

Bristol's Joint Health and Wellbeing Strategy
(draft for consultation)

Bristol living city



Fit for the Future 2013–2018



Bristol Clinical Commissioning Group

Contents

Foreword	1
Strategy summary	2
1: Introduction: A strategy for a healthier Bristol	3
2: Health and wellbeing in Bristol: What are the key challenges?	3
3. The Health and Wellbeing Strategy	8
4. How will the strategy be used?	12
5. How will the strategy be managed and monitored?	13
6. What happens next?	13
Annex 1: Background to the development of this draft strategy	14

Foreword

Health (and staying healthy and well) is important to everyone in Bristol, whether we live, work or learn in the city. It is much more than the absence of illness or disease. It is about being able to lead fulfilling lives, being actively engaged in our communities, our jobs and with our families.

Bristol is one of the healthiest amongst comparable cities, but the overall city-wide picture can hide variations in experience for different areas and population groups within the city. There are significant health inequalities across the city.

Population growth means that the health needs in Bristol are growing and changing and, given reductions in public spending, all parts of the system must find new ways of collectively addressing these changing health needs and increasing pressures on services. This requires significant transformation in how we work together to manage and deliver services. We hope that this strategy will help to meet this challenge, through collective objectives and ambition.

Through initial discussion and consultation with stakeholders, backed up by evidence from the Joint Strategic Needs Assessment, we have identified four themes (or directions of travel) for the city moving forward, where Bristol is:

- A city of healthy, safe and sustainable communities and places
- A city where health and wellbeing are improving for everybody
- A city where health inequalities are reducing
- A city where people get access to quality support when and where they need it

These overarching themes will be underpinned by specific priorities which contribute to the delivery of improvements across the city (leading to improved health outcomes). Many of the priorities identified are not new, with people already engaged in significant programmes of work. However, what the Health and Wellbeing Board seeks to bring, through this strategy, is collective leadership and challenge to truly get the most out of the resources in the city.

We look forward to working collaboratively with you all, to use this ambitious strategy to inform and drive the necessary changes, bringing real sustainable improvements for health and wellbeing in Bristol – a city fit for the future.

George Ferguson

Elected Mayor

Cllr Jon Rogers

Chair of Health and Wellbeing Board

Dr Martin Jones

Chair of Bristol CCG

Date: 13th February 2013, version 1

Find out more at: bristol.gov.uk/healthandwellbeing

Consultation closes on 10 May 2013

Strategy summary

The challenge for Bristol:

- Population growth means that the health needs in Bristol are growing and changing and, despite recent actions, the city still has significant inequalities.
- Given reductions in public spending, all parts of the system must be transformed to find new ways of collectively addressing these changing health needs and managing the increasing pressures on services. At the same time collective efforts are required to improve health and wellbeing and reduce inequalities, ensuring benefits are sustained – these are not easy challenges.

This strategy is designed to help us rise to these, and future, challenges and, in doing so, ensure Bristol is a city fit for the future.

The vision for Bristol:

Bristol is a place where all who live, work or learn in the city lead healthy, safe and fulfilling lives, now and in the future.

The mission:

To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing.

Themes and priorities:

(please see details on pages 9–11 and Annex 1)

- Bristol is a city of healthy, safe and sustainable communities and places.
- A city where healthy life expectancy and wellbeing are improving for everybody.
- A city where health inequalities are reducing.
- A city where people get access to quality support when and where they need it.

How will we do this?

- Work together to tackle the main reasons why people become unwell, so that people are enabled to stay healthier and independent for longer.
- Working in a joined up, cost effective way to integrate good quality services around the individual, improving patient experiences and satisfaction.
- Driving integration (e.g. working with providers to ensure better joined up services and support) and collaboration (working together) and by putting people and their communities/groups at the centre of everything we do, supporting and empowering people and communities to help themselves.
- Spreading good practice and making best use of existing strategies and work programmes.

We hope that this strategy will help to meet these challenges, through collective objectives, collaborative working and ambition.

1: Introduction: A strategy for a healthier Bristol

Bristol has a strong track record of partnership working to bring about improvements across the city. However, through the new Health and Social Care Act (2012), councils and the health care sector will have a shared duty to work together to produce a **Joint Health and Wellbeing Strategy** (JHWS).

