# **Health and Wellbeing Board**

## 20 September 2022

## Joint Local Health & Wellbeing Strategy 2022-25

## 1. Purpose

1.1 To provide the Health & Wellbeing Board (HWB) with the final version of the Walsall Joint Local Health & Wellbeing Strategy (JLHWS) 2022-25.

#### 2. Recommendations

- 2.1 That the Board approve the Joint Local Health & Wellbeing Strategy 2022-25
- 2.2. That the JLHWS is acknowledged as the framework to ensure accountability, monitoring organisational outcomes and performance against the agreed priorities by the Board

#### 3. Report detail

- 3.1 The Health and Social Care Act 20121 ('the Act') amended the Local Government and Public Involvement in Health Act 2007 ('the 2007 Act') to introduce duties and powers for health and wellbeing boards in relation to Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs).
- 3.2 The Health and Care Act 2022¹ which received Royal Assent in April 2022, and integration white paper² looks to enable greater integration between partners across the health (which includes physical and mental health) and social care sector. This includes collaboration between partners who can address the wider determinants of health by:
  - removing barriers to data-sharing
  - enabling joint decision-making and greater collaboration within the NHS, between trusts, and between the NHS and other systems partners – in particular local authorities

<sup>&</sup>lt;sup>1</sup> Health and Care Act 2022 (legislation.gov.uk)

<sup>&</sup>lt;sup>2</sup> Health and social care integration: joining up care for people, places and populations - GOV.UK (www.gov.uk)

- 3.3 The Health and Care Act 2022 establishes new NHS bodies known as Integrated Care Boards (ICBs) and requires the creation of Integrated Care Partnerships (ICPs) in each local system area. This will empower local health and care leaders to join up planning and provision of services both within the NHS and with local authorities and help deliver more person-centred and preventative care.
- 3.4 Local authorities and clinical commissioning groups (now ICSs) have equal and joint duties to prepare JSNAs and JLHWSs, through the health and wellbeing board. The responsibility falls on the health and wellbeing board as a whole and so success will depend upon all members working together throughout the process.
- 3.5 The integration white paper sets out actions the government will take to support this greater collaboration at place level, and further develop the effective delivery of integrated health and care services.
- 3.6 It sets an expectation that places will make rapid progress in providing clarity on the governance and scope of their place-based arrangements to ensure NHS and local authority leadership are effectively bought together. This will include a single person, accountable for the delivery of shared outcomes and plans in each place, working with local partners.
- 3.7 JLHWSs are unique to each local area and are produced by each borough's health and wellbeing board.

#### 3.8 A JLHWS:

- is the statutory responsibility of the HWBB
- outlines what agreed local priorities have been set by the HWBB in order to tackle the needs identified in the JSNA and members' individual strategies/operations plans
- translates the JSNA findings and members' individual strategies/operations plans into clear outcomes the board wants to achieve, which will inform local commissioning – leading to locally led initiatives that meet those outcomes and address the needs
- 3.9 The JLHWS 2022-25 replaces the 2017-2020 publication 'The Walsall Plan: Our Health and Wellbeing Strategy'. A replacement was planned to commence in 2020 but was delayed due to the borough-wide response to the Covid-19 pandemic taking precedence.

#### 3.10 This JLHWS is being presented

- As a succinct version (50% shorter than previous publication). The decision to be clear and concise for all readership was agreed by the Board. This has been achieved through the development of the Walsall Together partnership, which represents 60% of the HWB.
- To outline the new structure of the health service and introducing the Borough's new way of working via Walsall Together (see

- Appendix 1), highlighting the building upon previous iterations and add further value, through partnership and place-based working
- As a live document. The priorities will be reviewed annually, in accordance with data from the JSNA and corporate strategies/plans
- 3.11 Collating information / data for the Strategy involved having a meeting with each member of the HWBB to discuss each department/organisation's strategy/operations plans and priorities. The findings were then presented at a HWB workshop (15 March 2022) where all members agreed the following priorities:

Mental Wellbeing (<u>Mental wellbeing strategy 2022-2032</u> (<u>walsallintelligence.org.uk</u>) – especially isolation for all ages and the impact of Covid-19

Our Digital Approach (<u>BC Digital Strategy Final 210316.pdf</u> (<u>blackcountrylep.co.uk</u>) – infrastructure and inclusion

Children and young people (<u>Children & Young People - Walsall</u> Insight (walsallintelligence.org.uk)

- 3.12 To ensure a collective agreement for Outcomes, the strategies listed above will be used for reporting and monitoring. It is to be noted that HWB:
  - Signed off the Mental Wellbeing Strategy 2022-32
  - Noted Walsall's 'Giving Every Child The Best Start In Life' and
  - Agreed the content of the Black Country Digital Strategy
- 3.13 The strategies for the three areas will be the framework for each priority adopting the strategies' projected outcomes.

### 4. Implications for Joint Working arrangements:

4.1 All members of the HWB have a joint focus on the three agreed priorities, in accordance with each organisation's governance but share the same Outcome – to reduce inequalities. Page eight (8) demonstrates the reporting format. Budgets and resources will not be aligned.

### 5. Health and Wellbeing Priorities:

- 5.1 HWBs have a statutory duty to ensure they have a JSNA and JLHWS in place. These are used to identify local priorities and develop local plans to improve the health and wellbeing of their population and reduce health inequalities.
- 5.2 A Marmot life course approach has been applied to the three over-arching priorities with sub priorities identified under each.

- 5.3 Safeguarding: No adverse implications for the most vulnerable sectors in the community have been identified.
- 5.4 Further advice will be sought from the Director of Public Health and the Public Health team during the term of this Strategy.

## **Background papers**

- 1. Walsall JSNA
- 2. WM Fire Service Our Plan 2021-24
- 3. WM Police Wellbeing Action Plan
- 4. Walsall College Strategy
- 5. whg The H Factor 2021-24
- 6. Walsall Multi-Agency Mental Wellbeing Placed Based Strategy Mental Wellbeing Walsall "Together We Can" 2022- 2032
- 7. Black Country Digital Strategy
- 8. Walsall Digital Strategy 2022-25
- 9. Giving Every Child The Best Start In Life
- 10. Walsall Children, Young People & Families Strategic Alliance
- 11.NHS Long Term Plan
- 12. Health & Care Act 2022
- 13. Health & Social Care Integration Paper

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### Appendix 1

Members	Walsall Health & Wellbeing Board	Walsall Together
1. Walsall Council	V	$\sqrt{}$
Walsall Clinical Commissioning Group	V	<b>V</b>

West Midlands Fire and Rescue Service	<b>V</b>	$\alpha$
4. West Midlands Police	√	x
5. One Walsall	$\checkmark$	$\checkmark$
6. Walsall Healthcare NHS Trust	√	V
7. whg (Walsall Housing Group)	V	V
8. Walsall College	$\sqrt{}$	$\boldsymbol{x}$
Black Country Healthcare NHS Foundation Trust	V	<b>√</b>
10. Healthwatch Walsall	√	x