

Children and Young People's Overview and Scrutiny Committee

11 January 2016



Refresh of the Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy 2016-2019

Report of Rachael Shimmin, Corporate Director of Children and Adults Services

Anna Lynch, Director of Public Health County Durham

Purpose of Report

1. The purpose of this report is to provide Children and Young People's Overview and Scrutiny Committee with an update on the refresh of the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy 2016-19.
2. A presentation will be provided at the Children and Young People's Overview and Scrutiny Committee on 11th January 2016.

Background

3. The Health and Social Care Act 2012 places clear duties on local authorities and Clinical Commissioning Groups (CCGs) to prepare a Joint Health and Wellbeing Strategy (JHWS) through Health and Wellbeing Boards.
4. Consultation relating to health and wellbeing has taken place with over 260 people from various groups including voluntary organisations, patient reference groups, Area Action Partnerships, members of Adults Wellbeing and Health Overview and Scrutiny Committee, service users and carers attending the Health and Wellbeing Board's Big Tent engagement event in November 2015.
5. Consultation in relation to health issues has also taken place with young people through Investing in Children reference groups, and the 'Try it Out' Young People's Patient Congress organised by North Durham Clinical Commissioning Group (CCG). Young carers and their families have also been consulted through The Bridge Young Carers Service.
6. The refresh of the JHWS 2016-19 includes updates on policy information, consultation and evidence from the Joint Strategic Needs Assessment and Annual Report of the Director of Public Health County Durham.

Consultation Questions

7. Children and Young People's Overview and Scrutiny Committee will be asked the following questions as part of the consultation process:

- Are these still the correct outcomes on which the Joint Health and Wellbeing Strategy framework is built or do you think there are any changes required? (Appendix 2)
- Are these still the right strategic actions in the Joint Health and Wellbeing Strategy 2016-19?
- Are there any gaps in the strategic actions?

Next Steps

8. The Joint Health and Wellbeing Strategy 2016-19 will be presented for agreement at the Health and Wellbeing Board meeting on 8th March 2016.
9. A copy of the final Joint Health and Wellbeing Strategy 2016-19 will be circulated to members of Children and Young People's Overview and Scrutiny Committee for information.

Recommendations

10. Children and Young People's Overview and Scrutiny Committee is requested to:
 - Provide comments to Ann Whitton, Overview & Scrutiny Officer by **20th January 2016** on the Joint Health and Wellbeing Strategy 2016 -19.
 - Note that any feedback from the Committee will be fed into the Health and Wellbeing Board.

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Appendix 1: Implications

Finance – Ongoing pressure on the public services will challenge all agencies to consider how best to ensure effective services are delivered in the most efficient way.

The demographic profile of the County in terms of both an ageing and projected increase in population will present future budget pressures to the County Council and NHS partners for the commissioning of health and social care services.

Finance - Staffing - There are no staffing implications.

Risk – There are no risk implications

Equality and Diversity / Public Sector Equality Duty - Equality Impact Assessments have been completed for both the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy (JHWS).

Equality and Diversity / Public Sector Equality Duty – The key equality and diversity protected characteristic groups were considered as part of the process to identify the groups/organisations to be invited to the Health and Wellbeing Board Big Tent annual engagement event in November 2015, which was attended by over 260 people from various groups including service users, patients, carers, members of the voluntary and community sector and GP's as well as professionals from partners agencies.

Accommodation - There are no accommodation implications.

Crime and Disorder - The JHWS is aligned with and contributes to the current priorities within the Safe Durham Partnership Plan.

Human Rights – Human rights have been considered in the production of this plan.