This new strategy will lay out joint plans to help the people of Bristol live healthier, longer and fulfilling lives and it will provide an overarching framework for the commissioning (purchasing and delivery) of a range of health and care services designed to support and improve health and

wellbeing, both now and also looking forward (ensuring that Bristol, its people and its services are “fit for the future”).

This strategy will be driven forward by the newly formed Bristol Health and Wellbeing Board, working collaboratively, in partnership. Currently (2012) over £1.2 billion is spent annually on health and care services within the city. The Health and Wellbeing Board and this strategy, together, will have the potential to influence decisions about a wide range of services. For fuller information about the development of this strategy, underlying principles, and the role of the Health and Wellbeing Board, please see Annex 1.

2: Health and Wellbeing in Bristol: What are the key challenges?

Much of the evidence base for the development of this strategy is contained within the Joint Strategic Needs Assessment 2012 (www.bristol.gov.uk/jsna). While the detail is not repeated here, key population and health challenges are summarised in Boxes 1 and 2 respectively (*please see pages 4–5*).

2.1 How are we doing and how does Bristol benchmark against others?

Bristol is one of the healthier cities and in recent years, although health and wellbeing has gradually improved for some groups (when measured across a number of indicators), in Bristol, there are also some areas or groups where health and wellbeing has not improved commensurate with need.

Similarly, although crime rates are reducing, problems such as domestic violence, sexual violence, substance misuse (e.g. drugs, alcohol) and also fear of crime impact adversely on the lives of some of the most vulnerable and on families, their neighbours, neighbourhoods and communities.

2.2 What about health inequalities?

Bristol has some areas that rank amongst the most deprived in the country, often alongside those that are very affluent. Where you live in Bristol can be seen as one of the key factors (determinants) influencing your health and wellbeing. For example, there is a life expectancy gap of up to 9.6 years between those living in the most deprived and least deprived areas.

Of particular note, child poverty in Bristol is significantly higher than the average rate for England, with over a quarter of children growing up in poverty in different parts of the city, with limited opportunities.

2.3 What does our growing and changing population mean for services, care and support needs, both now and in the future?

Population growth in the city means that the health needs in Bristol are growing and changing (see Box 1). Bristol will face a number of challenges in meeting the needs of a growing and changing population within available resources and in meeting the needs of its child population, especially those living in poverty, to give them the best possible start in life.

Box 1: Population change and implications for services

Bristol is a city with:

- **A growing and changing population** (428,100), which is projected to grow to 460,000 by 2020.
- **An increase in births and a rapidly growing child (under 5 years) population.**
The number of births has increased by 50% over 10 years and the under five age group has grown by 26.5% since the 2001 census (the largest % rise of any age band). Over a quarter of children born in Bristol are to mothers who were born outside the UK (BME and non-British white).
- **Increasing diversity and changing ethnicity.** Bristol is a diverse city and will continue to become increasingly diverse. Black and Minority Ethnic (BME) groups make up 16% of the population (double that in 2001) and for children the proportion is higher still, with 26% of Bristol school pupils coming from BME groups. Also, 6% of the current Bristol population are non-British white (e.g. from Eastern Europe).
- **A changing population distribution.**
The BME population is highly concentrated in inner city wards, but East Bristol is changing and becoming increasingly diverse (with young BME children and their families), raising questions about access to appropriate services, particularly primary care, family support and education services.
- **More people living alone.**
There has been a substantial increase in the number of one-person households, which is expected to be a continuing trend. This seems to be linked to frequent changes of address and a changing rental market, bringing challenges in both accessing and delivering services.
- **More people growing older, often living with many health problems.**
Elderly people (over 85 years old) have increased by over 21%, many living with long term (and sometimes complex) conditions needing support.
- **Homelessness**
Relative to earnings, housing is less affordable than the national average. There is growing concern about the potential impacts of benefit changes and the recession in relation to homelessness and potential health impacts.

