Testing the Priority Setting Framework

Background

- 1. During discussions at the August meeting of the shadow Health and Wellbeing Board, members requested agreed to develop a priority setting framework to inform the Joint Health and Wellbeing Strategy (JHWS).
- 2. The priority setting framework will be used as the main conduit for how the board identifies its priorities for the Joint Health and Wellbeing Strategy.
- 3. The board's terms of reference clearly outline the responsibilities of the board in developing its priorities and the JHWS:

'To determine the priorities for, and prepare, the Joint Health and Wellbeing Strategy for Buckinghamshire, that spans the NHS, social care, public health, and wider health determinants. The Strategy will be based on the JSNA and will focus on outcomes'

Purpose

- 4. The purpose of the workshop session is:
 - To finalise a model for the board's priority setting framework;
 - To consider the plans/strategies/data sources that will feed into the priority setting framework; and
 - To test out the framework using inputs from the Joint Strategic Needs Assessment (JSNA) and identify any gaps that exist.

What inputs should be considered for the priority setting framework?

- 5. For the workshop session the board will use priorities identified within the JSNA to input into the draft priority setting framework. This approach will provide members with opportunity to test the questions outlined in the draft priority setting framework, to identify any gaps in the framework and edit the existing text if required.
- 6. Once the board has finalised the priority setting framework, it will be important to consider other data sources and plans that may feed into the priority setting framework, such as:
 - Children & Young People's Plan
 - Local authority corporate aims
 - Housing strategies
 - National reviews, e.g. Marmot

What does the board want its priorities to look like?

7. The type and level of priorities that members of the board want to set will impact on the inputs that will be fed into the priority setting framework. There are several approaches that the board may wish to consider, below are some examples drawn from existing Health and Wellbeing Strategies in the United Kingdom:

High Level Thematic	Specific	Mixed
 Helping people to keep physically fit Improving prevention, management & outcomes for the priority health conditions in Bucks Ensuring safe, modern, effective and accessible services Improving outcomes for children, young people and their families To improve public health 	 Reducing levels of smoking Improve sexual health Reduce Obesity Reduce substance misuse Ensuring residents get the benefit of immunisation and screening programmes Reducing levels of harmful drinking Reducing levels of domestic violence Improve the provision of suitable places to live Improving the availability of high quality employment to improve the physical and mental health of the 	 Children & Young Peoplereducing child poverty, ensuring issues relating to safeguarding are integral to local plans, etc To improve mental health and wellbeing: Through mental health promotion. Modernise and personalise services that are locally accessible, delivering high

 by promoting factors which contribute to healthy lifestyles and well being To develop and strengthen preventative work and service provision for vulnerable children and adults to prevent crisis. Improving the economic, social and environmental factors which promote good health and wellbeing 	 Improve the availability of green spaces 	 quality outcomes with a focus on recovery. Help communities understand mental health and wellbeing by breaking down barriers, and reducing stigma about mental illnesses. Health and Wellbeing-promote healthy lifestyles, reduce health inequalities, improve the quality of life for an ageing population, improve the quality of life for children and young people, Reduce homelessness, and create well-connected communities
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8. To further assist the priority setting process the priorities from all of the organisations represented on the board have been included in Appendix 2. These on the whole are high level strategic priorities, many of which take on similar themes such as safer communities and helping the most vulnerable.

Once priorities have been identified, what next?

- 9. The JHWS should have well evidenced priorities for action that all partners involved in health and wellbeing should 'have regard' to when developing together their commissioning plans.
- 10. The board will need to consider how it will shape the JHWS. There are a number of issues that will need to be debated prior to the JHWS being finalised including:
 - Who will lead on the strategy? Will a project group approach be taken to shape the development of the JHWS?
 - The board has responsibility for promoting joint commissioning and integrated provision between health, public health and social care. Members may wish to consider how it wishes to pursue this responsibility;
 - At what stage will the board go out to consultation? It is important to note that the board will have to allow 12 weeks for a formal consultation;