



**Royal Borough of  
Windsor & Maidenhead**

**Joint Health and  
Wellbeing Strategy  
2026-2036**

**Enabling residents to lead healthy and  
fulfilling lives across the life-course**

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# 1. Foreword



**Cllr Catherine del Campo**

Thank you for taking the time to read our Joint Health and Wellbeing Strategy covering the period from 2026 to 2036. This is an ambitious yet realistic road map that sets out how, during the coming decade, we plan to improve both the health and wellbeing of all our residents and communities, along with a special focus on combatting health inequalities that affect the most vulnerable in our borough.

Prevention lies at the heart of this strategy. By putting the right services in place, at the right time, for the right people and groups, we can make a real and lasting difference to prevent poor health from happening in the first place and delay the onset of age-related health issues.

We're taking a life course approach which means providing tailored support at every stage of a person's life to bring benefits they'll feel 30, 40 or more years from now. We're giving our children and young people a better start in life, ensuring adults have the support they need to live well and for older people to age well, all in a healthy place environment such as in their homes, their workplaces, and leisure and green spaces.

At a time of political and economic churn and instability, it's more important than ever that we work as one with the NHS, our valued community and voluntary organisations and of course our residents. By pooling our resources and experience, we can create and deliver joined up and effective support and services that not only do exactly what they need to do but also empower our communities with the knowledge and agency to manage their own health and wellbeing.

There's no room for complacency though, which is why we will review all our plans and actions every year, to see what's working well and what needs to be changed to make sure we are delivering tangible health improvements for everyone. This is just the start of our joint journey, and there will be further opportunities for our residents and communities to be involved as we develop further services and support.

I am immensely grateful to local NHS and GP partners, community and voluntary organisations, the Local Government Association, our Director of Public Health and her team as well as officers and senior leaders across the council, members of the Royal Borough of Windsor & Maidenhead Health and Wellbeing Board and, most of all, our residents for their passion, drive and determination in creating this strategy and commitment to its delivery during the next ten years.

*Catherine del Campo*

Councillor Catherine del Campo  
Cabinet Member for Housing Services, Housing Delivery & Health



## 2. Introduction

The Joint Health and Wellbeing Strategy is a statutory requirement for all Health and Wellbeing Boards and provides the shared plan for improving health and wellbeing across the local area. Its unique strength lies in bringing together partners across organisations including the council, NHS, the voluntary and community sector and residents to agree the most important priorities based on population need and to address them collectively.

With the former strategy finished at the end of 2025, the Royal Borough of Windsor & Maidenhead Health and Wellbeing Board is pleased to introduce our new 10-year strategy for 2026 to 2036. Building on the strong foundations of our previous strategy which championed health, safety, independence and community, we move forward with a life-course and place-based approach with prevention as a cornerstone of the strategy. This reflects the changing nature of health needs across different stages of life and the influence of local environments on health and wellbeing outcomes.

This strategy sets the long-term direction for improving health and wellbeing across the borough during the next ten years. It also sets out the priority areas and outcomes that define what success should look like by 2036. The strategy is informed by the needs of our population, identified through our Joint Strategic Needs Assessment and other data sources and shaped by insights from residents, communities and stakeholders. Lived experience and local knowledge are central to our understanding and have helped identify where joint effort is needed most to achieve meaningful and lasting improvements in population health and wellbeing.

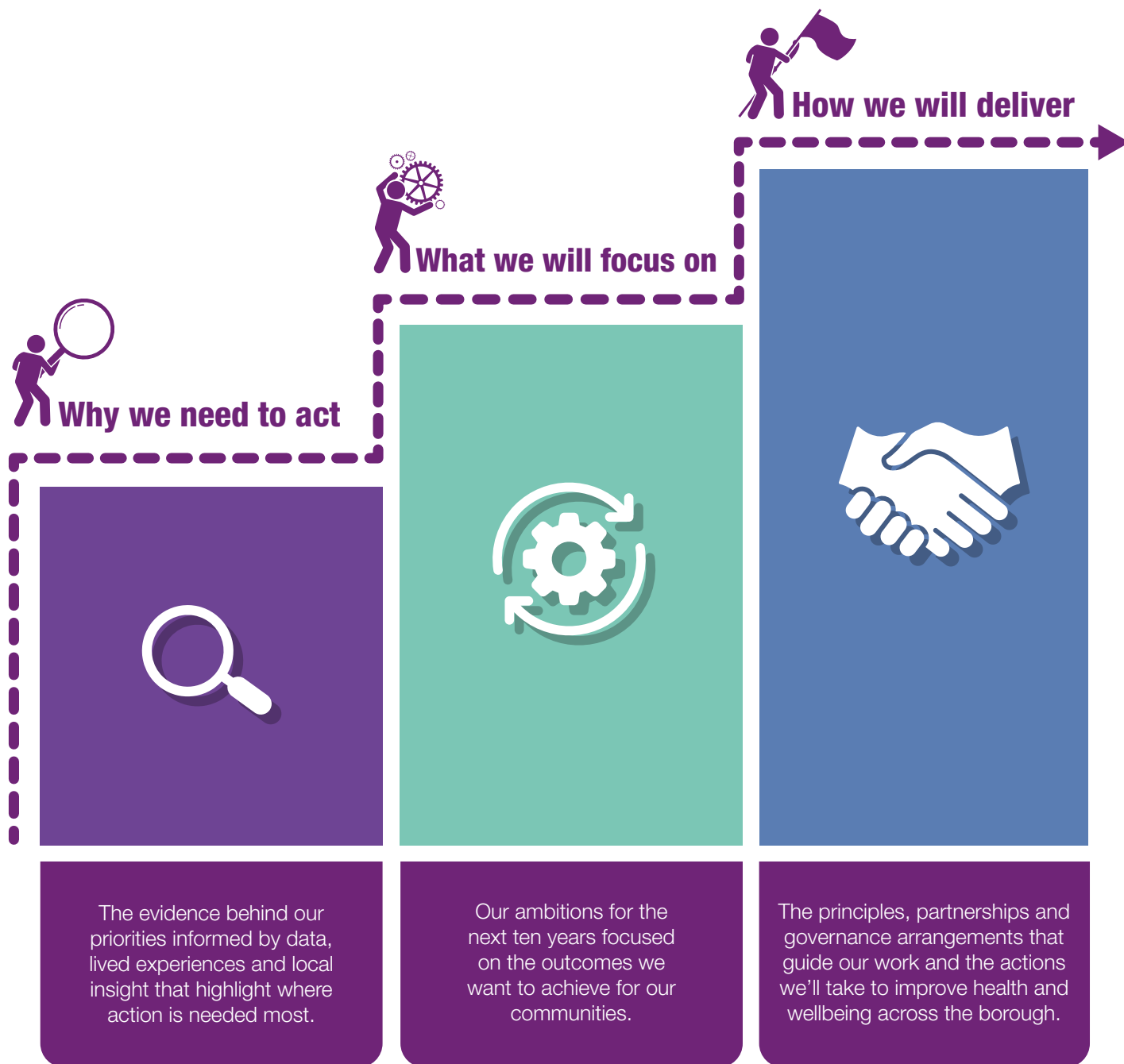
Alongside this strategy, an action plan will support delivery by setting out shorter-term actions, delivery leads and interim outcomes. This plan will be reviewed and updated regularly to reflect progress, learning and changing needs, with oversight provided through existing governance arrangements.