Box 2: Health and wellbeing in Bristol, influencing factors and challenges

- Bristol is a city with significant health inequalities between different groups and has high levels of child poverty in different parts of the city.
- Many of the big health issues for the city mirror national challenges and the causes of ill health and premature (early) death are well known. For example, cancer is still the biggest killer of people under 75 (38%), followed by cardio-vascular diseases (23%). Many of these problems are preventable or respond well to early intervention and treatment.
- Obesity and smoking are major contributing factors to poor health outcomes (e.g. illnesses such as diabetes or early death), as are other lifestyle behaviours such as substance misuse (drugs, alcohol and other substances) and risky sexual behaviours (leading to e.g. unplanned and teenage pregnancies etc). Risky alcohol consumption (and the increase in related hospital admissions) is of particular concern.
- Mental ill health (affecting all ages), and its associated problems, also has a major impact on wellbeing in the city. There is also a projected increase in the number of older people with dementia needing support.
- Projections of future service pressures suggest that there are likely to be significant increases in the numbers living with long-term conditions (e.g. diabetes, heart diseases, cancer, respiratory problems), disabilities and/or other vulnerabilities – some (children/young people, adults and older people) will have multiple complex needs requiring significant support.
- All of those living with long term (and/or complex) conditions (all ages) and their carers will need varying degrees of support, with ongoing access to appropriate, quality services (see JSNA 2012 for full details).

2.4 What sort of services and support do patients, their carers and local residents want and need?

Patients, their carers and service users want services that are organised around, and responsive to, their needs. They do not want to fall through any gaps and do not want organisational barriers and boundaries to delay or prevent access to care, so driving more integrated care is a local priority.

We also know that being healthy and well throughout our lives is much more than just

good health and care services. For most people, staying healthy, without the need for health and care services, is the top priority. At the same time, most want to remain independent for as long as possible, but with access to support or advice when needed. From our early consultation with stakeholders (*see Annex 1*), support for taking actions to prevent ill health (and addressing the factors that influence it), and supporting a good recovery from ill-health (re-enablement) while enabling people to continue to take responsibility for their own health and wellbeing, is a key priority.

2.5 How can this strategy help us rise to the challenge?

From the above analysis, a number of themes are emerging to inform this strategy. These are:

- The urban environment can impact both positively and negatively on health and wellbeing and on how easy or difficult it is for people to adopt healthier lifestyles (both now and into the future). Therefore Bristol needs to ensure it is, and remains, a healthy, health enabling and sustainable city.
- Maintaining a focus on prevention and enabling healthier lifestyle choices is a key priority – to reduce the burden of ill health/disease, improve resilience to poor health and promote healthy life expectancy.
- Tackling inequalities, alongside improving health and access to healthcare for everybody while focusing on those with greatest needs, is a priority.
- Bearing in mind the increasing pressures and demand on services, managing those demands and making best use of available resources is a clear priority (right quality care, right place/ time, right value, best results). This requires significant transformation in how we plan and deliver services, and can only be achieved by working collaboratively.
- Ensuring seamless joined up or integrated services, and appropriate access to services, where patients and their carers have better experiences and no-one falls through a gap, is an important challenge.

The strategy therefore needs to focus on making the best possible use of available resources (e.g. finances, services, human resources, community assets, voluntary activity etc) to drive necessary improvements and changes, while demonstrating value for money.

A framework for this strategy is summarised in Figure 1. This has been developed drawing on local evidence (and the Joint Strategic Needs Assessment [JSNA]) and national evidence (such as the Marmot review – *please see Annex 1*).

Figure 1: Bristol’s Framework for a Health and Wellbeing Strategy – at a glance

Vision: Bristol is a place where all who live, work or learn in the city lead healthy safe and fulfilling lives, now and into the future

Mission: To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing

		Theme 1	Theme 2	Theme 3	Theme 4
Focus on people across the whole life course	Whole population	Bristol is a city of healthy, safe and sustainable communities and places	Bristol is city where healthy life expectancy and wellbeing are improving for everybody	Bristol is a city where health inequalities are reducing	Bristol is a city where people can access high quality support when and where they need it
	Children and young people	Give every child the best possible start in life		Enable all children, young people, adults and older people, especially those experiencing inequalities to: maximise their capabilities and have control over their lives, so that they are more resilient to poor health and able to access support and services to help them take more responsibility for their own health and wellbeing	Ensure services and support are accessible, appropriate, joined up and meet needs, so that patient experiences are improved and nobody falls through any gap (right service/support, right place, right time, best value, right quality and sustainable)
	Adults	Create fair education, employment and good work for all and tackle poverty	Promote and enable healthier choices (strengthening the role and impact of timely and appropriate ill-health prevention) for everybody, but ...		
	Older people	Ensure a healthy standard of living for all and a healthy, health protecting environment			
	Population groups	Build healthy, safe, green and sustainable communities, developing social capital/ local assets	focus also on the areas/ groups and conditions where there is the greatest need and to improve health and wellbeing outcomes	Embed inequalities thinking across all themes	(The Health and Wellbeing Board will expect the commissioning of all the priority areas to be actively considered for integrated or joint commissioning)
HOW		Understanding and improving the wider determinants of health and tackling inequalities Working collaboratively with communities and partners			

3. The Health and Wellbeing Strategy

The Vision for Bristol:

Bristol is a place where all who live, work or learn in the city lead healthy, safe and fulfilling lives, now and in the future.

