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# Delivery Plan Review

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**Report being considered by:** Health and Wellbeing Board

**On:** 13 July 2023

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**Report Sponsor:** April Peberdy

**Item for:** Discussion

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## 1. Purpose of the Report

1.1 The Berkshire West Joint Local Health and Wellbeing Strategy (JLHWS) was adopted in December 2021. This sets out five priorities:

- (1) Reduce the differences in health between different groups of people.
- (2) Support individuals at high risk of bad health outcomes to live healthy lives.
- (3) Help children and families in early years.
- (4) Promote good mental health and wellbeing for all children and young people.
- (5) Promote good mental health and wellbeing for all adults.

1.2 Each of the three Health and Wellbeing Boards within the Berkshire West 'Place' has developed its own Delivery Plan to address these shared priorities, tailoring the approach to their particular needs and circumstances.

1.3 This report provides an update on how the Delivery Plan for West Berkshire is being reviewed and updated, and how the Sub-Groups of the Health and Wellbeing Board are evolving to better align with the priorities of the JLHWS and the associated Delivery Plan.

## 2. Recommendation(s)

2.1 The Health and Wellbeing Board is asked to:

- (1) note the report and the progress made to date;
- (2) endorse the approach proposed by the Health and Wellbeing Board Steering Group for reviewing the JLHWS Delivery Plan and reporting progress through the rolling programme of Progress Reports for each of the JLHWS priorities.

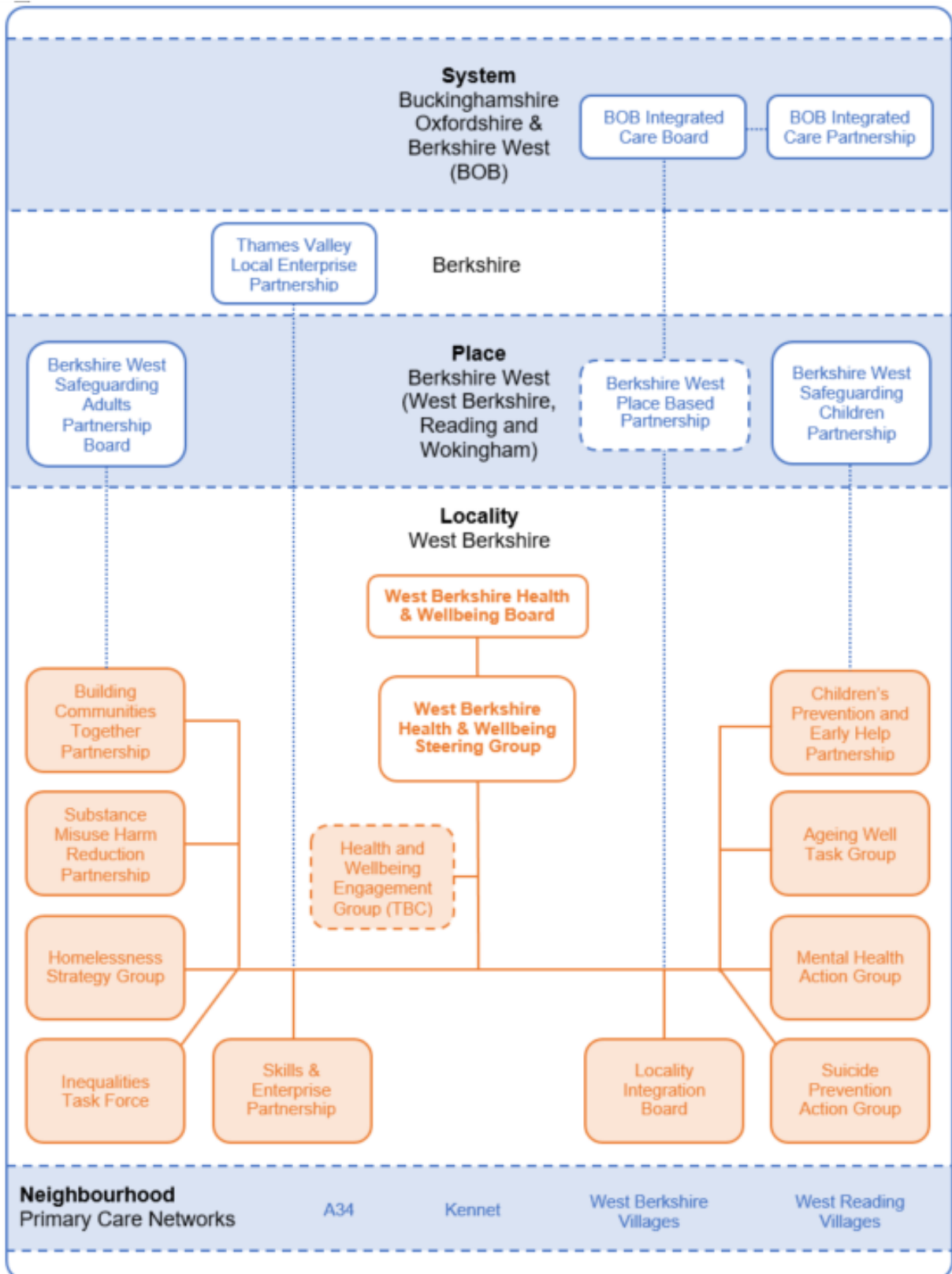
## 3. Executive Summary

3.1 This report describes the work being undertaken by the Health and Wellbeing Board Steering Group to review the JLHWS Delivery Plan and to review the structure of the Board's Sub-Groups in order to better align with the JLHWS priorities.

