

HEALTH AND WELLBEING BOARD

Date: Thursday, 30 January 2014

Report Title: Annual Refresh of the 2012 Health & Wellbeing Strategy

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1. SUMMARY

The current Health & Wellbeing strategy was developed as a three year strategy 2012 – 15 this report provides the Health & Wellbeing Board (HWB) with an update on the 2013/14 annual refresh. Attached to this report (as appendix 1) is the summary of the progress made during the last two years on the nine priorities. It is planned that the main strategy document be updated to reflect the 2012 Joint Strategic Needs Assessment (JSNA) and changes that are being made in relation to health and social care integration and this will be circulated to HWB members prior to sign off at the March HWB.

During 2014/15 the HWB will receive an update on the current priorities at each meeting using the summary document. Plans for the development of the next three year strategy are also outlined in section 4.4.

2. REASON FOR REPORT GOING TO HEALTH & WELLBEING BOARD

This report provides the HWB with an opportunity to review the current strategy and begins the development of the future strategy. The strategy will underpin the boards work programme and communication and engagement strategy (both covered in items on this agenda).

3. SPECIFIC ACTION REQUIRED BY HEALTH & WELLBEING BOARD AND ITS CONSITUTENT PARTNER ORGANISATIONS

The HWB are asked to:

- note the contents of this report – with particular reference to 2012/14 achievements and 2014/15 planned actions (appendix 1);
 - agree the timescales for completing this refresh (section 4.3);
 - comment on areas they think need to be highlighted within this refresh and agree the monitoring reports for the nine current priorities;
 - comment and endorse the suggested approach for development of the next strategy (section 4.4)
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Health & Wellbeing Strategy

1. Related priority: Diabetes, Hypertension, Obesity, Anxiety & Depression, Children with Complex Needs and Disabilities, Children with Mental & Emotional Health Problems, Children Referred to Children's Social Care, Dementia, Supporting Carers

Financial

- | | |
|--|--------------------------------|
| 1. Cost of proposal: | existing budgets and resources |
| 2. Ongoing costs: | existing budgets and resources |
| 3. Total savings (if applicable): | not applicable |
| 4. Budget host organisation: | not applicable |
| 5. Source of funding: | existing budgets and resources |
| 6. Beneficiary/beneficiaries of any savings: | not applicable |
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Supporting Public Health Outcome Indicator(s)

Where appropriate the nine priorities are linked back to the relevant Public Health Outcome Indicators.

4. COMMENTARY

- 4.1 The current Health & Wellbeing strategy commenced in 2012 for three years; it was agreed as part of the development that there would be an annual refresh of the data and priorities to reflect the latest evidence from the JSNA and monitoring reports. It is also the opportunity to outline current drivers especially as the Health and Social Care areas change and become more fully integrated.
- 4.2 Appendix 1 provides the HWB with an update on each of the nine priorities with summary of the main achievements over the last two years, a red, amber and green rating (RAG) based on the progress against the three year outcomes and finally a summary of the planned actions for 2014/15. This is currently being finalised with key partners including LBB, Bromley CCG and third sector partners. It is planned that during 2014/15 all nine priorities will be monitored and reported to the HWB during the course of the year.
- 4.3 The planned developed in 2012 outlined the proposed changes in both health and social care organisations, these changes have now been implemented in part and in relation to further integration these plans have become more developed locally. The evidence base of the 2012 version of the strategy has also been updated to reflect the 2012 JSNA and other more up to date sources. This document will be finalised and circulated for sign off at the HWB March meeting, with February being used to collate feedback and comments on the content of this refreshed strategy.
- 4.4 It is planned that work on the 2015 – 18 Health and Wellbeing strategy will begin as soon as the 2013 JSNA is presented for sign off by the HWB (September 2014). A facilitated HWB workshop where the potential areas to be considered as priorities in the future strategy, the draft strategy will be developed for engagement events early in 2015 for launching and implementation from April 2015.

5. LEGAL IMPLICATIONS

Duties and powers under the 2007 Act (as amended by the Act)⁴

5.1 Who is responsible for Joint Health & Wellbeing Strategies (JHWS)?

Local Authorities and Clinical Commissioning Groups (CCGs) have equal and joint duties to prepare JHWS, through the health and wellbeing board. The responsibility falls on the health and wellbeing board as a whole and so success will depend upon all members working together throughout the process. Success will not be achieved if a few members of the board assume ownership, or conversely do not bring their area of expertise and knowledge to the process. As the duties apply across the health and wellbeing board as a whole, boards will need to discuss and agree their own arrangements for signing off the process and outputs. What is important is that the duties are discharged by the board as a whole.

5.2 What are Joint Health and Wellbeing Strategies (JHWS)?

JHWSs are strategies for meeting the needs identified in JSNAs²¹. As with JSNAs, they are produced by health and wellbeing boards²², are unique to each local area, and there is no mandated standard format. In preparing JHWSs, health and wellbeing boards must have regard to the Secretary of State's mandate to the NHS CB²⁴ which sets out the Government's priorities for the NHS.

They should explain what priorities the health and wellbeing board has set in order to tackle the needs identified in their JSNAs. Again, it would not be appropriate to specify or dictate issues which should be prioritised. This is not about taking action on everything at once, but about setting a small number of key strategic priorities for action, that will make a real impact on people’s lives. JHWSs should translate JSNA findings into clear outcomes the board wants to achieve, which will inform local commissioning – leading to locally led initiatives that meet those outcomes and address the needs.

The importance of JSNA and JHWS lies in how they are used locally – as well as identifying the local community’s needs, they also provide a significant opportunity to tackle and make a real impact on extreme inequalities experienced by some vulnerable and seldom heard groups, and to integrate local services around their users.

Non-Applicable Sections:	Financial/Governance, Board and Partnership Arrangements
Background Documents: (Access via Contact Officer)	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/223842/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-2013.pdf