

Report to: East Sussex Shadow Health and Wellbeing Board
Date: 6 March 2012
By: Becky Shaw, Chief Executive, East Sussex County Council
Title of report: Developing a Health and Wellbeing Strategy for East Sussex
Purpose of report: To inform the Board of the process and progress towards developing the first Health and Wellbeing Strategy for East Sussex

The Shadow Health and Wellbeing Board is recommended to note the report

1. Background

1.1 The Health and Social Care Bill requires the Board to develop a HWS based on the Joint Strategic Needs Assessment (JSNA). At its last meeting, the Board agreed:

- i. The life cycle themes within the Healthy Lives, Healthy People: strategy for public health in England (Starting Well, Developing Well, Living Well, Ageing Well plus Dying Well) would provide a framework for the Strategy;
- ii. The Strategy must not replicate other plans already in place; would need to set the high level messages, and establish performance indicators; and
- iii. A Consultation draft of the strategy should be agreed at the Board's meeting in June 2012.

1.2 Until final guidance on JSNA and HWS is published later in the year, draft guidance published by the Department of Health in January 2012 is being used to inform the development and content of the strategy and to ensure it meets the statutory duties and powers set out in the Health and Social Care Bill (see Appendix 1 for details).

2. The approach being taken

2.1 A Working Group has been set up to oversee the development of a Health and Wellbeing Strategy for East Sussex, ensuring the delivery of all elements of the project to the required timescale. The project comprises the following strands:

- i. Strategy Development:
 - Agree contents/structure of the strategy
 - Gather evidence of need from the JSNA and other relevant data sources
 - Map existing/planned activity that addresses identified need
 - Identify gaps/additionality to build into the Health and Wellbeing Strategy
 - Identify and agree priorities and outcomes
 - Develop proposals for monitoring, reporting, reviewing and refreshing the strategy
 - Drafting the strategy for consultation
- ii. Undertaking an Equalities Impact Assessment (EqIA)
- iii. Consulting stakeholders and reporting progress to the Health and Wellbeing Board
- iv. Ensuring compliance with statutory requirements in the Health and Social Care Act
- v. Maintaining a connection with commissioning plans and planning cycles
- vi. Gaining formal approval for the final strategy from the Health and Wellbeing Board.
- vii. Publishing and promoting the strategy to stakeholders.

2.2 The key tasks and milestones for the project are set out below:

Date	Milestone
February	Establish HWS working group to oversee strategy development
6 March	HWB Meeting - process and progress reports
March-May	Strategy development – undertake and complete key stages (as above)
12 June	HWB Meeting - Consultation Draft strategy and EqIA considered
13-22 June	Strategy amended in light of Health and Wellbeing Board comments and EqIA

25 June–9 Sept	12 week compact compliant consultation period on Consultation Draft HWB Assembly event to consider the Consultation Draft strategy
From June	Disseminate indicative priorities to feed into business and commissioning plans and resource allocation
10-24 Sept	Consultation analysis and strategy redrafted in light of comments received
9 October	HWB Meeting - Final Strategy considered and approved
By end of March 2013	Priorities, outcomes and actions built into partners' business and commissioning plans and budgets as appropriate

3 Progress to date

3.1 Strategy development to date has focused on gathering evidence from the JSNA and other relevant data sources to identify the health and wellbeing issues that have the greatest impact and the local populations they most affect. These needs are being mapped against existing and planned activity in other relevant local joint commissioning strategies and partnership plans that address identified local needs and against the national Outcomes Frameworks for Public Health, the NHS and Adult Social Care and the outcomes in the East Sussex Children and Young People's Plan (until such time as a national Outcomes Framework for Children and Young People is published). Once complete, this exercise will help to identify gaps and/or the potential for additional or complimentary activities that will accelerate the improvement of outcomes and integrated working, and help identify HWS priorities, outcomes and performance indicators that will:

- i. Be based on robust evidence of local needs
- ii. Add value to existing and planned activities to address needs
- iii. Improve the health and wellbeing of the total local population throughout life
- iv. Narrow the gap and reduce health inequalities
- v. Be able to be delivered within available resources, deliver efficiencies and support the drawing down of new funds
- vi. Be able to be measured, monitored and evaluated
- vii. Have to be done in partnership i.e. not the sole responsibility of one agency
- viii. Promote integration of health and social care along extended care pathways and, where relevant, promote closer integration between the commissioning of health and social care and services relating to wider determinants of health and wellbeing such as housing, community safety, economic development, education and skills, and the environment.

