

# Westminster Health & Wellbeing Board

<b>Date:</b>	14 <sup>th</sup> July 2016
<b>Classification:</b>	General Release
<b>Title:</b>	Updates on the North West London Sustainability Transformation Plan and Westminster Joint Health and Wellbeing and Strategy
<b>Report of:</b>	Councillor Rachael Robathan, Chairman, Health and Wellbeing Board  Dr Neville Pursell, Vice-chair, Health and Wellbeing Board  Jules Martin, Managing Director, NHS Central London Clinical Commissioning Group
<b>Wards Involved:</b>	All
<b>Financial Summary:</b>	Not Applicable
<b>Report Author and Contact Details:</b>	Daniela Valdes, Head of Planning and Governance, Central London CCG  Meenara Islam, Principal Policy Officer, Westminster City Council ( <a href="mailto:mislam@westminster.gov.uk">mislam@westminster.gov.uk</a> )

## 1. Executive Summary

- 1.1 In May 2016 the Board received an update on the findings of the April engagement workshops with commissioners and patient/service user representatives. The outcomes of these workshops were used to produce a first draft of the refreshed strategy. The Board discussed the draft and provided feedback and suggestions which have been incorporated into a final draft which has now been published for public consultation (attached at Appendix A).
- 1.2 The Board also received an update on the development of the North West London Sustainability and Transformation Plan (NWL STP). The Board had agreed at its January meeting that the joint health and wellbeing strategy will act as the local delivery plan of the NWL STP.

1.3 This paper tables the final draft of the refreshed Joint Health and Wellbeing Strategy that was published for consultation on 6 July, sets out the consultation process and updates the Board on the latest developments of the North West London STP.

## **2. Key Matters for the Board**

2.1 The Board is requested to:

- Put forward suggestions for the public engagement approach – including any suggestions for key groups or meetings which it would be good to include as part of the process; and
- Note the final draft of the Strategy which has now been released for public consultation; and
- Note the proposed consultation process and provide comment.

## **3. Background**

3.1 The NHS Planning Guidance<sup>1</sup> released in December 2015 provided a clear mandate for local health and care systems to move to a place-based approach to strategic planning. This reflects the reality that local challenges cannot be effectively addressed by any one organisation alone. Collective action and cooperation is required between commissioners, providers and local authorities to jointly manage resources to secure a financially sustainable system. STPs are backed by potential funding from 2017/18 onwards to support future transformation.

3.2 At its previous meetings, the Health and Wellbeing Board considered papers outlining the refresh process of the strategy and the STPs. The Board endorsed an approach to the development of both the strategy and the STP that was consistent with strategic documents such as City for All<sup>2</sup> and the Better Care Fund. The Board agreed that the JHWS should continue to emphasise the importance of integration, collaboration, prevention, independence and community resilience in addressing health and care challenges.

---

<sup>1</sup> [Delivering the Forward View, NHS Planning Guidance 2016/17 – 2020/21”, Dec 2015](#)

<sup>2</sup> [Westminster City for All Year Two](#)

#### **4. An update on the North West London Sustainability and Transformation Plan (STP)**

4.1 An STP evidence and policy “base case” establishing health and care priorities for Westminster, Brent, Ealing, Hammersmith & Fulham, Harrow, Hounslow, Hillingdon and the Royal Borough of Kensington and Chelsea was submitted to NHS England on 15 April. The document set out the needs of the North West London population, the emerging priorities, governance for implementing the plan and emerging delivery areas.

4.2 The emerging priorities have been identified by drawing on local place based planning, sub-regional strategies and plans and the views of the sub-regional health and local government bodies, including, in Westminster’s case, the City for All strategy, the local Better Care Fund plan and the published commissioning intentions of Central and West London CCGs. They seek to demonstrate how the local health and care geography will address the challenges of the questions posed by NHS England in the planning guidance in December 2015. These questions are:

- How will you close the health and wellbeing gap?
- How will you drive transformation to close the care and quality gap?
- How will you close the finance and efficiency gap?

4.3 In the base case submission these were set out as follows.

1. Supporting people who are mainly healthy to stay mentally and physically well, enabling and empowering them to make healthy choices and look after themselves;
2. Reducing social isolation;
3. Improving children’s mental and physical health and wellbeing;
4. Ensuring people access the right care in the right place at the right time;
5. Reducing the gap in life expectancy between adults with serious and long-term mental health needs and the rest of the population;
6. Improving the overall quality of care for people in their last phase of life and enabling them to die in their place of choice;
7. Improving consistency in patient outcomes and experience regardless of the day of the week that services are accessed;
8. Reducing unwarranted variation in the management of long term conditions – diabetes, cardio vascular disease and respiratory disease; and
9. Reducing health inequalities and disparity in outcomes for the top 3 killers: cancer, heart disease and respiratory illness.

