

**REPORT TO:** Health Policy & Performance Board (HPPB)  
**DATE:** 10 January 2012  
**REPORTING OFFICER:** Strategic Director, Communities  
**PORTFOLIO:** Health and Adults  
**SUBJECT:** Health and Wellbeing Strategy  
**WARD(S)** Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 The purpose of this report is to provide a briefing to the Board on the requirement to produce a local Joint Health and Wellbeing Strategy and the process involved.

2.0 **RECOMMENDATION: That the Board note contents of the report.**

3.0 **SUPPORTING INFORMATION**

**Background**

3.1 The NHS White Paper *Equity and Excellence: Liberating the NHS* set out three main functions for the new Health and Wellbeing (HWB) Boards as detailed below:

- To assess the needs of the local population and lead statutory Joint Strategic Needs Assessments.
- Promote integration and partnership across areas, including through promoting joined up commissioning plans across the NHS, Social Care and Public Health and to publish a **Joint Health and Wellbeing Strategy**
- To support joint commissioning and pooled budget arrangements where all parties agree this makes sense.

3.2 The second of these functions is to produce a Joint Health and Wellbeing Strategy. The strategy should provide the overarching framework within which commissioning plans for the NHS, Social Care, Public Health and other services which the Health and Wellbeing Board agrees are relevant, are developed.

3.3 **Requirements**

The HWB Board will be required to produce the strategy as part of its statutory responsibilities.

*'The responsible local authority and each of its partner commissioning consortia must prepare a strategy for meeting the needs included in the assessment by the exercise of functions of the authority, the national Health Service Commissioning Board or the consortia'* (A Joint Health and Wellbeing Strategy - Health & Social Care Bill ).

- 3.4 In addition, HWB Boards will be able to consider whether the commissioning arrangements for social care, public health and the NHS, developed by the local authority and Clinical Commissioning Group respectively, are in line with the JHWB Strategy; and if not, the HWB Board will be able to write formally to the NHS Commissioning Board & the Clinical Commissioning Group or Local Authority leadership.
- 3.5 When the Clinical Commissioning Group send their commissioning plans to the NHS Commissioning Board, they will be under an obligation to state whether the HWB agrees that their plans have held due regard to the JHWS & send a copy of their plans to the HWB at the same time.
- 3.6 It will therefore be very important to ensure 'ownership' of the Strategy by all parties from the outset and have good joint working arrangements in place to agree priorities at an early stage.

### 3.7 **Production of the Strategy**

In developing the strategy a range of views will need to be gathered from a wide range of partner organisations especially given the scope and remit of the strategy. It will also be essential to develop ways of involving members of the public in the preparation of the strategy.

- 3.8 Linked to the above, Members will also have a vital role to play in helping to develop the strategy in conjunction with identifying the priorities for action

The Centre for Public Scrutiny (CfPS) report 'Peeling the Onion - learning, tips and tools from the Health Inequalities Scrutiny Programme' highlights the role that local overview and scrutiny committees have in addressing health inequalities and provides a number of tools and tips. The report recognises and sets out to demonstrate the active and vital role that 'scrutiny' can have in helping its partners understand issues so that gaps in inequalities can be narrowed.

Below is a link to this documents :-

[http://politiquessociales.net/IMG/pdf/CfPSPeelingonionfin\\_1\\_1\\_.pdf](http://politiquessociales.net/IMG/pdf/CfPSPeelingonionfin_1_1_.pdf)

3.9 A major challenge for scrutiny is ensuring that review topics have greatest influence and prioritising issues is key. The Joint Health and Wellbeing Strategy (in conjunction with the Joint Strategic Needs Assessment) will be able to be used to help members in the future to understand issues in more depth and can also support in exercising their role as locally elected councillors in helping public services to understand the issues that their communities face.

### 3.10 **Halton's Health and Wellbeing Strategy**

At a local level Halton has recently updated its Joint Strategic Needs Assessment for Health and Wellbeing and is currently in the process of developing locality needs analyses. Both of these will be used to underpin the Joint Health and Wellbeing Strategy.

Some initial scoping work has begun in terms of gathering the evidence base, determining the outline of the strategy and collating best practice (where available) from other areas

### 4.0 **POLICY IMPLICATIONS**

4.1 The Health and Wellbeing strategy should provide the overarching framework, within which commissioning plans for the NHS, Social Care, Public Health and other services which the Health and Wellbeing Board agrees are relevant, are developed.

4.2 The implementation of the strategy at a local level will have direct policy implications for the future delivery of services however until the detail of the strategy is worked through and developed it will be impossible to say exactly what these are at this time.

### 5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 None identified at this time.

### 6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

#### 6.1 **Children & Young People in Halton**

Improving the Health of Children and Young People is a key priority in Halton and will continue to be addressed through the Health and Wellbeing Strategy whilst taking into account existing strategies and action plans so as to ensure a joined-up approach and avoid duplication.

#### 6.2 **Employment, Learning & Skills in Halton**

The above priority is a key determinant of health. Therefore

improving outcomes in this area will have an impact on improving the health of Halton residents.

### 6.3 **A Healthy Halton**

All issues outlined in this report focus directly on this priority.

### 6.4 **A Safer Halton**

Reducing the incidence of crime, improving Community Safety and reducing the fear of crime have an impact on health outcomes particularly on mental health. There are also close links between partnerships on areas such as alcohol and domestic violence.

### 6.5 **Environment & Regeneration in Halton**

The environment in which we live and the physical infrastructure of our communities has a direct impact on our health and wellbeing and will therefore need to be addressed through the Health and Wellbeing Strategy.

## 7.0 **RISK ANALYSIS**

7.1 Developing a Health and Wellbeing Strategy in itself does not present any obvious risk however, there may be risks associated with the resultant action plans and how these are to be implemented. These will be assessed as appropriate.

## 8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 The Joint Health and Wellbeing Strategy will seek to reduce health inequalities across Halton and will be inclusive in its approach. Whilst services will continue to be offered across the whole borough, it is anticipated that a focussed approach may be needed where areas of high need are identified.

## 9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Health and Social Care Bill	Department of Health website	Louise Wilson

### **For further information please contact :-**

Louise Wilson or Diane Lloyd  
People and Communities Policy Team, Halton Borough Council  
**Contact:** 0151 471 7368  
E-Mail : [louise.wilson@halton.gov.uk](mailto:louise.wilson@halton.gov.uk) or [Diane.Lloyd@halton.gov.uk](mailto:Diane.Lloyd@halton.gov.uk)