The Mission:

To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing.

Themes:

- Bristol is a city of healthy, safe and sustainable communities and places.
- A city where healthy life expectancy and wellbeing are improving for everybody .
- A city where health inequalities are reducing.
- A city where people get access to quality support when and where they need it.

Principles informing strategy development (*see also Annex 1*):

- Working in a joined up, cost effective way to integrate good quality services around the individual.
- Enabling children to have the best start in life.
- Reducing health inequalities.
- Preventing anyone from “falling through the gaps”.
- Empowering people and communities to help themselves.
- Focusing on enabling people to stay healthy, on providing timely intervention and on reducing unnecessary demand for services.
- Commissioning services that are innovative and sustainable.
- Spreading good practice and making best use of existing strategies and work programmes.
- Working with partners on issues that have an impact on health and wellbeing within our communities.

How will we do this?

We will work together to tackle the main reasons why people become unwell, so that people are enabled to stay healthier and independent for longer.

The Health and Wellbeing Board will do this through: providing leadership and ambition, driving integration (better joined up services and support), promoting and supporting collaboration (working together) and by putting people and their communities/groups at the centre.

Bristol's Health and Wellbeing Strategy: What are the priorities for the next 3–5 years?

Vision: Bristol is a place where all who live, work or learn in the city lead healthy safe and fulfilling lives, now and into the future

Mission: To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing

Theme 1	Theme 2	Theme 3	Theme 4
Bristol is a city of healthy, safe and sustainable communities and places	A city where healthy life expectancy and wellbeing are improving for all ages	A city where health inequalities are reducing	A city where people get high quality care and support when and where they need it
How? By addressing the wider influences (determinants) of our health and wellbeing and through considering health in all aspects of our city life e.g. education, employment, food, transport, planning, housing, leisure.	How? By promoting and enabling healthier lifestyle choices for the whole population across the complete life course (children and young people, young and working age adults and older people).	How? By focusing on areas and population groups that include the most vulnerable and disadvantaged and by working at neighbourhood level with local community partnerships.	How? By actively considering priority areas for joint commissioning: where there is a clear need/ priority to better integrate services across the whole care pathway and to improve patient and carer experiences.
Priorities			
<ul style="list-style-type: none"> ● Give children the best possible start in life: <ul style="list-style-type: none"> – Promote emotional health and wellbeing as a foundation for healthy development and offset risks of disadvantage through targeted family support services – Ensure school readiness – Improve educational attainment 	<ul style="list-style-type: none"> ● Reduce infant mortality (deaths) and premature (early) deaths ● Increase life expectancy and reduce the burden of disease (promote healthy life expectancy) ● Focus on ill-health prevention and early intervention, for those conditions contributing most to inequalities (cancer, CVD, COPD, Diabetes, Mental Health) 	<ul style="list-style-type: none"> ● Ensure effective delivery of lifestyle interventions and support; designed to improve health and reduce health inequalities and the social gradient ● Work with those experiencing inequalities to maximise their capabilities and have more control over their lives (improve resilience to poor health and support them in 'self care') 	<ul style="list-style-type: none"> ● Reduce the rate of avoidable hospital admissions and reduce reliance on acute services by: <ul style="list-style-type: none"> – supporting re-enablement and independent living – developing appropriate access to integrated to community based health and social care support and services (both statutory and voluntary)

Bristol's Health and Wellbeing Strategy: What are the priorities for the next 3–5 years?