- 4.4 The emerging draft plan for addressing these priorities was submitted to NHS England for discussion on 30 June as part of a checkpoint submission. This will support a conversation that will take place between the NW London leadership team (led by Dr Mohini Parmar) and Simon Stevens, the Chief Executive of NHS England on the 14 July. The Board will be updated on developments as these arise.
- 4.5 In January, CCG and council officers formed a working group to provide local contributions to support the development of the North West London STP and to develop the Joint Health and Wellbeing Strategy. Further to this, the group has made joint submissions to the initial base case as well as to the drafts issued to NHS England in April and June. Strong participation from Central and West London CCGs, Public Health and whole systems colleagues has contributed to the development of the base case and the draft plan.
- 4.6 At North West London level, a number of colleagues represent the Health and Wellbeing Board in the Strategic Planning Group. In addition to this Charlie Parker, Chief Executive; Liz Bruce, Executive Director of Adult Social Care Services; Dr Fiona Butler, West London CCG Chair; Dr Neville Pursell, Central London CCG Chair and Cllr Rachael Robathan Health and Wellbeing Board Chair have been involved in discussions as part of the development of the documents.
- 4.7 Following feedback from NHS England, the draft STP will be subject to approval and agreement. Further engagement at North West London level is expected over the summer in preparation for implementation in the autumn.

## **5. Refreshing the Joint Health and Wellbeing Strategy**

- 5.1. During May and June the Health and Wellbeing Board, Westminster Council Cabinet, Central London and West London CCG Governing Bodies all reviewed the draft Strategy. The feedback has been positive with suggestions centring on strong support for the addressing of 'wider determinants' of wellbeing such as housing, air quality employment and community resilience. Reflecting the feedback, a revised version of the draft strategy is attached as Appendix A.
- 5.2 Officers also attended Westminster Health and Wellbeing Network meetings throughout June. These networks will be revisited in September to discuss the draft strategy in further detail.
- 5.3 The public consultation on the draft strategy was launched on Wednesday 6 July and will run for 14 weeks until Sunday 16 October. Please see Appendix B for information on objectives and channels of consultation.

5.4 During the consultation period four consultation events for the following audiences/areas are proposed for September and October:

- Local business communities
- Providers of health and social care in Westminster
- Open house for the public in partnership with Healthwatch

5.5 The timeline for activities and progress between July and December:

July - October	<p>Engagement through newsletters, social media, attending stakeholder events and forums</p> <p>Four targeted consultation events (dates TBC)</p> <p>Close of public consultation on 16 October</p> <p>Implementation planning</p>
November - December	<p>Review and revise draft strategy to reflect consultation outcomes</p> <p>Health and Wellbeing Board final approval at 17 November meeting</p> <p>Final reviews by Westminster City Council Cabinet, Central and West London CCG Governing Bodies</p> <p>Adoption</p>
January 2017	Implementation begins

## 6. Implementation and Monitoring

6.1 Following public consultation and incorporation of the feedback, the final strategy will be presented to the Board for their final formal approval at or before the meeting on 17 November 2016.

6.2 A cross-organisational group of officers will be convened to develop an implementation approach which maximises on the use of existing resources to drive forward the plan. The strategy includes key outcomes and performance indicators against which the implementation of the Strategy can be measured.

6.3 From January 2017, papers to the Board will be asked to identify how they support and align with the priorities of the Strategy, and the Board will receive regular monitoring reports indicating progress in delivering the priorities and the outcomes identified in the Strategy.

## **7. Legal Implications**

7.1 The duty in respect of Joint Health and Wellbeing Strategies is set out in s116A of the amended Local Government and Public Involvement in Health Act 2007.

7.2 There is also statutory guidance, the “Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies” issued in March 2013. The Guidance states at paragraph 3.5 that Joint Health and Wellbeing Strategies are continuous processes and that it is a decision for the Health and Wellbeing Board to decide when to either update or refresh their JHWS or undertake a fresh process. There is not a requirement that the JHWS be undertaken from scratch each year so long as the Board is confident that their evidence based priorities are up to date and informing local commissioning plans.

7.3 The process being followed to refresh the Council’s JHWS is set out in detail above at paragraph 5 and Appendix B of this report, which includes a proposed public consultation commencing in July 2016. Legal Services has had an opportunity to comment on the proposed consultation documentation and consultation process. It is confirmed as being a lawful process that discharges the Council’s public and stakeholder’s engagement responsibility to consult.

## **8. Financial Implications**

N/A

**If you have any queries about this Report or wish to inspect any of the Background Papers please contact:**

Meenara Islam

**Email:** [mislam@westminster.gov.uk](mailto:mislam@westminster.gov.uk)

**Telephone:** 020 7641 8532

## **APPENDICES:**

Appendix A – Draft Joint Health and Wellbeing Strategy

Appendix B – Consultation process