

Health and Wellbeing Strategy – feedback from the consultation

1. Background

During December 2012 and January 2013 feedback on the draft health and Wellbeing Strategy has been actively sought from stakeholders, health and wellbeing organisations, their staff and volunteers. Methods included an online survey, meetings and forums and the stakeholder event held on 18th January.

We are pleased at the level of responses received throughout this second phase of consultation. The willingness of organisations to continue to be involved in the development of the strategy and the health and wellbeing partnerships is evident, indicating a sense of ownership for the health and wellbeing priorities across organisations and sectors.

This report provides an update for the Shadow Health and Wellbeing on some of the key themes that have been identified from this feedback.

The Shadow Health and Wellbeing Board is asked to:

- A. Acknowledge the feedback and agree it will be considered through the ongoing development of the strategy and the partnership boards.
- B. Discuss the draft strategy with their management teams (if they haven't already done so) to ensure their organisation can commit to its implementation once approved by the Board on 17th April. (The draft strategy is attached as Annex A.)

2. Summary of the feedback

A number of key themes have emerged from reviewing the feedback on the draft health and wellbeing strategy. These key themes are summarised below.

Support for the strategy and its priorities:

- a. Generally there is a great deal of support for the strategy - an understanding of why the five priorities have been chosen their importance and clear links to the Joint Strategic Needs Assessment.
- b. The support for increased early intervention and prevention is overwhelming. Earlier diagnosis and treatment of conditions to prevent them worsening and avoid more costly interventions later down the line. The contribution of community and voluntary organisations to early intervention and prevention is strongly acknowledged and supported.

Areas where more emphasis is required:

- c. More links to the economy, the economic viability of the city and the alignment of partners, especially in delivering and implementing the strategy in this challenging financial climate.
- d. The relationship between housing and health, for example the Council's Elderly People's Homes programme and increased housing options for older people and people experiencing mental health problems.
- e. The health and wellbeing of unpaid carers should have more prominence.

Omissions – issues that are not referenced:

- f. Safeguarding- there should be a reference to safeguarding and the role of the Health and Wellbeing Board. The Winterbourne View Report, for example, is key is crucial in safeguarding vulnerable adults in care settings.
- g. People with learning disabilities - people with learning disabilities, their carers and other marginalised groups experience lower socio-economic status and experience poorer health and wellbeing outcomes. This is relevant to the Health Inequalities Priority.

Other comments:

- h. More joined up support is needed to support people who are living with multiple conditions simultaneously, i.e. people with learning disabilities, sight loss and depression. Care pathways need to be better understood and integrated.
- i. Older people are not a homogenous group, they can span across 4 decades are embedded within community life and experience the same issues that we all do. Their contribution to community life should be celebrated more.

3. Next Steps

This feedback is extremely valuable for the ongoing editing of the Health and Wellbeing Strategy and the development of the three new health and wellbeing partnership boards. It will influence their priority setting and action planning.

Although the strategy will be formally approved in April, it will remain a 'living document', updated regularly to reflect change and issues arising from the evolving health and wellbeing partnerships, the Health and Wellbeing Board and HealthWatch. We will continue to offer opportunities for people to be involved in determining our health and wellbeing priorities, the work of the Health and Wellbeing Board and its partnership boards. From April, work will commence to draft Stakeholder Engagement Strategy to facilitate ongoing consultation and effective engagement within the new health and wellbeing structure.

4. Council Plan

The proposals in this paper have particular relevance to the 'Building Strong Communities' and 'Protecting Vulnerable People' strands of the Council plan.

5. Implications

- **Financial**

The health and wellbeing strategy will impact on service planning and commissioning decisions.

The health and wellbeing board will not take specific decisions on services or commissioning, however they will set the strategic direction for health and wellbeing services over the next three years.

- **Human Resources (HR)**

No HR implications

- **Equalities**

The health and wellbeing strategy may well affect access to service provision. Decisions about accessing specific services will not be taken by the board. Addressing health inequality and targeting more resource towards the greatest need should positively impact on equalities. The impact of the strategy's priorities were assessed under a community impact assessment (CIA) prior to its sign off in April 2013.

- **Legal**

No legal implications

- **Crime and Disorder**

No crime and disorder implications

- **Information Technology (IT)**

No IT implications

- **Property**

No Property implications

- **Other**

6. Risk Management

There are no significant risks associated with the recommendations in this paper.

7. Recommendations

The Shadow Health and Wellbeing Board is asked to:

- A. Acknowledge the feedback and agree it will be considered through the ongoing development of the strategy and the partnership boards.

B. Discuss the draft strategy with their management teams (if they haven't already done so) to ensure their organisation can commit to its implementation once approved by the Board on 17th April.

Reason: To ensure that feedback from the consultation will influence the health and wellbeing strategy and the work of the partnership boards.

Contact Details

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**Report
Approved**



Date *19 February
2013*

C. Wards Affected:

All

For further information please contact the author of the report

D. Attachments

Annex A – Draft Health and Wellbeing Strategy (Online Only)