Vision: Bristol is a place where all who live, work or learn in the city lead healthy safe and fulfilling lives, now and into the future

Mission: To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing

Theme 1 Bristol is a city of healthy, safe and sustainable communities and places	Theme 2 A city where healthy life expectancy and wellbeing are improving for all ages	Theme 3 A city where health inequalities are reducing	Theme 4 A city where people get high quality care and support when and where they need it
<ul style="list-style-type: none"> ● Tackle poverty and inequality (including action on child poverty, NEETs and poverty in older age) through increasing employment and enterprise opportunities and maximising benefit uptake. ● Build social capital and develop community assets, promoting and supporting voluntary action, providing meaningful activities for those who otherwise may be disengaged or isolated. ● Prevent homelessness, increase access to affordable housing, improve housing quality and also tackle fuel poverty. ● Improve community cohesion, improve perceptions of safety and mental wellbeing and prevent mental ill-health through reducing social isolation. 	<ul style="list-style-type: none"> ● Promote and enable healthier lifestyle choices through access to information, services and support to: <ul style="list-style-type: none"> – stop smoking (and support tobacco control initiatives) – reduce the harm cause by alcohol and substance (e.g. drug) misuse/dependency and promote recovery – tackle obesity via physical activity and healthy eating – reduce sexual health risks and teenage pregnancy. ● Promote, enable and support positive lifestyle choices for children and young people (inc. drugs, alcohol). 	<ul style="list-style-type: none"> ● Improve access to services, care and support for vulnerable and/or disadvantaged populations and those with greatest needs (where outcomes need to be improved most). ● Ensure a strategic, multi-agency response to the increase in child population in inner city and east part of the city, ensuring access to services and support meets changing needs. ● Ensure that the impact on inequalities is recognised, prioritised and embedded in everything we commission or do. 	<ul style="list-style-type: none"> ● Ensure quality services, support and care are commissioned and delivered in an integrated manner to improve outcomes and patient experiences, focussing initially on identified priority areas: <ul style="list-style-type: none"> – children, adults and groups with highly complex needs – long-term conditions – mental health – maternity services – end of life care. ● Linked to the above, improve patient experiences and safety within in-patient care, improving transparency and engagement with patient and public representatives.

Bristol's Health and Wellbeing Strategy: What are the priorities for the next 3–5 years?

Vision: Bristol is a place where all who live, work or learn in the city lead healthy safe and fulfilling lives, now and into the future

Mission: To make Bristol a city where healthy life expectancy and wellbeing are improving and health inequalities are reducing

Theme 1 Bristol is a city of healthy, safe and sustainable communities and places	Theme 2 A city where healthy life expectancy and wellbeing are improving for all ages	Theme 3 A city where health inequalities are reducing	Theme 4 A city where people get high quality care and support when and where they need it
<ul style="list-style-type: none"> ● Develop a restorative justice approach across the city (to reduce stress, anxiety, neighbourhoods disputes, absences from schools etc) and improve perceptions of safety. ● Tackle domestic violence, abuse, sexual violence and exploitation, and other forms of gender-based violence. ● Promote a healthy sustainable and resilient food supply that benefits the local economy and creates better access to fresh ingredients. ● Create a high quality built and green/sustainable environment, and manage the health impacts of climate change embedding public health principles in everything we do. 	<ul style="list-style-type: none"> ● Ensure access to a health enabling environment e.g. safe cycling, good healthy and affordable food, tobacco control /action on tobacco, air quality and a transport system that supports physical activity. ● Improve access to information about health and wellbeing and access to services: coordinate information about health, care and support services and promote more effective and appropriate use of services. ● Ensure that the safeguarding of children and vulnerable adults receives appropriate attention and that safeguarding issues are addressed in all commissioning plans, strategies and action plans (e.g. services, lifestyle interventions, care and support). 	<ul style="list-style-type: none"> ● Investigate and monitor social and economic trends that have the potential to impact on inequalities and instigate appropriate actions or use evidence for awareness raising and advocacy if needed. ● Promote an evidence-based and evaluative approach to everything we do, embedding inequalities analysis in e.g. audits, performance monitoring, evaluations and reviews, promoting shared learning (about what works when and under what conditions) and sharing and using the results. 	<ul style="list-style-type: none"> ● Improve outcomes for people using mental health services, including dementia services, through an improved integrated system/service across the city. ● Ensure that more people and their carers have direct choice, advice and control over their own health and care services. ● Ensure people and carers are supported to better manage their own care, health and wellbeing. ● Commission services, care and support for highly complex and vulnerable groups, including children and young people who have experienced sexual exploitation.

4. How will the strategy be used?

We have identified four themes for the Health and Wellbeing of the city, underpinned by some particular priorities to support these. This is not a statement of everything that needs to be done for better health and wellbeing in the city. It is a statement of the most pressing priorities for the next few years and where there is opportunity to improve outcomes.

