

DEVELOPING HILLINGDON'S HEALTH AND WELLBEING BOARD AND JOINT HEALTH AND WELLBEING STRATEGY FROM 2021

Relevant Board Member(s)	Councillor Jane Palmer
Organisation	London Borough of Hillingdon
Report author	Kevin Byrne, Head of Health Integration and Voluntary Sector Partnerships
Papers with report	None

1. HEADLINE INFORMATION

Summary	Outline proposals as to how to take forward development of Hillingdon's Health and Wellbeing Board and how that work could lead into the next iteration of the Joint Health and Wellbeing strategy.
Contribution to plans and strategies	Hillingdon Joint Health and Wellbeing Strategy. NHS Long Term Plan
Financial Cost	No direct costs.
Ward(s) affected	All

2. RECOMMENDATIONS

That the Health and Wellbeing Board:

- 1) comments on and agrees to the approach to holding a developmental workshop as set out at 3.3 and 3.4 below.
- 2) notes that the proposed Board development workshop will be the starting point for the next iteration of the Borough's Joint Health and Wellbeing Strategy

3. INFORMATION

Supporting Information

Developing Hillingdon's Health and Wellbeing Board

3.1. At its meeting on 22nd September the Board agreed in principle to review how it works, its priorities and its future role, recognising the substantial changes faced by partners in responding to the current pandemic, the ambitions of the NHS long term plan and the pressures in health and social care along with the opportunities presented for local working through Hillingdon Health and Care Partners.

3.2. Officers were asked to explore the possibility of utilising the services of the Local Government Association's facilitated programme for the development of HWBs and to report back to the Board for a steer as to how it wished to proceed.

3.3. Preliminary discussions have been held with LGA. Their offer is entirely flexible and would be bespoke to Hillingdon, so it is important that all members of the Board have their input to how to proceed. The objectives are suggested as:

- To develop an agreed vision for the Health and Care economy in Hillingdon and enable the Board to fulfil its "leadership of place" role
- To agree across all partners how the HWB can be meaningful for them and integrated into their strategic thinking and planning
- To agree broad priorities for its future strategy
- To explore how the HHWB wishes to work to deliver on its ambitions.

3.4. The suggestion at present is that we should:

- Seek to hold a 3 or so hour workshop around end of February or early March 2021 (to avoid key winter pressure times, coincide with the municipal calendar and major changes some of which take effect from April 2021).
- To prepare for the workshop by holding one to one interviews with each Board member in advance to receive feedback and take account of all views.
- To identify a facilitator (or even small team) to lead the session. The LGA have a panel of former senior local authority and NHS personnel who would be approached, for agreement.
- The workshop would probably need to be held virtually.
- The workshop would consider priorities for Hillingdon's Health and Care economies and provide a framework for the subsequent work on the Joint Health and Wellbeing Strategy from 2021.

3.5. There would be the opportunity to come back for a further session – perhaps later in the year if felt useful and to support ongoing development.

Joint Health and Wellbeing Strategy

3.6. The current JHWBs runs to 2021. A key outcome of board development session should be to set broad priorities for next few years so that the board can achieve its ambitions. These would be captured into the next strategy.

3.7. A central challenge for developing the next iteration of Hillingdon's Joint Health and Wellbeing Strategy (JHWBS) will be to ensure that the focus on key health priorities is not lost as organisations respond to Covid-19, but also adapts in ways that enable us to address the challenges we have identified as public health priorities and through the JSNA.

3.8. This is no easy task when organisations are dealing with the immediate crisis created by the pandemic. However, at the same time as organisations bring in substantial changes to governance structures and other changes aimed at protecting health services, it is important that organisations consider how they can retain a focus on monitoring and improving the health and wellbeing of Hillingdon's population. The current challenges identified through the JSNA are as follows:

- The mortality rate from all cardiovascular diseases is higher.

