



Bristol Health & Wellbeing Board

| Title of Report | |
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| Author, including organisation | Christina Gray, Director of Public Health |
| Date of meeting | 27 th March 2019 |
| Report for Discussion & Decision | |

1. Purpose of this Paper

To present to the Health and Wellbeing Board a proposal for developing a new Health and Wellbeing Strategy and delivery plan which is maximises the opportunities presented by the both the Bristol One City Plan and Healthier Together.

2. Executive Summary

The Health and Wellbeing Board has a statutory duty to produce a Health and Wellbeing Strategy. The current strategy was produced in 2013 and now needs to be updated.

Bristol has recently developed a One City Plan which is has been developed in in consultation with partners and communities. The One City Plan includes a number of ambitions, commitments and actions to address health and health inequality.

Healthier Together is a collaboration of Health and Care organisations across Bristol, South Gloucestershire and North Somerset. Healthier Together is supporting the development of new models of Integrated Care. Improving health and reducing health inequality is central to these plans.

The Board is recommended to adopt the Health and Wellbeing ambitions within the One City Plan and Healthier Together as the framework for the new Health and Wellbeing Strategy and delivery plan.

3. Recommendations for the HWB to Agree

That the Health and Wellbeing Board adopt the Health and Wellbeing ambitions within the One City Plan and Healthier Together as the framework for the new Health and Wellbeing Strategy.

That the Board develop a delivery plan against which to measure progress.

That Board meeting structure is reviewed to include development sessions within which to explore topics in more depth prior to action and decision; and joint Board sessions with North Somerset and South Gloucestershire.

4. Main body of the Report

The gap between the most and least deprived areas in Bristol is 9.5 years for men and 7.4 years for women. In 1996 the gap was 10 years, so although overall life expectancy has increased slow progress has been made in closing the gap.

Of equal concern is the gap in *Healthy Life Expectancy* which ranges from 11 years to 31 years for females and from 10 years to 24 years for males between least and most deprived areas. This health gap describes years lived with disability, in discomfort and pain. It describes impacts on employment, the ability to engage in daily life and the need for health and social care treatments and interventions.

These entrenched inequalities require concentrated action and an approach which forensically addresses both the social determinants of health such as housing, employment and poverty, alongside a focus on the prevention and early intervention opportunities within the health and care system.

This paper proposes that the Board frame the new Health and Wellbeing Strategy around the opportunities to address a range of social and economic determinants as outlined in the One City Plan and within the Healthier Together programme.

To support the Health and Wellbeing Board effectively discharge its assurance role on behalf of the population an action plan with measurable outputs and outcomes needs to be developed.

The Bristol One City Plan provides a unique opportunity to take a whole system approach to addressing health inequalities while the developing Healthier Together programme led by the Sustainability and Transformation Plan provides opportunities for prevention and early intervention through the Health and Care system.

5. Appendices

Bristol One City Plan

<https://www.bristolonecity.com/one-city-plan/>

Healthier Together

<https://bnssghealthiertogether.org.uk/>

Draft Plan on a Page