It is acknowledged that much of this work is subject of existing strategies, plans and work programmes. Where this is the case, the Health and Wellbeing Board will seek to add weight and influence to these areas of work and be assured that they are delivering results. There are also some areas of work that need bringing into sharper focus or need action taken to improve co-ordination.

The Board itself will also focus on a limited range of issues that it will give specific attention to (listed below). In summary, the Strategy will be used in the following ways:

4.1 Integration and Commissioning

The Strategy will set the framework for commissioning plans across the NHS and the council, with a key focus on the integration of services. These commissioning plans will then be “held to account” by the Health and Wellbeing Board (on which HealthWatch is represented), to make sure that they reflect the direction set within the strategy.

4.2 Influencing

The council and other agencies and partnerships are responsible for a wide range of services that impact on health and wellbeing. The strategy will also be used to influence the direction of other strategies and plans, for example, planning, transport and major developments, in order that these contribute to the overall health and wellbeing of the city in a sustainable way.

We will also work in partnership with other organisations for example the police, fire service,

schools/education services, Voluntary Community Sector, other service providers and communities to shape the actions that will deliver against the key priorities.

4.3 Focus and leadership

There are some areas of work where a sharper focus (such as that provided by the strategy), clearer leadership (provided by the Board) or better governance will add value to existing work programmes and strengthen them, increasing their impact and outcomes.

4.4 Informing the board’s own work programme

The Health and Wellbeing Board has oversight and responsibility for driving forward the strategy, but the board will also drive forward a limited range of issues in the first eighteen months that it needs to prioritise. These include:

- Ensuring that appropriate mechanisms are in place to enable the integration and joint commissioning of services, where appropriate
- Ensuring that there is a strategic, multi agency response to the increases in child population in Bristol, but particularly focused in inner city and East Bristol where there are pressing needs
- Ensuring the on-going investigation of social trends that might impact on health inequalities and strengthening our inequalities analysis and response in everything we do
- Developing a patient and public engagement strategy, in collaboration with HealthWatch, particularly focusing on how we engage with people that are the most disadvantaged
- Ensuring improved co-ordination of information between and about services and promoting more effective and appropriate use of services
- Ensuring that highly complex and vulnerable groups are not overlooked and that no-one falls through any gaps.

5. How will the strategy be managed and monitored?

Progress on the strategy will be measured through a range of performance indicators and will be reviewed each year. Progress will be driven and monitored by the Health and Wellbeing Board. It must be acknowledged that during 2013 much of the action will be focused around getting the right mechanisms and people in place, as commissioning plans and budgets will already have been set.

The board itself will not develop a detailed action plan for the delivery of the strategy, as much of the delivery will be contained within the work programmes of teams, partners and commissioning units. Rather, the board will seek assurance that the priorities are being delivered and progress is being made and will provide both leadership and challenge.

6. What happens next?

The Health and Wellbeing Board has now approved this draft strategy to go forward for public consultation. For the next 12 weeks there will be opportunities to contribute through an on-line and a paper survey and through some “drop-in” meetings in different localities. More information on the dates for these events will be available shortly. In the meantime, work will continue on developing the details behind this draft as information becomes available.

Find out more at:

bristol.gov.uk/healthandwellbeing

Consultation closes on 10 May 2013.

Annex 1: Background to the development of this draft strategy

A1: The new Health and Wellbeing Board

Bristol has a strong track record of partnership working and this has the opportunity to be significantly strengthened for the benefit of Bristol residents through the establishment of the Bristol Health and Wellbeing Board. The Board has representation from health service commissioners, the Clinical Commissioning Group, local councillors, and Bristol City Council commissioners from Adult Care, Public Health and Children's Services, and soon, the National Commissioning Board. The voluntary sector and patient and public voice (including HealthWatch) is also represented.

The Health and Wellbeing Board has oversight of commissioned services and interventions, and is expected to drive integration (or better joining up) of services and identify opportunities for improvements. Currently (2012) over £1.2 billion is spent annually on health and care services within the city. The Health and Wellbeing Board has the potential to influence services that this money is spent on. There are also other service areas that have an impact on health and wellbeing, for example, housing, leisure and police services.

A2: Background to the development of the strategy

However, our health is influenced by much more than the health and care services that we receive. For example, environmental factors (such as the quality of the built environment, transport, air quality and access to green spaces, good food etc), economic factors (e.g. child poverty, employment) and social factors are all wider determinants of our health and wellbeing.

