

Health Scrutiny Panel

20 September 2018

Report title	Draft Joint Health and Wellbeing Strategy	
Cabinet member with lead responsibility	Councillor Hazel Malcolm Public Health and Wellbeing	
Wards affected	All	
Accountable director	Mark Taylor, Strategic Director	
Originating service	Public Health	
Accountable employee(s)	John Denley	Director of Public Health
	Tel	01902 550148
	Email	John.denley@wolverhampton.gov.uk
Report to be/has been considered by	Strategic Executive Board	26 June 2018
	Health and Wellbeing Board	11 July 2018

Recommendation(s) for action or decision:

The Health Scrutiny Panel is recommended to:

1. Support the Health and Wellbeing Board's approach to the strategy, and to comment on the plans for consultation and involving the public and patients in the development of the priority workstreams going forward.

1.0 Purpose

- 1.1 To present a draft of the new Joint Health and Wellbeing Strategy 2018 – 2023, as endorsed by the Health and Wellbeing Board.
- 1.2 To present plans to consult on the document and to involve residents and patients in the priority workstreams identified.

2.0 Background

- 2.1 Health and Wellbeing Boards (HWB) are a formal committee of the local authority charged with promoting greater integration and partnership between bodies from the NHS, public health and local government. They have a statutory duty, with Clinical Commissioning Groups (CCGs), to produce a Joint Strategic Needs Assessment (JSNA) and a Joint Health and Wellbeing Strategy (JHWS) for their local population.
- 2.2 The priorities for the new strategy were based on intelligence from the JSNA, local and national strategies, Board member priorities, and insight from Healthwatch. It was felt that if the HWB priorities were anchored back to the City 2030 vision and the Public Health vision, this would enable the Board to be free to drive the health agenda from a city wide perspective using a thematic approach. The HWB needs to be able to respond quickly to emerging needs, and a narrow focus on Joint Health and Wellbeing strategy priorities would hinder this, so the priority areas have been deliberately described at a high level; the detail of work programmes and indicators would be agreed in sub-groups.
- 2.3 The purpose of the Board, through its strategy, is to provide collective systems leadership across the health and care economy. However, the Board would set itself up to fail if it tried to address the full breadth of health and wellbeing (much of which would continue as business as usual without the Strategy or Board). The strategy focuses on areas in which the Board can add value and unlock the potential for transformational change through system leadership.

3.0 Consultation and Public Involvement plans

- 3.1 Public and patient involvement should be integral to the JSNA and JHWS process; it is proposed that the JHWS process should provide a useful platform to engage with the public in a debate about the big issues we are facing, such as integrating health and social care. As well as formal consultation, it is recommended that public involvement should be built into each ongoing theme of the strategy moving forwards.
- 3.2 An online survey has been launched to seek feedback from residents on the approach to strategy development, the priority themes, and how to involve residents and patients in the workstreams going forward. This is in addition to engagement and consultation that has already taken place for some of the themes.
- 3.3 In addition, in order to boost the quantity and quality of feedback, further in-depth research has been commissioned to expand on the views around the priority themes, to find out what level of awareness there is in the community for these issues, and to explore the best ways to get more people involved in the development of the workstreams.

4.0 Questions for Scrutiny to consider

- 4.1 Are there any suggestions to improve the approach to consultation and involvement?

4.2 What can Panel members do to help to raise the profile of the consultation and ensure that we receive as much feedback as possible?

5.0 Financial implications

5.1 There are no financial implications associated with this report. [MI/19062018/Q]

6.0 Legal implications

6.1 There are no legal implications associated with this report. [RB/15062018/D]

7.0 Equalities implications

7.1 A reduction in health inequalities is an overarching aim of the Board. Equalities impact assessments will be carried out as appropriate for each priority area during the process of developing the associated workplans.

8.0 Environmental implications

8.1 There are no environmental implications associated with this report.

9.0 Human resources implications

9.1 There are no human resources implications associated with this report.

10.0 Corporate landlord implications

10.1 There are no corporate landlord implications.

11.0 Schedule of background papers

11.1 Draft Joint Health and Wellbeing Strategy attached.