In 2025, the UK Government published its 10 Year Health Plan for England: Fit for the Future, setting out a vision to reduce health inequalities, shift from treatment to prevention, strengthen neighbourhood health services and promote digital innovation to improve outcomes. Our strategy reflects these priorities at a local level. Through strong partnerships with the existing (Frimley) and future (Thames Valley) local Integrated Care Board and other stakeholders, we aim to deliver innovative initiatives that are nationally aligned, locally driven and responsive to the needs of our communities.



## What shapes our strategy

When developing this strategy, we had three core questions to generate discussion and direction, those being why, what and how. By taking this approach we followed evidence-based and community needs while ensuring our work is held to account and planned to enable effective delivery and achievement of positive health outcomes. The concepts are introduced below, but throughout the document we begin to delve deeper into the content that surfaced when asking ourselves why, what and how.



### 3. National and local context

Health both influences and is influenced by a wide range of systems and services. That's why this strategy is not only informed by evidence and local insight but also closely aligned with wider local and national plans.

At a national level, the strategy aligns with the [10 Year Health Plan for England: Fit for the Future](#) and the Neighbourhood Health Partnership Framework, ensuring local delivery reflects national priorities around prevention, neighbourhood health and digital innovation.

Locally, the [Royal Borough of Windsor & Maidenhead's Council Plan](#) sets out a vision for a safer, greener, healthier borough where children thrive and opportunities continue into adulthood. Our strategy builds on this by embedding public health across council services and working in close partnership with the Integrated Care Board (ICB). The [Creating Healthier Communities Strategy](#) shares our life-course and place-based approach.

Examples of other strategies or policies that have supported the development of our strategy include:

**Royal Borough of Windsor & Maidenhead Children and Young People Plan**

**Royal Borough of Windsor & Maidenhead  
Sport and Leisure Strategy**

**Local Plan and planning policy**

**The Royal Borough of Windsor & Maidenhead  
Air Quality Strategy**

**Royal Borough of Windsor & Maidenhead  
Environment and Climate Strategy**

**From Harm to Hope: A 10-year drugs plan to cut crime and save lives**

**Royal Borough of Windsor & Maidenhead  
Serious Violence Strategy 2024-2027**

**Alcohol: applying All Our Health**

**Strategic Commissioning Framework**

This is not exhaustive of all the strategies and policies that have informed this document. However, it highlights a selection of key internal and external strategies we will align with and work alongside in the development and delivery of our action plans.

## 4. Why we need to act

Our health and wellbeing are shaped by many different factors that go far beyond individual choices or access to healthcare. These influences are often referred to as the 'wider determinants' or 'building blocks' of health. They include the conditions in which we are born, grow, live, work and age such as housing, education, employment, social connections, the environment and access to nutritious food. Differences in how these determinants are experienced can lead to health inequalities which are unfair and avoidable differences in health outcomes between different groups or communities.

The diagram illustrates some of these determinants and how they can either support or hinder our ability to live healthy, fulfilling lives. While not exhaustive, it highlights the importance of addressing these wider factors to improve population health and reduce inequalities.

### How we identified health and wellbeing needs in the Royal Borough

**Health needs assessments:** We used our [Joint Strategic Needs Assessment](#) and other health analyses to understand local health outcomes, identify inequalities and highlight gaps in services.

**Stakeholder collaboration:** As part of the needs assessment process, we engaged with local organisations, partners and professionals through workshops, meetings and targeted engagement activities. Their expertise helped interpret the data, validate findings and identify key health and wellbeing issues within the borough.

**Resident engagement:** We have also listened directly to residents, hearing their stories, concerns and ideas. This input ensured that lived experience informed and strengthened our understanding of local needs.

### A snapshot of the Royal Borough

When reviewing data for the borough as a whole, residents appear to experience lower levels of deprivation, higher life expectancy, better average incomes and strong educational outcomes compared to other local authority areas nationally. However, when looking more closely at smaller geographies within the borough, pockets of hidden inequalities become visible. These include differences in income, life expectancy, housing affordability, health and wellbeing outcomes and school readiness.

For example, life expectancy at birth in the borough is **81.6** years for males, which is higher than the England average of **79.5** years. However, around **17.3%** of their lives are spent in poor health, with a healthy life expectancy of **67.5** years. For females, life expectancy at birth is **84.7** years, also above the England average of **83.2** years but around **18.7%** of their lives are spent in poor health with a healthy life expectancy of **68.9** years.

