# TO: HEALTH AND WELLBEING BOARD 10 DECEMBER 2015

# HEALTH AND WELLBEING STRATEGY 2016-2020 DIRECTOR: ADULT SOCIAL CARE, HEALTH AND HOUSING

#### 1. PURPOSE OF REPORT

1.1. To enable the Health and Wellbeing Board to consider the draft Health and Wellbeing Strategy for 2016 - 2020, and agree it subject to any required amendments

#### 2. RECOMMENDATION

2.1. That the Health and Wellbeing Board approve the strategy subject to any amendments.

#### 3. REASONS FOR RECOMMENDATION

3.1. To ensure that Bracknell Forest residents, and all organisations undertaking activity that may impact on the health and wellbeing of the population are aware of the priorities and their responsibilities within them.

#### 4. ALTERNATIVE OPTIONS CONSIDERED

4.1. None

# 5. SUPPORTING INFORMATION

- 5.1 It is a statutory requirement of the Health and Wellbeing Board (HWB) to develop and publish a joint Health and Wellbeing Strategy. The purpose of the strategy is to identify the local priorities in relation to the health and wellbeing of the population, and identify where relevant organisations need to work in partnership to develop and implement plans to address those priorities.
- 5.3 Developed by a working group comprised of officers from Adult Social Care, Public Health, CYPL and CCG, the first joint strategy Seamless Health (<a href="http://www.bracknell-forest.gov.uk/BF-JHWS-v10-1.pdf">http://www.bracknell-forest.gov.uk/BF-JHWS-v10-1.pdf</a>) was developed in 2012, building on the Council's strategy from 2007. As this was very early days in the implementation of the Health and Social Care Act 2012, the requirement was that Health and Wellbeing Boards develop a "model" strategy.
- 5.2 In addition to identifying local priorities, this required the identification of
  - Plans already in place, and whether these were sufficiently robust;
  - where there were priorities that were not being addressed; and
  - where greater effectiveness and efficiency would be gained by organisations working in partnership

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- 5.4 In the time since the first joint strategy, the focus has been on:-
  - ensuring that the JSNA is based on up to date information
  - establishing a greater understanding of what organisations (including departments of the Council and their usual partners) are doing in relation to the
    - priorities in the 2012 strategy and
    - the newly emerging priorities for 2016 onwards

A representative from Healthwatch has joined the working group.

5.5 The new draft strategy summarises actions taken, outcomes and the current position in relation to the priorities identified in 2012, and identifies the newly emerged priorities for 2016 – 2020

#### 6. ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS

## **Borough Solicitor**

6.1. The relevant legal issues are addressed within the main body of the report.

## **Borough Treasurer**

The Council allocates its financial resources through the budget process in the context of its medium term financial plan. Currently the medium term financial plan forecasts that the Council will need to make significant savings over the next few years. Over this period the Council will have to develop increased efficiency in service delivery whilst still responding to demographic changes, new legislation and the need to modernise services. This will require the reallocation of some of the Council's limited resources to key priorities.

In order to deliver these service changes the Council publishes a range of strategies and policies relating to many of its key services. A strategy or policy does not represent a financial commitment but, rather, sets the strategic direction of travel, subject to the level of resources that become available. These strategies also form the basis of the annual service plan which ensures that the development of the Council's services is consistent with its medium term objectives within the resource envelope that is agreed. The development of these strategies is, therefore, an important part of the Council's arrangements for helping it allocate its limited resources to maximum effect.

#### 7. CONSULTATION

## Principal Groups Consulted

7.1. Members of the public in determining the priorities for the strategy, and on the style and content of Seamless Health ASCH&H DMT CYPL DMT

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CMT Health Overview and Scrutiny Panel Bracknell Forest Healthwatch

## Method of Consultation

7.2. Conferences, meetings, online consultation, circulation of earlier draft documentation.

# Representations Received

7.3. See strategies for detail

# **Background Papers**

# Contact for further information

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