

HEALTH AND WELLBEING BOARD	AGENDA ITEM No. 6(c)
10 DECEMBER 2018	PUBLIC REPORT

Report of:	Dr Liz Robin, Director of Public Health	
Cabinet Member(s) responsible:	Councillor Diane Lamb, Cabinet Member for Public Health.	
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HEALTH AND WELLBEING STRATEGY – RENEWING THE HEALTH AND WELLBEING STRATEGY

R E C O M M E N D A T I O N S	
FROM: Dr Liz Robin, Director of Public Health.	Deadline date: N/A
<p>It is recommended that the Health and Wellbeing Board:</p> <ol style="list-style-type: none"> 1. Reviews and considers the proposed options in paras 4.6 and 4.7 for developing a new Peterborough Joint Health and Wellbeing Strategy (JHWS), when the current JHWS expires in July 2019. 2. Decides on the preferred option. 	

1. ORIGIN OF REPORT

1.1 This report is submitted to the Health and Wellbeing Board following a request from the Director of Public Health.

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to obtain the Health and Wellbeing Board’s views on development on the next Joint Health and Wellbeing Strategy for Peterborough, given that the current three year Health and Wellbeing Strategy, which was approved in July 2016, is due to end in July 2019.

2.2 This report is for the Health and Wellbeing Board] to consider under its Terms of Reference No.

2.8.3.1 To develop a Health and Wellbeing Strategy for the city which informs and influences the commissioning plans of partner agencies.

2.3 This report links to the Children in Care Pledge: Help encourage you to be healthy

3. TIMESCALES

Is this a Major Policy Item/Statutory Plan?	NO	If yes, date for Cabinet meeting	N/A
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4. BACKGROUND AND KEY ISSUES

4.1 Production of a Joint Health and Wellbeing Strategy to meet the needs identified in the Joint Strategic Needs Assessment (JSNA) is a statutory function of the Peterborough Health and Wellbeing Board under the Health and Social Care Act (2012). Both NHS Commissioners and Local Authorities are required to have regard to the Joint Strategy in their service plans.

4.2 The first Peterborough Joint Health and Wellbeing Strategy (JHWS) covered the period 2012-2015 and was extended until July 2016. The second JHWS, intended to cover a three year period from 2016-19 was approved in July 2016 and therefore will expire in July 2019.

4.3 The current Peterborough JHWS 2016-19 was developed collaboratively, with a wide range of local authority and NHS senior officers involved in drafting chapters for their lead area of responsibility. It follows a framework agreed by the Health and Wellbeing Board with sections on:

- Health needs analysis
- Health and wellbeing through the lifecourse
- Creating a healthy environment
- Tackling health inequalities
- Working together effectively

4.4 The current actions and future plans identified in the JHWS have been regularly monitored through the quarterly JHWS Performance Report and the annual review of JHWS metrics.

4.5 The Cambridgeshire JHWS was initially approved to run from 2012-2017. However it has been extended to 2019. Part of the rationale for the extension was that it may be appropriate for the Peterborough Health and Wellbeing Board and Cambridgeshire HWB Board to work together to create one JHWS across the area.

4.6 The options open to the Peterborough Health and Wellbeing Board are therefore as follows:

Option A: Develop a new JHWS in 2019 which covers Peterborough only

Option B: Develop a new JHWS in 2019 which covers both Peterborough and Cambridgeshire

Option C: Develop a new JHWS in 2019, with a Peterborough-only section for key local priorities, and a Joint Peterborough/Cambridgeshire section for shared priorities

Considerations which may be relevant when deciding between the options include:

- Relevance to local health and wellbeing needs as outlined in the JSNA
- Views of key stakeholders
- System leadership role of the HWB Board
- Impact of the JHWS on the work of key partners
- Consultation process for the JHWS
- Deliverability of the JHWS
- Monitoring of the JHWS and key outcomes

4.7 Options appraisal

	Option A Peterborough only JHWS	Option B Peterborough and Cambridgeshire JHWS	Option C Mixed model JHWS
Relevance to local HWB needs (JSNA)	Yes	May be less sensitive to local needs, but could incorporate local priorities	Yes
Views of key stakeholders	TBC	TBC	TBC

System leadership role of HWB Board and impact of the JHWS	JHWS likely to have less impact on partners (e.g. NHS) which cover both Peterborough and Cambridgeshire	JHWS might have less impact on local partners which cover Peterborough only	JHWS has potential to impact on both local and wider system partners
Consultation process for the JHWS	Straightforward Main consultation is with Peterborough residents	More complex – requires consultation over a larger and more diverse geographical area.	Most complex – A mix of local focus and Cambs/ Peterborough wide focus
Monitoring of the JHWS and key outcomes	Straightforward Performance monitoring covers Peterborough only	Straightforward Performance monitoring covers the whole C&P area	More complex Part of the Strategy is performance monitored for Peterborough only, and part for Cambs and Peterborough
Role of Health and Wellbeing Boards Joint Cambridgeshire and Peterborough sub-committee	JHWS would be agreed by the 'parent' Peterborough HWB Board, not the Joint Sub-Committee	Agreeing the JHWS would be part of the Joint Sub-Committee delegated functions	Agreeing the joint section of the JHWS would be the role of the Joint Sub-Committee and the Peterborough only section of the JHWS would be agreed by Peterborough HWB Board

5. CONSULTATION

- 5.1 No consultation undertaken to date. However the new JHWS would be subject to public and stakeholder consultation.

6. ANTICIPATED OUTCOMES OR IMPACT

- 6.1 A clear direction of travel for developing the next Peterborough JHWS

7. REASON FOR THE RECOMMENDATION

- 7.1 The Health and Wellbeing Board has a statutory duty to prepare a Joint Health and Wellbeing Strategy. Given the increased joint working with Cambridgeshire County Council, and the likelihood that a Joint Subcommittee of the two Health and Wellbeing Boards will be formed, it is important to have a clear steer on the preferred direction for the development of the next JHWS.

8. ALTERNATIVE OPTIONS CONSIDERED

- 8.1 Please see section 4.7

9. IMPLICATIONS

Financial Implications

- 9.1 No direct financial implications

Legal Implications

9.2 Section 198 of the Health and Social Care Act 2012 provides that

Two or more Health and Wellbeing Boards may make arrangements for: -

- (a) any of their functions to be exercisable jointly
- (b) any of their functions to be exercisable by a joint sub-committee of the Boards
- (c) a joint sub-committee of the Boards to advise them on any matter related to the exercise of their functions.

The Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies provides that “Two or more health and wellbeing boards could choose to work together to produce JSNAs and JHWSs covering their combined geographical area. Some health and wellbeing boards may find it helpful to collaborate with neighbouring areas where they share common problems as this can prove to be more cost effective than working in isolation”

Equalities Implications

9.3 The current Peterborough JHWS includes ‘Tackling Health Inequalities’ as one of its five sections.

10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 Peterborough Joint Health and Wellbeing Strategy 2016-19.

<https://pcc-live.storage.googleapis.com/upload/www.peterborough.gov.uk/healthcare/public-health/PCCHHealthWellbeingStrategy-2016-2019.pdf?inline=true>

11. APPENDICES

11.1 None