Approximately **30%** of the borough's population are from ethnic minority backgrounds, reflecting its diversity. Meanwhile, **4.5%** of the local population experience higher levels of deprivation relative to the rest of the borough, as indicated by Index of Multiple Deprivation (IMD) **deciles 3 and 4**.



## Our local health needs across the life-course



**18.4%** of 4-5 year olds are overweight (including obesity).

**28.2%** of 10-11 year olds are overweight (including obesity).



**21%** of five year olds in the borough showed visible signs of dental decay - slightly below the England average of 23.7%.



We have the largest school readiness attainment gap in Berkshire East between all children and those eligible for free school meals.



**77.6%** of children achieved a good level of development at their two to two-and-a-half-year review - below the England average of 81.4%.



**5.6%** of 16 and 17 year olds are not in education, employment or training - slightly above the England average of 5.4%.



**17.2%** of adults are classified as physically inactive - below the England average of 22%.



**7.7%** of adults smoke, slightly below the UK average of 10.9%.



**2.9%** of registered patients are living with coronary heart disease, slightly above the England average of 3%.



**14%** of adults have diagnosed high blood pressure, with an additional **8.9%** estimated to be undiagnosed.



Locally, **57.7%** of adults are overweight or obese - below the England average of 64.5%.



**1.7%** of patients have a recorded stroke diagnosis - slightly below the England average of 1.9%.



Under-75 mortality from alcoholic liver disease in the Royal Borough was **10.3** per 100,000.



2024 bowel cancer screening rate at **74.3%** for those aged 53-70.



In 2024, **74.1%** of eligible females aged 53-70 received breast cancer screening.



In 2024, **69.1%** of 25-49 year olds and **75.5%** of 50-64 year olds received cervical screening.



**10.5%** of eligible adults aged 40-74 in the Royal Borough received an NHS Health Check in 24/25 - slightly above the England average of 9%.



The unemployment rate among working-age residents is **4.4%**, slightly above the national average of 4%.



**53.7%** of households have access to public green space.



The prevalence of moderate-risk (**6.3%**) and problem gambling (**3.4%**) in our borough is higher than the England averages of 5.9% and 2.9%.



**78.7%** of residents with a long-term physical or mental health condition are in employment - higher than the national average of 65.3%.



The Royal Borough has a **higher density** of fast-food outlets per 100,000 population compared to the South East average.



An estimated **8.2%** of households experience fuel poverty, slightly below the national average of 11% in England.



The number of premises licensed to sell alcohol per square kilometre in the Royal Borough exceeds both the South East England and national averages.



**14.1%** of adults walk for travel at least 3 days a week compared to 18.6% nationally.



Only **5.1%** of residents regularly utilise outdoor space for physical activity, compared to 17.9% nationally. (according to latest data 2015-2016).



**5.5%** of deaths among residents aged 30+ are attributable to particulate air pollution.

All figures reflect data collected between 2021 and 2025, providing a baseline for the 10-year strategy

## Residents' voices

We've taken an inclusive and evidence-informed approach to shaping this strategy, drawing on existing community engagement insights and a formal consultation process to reflect a wide range of voices and experiences.

In spring and summer of 2022, we hosted a series of World Cafés, creating open spaces for residents to share their experiences, concerns and hopes for local health and care services. Insights from these discussions were captured through a Community Insights project which identified three key themes: community cohesion and belonging; health inequalities and gaps in access; and the wider building blocks of health, particularly employment and cost-of-living pressures.

Below are some of the key findings from the Community Insights project, illustrated through resident quotes. These insights helped shape the priorities set out in this strategy (see page 12). Further information about the project and its findings is available on [RBWM together](#).

Despite the borough's overall affluence, disadvantage and inequality are present and often hidden particularly in areas like central Maidenhead, Dedworth and Datchet, Horton and Wraysbury. Residents in these neighbourhoods report feeling segregated and forgotten with poverty and limited opportunities shaping life chances.



***"I'm struggling and a lot of other people are struggling and in the same boat... It can happen to anybody but where you live and what your circumstances are make a difference."***

***"You have to look for the help and I think if you are feeling like that and feeling shameful [then you] don't want to look for the help and don't think it's out there."***



Certain groups including those with low English proficiency, learning difficulties, mental health issues, ethnic minorities, lone parents and older people face additional barriers. Disadvantage can be intergenerational and older people may fall into isolation and poor quality of life even outside of poverty.

The cost of living crisis is compounding existing challenges, pushing vulnerable households into crisis and affecting mental health.



***"The cost of living is affecting everyone. The food banks are so overrun now... I feel really uncomfortable when I go up there and I really do need to be up there because I'm struggling."***

***"I think in this area the community, we support each other... I have my neighbours that come in and ask me do you need any shopping and they are very helpful people."***



Support networks play a vital role in resilience. In areas like Dedworth, strong community support makes a positive difference.

Disadvantage also stems from health conditions, disability, bereavement and trauma, which can affect individuals and families across the borough, including more affluent areas.



***"For two years my daughter couldn't go to school... I couldn't work, someone had to be at home with her... that really affected us."***

## Consultation process

From October to December 2025, we invited residents, professionals and stakeholders to review our draft strategy and share their views on priorities, challenges and opportunities. Feedback from the consultation helped shape the final strategy, ensuring it reflects a broad range of lived experiences, professional insights and local knowledge. This process informed both the strategic focus and how we plan to deliver and measure impact across the borough.

