focused and take into account work in the system already addressing the priorities and lastly that integration, building community resilience, tackling inequalities in health and prevention should be cross cutting themes within the refreshed strategy.
- 4.8 Taking on board the suggestions and comments received at this development workshop and following advice and guidance from Kay Burkett of the LGA, the HWS has been refreshed utilising ideas and approaches from a number of HWSs across the country including Leeds, Suffolk, Stoke-on-Trent, Bristol City, Essex, Ealing, Wiltshire, Plymouth, Durham and Bedford.
- 4.9 There is a recommendation that the HWB produces an Annual Report each year to demonstrate how it has achieved against priorities throughout the year. In this way the public will be fully informed of progress in each of the priorities.

5. Equalities

5.1 This item is not relevant to equality.

Appendices

Appendix A - Draft Health and Wellbeing Strategy Appendix B - Governance structure

Consultees

Nick Carter, CE West Berkshire Council Andrew Sharp, CE, West Berkshire, Healthwatch

Local Stakeholders: West Berkshire Health and Wellbeing Steering Grroup

Officers Consulted:

Other: