

Cabinet

16 September 2015

Health and Wellbeing Board Annual Report 2014-2015



Report of Corporate Management Team

Rachael Shimmin, Corporate Director of Children and Adults Services

Anna Lynch, Director of Public Health County Durham

Councillor Lucy Hovvels, Cabinet Portfolio Holder for Adult and Health Services

Councillor Joy Allen, Cabinet Portfolio Holder for Safer Communities

Councillor Ossie Johnson, Cabinet Portfolio Holder for Children and Young People's Services

Purpose of Report

1. The purpose of this report is to present the Health and Wellbeing Board Annual Report 2014/15 (attached as Appendix 2) for information.

Background

2. The Health and Social Care Act 2012 required all upper tier local authorities to establish Health and Wellbeing Boards. The County Durham Health and Wellbeing Board was formally established as a committee of Durham County Council in April 2013.
3. The first Health and Wellbeing Board Annual Report was agreed by the Health and Wellbeing Board in July 2014 and was received by Durham County Council's Cabinet for information in October 2014.
4. This is the second Health and Wellbeing Board Annual Report, which outlines the achievements of the Board during its second year of operation. It also includes details of locality health and wellbeing projects which are supported by the Health and Wellbeing Board, commitments and engagement activity of the Board and information on the Local Government Association Health and Wellbeing Peer Challenge which took place in February 2015.
5. The functions of the Health and Wellbeing Board remain as:
 - Develop a Joint Strategic Needs Assessment
 - Develop a Joint Health and Wellbeing Strategy
 - Duty to encourage integrated working between commissioners of health services, public health and social care services.

Achievements during 2014/15

6. Central to achieving the vision of the Health and Wellbeing Board to “Improve the health and wellbeing of the people of County Durham and reduce health inequalities” is the belief that decisions about the services provided, should be made as locally as possible and involve the people who use them.
7. A number of achievements have been made during 2014/15 which include:
 - The Health and Wellbeing Board agreed the first Joint Health and Wellbeing Strategy and Delivery Plan in 2013/14, and have undertaken subsequent reviews, which have been informed by the Joint Strategic Needs Assessment, the Annual Report of the Director of Public Health County Durham, and feedback from engagement and consultation.
 - The Health and Wellbeing Board hosted a ‘Big Tent’ engagement event in October 2014 as part of the consultation process for the refresh of the Joint Health and Wellbeing Strategy. The event was attended by over 240 people and included a number of themed workshops relating to health, social care and the wider wellbeing approach.
 - The Health and Wellbeing Board agreed the County Durham Better Care Fund plan which supports the following seven work programmes to integrate health and social care initiatives locally:
 - **Intermediate Care+ Short term intervention services** which includes intermediate care community services, reablement, falls and occupational therapy services
 - **Equipment and adaptations for independence** which includes Telecare, Disability adaptations and the Home Equipment Loans Service
 - **Supporting independent living** which includes mental health prevention services, floating support, supported living and community alarms and wardens
 - **Supporting Carers** which includes carers breaks, carer’s emergency support and support for young carers
 - **Social inclusion** which includes local coordination of an asset based approach to increase community capacity and resilience to provide low level services
 - **Care home support** which includes care home and acute and dementia liaison services
 - **Transforming care** which includes maintaining the current level of eligibility criteria, the development of IT systems to support joint working and Implementing the Care Act

The Better Care Fund is aligned to the strategic objectives in the Joint Health and Wellbeing Strategy and supports the aim to provide people with the right care, in the right place at the right time.

- The County Durham Mental Health Implementation Plan was developed by the Mental Health Partnership Board, and agreed by the Health and Wellbeing Board, and is the overarching mental health strategy for children and adults in County Durham. It is the local implementation plan of the national 'No Health without Mental Health' strategy and aims to improve mental health and wellbeing across all ages within County Durham. The Plan is supported by a range of supporting strategies, with work taking place in a number of areas and local priorities, which are aligned to the Joint Health and Wellbeing Strategy, identified as follows:
 - Improving outcomes for people experiencing mental health crisis
 - Supporting people who are socially isolated
 - Reducing the number of people developing mental health problems through promotion of mental health, prevention of mental ill-health and improving the quality of life for those with poor mental health through early identification and recovery
 - Developing a specific Mental Health, Emotional Wellbeing and Resilience Plan to take forward work relating to children and young people, incorporate Children and Adolescent Mental Health Services (CAMHS)
 - Reducing the rate of people who self-harm or attempt suicide in County Durham

 - The Health and Wellbeing Board agreed the Dementia Strategy for County Durham and Darlington 2014-17, which has been developed to identify areas of need and priority actions over the next three years, to meet challenges of the national dementia policy and to enable people to live well with dementia. The strategy emphasises the role of appropriate, high quality services in the community, which will help to avoid inappropriate hospital admissions and facilitate timely discharge. It identifies housing initiatives for people with dementia, and specific services such as dementia advisors, and highlights the need to establish 'Dementia Friendly Communities' in Durham, which has been highlighted as an area of good practice.

 - The Health and Wellbeing Board has supported the Wellbeing for Life Service to help people to live well, and build on their capacity to be independent, resilient and maintain good health for themselves and those around them.
8. Details of the local projects across County Durham, which aim to improve the health and wellbeing of people in their local communities, including those delivered by the Area Action Partnerships, are included in the Annual Report. Examples include:
- Health Express in Shildon, which aims to increase knowledge and awareness of health issues in the local community and help people access health services and get support in better managing long term health conditions.
 - The roll out of dementia friendly communities, focusing on improving inclusion and quality of life for people living with dementia.

Commitments of the Health and Wellbeing Board

9. The Health and Wellbeing Board has made a number of commitments since it was established in April 2013, which include:

- Signing up to the Disabled Children's Charter to ensure the needs of disabled children are fully understood and services are commissioned appropriately
- The Chair of the Health and Wellbeing Board and the Director of Public Health County Durham are mental health champions, whose role includes promoting wellbeing, and initiating and supporting action on public mental health
- Signing up to the National Dementia Declaration and Dementia Care and Support Compact to support the delivery of the National Dementia Strategy and improving care and support for people with dementia, their carers and families.
In addition the Health and Wellbeing Board have signed up to the Carers' Call to Action to ensure that the vision for carers of people with dementia is achieved
- Signing the NHS Statement of Support for Tobacco Control to actively support local work to reduce smoking prevalence and health inequalities

Local Government Association Peer Challenge

10. The Annual Report includes a section on the Local Government Association Peer Challenge, which took place between 24th and 27th February 2015, and provides an overview of areas which are strong, as well as the following four areas of best practice which they would like to share with other Health and Wellbeing Boards. These are in relation to:

- Community engagement
- Area Action Partnerships
- 'Voice of the child'
- Relationship with Scrutiny

Future work of the Health and Wellbeing Board

11. There are a number of initiatives that the Health and Wellbeing Board will continue to take forward during the coming year, which include:

- Agreeing the Children and Young People's Mental Health, Emotional Wellbeing and Resilience Plan
- Agreeing the County Durham Physical Activity delivery plan
- Signing up to the 'Charter for Homeless Health'

Details of further initiatives are included in the Annual Report.

Recommendations

12. It is recommended that Cabinet:
- Note the work that has taken place in 2014/15 by the Health and Wellbeing Board
 - Receive the Health and Wellbeing Board Annual Report 2014/15 for information.

Contact: Peter Appleton, Head of Planning and Service Strategy, Children and Adults Service Tel: 03000 267 381

Appendix 1: Implications

Finance – Ongoing pressure on the public services will challenge all agencies to consider how best to respond to the health, social care and wellbeing agenda.

The Better Care Fund will be used to deliver integrated services between health and social care in County Durham.

Staffing – Not Applicable

Risk – A risk sharing agreement is in place for the Better Care Fund, which has been developed between the Clinical Commissioning Groups and the Local Authority.

Equality and Diversity / Public Sector Equality Duty – Consultation on the priorities for the Health and Wellbeing Board is undertaken on an annual basis through the Big Tent Engagement Event and other engagement activities.

The key equality and diversity protected characteristic groups are considered as part of the process to identify the groups/organisations to be invited to the Big Tent Engagement Event.

Equality Impact Assessments have been completed for the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS).

Accommodation - No direct implications.

Crime and Disorder – The JSNA provides information relating to crime and disorder.

Human Rights - No direct implications.

Consultation – Consultation has taken place as part of the development of the JSNA and JHWS. This includes consultation through the Big Tent engagement event to gather the views of a wide range of stakeholders including service users, patients GPs, carers, members of the voluntary and community sector as well as partner agencies and elected members.

Consultation has also taken place through service user and carers forums, Investing in Children agenda days, The Bridge (Family Action) young carers group, and Making Changes Together (parents of disabled children).

Carers are involved in consultation, to ensure their needs and the needs of the people they care for are considered.

Procurement – The Health and Social Care Act 2012 outlines that commissioners should take regard of the JSNA and JHWS when exercising their functions in relation to the commissioning of health and social care services.

Disability Issues – The needs of disabled people are reflected within the JSNA and the JHWS.

Legal Implications – The Health and Social Care Act 2012 established the requirement for all upper tier local authorities to establish Health and Wellbeing Boards.