



Westminster Scrutiny Commission

Meeting:	Westminster Scrutiny Commission
Date:	21 March 2013
Classification:	For General Release
Title:	HEALTH AND WELLBEING STRATEGY
Wards Affected:	Not Applicable
Policy Context:	Health and Wellbeing
Financial Summary:	There are no financial implications
Report of:	Holly Manktelow, Policy Officer, Strategy Unit Tel: 020 7641 2757; Email: smanktelow@westminster.gov.uk

1. Executive Summary

- 1.1 Westminster's Health and Wellbeing Board is required to produce a Joint Health and Wellbeing Strategy which sets out how the local authority, Clinical Commissioning Groups, and other partners, will work together to improve the health and wellbeing of those who live and work in Westminster.
- 1.2 Westminster's Joint Health and Wellbeing Strategy has been drafted through engagement with local authority members and officers, the clinical commissioning groups, the wider NHS, the community and voluntary sector and other partners. In January, the Health and Wellbeing Board requested that the Strategy be redrafted to produce a more focussed document with clear priorities and actions for the Board. The most recent draft of the Health and Wellbeing Strategy is presented to the Westminster Scrutiny Commission in this paper.
- 1.3 The current draft of the Joint Health and Wellbeing Strategy focuses on five priorities, where the Westminster Health and Wellbeing Board believe need is greatest and where they believe they can add value by pushing progress further and faster. The five priorities are:

- Every child has the best start in life
- Enabling young people to have a healthy adulthood
- Supporting economic and social wellbeing and opportunity
- Ensuring access to the appropriate care at the right time
- Supporting people to remain independent for longer

1.4 The Westminster Health and Wellbeing Board have endorsed the current draft of the Strategy, subject to minor or technical drafting amendments, for publication on 2nd April 2013. Following publication, the strategy will be subject to a three month engagement period with those who live and work in Westminster and those who use our services. As part of this engagement period we would welcome participation from all of Westminster's Scrutiny Committees.

2. Key Matters for the Commission's Consideration

2.1 The Scrutiny Commission are invited to consider the most recent draft of the Westminster Joint Health and Wellbeing Strategy, attached to this paper as Annex A.

2.2 The Scrutiny Commission are asked to note that:

- the draft contains a small number of "drafting notes" which show where elements of the strategy require further development;
- the draft has not been fully proof-read at this time so may contain spelling and grammar errors; and
- only minor changes can be made before the strategy is published for engagement on 2nd April 2013, although more detailed scrutiny would be appreciated during the engagement period.

2.3 In particular the Scrutiny Commission are asked to provide a view on:

- a.) the structure and tone of the current draft;
- b.) the priorities and actions that the Health and Wellbeing Board have identified as areas where they can add value; and
- c.) what role the Westminster Scrutiny Committees should play during the three month engagement on the strategy and how the Health and Wellbeing Board can best support this.

3. Background

3.1 Health and Wellbeing Boards were set up through the Health and Social Care Act 2012. They are a partnership board bringing together the local authorities

and each of its partner clinical commissioning groups. Among other things, the Health and Wellbeing Board is responsible for:

- Assessing the health and wellbeing needs of the local populations, including the wider determinants of inequalities, and bringing this analysis together in the Joint Strategic Needs Assessment (JSNA); and
- Preparing a Joint Health and Wellbeing Strategy (JHWS) reflecting the needs identified in the JSNA, prioritising actions and underpinning commissioning in the short, medium and longer term.

3.2 The Joint Health and Wellbeing Strategy (“the strategy”) has three central purposes:

- To set out a framework of needs and priorities in which all local health, social care and related services are commissioned;
- To provide the strategic vehicle to address local needs and inequalities in health and wellbeing; and
- To improve outcomes for local communities especially for the most vulnerable and excluded citizens.

3.3 The strategy is not a statement of everything that the local authority and partners will do to promote better health and wellbeing, but a way of prioritising specific health needs identified in JSNAs in order to establish an agreed and shared plan to tackle these needs.

3.4 The strategy has been developed through extensive engagement with council and health colleagues. A draft of the strategy was considered by the Health and Wellbeing Board in January 2013.

3.5 At this meeting, the Board agreed that the draft was too wide-ranging and had a lack of tangible actions for the Board to undertake. It was also questioned whether the strategy adequately reflected the uniqueness of Westminster both as a place, and in relation to our specific health challenges for example our 24/7 city and our large rough sleeping population.

3.6 The strategy has now been refined and reformed through discussions with Cabinet Members, the Clinical Commissioning Groups, the LiNk and officers from across council and health partners. This process has included narrowing down the priorities for the Board ensuring that they meet the following criteria:

- Requires Board support because:
 - There is a gap in provision across partners
 - Benefits can be made through partnership working / joint commissioning
 - There are new initiatives which require strong leadership
 - The Board can help to push further and faster than would otherwise happen

- Has the support of the Leadership of respective organisations
- Responds to a clear need which we are able to impact (based on the evidence of the JSNA and other sources)
- Will lead to an improvement in three years and we are able to measure progress.

4. Financial Implications

- 4.1 The Health and Wellbeing Strategy is primarily focussed on using existing resources to drive better value for money, particularly through partnership working and by using the flexibilities provided by s75 of the National Health Service Act 2006 (lead commissioner, integrated provision, pooled budgets).

5. Legal Implications

- 5.1 S194 of the Health and Social Care Act 2012 places a duty on the local authority to establish a Health and Wellbeing Boards as a committee appointed by the Council in accordance with s102 of the Local Government Act.
- 5.2 S193 of the Health and Social Care Act 2012 places a duty on the local authority and Clinical Commissioning Groups to develop a joint health and wellbeing strategy which meets needs as defined in the relevant local Joint Strategic Needs Assessment.
- 5.3 S192 of the Health and Social Care Act 2012 amends the Local Government and Public Involvement in Health Act 2007, to place a duty on local authorities and CCGS to prepare a Joint Strategic Needs Assessment.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact: Holly Manktelow
hmanktelow@westminster.gov.uk (tel.020 7641 2757)

BACKGROUND PAPERS

Annex A: Draft Westminster Joint Health and Wellbeing Strategy