Through the Health and Social Care Act (2012), councils and the health care sector have a duty to produce a Joint Health and Wellbeing Strategy [JHWS] which sets the overarching framework for health and care commissioning plans within the city – now and into the future. The Health and Wellbeing Board also has a duty to 'promote integration', so a focus on collaboration is key to success, building on local achievements and identifying new opportunities. However, the strategy is being developed within the context of resource constraints so there needs to be a strong focus on 'getting the most out of the whole system'. Feedback from partners to date demonstrates an active commitment to collaborate and a significant ambition that, by working together more cohesively, Bristol 'can deliver'.

A3: Taking into account what people want and need

We know that patients and service users want services that are organised around, and responsive to, human needs. They do not want to fall through any gaps and do not want organisational barriers and boundaries to delay or prevent access to care, so driving more integrated care is a local priority.

We also know that being healthy and well throughout our lives is much more than just good health and care services. For most people, staying healthy, without the need for health and care services, is the top priority. At the same time, most want to remain independent for as long as possible, but with access to support or advice when needed.

From our early consultation with stakeholders, support for taking actions to prevent ill health and all the factors that influence it, while enabling people to continue to take responsibility for their own health and wellbeing, is a key priority.

A4: How has the draft strategy been developed?

The Joint Strategic Needs Assessment (JSNA) is an ongoing process to identify the current and future health and wellbeing needs of the local Bristol population. The JSNA has formed a local evidence base for the development of priorities since 2008 and the new (2012) JSNA has informed this draft strategy.

The strategy is also informed by Marmot principles. In November 2008, Professor Sir Michael Marmot was asked by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England.

The final report “Fair Society Healthy Lives” was published in 2010 and concluded that reducing health inequalities while improving health outcomes would require action on six policy objectives:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill-health prevention

This Marmot analysis informed the Bristol Commissioning Model for Health and Wellbeing (see Bristol’s JSNA, 2010) and this strategy has taken these into account in the formulation of themes and priorities.

A5: The strategy development sub-group and preliminary consultation

To progress this work, the Health and Wellbeing Board established a sub group to co-ordinate and develop proposals on its behalf. Discussion began in the early summer 2012 with a short issues paper prepared by Dr Ulrich Freudenstein, the chair of the sub group.

Wide ranging feedback was received from selected stakeholders, groups and individuals. This helped to shape the discussion that took place at a Stakeholder Conference on 3rd October and Voluntary Community Sector event on 8th November 2012.

A large variety of detailed suggestions have been made by stakeholders. Many of these will contribute to the delivery of the themed work programmes. Not all of the detail is included in this document, but these suggestions will be shared with those responsible for the programme areas in order to make best use of the knowledge and experience within the city.

A6: What criteria informed strategy development and prioritisation?

The sub group established criteria for strategy development and prioritisation which were tested against the issues raised by stakeholders and partners. These nine criteria for prioritisation were:

1. Consider Bristol as a whole system and look to identify work streams where closer co-operation between the council and health services will benefit the public, including through integrated planning/commissioning.
2. Actions under the strategy will seek to ensure that people have a positive experience of care and recognise that quality services and quality of life are important.
3. Actions to be taken under the strategy are affordable in the widest sense (ie service changes, mergers or service reductions elsewhere may need to take place to free up resources for investment).
4. Ensure that our priorities, including outcomes and targets for investment should make sense to the public, public health, elected members and health service leaders.
5. Actions within the strategy should have impact and make a difference.
6. Base our policy and practice on best available evidence. Where evidence does not exist, consider if and how we can contribute to the building of an evidence base.
7. Ensure that the strategy, planning and activity is informed by the Joint Strategic Needs assessment.
8. Actions under the strategy should help people to help themselves and use people as a resource whenever possible.
9. Ensure that all our work looks to reduce the health inequalities gradient, and that the impact of our work on health inequalities is routinely assessed.

A7: Conclusions and acknowledgements

Feedback from partners to date demonstrates an active commitment to collaborate and a significant ambition that, by working together more cohesively, Bristol 'can deliver'. Hopefully this has been captured in the thinking under-pinning the development of this strategy.

The strategy development group and the Board would like to thank all those who have contributed to date, and look forward to using the feedback on this draft to inform further strategy development and finalisation.

If you would like this information in another language, Braille, audio tape, large print, easy English, BSL video or CD rom or plain text please contact us on 0117 922 2848 or email health@bristol.gov.uk

For more information visit bristol.gov.uk/healthandwellbeing