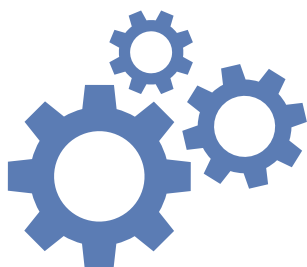


### You said

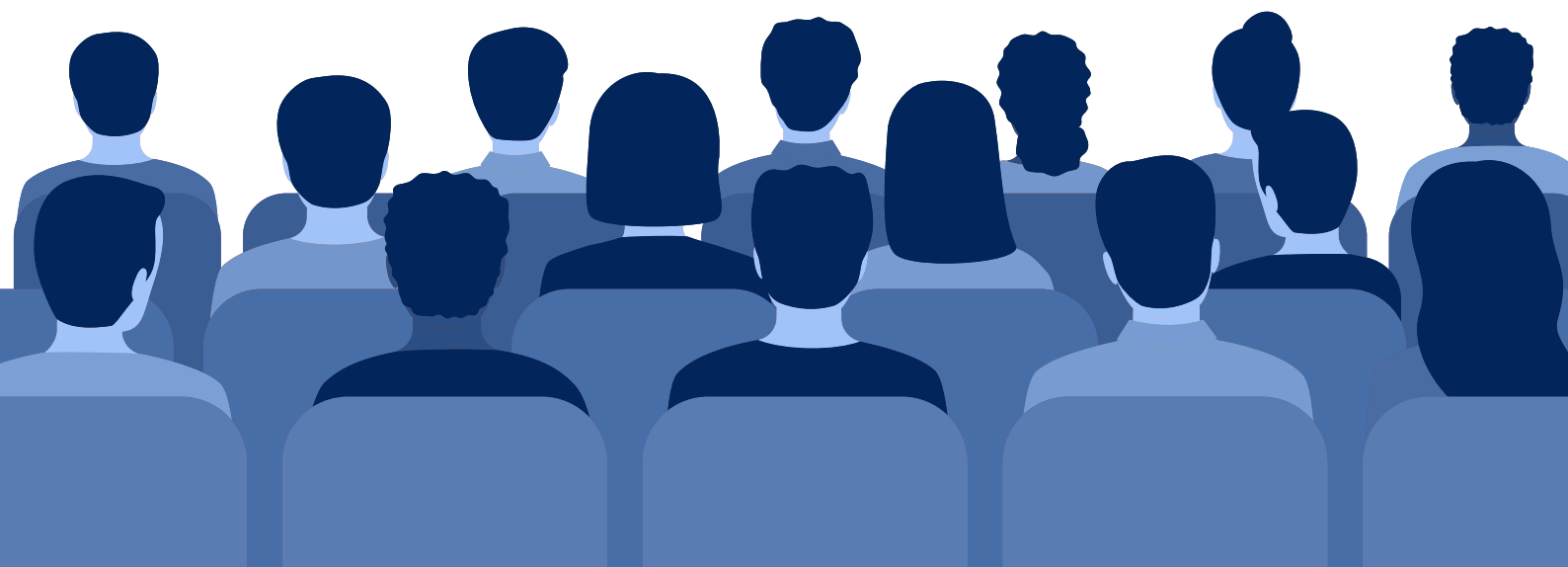


Overall, respondents felt the strategy was clear, reflective of local need and had the potential to make a positive impact. They also highlighted areas where greater emphasis was needed, particularly physical activity, mental health and wellbeing, and environmental factors that influence health. There was strong support for a prevention-led approach, partnership working and meaningful community involvement alongside requests for clarity on outcomes, delivery arrangements and how progress will be measured. Respondents also expressed a need for a more accessible, resident-friendly version of the strategy.

### We did



In response, mental health and wellbeing is now embedded as a cross-cutting priority throughout the strategy. We have also strengthened the focus on environmental factors that influence health within the Healthy Place theme. Our emphasis on prevention, partnership working, and reducing health inequalities has been reinforced, and we have clarified how delivery will be supported through governance arrangements. While the strategy provides a high-level framework to allow flexibility over its 10-year lifespan, a supporting action plan will outline practical steps, responsibilities and interim outcomes to help monitor progress. We have also added a new section on delivery and committed to publishing an easy-read version of the strategy.



## 5. What we will focus on

### Introducing our strategic framework

This strategy is underpinned by a clear framework, set out on page 12, which provides a shared direction for improving health and wellbeing during the next ten years. At the centre is our vision to enable residents to lead healthy and fulfilling lives across the life-course. A key focus of the framework is to shift our collective efforts from responding to ill health towards preventing it, helping people to stay well for longer.

To deliver this vision, we have defined the outcomes we want to achieve by 2036. These long-term outcomes have been developed with partners and describe the changes we want to see for our residents and communities during the lifetime of the strategy. Our work is structured around four strategic themes: Best Start in Life, Living Well, Healthy Ageing and Healthy Place. Each theme includes a set of priority areas where partners will focus joint effort to deliver change. These priorities are summarised on page 12 and expanded upon in our 10-year plans.

The strategy is supported by four cross-cutting themes that apply across all themes and action plans: reducing health inequalities, addressing the wider determinants of health, shifting from treatment to prevention, and mental health and wellbeing. Together, these priorities help ensure that action taken in one area supports progress across the whole system, and addresses the key conditions and influences that shape health and wellbeing during the next ten years. Mental health and wellbeing is also identified as a specific priority within the Best Start in Life theme, recognising the importance of early support in building resilience and supporting positive health outcomes later in life. This dual focus reflects both its relevance across all themes and the particular opportunities for prevention and early intervention during childhood and adolescence.

The framework is underpinned by a set of principles that guide how we will work together, including partnership and inclusivity, having a clear evaluation of impact, demonstrating sustainability and continuous improvement, taking a needs-driven and evidence informed approach, ensuring flexibility in our approach, using local strengths, working with our communities and responsiveness to digital innovations. Together, the principles, cross-cutting themes and priorities provide the structure that connects our long-term vision with the practical steps needed to improve health and wellbeing outcomes for our communities across the borough.



### VISION : ENABLE RESIDENTS TO LEAD HEALTHY AND FULFILLING LIVES ACROSS THE LIFE-COURSE

#### STRATEGY OUTCOMES

By 2036 we aim to...



Reduce inequalities across the borough.



Enable communities to demonstrate strong health literacy and confidence in managing their health.



Increase healthy life expectancy across the borough.



Ensure communities have the opportunity to achieve and maintain good mental health and wellbeing.



Enable communities to thrive, connect and be resilient.



Shape accessible and inclusive services for communities, responsive to diverse needs.

#### CROSS-CUTTING THEMES

Reducing health inequalities

Addressing wider determinants of health

Shifting from treatment to prevention

Mental health and wellbeing

#### Our four strategic themes

##### Best Start in Life: children and young people

School readiness

Mental health and wellbeing

Healthy weight

Oral health

Healthy adolescence

##### Living Well: adulthood

Cardiovascular disease prevention

Oral health

Screening and immunisations

Health behaviours

##### Healthy Ageing: older residents

Promoting independence

Screening and early intervention

Digital inclusion

Loneliness and isolation

##### Healthy Place: the environments we live, learn, work and rest

Active travel

Healthy housing

Planning, infrastructure and licensing

Sustainable and healthy environments

Health and work

#### Our Principles for delivery



Partnership and inclusivity



Clear evaluation of impact



Sustainability and continuous improvement



Needs-driven and evidence-informed



Flexibility in our approach



Using local strengths



Working with our communities

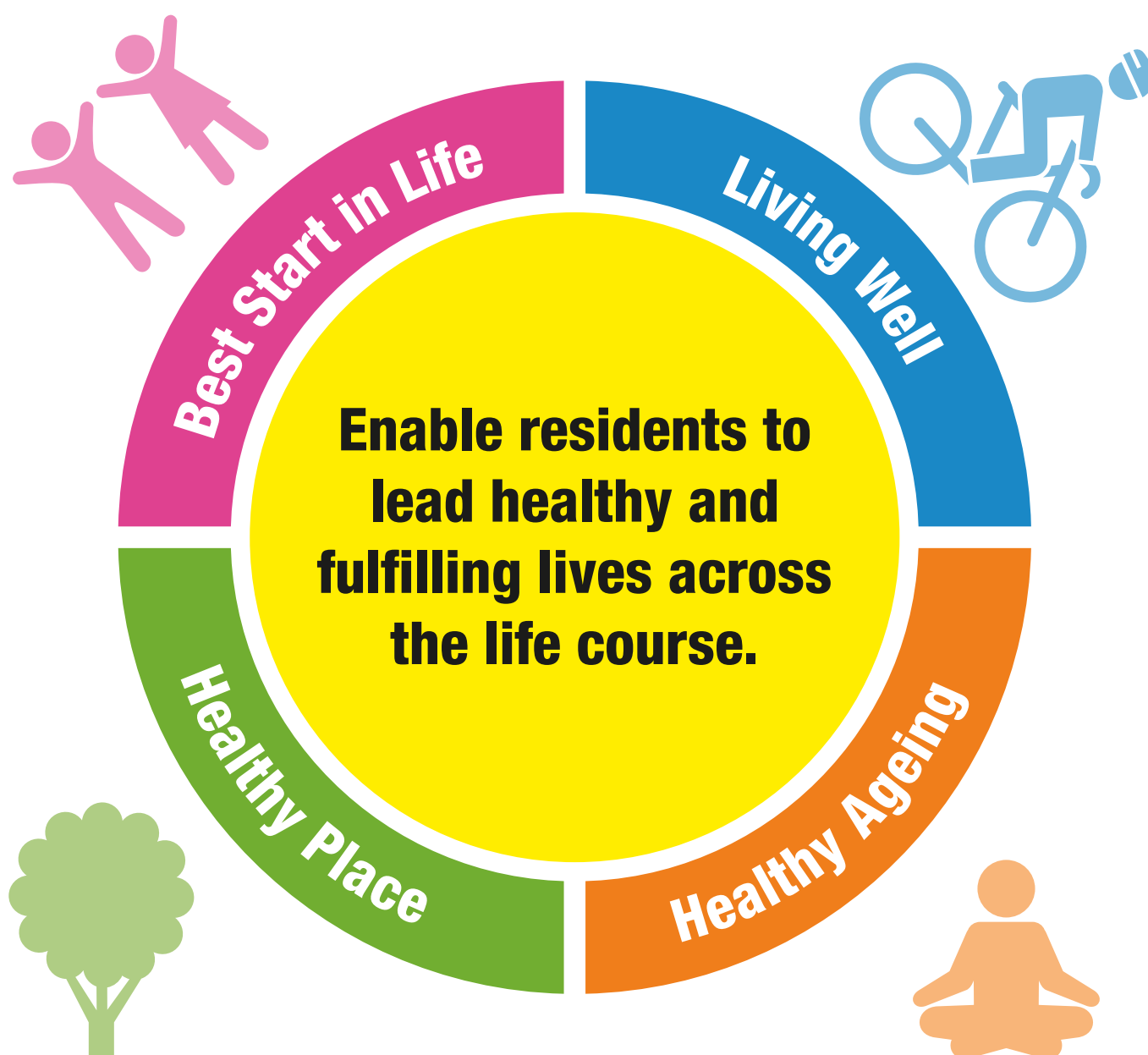


Responsiveness to digital innovations

## 6. 10-year plans

The following pages outline the 10-year plans for each of the four themes. They highlight the priority areas for focus and the measurable outcomes agreed by partners to define what success should look like by 2036. These plans provide a shared direction for collective effort, with an emphasis on preventing ill health, supporting early intervention and reducing health inequalities across the borough.

To support delivery, a [Joint Health and Wellbeing Strategy Action Plan](#) identifies shorter-term actions and interim outcomes that will help track progress towards the longer-term goals. This plan will be reviewed regularly and updated to reflect progress, learning and emerging needs, ensuring the approach remains responsive over time.