3.2 Alongside this work, preparation for stakeholder consultation is underway to ensure the widest possible engagement by the public, patients, service users and their carers; providers; commissioning bodies and boards; elected members; HWB Assembly members; and partnership boards that tackle the wider determinants of health and wellbeing.

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Appendix 1: A summary of the duties and powers relating to JSNA and HWS that have been introduced by the Health and Social Care Bill

LOCAL DEMOCRATIC LEGITIMACY – POWERS AND DUTIES	Health and Wellbeing Board	CCGs	Local Authority	NHS Commissioning Board	Local HealthWatch
Functions of Health and Wellbeing Boards					
Duty to cooperate with the HWB in the exercise of its functions		X			
Power for HWB to request information for the purposes of enabling or assisting its functions from the local authority and any of its members or their representatives	X	X (duty to provide)	X (duty to provide)	X (duty to provide)	X (duty to provide)
Duty to prepare JSNA in relation to LA area with regard to guidance from Secretary of State. To consider need or likely need capable or being met or affected by LA or CCG functions	X	X*	X*	X (to participate)	
Duty to prepare a HWS based on JSNA in relation to Local Authority area with regard to guidance from Secretary of State	X	X*	X*	X (to participate)	
Duty to involve (the following) third parties in preparation of the JSNA and HWS: Local HealthWatch; people living or working in the area; for County Councils – each relevant DC	X				
Power to consult any other persons it thinks appropriate on preparation of the JSNA	X				
Duty to have regard to the NHS Commissioning Board mandate and statutory guidance in developing the JSNA and HWS	X				
Duty to consider health act flexibilities when developing HWS	X				
Duty to publish the JSNA	X				
Duty to publish the HWS	X				
Power to include in the HWS a statement of views on how commissioning of health and social care services, and wider health-related services**, could be more closely integrated i.e. ability for the HWS to look more broadly than health and social care	X				
Impact of duties on other associated functions					
Duty to have regard to JSNA and HWS in the exercise of relevant commissioning functions		X	X	X	
Duty to promote integrated working between commissioners of health and social care services and using health act flexibilities	X				
Power to encourage integrated working across wider determinants of health between itself and commissioners of health related services and between commissioners of health and social care services and of health-related services	X				
Power to delegate any local authority function (except scrutiny) to the HWB			X		

LOCAL DEMOCRATIC LEGITIMACY – POWERS AND DUTIES	Health and Wellbeing Board	CCGs	Local Authority	NHS Commissioning Board	Local HealthWatch
Ensuring alignment of commissioning plans					
Duty to involve HWB in preparing or revising the commissioning plan – including consulting it on whether the plan has taken proper account of the HWS	X	X			
Duty to provide opinion on whether the commissioning plan has taken proper account of the HWS	X				
Power to also write to NHSCB with that opinion on the commissioning plan (copy must be supplied to the relevant CCG)	X				
Duty to include a statement of the final opinion of the relevant HWB in the published commissioning plan	X				
Power to provide NHSCB with opinion on whether a published commissioning plan has taken proper account of the JHWS (copy must also be supplied to the relevant CCG)	X				
Duty to review how well the commissioning plan has contributed to the delivery of the HWS and to seek opinion of HWB on this	X	X			
Duty to get view of HWB on how well CCG has contributed to delivery of HWS when conducting its annual performance assessment of the CCG	X				X
Other duties, which can be contributed to through the JSNA and JHWS					
Duty to exercise functions with a view to securing continuous improvement in quality of services		X			
Duty to act with a view to secure continuous improvement in outcomes achieved		X			
Duty to exercise functions with regard to need to reduce inequalities between patients in outcomes and access to services		X			
Duty to promote the involvement of patients, their carers and representatives in decisions about the provision of health services		X			
Duty to promote innovation in the provision of health services		X			
Duty to exercise functions with a view to securing integration in the provision of health services, and the provision of health and social care services to improve the quality of the services or reduce inequalities between patients in outcomes and access to services		X			

X*- duty discharged via HWB

** - As defined in s.192: “Health services” means services that are provided as part of the NHS; “Social care services” means services that are provided in fulfillment of the social services functions of local authorities (within the meaning of the Local Authority Social Services Act 1970); “Health-related services” means services that may have an effect on the health of individuals but are not health or social care services.