

**JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING
PAPER FOR CHAIR**

MEETING DATE: 3rd June 2024

REPORT/PAPER TITLE: Summary of Circulars Published by DoHASC on 1st February 2024 relating to status of JHWBB

REPORT OF Director of Public Health

**SUMMARY OF KEY ISSUES INCLUDED WITHIN THE ATTACHED
REPORT OR PAPER**

- The Department of Health and Social Care also published guidance on the 1st February 2024 relating to the preparation of integrated care strategies.
- [The full circular may be found here.](#)
- This includes additional guidance on localised decision-making at place [local authority] level including how local strategies [including the Joint Health and Wellbeing Strategy] should shape integrated care strategies.
- The guidance also sets out very clearly the continued importance of “place” and the Joint Health and Wellbeing Board and its outputs.
- Specifically the Joint Health and Wellbeing Strategy and the Joint Strategic Needs Assessment.

REPORT AUTHOR:

Report prepared by Mark Tickner Date 03.06.2024

Agency/Organization/Role LBE Public Health Department Health and Wellbeing Board Partnership Manager.

ANY COMMENTS OF THE DIRECTOR OF PUBLIC HEALTH

JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING PAPER FOR CHAIR

The original guidance on the preparation of integrated care strategies was first published in July 2022.

This guidance replaces that previously published.

A summary of the changes made as they relate to the Joint Health and Wellbeing Board and its outputs are:-

- additional guidance on localised decision-making at place level, including how place-level plans and strategies (including shared outcomes frameworks) should shape any integrated care strategy.
- **greater clarity on the opportunity for integrated care strategies to consider the wider determinants of health in setting the overall direction for the system (for example, housing and crime) and health-related services (services that are not directly health or social care services but could have an impact on health)**
- greater clarity on **the expectation** for integrated care partnerships (ICPs) to promote widespread involvement when developing their integrated care strategies, supported by specific examples - this includes engagement with voluntary sector organisations.

Context

The Health and Care Act 2022 amends the Local Government and Public Involvement in Health Act 2007, and requires ICPs to write an integrated care strategy to set out how the assessed needs (from the **joint strategic needs assessments**) can be met through the exercise of the functions of the integrated care board (ICB), responsible local authorities or NHS England).

Any integrated care strategy should build on existing work and momentum to further the transformative change needed to tackle challenges such as reducing disparities in health and social care; improving quality and performance; preventing mental and physical ill health; maximising independence and preventing care needs, by promoting control, choice and flexibility in how people receive care and support.

The integrated care strategy should set the direction of the system across the area of the ICB and ICP, setting out how commissioners in the NHS and local authorities, working with providers, the voluntary, community and social enterprise (VCSE) sector, and other partners, can deliver more joined-up, preventative, and person-centred care for their whole population, **and across the life course.**

The integrated care strategy presents an opportunity to do things differently to before, such as reaching beyond 'traditional' health and social

JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING PAPER FOR CHAIR

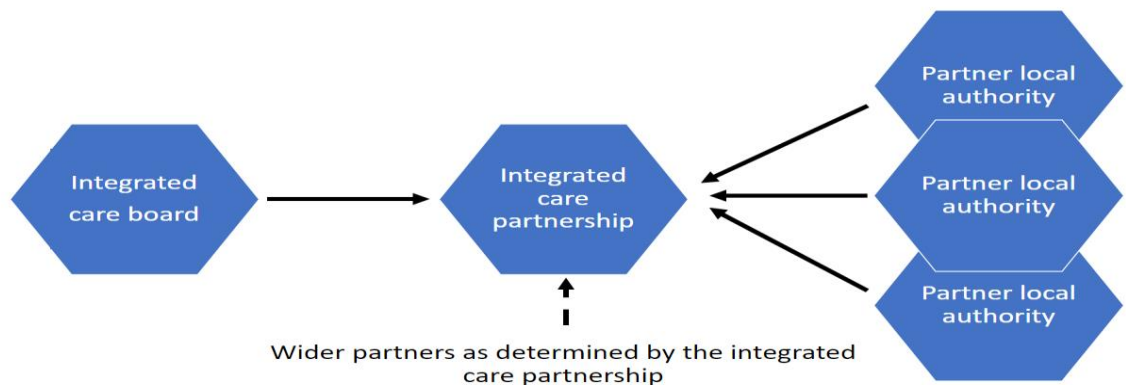
care services to consider **the wider determinants of health** or joining-up health, social care and wider services, and to take an approach based on health creation, in addition to addressing deficits.

ICPs and the wider system

The make-up of the ICP

The Health and Care Act 2022 establishes ICBs and requires them to form a joint committee with each responsible local authority in their area. This committee is the ICP as demonstrated in Figure 1 below.

Figure 1: the make-up of the ICP



The purpose of the integrated care strategy

The integrated care strategy is an opportunity to work with a wide range of people, communities and organisations to develop evidence-based, system-wide priorities that will improve the public's health and wellbeing and reduce health inequalities.

The integrated care strategy **must** set out how the assessed needs (identified in the **joint strategic needs assessments** produced by **the health and wellbeing boards**) of the local population are to be met by the ICB.