## 4. Supporting Information

- 4.1 The Delivery Plan was developed in the second half of 2021. Not only was this during the latter stages of the Covid pandemic, but it was also a period of significant change within the NHS in anticipation of the requirements of the Health and Care Act 2022. This included the transition from Clinical Commissioning Groups (CCGs) to new structures and organisations at ‘System’ and ‘Place’ levels. This transformation is still underway, with arrangements for Place Based Partnerships still to be finalised. However, with greater clarity regarding the new arrangements, and the respective roles and responsibilities of the individual bodies, the Health and Wellbeing Board Steering Group considers that this is an appropriate time to review the Delivery Plan.
- 4.2 Good progress has been made with implementation of many of the Delivery Plan actions, and a significant number of actions were completed by the end of the 2022/23 financial year. In some cases, needs or circumstances have changed since the Delivery Plan was first developed, so some actions may no longer be relevant. In other cases, it may not be possible to deliver the actions as originally planned due changes in the availability of funding or resources. Also, some actions are considered to be ‘business as usual’ activities that are delivered and monitored through existing service plans / business plans with no need for additional support or oversight through the Health and Wellbeing Board. As a result, some actions may need to be deleted or replaced with new actions. The actions currently earmarked for deletion are highlighted in Appendix B.
- 4.3 The original Delivery Plan consisted of over 150 individual actions, which were allocated to over 30 different bodies or organisations. In some cases, these were not allocated to the correct owners, but most have since been reassigned. Some actions were assigned to organisations that operate across areas wider than West Berkshire, such as the Berkshire Healthcare NHS Foundation Trust. Also, a significant number of actions were initially allocated to the Berkshire West CCG, whose functions have since transferred to the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (ICB). Where appropriate, actions are being referred upwards for incorporation into delivery plans at ‘Place’ or ‘System’ levels – these are summarised in Appendix C.
- 4.4 Given that the Strategy has a 10 year lifespan, additional actions are now required to build on the early progress that has been made and to respond to emerging issues, such as those identified in the health inequalities needs assessments. Work is still progressing to develop these new actions, but some initial suggestions are shown in Appendix A. As a result of the changes identified above, some of the priorities have relatively few actions remaining. However, work will continue in the coming months to identify additional actions and work streams to deliver these priorities. These will be reported through the rolling programme of Priority Progress Reports. This approach is consistent with the original intention for the Delivery Plan to be a living document.
- 4.5 In parallel with the work being undertaken to review the Delivery Plan, the Steering Group is also considering how the Sub-Groups can be better structured. The existing set of Sub-Groups are illustrated in Figure 4.1 below. These were originally established to deliver the priorities of the previous Health and Wellbeing Strategy. A key challenge will be to ensure that where Sub-Groups have proved effective in addressing particular health issues, this work is not lost as part of any restructure.

Figure 4.1 – Health and Wellbeing Board Governance Structure



4.6 It should be noted that the Health and Wellbeing Engagement Group has been dormant for some time. This was previously chaired by a CCG representative, but a replacement could not be identified after she had left, and so meetings lapsed. Given that engagement is one of the core principles of the JLHWS, the Steering Group is actively considering options for how this Sub-Group could be reconvened, with an updated terms of reference that is more closely aligned to the strategic priorities.

## 5. Options Considered

The Board could choose not to update the Delivery Plan. However, this would not respond to changes that have occurred since the Delivery Plan was originally developed in 2021, and it would limit the progress that could be made towards achieving the JLHWS priorities in the coming years.

## 6. Proposal(s)

It is proposed that the Steering Group should continue to update the Delivery Plan over the coming months, and that the Board should be kept updated through the rolling programme of Progress Reports for each of the JLHWS priorities.

## 7. Conclusion(s)

The approach set out in Section 4 above will ensure that the Delivery Plan remains up to date and responsive to changes that have occurred since it was originally developed in 2021. It will also ensure that the Sub-Groups are structured appropriately so they are more closely aligned to the priorities set out in the JLHWS.

## 8. Consultation and Engagement

The Health and Wellbeing Board Steering Group has been consulted on this report.

## 9. Appendices

Appendix A – Updated Delivery Plan (to follow)

Appendix B – Completed Actions and Actions Proposed for Deletion (to follow)

Appendix C – Actions Proposed for Escalation to Place or System Level (to follow)

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### Background Papers:

[Berkshire West Health & Wellbeing Strategy 2021-2030](#)

[Health & Wellbeing Strategy - West Berkshire Delivery Plan \(as adopted, December 2021\)](#)

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### Health and Wellbeing Priorities Supported:

The proposals will support the following Health and Wellbeing Strategy priorities:

- Reduce the differences in health between different groups of people
- Support individuals at high risk of bad health outcomes to live healthy lives
- Help families and young children in early years
- Promote good mental health and wellbeing for all children and young people
- Promote good mental health and wellbeing for all adults

The proposals contained in this report will support the above Health and Wellbeing Strategy priorities by ensuring that the Delivery Plan is kept up to date.

# Appendix A