## Best Start in Life

Children and young people aged 0-19



The experiences and opportunities children and young people have as they grow up shape their health and wellbeing for life. In the borough, we see gaps in health outcomes emerging from the earliest years, which can continue into later childhood and adolescence. By ensuring the building blocks of good health and wellbeing are in place, we can give every young person the strongest foundation to thrive.

### During the next 10 years we will focus on:

**Mental health and wellbeing** - Enhancing early support for children, young people and families by improving access to services through integrated health, education, social care pathways, alongside accessible community-based resources and programmes that promote positive mental health and wellbeing.

**School readiness** - Working with schools, health visitors and families to strengthen early development, drawing on evidence-based models such as UNICEF's *Ready Children, Ready Families, Ready Schools and Ready Communities*.

**Healthy weight** - Taking a whole-systems approach to healthy weight by addressing the food environment and providing tailored interventions and resources for the prevention and management of overweight childhood and obesity.

**Oral health** - Promoting oral health as a family habit, embedding prevention into early years programmes and diet initiatives.

**Healthy adolescence** - Supporting our young people through structured opportunities in education, employment and training, while promoting health behaviours around adolescent smoking, vaping, alcohol and drug use.

### What will success look like for our children and young people by 2036?

- Increased percentage of children and young people who report feeling able to manage their emotions and seek help when needed.
- At least 75% of children reaching a good level of development by the end of reception.
- Increased percentage of children at a healthy weight.
- Reduced hospital admissions for children and young people due to preventable dental conditions.
- Reduced numbers of young people engaging in harmful behaviours.





Adults in the borough face preventable health challenges that affect wellbeing across the life-course. Early intervention in young and middle adulthood increases the chances of being healthy in later life. We will take a prevention-first, neighbourhood-based approach, working with residents, health services, voluntary and community partners to create supportive environments for healthy living.

## During the next 10 years we will focus on:

**Cardiovascular disease prevention** - Promoting heart health and early identification of risk factors through workplace initiatives, local campaigns and neighbourhood programmes, partnering with local employers and community champions.

**Screening and immunisations** - Addressing gaps in uptake by using neighbourhood health data and working with community champions and outreach settings to enhance the reach of preventative programmes.

**Oral health** - Embedding oral health messaging across the system and neighbourhoods.

## Health Behaviours

**Healthy weight** - Supporting residents to achieve and maintain a healthy weight through evidence-based initiatives and neighbourhood interventions.

**Physical activity** - Enabling residents to engage with physical activity by reducing barriers to exercise and movement.

**Alcohol harm** - Supporting residents and professionals to understand the impact of alcohol on our health and how to identify risk, and ensuring community services are available and accessible for those experiencing drug and alcohol harm.

**Tobacco harm** - Expanding our community smoking cessation service to be accessible for all residents and encouraging smoke free areas across the borough.

## What will success look like for our working aged adults by 2036?

- 25% fewer deaths from cardiovascular disease and stroke.
- 75% of cancers diagnosed at stages I or II.
- Reduced adult overweight and obesity prevalence.
- Increased physical activity rates.
- Fewer alcohol related hospital admissions.
- Smoking prevalence below 5%.
- Reduced oral health related A&E admissions.

“Have a common place where people can find out information about social services and support networks and things like that.”



## Healthy Ageing

Residents aged 65 and above



Although challenges to health and wellbeing are common in later life, living in poor health and experiencing poor wellbeing aren't an inevitable consequence of ageing. We will be proactive in supporting the health and wellbeing of older adults to ensure as many as possible can live independent, productive and fulfilling lives.

### During the next 10 years we will focus on:

**Promoting independence** - Developing neighbourhood initiatives to support residents to remain independent for longer, including access to physical activity and falls prevention techniques.

**Screening and early intervention** - Improving uptake of NHS preventative screening services to prevent health conditions through early identification.

**Digital inclusion** - Embedding digital support into broader community services and resources, promoting IT skills learning opportunities and engagement with accessible IT hubs.

**Loneliness and isolation** - Working with voluntary and community groups to build the capacity of communities in the borough, empowering older residents to increase their social capital\*.

"Everything is online and older people report not having access to computers/internet at home. They are really struggling because they cannot speak to a person about services."

### What will success look like for our older residents by 2036?

- Increased proportion of people using services report having control of their daily life.
- 100% of the eligible population invited to have an NHS Health Check every five years and increased percentage receiving a full NHS Health Check.
- Increased uptake of screening and prevention programmes.
- More residents and their families confident in using digital tools.
- Older adults experiencing loneliness and isolation are empowered to access community venues and activities.

\*Social capital refers to the benefit an individual gains from their social networks and relationships.

# Healthy Place

The environments we live, learn, work and rest



The environments where we live, work, learn and connect, including physical, social, cultural and digital, shape our health and wellbeing. While individual behaviours are often viewed through the lens of personal choice, strong evidence highlights the powerful role our surroundings play in influencing outcomes. Adopting a place-based approach, we aim to ensure the borough is designed to support the wellbeing of all residents, embedding health into the very fabric of our communities.

## During the next 10 years we will focus on:

**Active Travel** - Expanding safe and accessible infrastructure so that walking and cycling are integrated into daily life.

**Healthy housing** - Collaborating with developers and social housing providers to reinforce the importance of housing as a foundation influence on health.

**Planning, infrastructure and licensing** - Embedding health into local planning, licensing and policy decisions across the borough.

**Sustainable and healthy environments** - Harness system-wide partnership to explore opportunities to address environment, climate and health goals.

**Health at work** - Partnering with local employers to foster healthy workplaces through tailored initiatives and increasing employment opportunities and access.

**Gambling harm** - Working with partners to prevent harmful gambling behaviours and provide support for people where gambling is problematic, including addressing risks associated with online gambling.