Place, health and wellbeing boards and subsidiarity

Health and wellbeing boards are an important mechanism for driving joined up working at place level. **The health and wellbeing board** remains responsible for producing both **the joint strategic needs assessment** and **the joint local health and wellbeing strategy**.

**JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING
PAPER FOR CHAIR**

The integrated care strategy should **complement** the production of these local strategies. It should not replace or supersede the joint local health and wellbeing strategies, which will continue to have a vital role at place.

The integrated care strategy should also and complement, not supersede, any other place-based plans and strategies - for example, shared outcomes frameworks being developed by place partnerships.

In cases where the geographical area covered by a place-based arrangement is coterminous with that of a health and wellbeing board, the joint local health and wellbeing strategy produced by the health and wellbeing board may act as the shared outcomes framework the government expects place partnerships to develop.

The ICP must consider refreshing the integrated care strategy when it receives a new joint strategic needs assessment.

The ICP should continue to consider how its integrated care strategy aligns with shared outcomes frameworks produced by places within its geographical area, and in light of any new policy announcements.

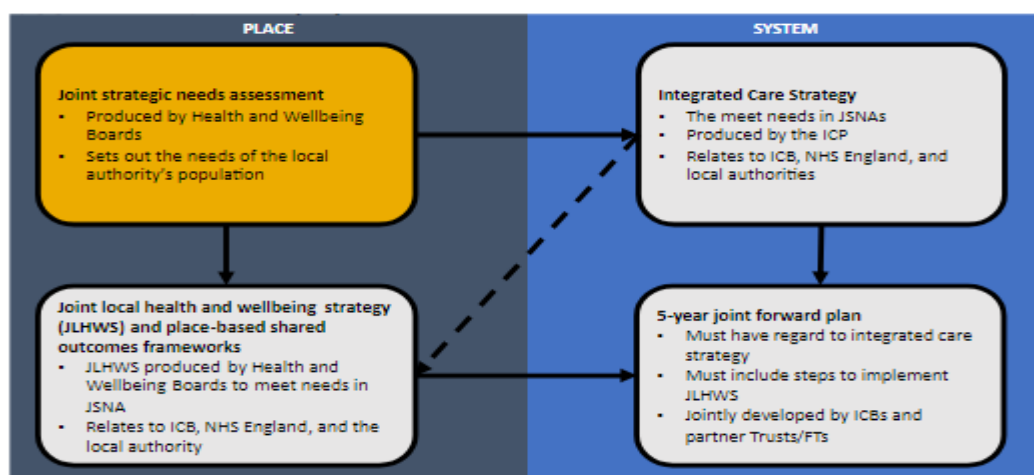
A health and wellbeing board is required to consider revising the joint local health and wellbeing strategy on receiving a new integrated care strategy, but need not produce a new strategy if it considers the existing strategy sufficient.

There should be alignment between system and place level strategies and plans.

Figure 2 highlights that the integrated care strategy, as a system-level strategy, should complement the place-level joint strategic needs assessment, joint local health and wellbeing strategy, and any place-based shared outcomes framework.

JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING PAPER FOR CHAIR

Figure 2: plans and strategies at system and place level within ICSs



Producing an integrated care strategy

Responsibility for developing the strategy.

The ICP is responsible for preparing the integrated care strategy, so ICBs and responsible local authorities should engage, co-operate and provide the necessary resources for the preparation for the strategy.

Evidence of need and the integrated care strategy

The integrated care strategy is intended to meet the needs of local people of all ages identified in the **relevant health and wellbeing boards' joint strategic needs assessments**.

These assessments relate to all health (physical and mental), and social care needs of the whole population. **ICPs should use these assessments** to explore gaps in care, unwarranted variation, and disparities in health and care outcomes and experiences between parts of the population and understand opportunities where system-wide action could be effective in improving these, including addressing the wider determinants of health and wellbeing, and preventing ill-health and future care and support needs.

Local authority and ICB leadership Implications

ICPs should involve chairs of health and wellbeing boards, local authority directors of children's services, adult social services, statutory safeguarding partners, and public health and their teams in the production of the integrated care strategy.

JOINT HEALTH AND WELLBEING BOARD - SUMMARY BRIEFING PAPER FOR CHAIR

Population health and prevention

The circular re-states the importance of “prevention” to the activity defined in ICPs. And notes that they should consider how to improve health and wellbeing and how to support prevention of physical and mental ill-health.

Definition of “population health management”

Evidence-based, proactive, data-driven population health management techniques such as targeted predictive prevention and tackling long-term challenges through addressing the wider determinants of health are an important part of the broader task of improving population health.

ICPs, when considering how they can address health and social care needs, should consider whether population health management approaches could support people in staying healthy, avoiding illness, and the impact this can have on their and their families’ lives.

ICPs should ensure the full utilisation of **public health expertise** and leadership, centring on **the local directors of public health**.

Refreshing the integrated care strategy

The circular makes very clear that whenever the ICP receives **a new joint strategic needs assessment from a health and wellbeing board**, it must consider whether the integrated care strategy needs to be revised.

- [The full circular may be found here.](#)