

**C&WSC 8 July 2021**  
**The Emerging Joint Health and Wellbeing Strategy**  
**Recommendations and Officer Response**

**1. That there be greater emphasis on primary prevention and preventative measures in the development of the strategy.**

The BHWB agreed that in the context of the seismic changes and fundamental issues exposed by the pandemic, a fundamental rewrite of the Joint Health and Wellbeing Strategy (JHWS) was required. The BHWB agreed the focus of the JHWS should be a whole systems approach to tackling health inequalities and wider determinants of health inequalities, as exposed and exacerbated by Covid19. The consultation on the JHWS identified five emerging priority areas:

- Healthy lives
- Healthy places
- Staying healthy
- Healthy workforce
- Healthy ways of working

There will be a clear focus on prevention to address the social determinants of health and to tackle health inequalities

**2. That all Council departments be involved as soon as possible in the development and delivery of the strategy.**

Given the nature of the Joint Health and Wellbeing Strategy (JHWS) emerging priority areas, the membership of the strategy development working group was expanded, and there is now representation from all council departments, as well as BHWB partners.

As part of stage two of the consultation process, a Brent Council Senior Management Group (SMG) session was held in June to discuss health inequalities and how the council can work to maximise impact in this area. Officers have consulted across the other key mechanisms e.g. management team meetings, staff networks. We have continued to do this to inform the draft strategy and related delivery plans for stage three of the consultation process.

**3. To formalise engagement with a wider variety of community groups to work as partners in the development of the strategy as outlined by the committee, and to do further engagement with BAME communities.**

The BHWB gave clear instruction that the JHWS must be developed with communities, and that consultation throughout the development process was critical. For the first stage of consultation, Healthwatch was commissioned to consult with our most vulnerable, seldom heard communities and those most impacted by health inequalities. The findings of this stage set the priorities of the strategy.

Stage two consultees include partners, key external and internal forums, and key community and voluntary sector groups. Community forums consulted as part of stage two have included the Emerging Communities Network, Multi Faith Forum, Cultural Diversity Network and the Brent Health Matters Community Champions network.

We will continue to consult widely as part of stage three of the consultation process, and will ensure engagement with key communities including BAME communities. Officers are working closely with BHWB members to ensure effective engagement across the system.

**4. To further link up the work of the strategy with proposals in the Poverty Commission, Climate Strategy, and Black Community Action Plan.**

The BHWB has noted that a number of issues emerging from the consultation, such as creating fair employment and improving access to high quality housing, result in inequalities that people experience as impacting upon their health and wellbeing. The BHWB agreed these insights would be shared into the relevant key council strategies e.g. the Poverty Commission delivery plans, and the BHWB would take steps to ensure these plans address the needs identified. Officers will ensure there is a matrix approach across these key strategies.