## What will success look like for borough as a place to live, learn, work and rest by 2036?

- Increased percentage of residents engaging with active travel or/and using outdoor space for physical activity.
- Health systematically embedded into housing, planning, licensing and policy decisions.
- Mitigation and adaptation of the impacts on climate and health.
- Increased awareness and behaviour change related to environmental health.
- Reduced number, per headcount, of working days lost to sickness.
- Higher employment rates across the borough.
- Improved understanding and prevention of harmful gambling behaviours.



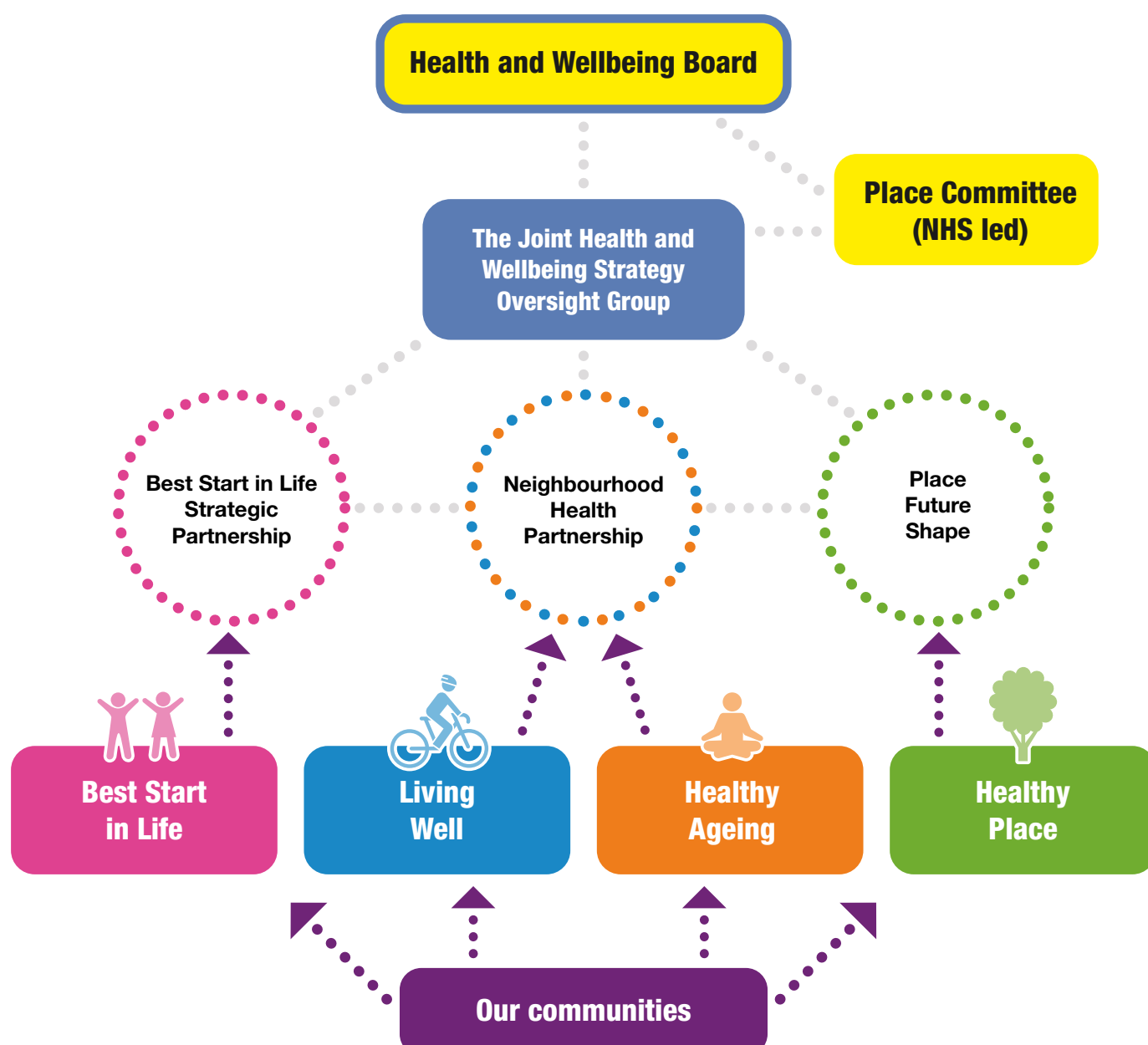
## 7. How we will deliver our strategy

The Health and Wellbeing Board provides statutory strategic leadership for this strategy and oversees accountability for its delivery. The Board works in partnership with the Royal Borough's Place Committee to ensure alignment with local priorities and the Integrated Care System.

Delivery is supported through multi-stakeholder governance groups aligned to the strategy's themes: the Best Start in Life Strategic Partnership, the Neighbourhood Health Partnership and the Place Future Shape Board. The Neighbourhood Health Partnership provides oversight for both the Living Well and Healthy Ageing themes. This reflects its role in coordinating delivery across these areas and aligning activities with the Neighbourhood Health Plan over time. This approach supports joined-up working and strengthens place-based delivery as priorities and plans evolve.

These governance groups oversee the planning and delivery of actions to achieve the strategy's outcomes. They also facilitate joint working across themes, recognising the connections between life stages, environments and the wider determinants of health. They use local data to guide priorities and work in partnership with residents, voluntary and community sector organisations and system stakeholders to shape and deliver change.

The Joint Health and Wellbeing Strategy Oversight Group brings the governance groups together and reports collectively to the Health and Wellbeing Board. It ensures alignment across the strategy, supports shared learning and oversees monitoring and evaluation of progress against the strategy's outcomes and cross-cutting priorities.



## System wide partnership

Partnership is at the heart of this strategy. Improving health and wellbeing cannot be achieved by any single organisation alone, it requires collective action across the whole system. By working together, we can combine resources, expertise and local knowledge to deliver greater impact for our communities.