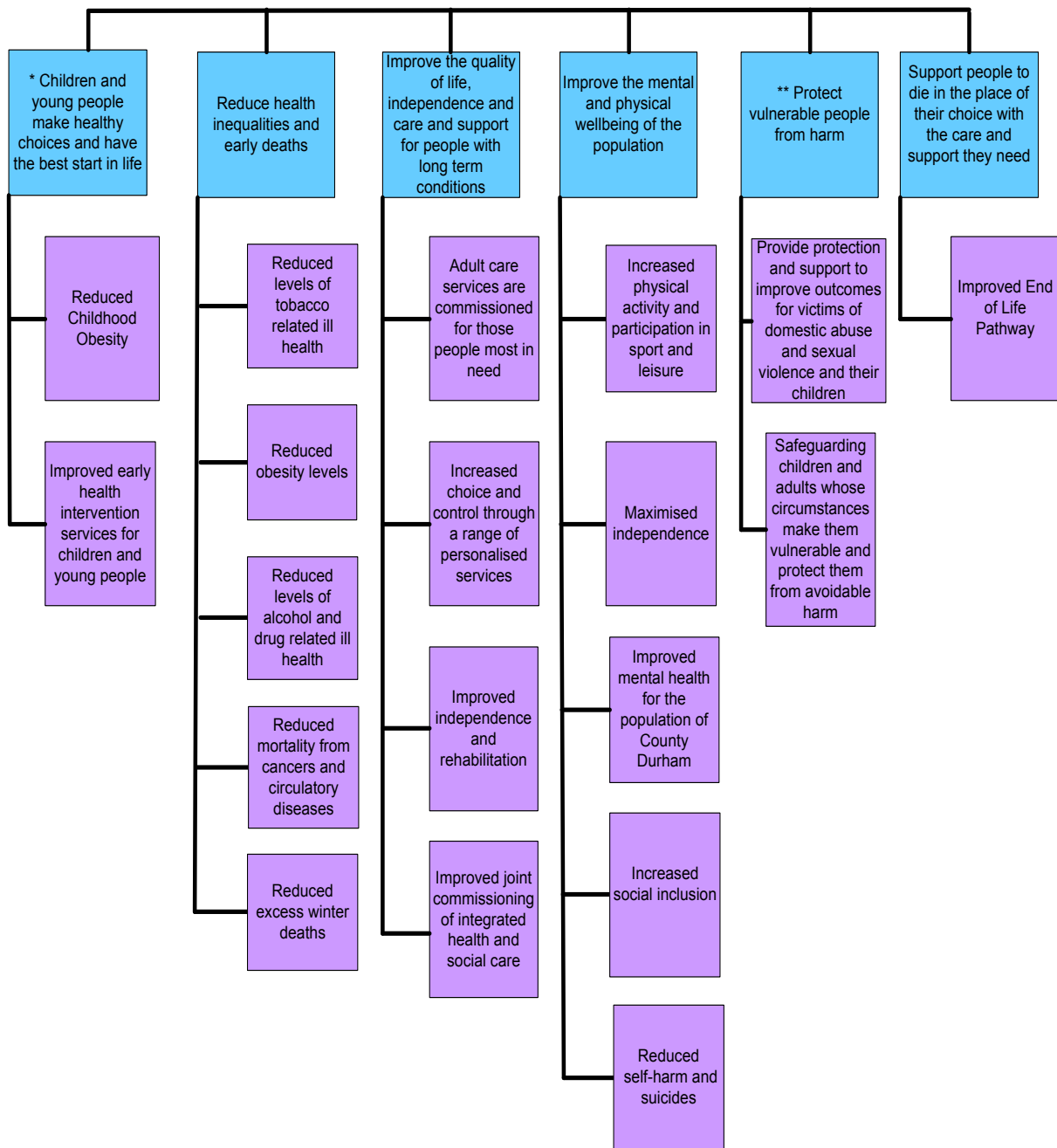
Consultation - Consultations have taken place with over 500 key partners and organisations including service users, carers, patients, members of the voluntary and community sector and GP's as well as professionals from partner agencies to ensure the strategy continues to meet the needs of people in the local area and remains fit for purpose for 2016-19.

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

Disability Issues – Issues in relation to disability have been considered throughout the development of the JHWS.

Legal Implications - The Health and Social Care Act 2012 places clear duties on local authorities and Clinical Commissioning Groups (CCGs) to prepare a JHWS. The local authority must publish the JHWS. The Health and Wellbeing Board lead the development of the JHWS.

Appendix 2: JHWS Objectives and Outcomes Framework



* Shared objective for the Children and Families Partnership and the Health and Wellbeing Board

** Shared objective for the Safe Durham Partnership and the Health and Wellbeing Board