- Percentage of cancer diagnosed at early stage is lower.
- Percentage of physically active adults is lower.
- Smoking prevalence in adults is higher.
- Smoking prevalence in adults in routine and manual occupations is higher.
- TB incidence rate is higher.
- The increase in overweight and obese children between Reception and Year 6 is higher than national and regional averages.

3.9. The Public Health priorities, identified based on the JSNA and the Public Health Outcomes Framework, are:

- Deliver against mandatory Public Health functions, in the most efficient and effective manner.
- Reduce Childhood Obesity.
- Improve Sexual Health.
- Reduce alcohol and substance misuse, including smoking.
- Improve mental health and wellbeing amongst vulnerable groups, including early intervention and prevention of mental health conditions, reducing suicide, reducing isolation and loneliness and increase independence in older people, providing support for those with dementia or autism, for people with long-term conditions and learning disabilities, and for carers.
- Increase adult physical activity.
- Improve health and reduce obesity levels within the Borough's adult population.
- Tackle violent crime, by reducing and preventing domestic abuse, supporting victims and reducing and preventing knife crime.
- Reducing homelessness in the Borough, assisting families to find permanent accommodation and addressing the challenge of rough sleeping.
- Ensure children have the best start in life by encouraging breastfeeding, reducing tooth decay in 5-year olds, encouraging family immunisations, and ensuring effective commissioning and delivery of health visiting and school nursing service.
- Reduce the risks to residents from poor air quality.

3.10. Maintaining a clear focus on well-defined and shared priorities will help at a time of substantial pressure and change affecting services across health and social care. The new Strategy should seek to include a smaller number of key priorities.

3.11. Hillingdon's Local Outbreak Control Plan will continue to affect the operation of health and social care services, with work being overseen by a partnership COVID-19 Health Protection Board. The work of Hillingdon's Public Health Team is heavily focussed on the pandemic. Responsibility for contact tracing now rests with local authorities.

3.12. The Covid-19 pandemic has of course had a huge impact on health service provision and this will continue into the foreseeable future. The North West London Out of Hospital Recovery Plan has set out the ambition to adopt an integrated, partnership approach to delivering health and social care services out of hospital. The approach includes both reactive and proactive care and a focus on caring for the whole person, through an integrated service team at the local level. The timeline for implementation involves three phases: *Responding* to the first wave of the crisis (Feb-July 2020), *Rebalancing* to restart wider services and prepare for a second wave: (August 2020-April 2021 and *Renewing* to develop Plans which renew services from April 2021.

- 3.13. Elements within each of the above three phases will have some impact on the ability of the JHWBS to address health and care priorities. For example, the *response* phase included the shift to ‘virtual by default’ and ‘triage way of working’ approaches to contact with patients, which continue in the *rebalancing* phase. Digital access becomes standard as and when services can *renew*. There are already concerns about people accessing health services during the pandemic and serious illnesses going undetected so an understanding of how early diagnosis will be maintained and improved will be important as services are accessed and delivered in new ways. The plan for Hillingdon includes the development of community-based approaches to managing long-term conditions.
- 3.14. Communication and engagement will be a crucial part of the new health and social care landscape. This has been evident in the pandemic response with the need to deliver public information messages and to engage with a diverse range of communities. As health services are transformed to provide appointments and treatment in different ways, community engagement will be vital.
- 3.15. The next JHWBS therefore will reflect the Board’s agreed priorities taking into account all of the above - it will consider both the “what” and the “how” so that the major changes afoot are supported across partners to maximise benefits to residents health and care.

Financial Implications

There are no direct financial consequences arising from this report. The LGA offer is supported by the Department of Health and Social Care and is offered at no cost. The JHWBS will have consequences for services but does not take decisions on resourcing or replace usual decision making through sovereign governance bodies.

4. EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

What will be the effect of the recommendation?

Strong leadership from the borough’s HWB and a clear JHWBS would support improvements in health and social care for residents.

Consultation Carried Out or Required

No wider consultation at this stage. A full consultation would be envisaged for the JHWBS during 2021 before approval is given.

Policy Overview Committee comments

None at this stage.

6. BACKGROUND PAPERS

NIL.