	BRIEFING TO HEALTH AND WELLBEING BOARD
hammersmith & fulham	22 June 2015
IMPROVING OUR PUBLIC'S HEALTH – THE PUBLIC HEALTH STRATEGY FOR	
	GH OF HAMMERSMITH AND FULHAM, THE ROYAL GTON AND CHELSEA AND THE CITY OF WESTMINSTER
Report of the Executive Director of Adult Social Care and Health	
Open Report	
Classification: For Information	
Key Decision: No	
Wards Affected: All	

Accountable Executive Director: Liz Bruce, Executive Director of Adult Social Care

Report Author: Stuart Lines, Public Health Consultant,

Interim Director of Public Health for LBHF

and Health

London Borough of Hammersmith & Fulham

Contact Details:

E-mail:

Tel: 020 7641 4690

slines@westminster.gov.uk

1. EXECUTIVE SUMMARY

- 1.1 *Improving our public's health* is a ten-year strategy for the City of Westminster, the Royal Borough of Kensington and Chelsea and the London Borough of Hammersmith and Fulham. It includes six shared public health priorities as well as one specific priority for each borough. The LBHF specific priority is "reducing the health inequalities associated with childhood poverty".
- 1.2 Annual updates on progress and thorough reviews every three years will ensure that the priorities remain relevant and focused. The strategy will be used as an internal resource, which public health professionals and wider council departments can use to work together and embed public health priorities into day to day working. The full strategy will be shared with health (CCG) colleagues as key partners in its delivery, and a shorter, public facing document will be made available to residents and other partners.
- 1.3 Much of the success of this strategy will be dependent on the positive engagement from council services and wider partners. Achievement of these large scale public health outcomes will be delivered most effectively by different services and organisations working together and sharing aims.

2. **RECOMMENDATION**

2.1 HWBB members are asked to consider how the strategy's priorities can be aligned to the work of their organisations and how these efforts can be coordinated with Public Health and other relevant stakeholders.

3. INTRODUCTION AND BACKGROUND

- 3.1 This is the first public health strategy for the three councils to be developed by since public health functions transferred from the NHS in 2013. It seeks to support a step change in the integration of public health priorities into all relevant services by providing a clear focus on the priorities that will help make our boroughs places where everyone starts their life well, lives well and ages well.
- 3.2 A single page summary of the strategy, including the six shared priorities and one LBHF specific priority, is included on page 5 of the full report attached as appendix 1.

4. PROPOSAL

4.1 Through the development and delivery of the ten year public health strategy, we intend to help create sustained and focused action on the key areas that we believe will improve public health and reduce health inequalities in our three boroughs.

5. OPTIONS AND ANALYSIS OF OPTIONS

- 5.1 HWBB Board Members are asked to review the priorities below and consider:
 - 5.2 Whether they cut across or complement priorities for their organisations and/or the Health and Wellbeing Board and, if so, what new opportunities does this strategy afford for collaboration to achieve shared priorities and,
 - 5.3 Whether any of the priorities represent a strategic opportunity to introduce new activities into their service and/or the Health and Wellbeing Board that can improve public health outcomes.

6. CONSULTATION

6.1 This Strategy has incorporated feedback from the Cabinet Member for Adults and Public Health, Shared Services Board, Public Health Integration and Transformation Board and Public Health England, London

7. EQUALITY IMPLICATIONS

- 7.1 An overriding ambition of this strategy is to address the wider determinants of health and reduce health inequalities. We believe a sustained focus on these priorities will make a tangible difference to health inequalities in our boroughs.
- 7.2 Any significant changes in service delivery as a result of this strategy will be subject to Equality Impact Assessments as part of the decision making process.

8. LEGAL IMPLICATIONS

- 8.1 There have not yet been any proposals that impact on services and therefore there has not been the need to seek legal advice.
- 8.2 Implications verified/completed by: N/A

9. FINANCIAL AND RESOURCES IMPLICATIONS

- 9.1 In the future, the public health budget will be more closely aligned to the identified priorities within the strategy. This alignment will be subject to normal governance processes and will require consideration of financial implications on a case by case basis.
- 9.2 Implications verified/completed by: N/A

10. RISK MANAGEMENT

- 10.1 RISK Lack of engagement from all stakeholders may undermine successful action to address priorities. ACTION TO MITIGATE RISK the strategy is being presented to all key stakeholders within the Councils and CCGs. A public facing document is being produced to share with wider stakeholders. Task and Finish Groups will be established to coordinate activities on priorities where there is currently a lack of joint action (for example, a Task and Finish Group is not required for reducing smoking rates because the Smokefree Alliance is already well-established.
- 10.2 RISK The strategy fails to focus action on the key priorities and becomes irrelevant. ACTION TO MITIGATE RISK every year we will review and provide an update on how we are performing against each of the priorities. The Annual Public Health Report will also comment on our progress in these priorities.
- 10.3 RISK The public health priorities in the borough change during the ten year lifetime of the strategy. ACTION TO MITIGATE RISK every three years we will review progress and strategic direction of the overall strategy to ensure that it remains relevant.
- 10.4 Implications verified/completed by: Stuart Lines, Interim Director of Public Health for LBHF

11. PROCUREMENT AND IT STRATEGY IMPLICATIONS

- 11.1 Public Health is currently in the process of conducting comprehensive reviews of all our commissioned public health services. This strategy will help guide these reviews which will ultimately have implications on procurement activity
- 11.2 Implications verified/completed by: N/A

LIST OF APPENDICES:

Appendix 1 – Full report – Improving our Public's Health – the public health strategy for the London Borough of Hammersmith and Fulham, the Royal Borough of Kensington and Chelsea and the City of Westminster