This strategy strengthens partnership working by setting a shared vision, aligning priorities and supporting collaboration between the council, the NHS, voluntary and community sector organisations and residents. In particular, the voluntary and community sector plays a vital role through its deep local knowledge and trusted relationships, helping to reach people and communities who may not engage with traditional services.

We will continue to work closely across sectors to improve coordination, reduce inequalities and support innovation. Partnership working will be embedded throughout delivery, including within governance arrangements, to ensure activity is inclusive, connected and responsive.

Meaningful engagement with residents is fundamental to this approach. We will continue to involve residents in accessible and inclusive ways, using community insight, co-production and lived experience to inform priorities and shape service delivery. This includes opportunities to participate in workshops, forums and local decision-making, while recognising the diversity of our communities and the importance of building trust and long-term relationships. We will take a coordinated approach to engagement, working with council and system partners to support clear communication and meaningful involvement throughout the delivery of the strategy.



## 8. Monitoring and evaluating impact

We are committed to regularly monitoring and evaluating progress towards the health and wellbeing outcomes set out in this strategy. This will enable us to understand the impact of our actions, learn from what is working well, and adapt our approach where needed.

Monitoring and reporting will be outcomes-focused and aligned with the governance arrangements described earlier in the strategy. A review of the strategic priorities will be undertaken at the mid-point of the strategy period. This will provide an opportunity to assess whether the priorities remain relevant, respond to new challenges or opportunities, and agree any necessary adjustments. At the end of the strategy period, we will undertake an evaluation of the overall impact of the strategy, drawing on available data, partner insights and learning over time. This will inform future strategic planning.

We will take an open and transparent approach, using learning to refine priorities and ensure the strategy remains relevant, effective and responsive throughout its 10-year lifespan.



## 9. Acknowledgements

We would like to thank all those who contributed to the development of this strategy, including partners working across our four priority themes and representatives from local communities. We look forward to working together throughout the next 10 years to achieve our collective vision for the borough.



## 10. Glossary

We recognise not all terminology used in public health is widely understood by everyone so have developed a glossary of key terms mentioned throughout this strategy.

**Building blocks of health** - The fundamental elements required to ensure a strong foundation for health, such as quality of housing, having enough money and resources, having a fulfilling job and access to a supportive education, etc.

**Deprivation** - Deprivation is the absence of resources like income, housing, education or healthcare needed for good health and wellbeing.

**Health** - Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

**Health inequalities** - Unfair and avoidable differences in health outcomes between different groups of people. The differences experienced are often not random but associated with social, environmental, biological or economic factors that lead to disadvantage in different communities.

**Healthy life expectancy** - The years on average an individual lives in good health.

**Health literacy** - The ability to access, understand and use health related information.

**ICB (Integrated Care Board)** - A statutory NHS organisation responsible for planning, funding and coordinating health services within an Integrated Care System to improve population health and reduce inequalities.

**IMD (Index of Multiple Deprivation)** - A measure used in England to rank areas based on levels of deprivation across factors such as income, employment, health, education, housing and crime.

**Life expectancy at birth** - The average years an individual is expected to live.

**Outcomes** - A measurable result of impact from an action or intervention- for the purposes of this 10-year strategy the outcomes are high level ambitions we have and expect to see in 10 years.

**Population health** - An approach to addressing the health needs and outcomes of groups of people by focusing on the 'building blocks of health', prevention and health inequalities.

**Prevention** - Actions aimed at stopping health problems before they occur or worsen, by promoting healthy lifestyles, reducing risks, and addressing the wider factors that influence wellbeing.

**Priorities** - Unique, specific areas of focus for each theme.

**Principles** - Approaches enabling us to design and deliver this strategy effectively.

**Stakeholder** - An individual or group of people with an interest or mutual goal in or within an organisation or project, for the interest of this strategy and the health and wellbeing of Royal Borough residents.

**Strategy** - A plan to achieve a long-term aim.

**Theme** - Sections within the strategy with unique ambitions and outcomes, including Best Start in Life, Living Well, Healthy Ageing and Healthy Place, sometimes referred to as area of focus.

**Wellbeing** - Wellbeing is a person's overall physical, mental, emotional and social health. It reflects how they feel, function and connect shaped by their environment, relationships and access to support.

**VCS (Voluntary and Community Sector)** - Organisations and groups that are independent of government and operate on a not-for-profit basis to provide services, support, and advocacy within communities.

## 11. Further reading and data sources

While not an exhaustive list, below are links to plans, strategies and frameworks that informed this strategy as well as sources for the data we used.

- [10 Year Health Plan for England: Fit for the Future](#)
- National framework for Neighbourhood Health Plans
- [Royal Borough of Windsor & Maidenhead 2024-2028 Council Plan](#)
- [Royal Borough of Windsor & Maidenhead Children and Young People Plan](#)
- [Royal Borough of Windsor & Maidenhead Sport and Leisure Strategy](#)
- [Royal Borough of Windsor & Maidenhead Air Quality Management Strategy](#)
- [Royal Borough of Windsor & Maidenhead Environment and Climate Strategy](#)
- [Drug Strategy 'From harm to hope'](#)
- [Royal Borough of Windsor & Maidenhead serious violence strategy](#)
- [Alcohol: applying All Our Health](#)
- [Strategic commissioning framework](#)
- [Royal Borough of Windsor & Maidenhead - Joint Strategic Needs Assessment](#)
- [Fingertips - Department of Health and Social Care](#)
- [Office for Health Improvement and Disparities - Work and Health Regional Data Explorer](#)
- [RBWM Together World Cafes](#)
- [The Health Foundation Building Blocks of Health](#)

**“Thank you for joining us on  
our journey to enable people  
of all ages to lead healthy  
and fulfilling lives.”**

*- The Royal Borough of Windsor & Maidenhead  
Health and Wellbeing Board*



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