



# **Bristol Health & Wellbeing Board**

Developing the Health and Wellbeing Strategy Refresh				
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organisation				
Date of meeting	10 August 2016			
Report for Decision				

### 1. Purpose of this Paper

To seek formal endorsement of the direction of travel of the developing re-fresh.

### 2. Executive Summary

#### 3. Context

- 3.1 The HWB established a Strategy Re-fresh group to establish a process and make recommendations to the HWB for a much smaller set of priorities.
- 3.2 Three Key Priorities have been identified, following the agreement of the Health and Wellbeing Board on the criteria for prioritisation.
  - Mental wellbeing and social isolation
  - Alcohol misuse
  - Healthy Weight
- 3.2 An informal HWB seminar in June 2016 discussed this process and felt confident with the outcome.
- 3.3 Mental Wellbeing was clearly felt to be a top priority, with a wide range of views on which aspects are the most important. For some, the importance of prevention and

public mental health was the most important. For others it was about improving services and access to services. It was acknowledged that action on Alcohol Misuse had begun and the model for developing the strategy could be replicated for the other priorities.

#### 4.00 Issues raised at the seminar

- 4.1 A wide range of topics related to mental health were discussed, for example:
  - Impact of housing on mental health
  - Impact of anti-social behaviour
  - The role of schools (including primary) in promoting resilience + systemising the offer for schools (join up Healthy Schools, Off the Record, HITs)
  - Using social prescribing
  - Wellbeing of staff across all sectors
  - Importance of diversity in the workforce and governance structures
  - Difficulties of recruitment right across the health and care sectors
  - Systemised discharge planning from mental health services to avoid revolving door
  - Getting a balance between tackling long-term, entrenched problems (eg. Black males in the MH system) as well as getting behind "upstream" preventative work.
  - Need to be able to see the whole system, including the Acute Trusts in order prove the early intervention concept
  - Effectiveness of new mental health services
- 4.2 Some examples of success would include:
  - People will be better equipped for the challenges they face in their lives
  - Cultural views: recognition and access
  - Better Care community webs: could be rolled out?
  - A well-equipped, confident workforce
  - Giving people the language
  - Access to information and knowledge: having the right resources for the city
  - Communities supporting each other

- Expansion of Better Care integration
- Parity of esteem as an outcome
- Success would mean people are not left waiting in inappropriate places, and nobody will ever be in S136 suite for 75 hrs plus (not least because this is illegal).
- Opportunities for 'digitally enabled' / technological progress/apps etc, under 'innovation' stream
- Person-centred services
- Population wellbeing measured
- 4.3 Themes underpinning the priorities.

Tackling	Prevention	Tackling the	Promoting	Innovation
health	and Early	wider	Integration	
inequalities	Intervention	Determinants		
	and self	of health		
	care			

The discussion at the seminar also included the importance of these themes running through the three priorities.

## 5. Key risks and Opportunities

5.1 There is significant opportunity to deliver against a smaller number of Key Priorities.

## 6. Implications (Financial and Legal if appropriate)

None arising directly from this report.

#### 7. Recommendations

It is recommended that the HWB endorse the adoption of these three Key Priorities.

## 9. Appendices

Appendix A. Developing Health and Wellbeing Strategy Re-fresh