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**HEALTH AND ADULT SOCIAL CARE SCRUTINY COMMITTEE**

**26<sup>TH</sup> SEPTEMBER 2012**

**Joint Report of the Director of Adult, Community and Housing Services, Acting Director of Children's Services, Director of the Urban Environment, the Director of Public Health and the Interim Senior Responsible Officer of the Clinical Commissioning Group**

**DRAFT JOINT HEALTH AND WELL-BEING STRATEGY**

**Purpose of Report**

1. For the Committee to consider the Shadow Health and Well-Being Board's Draft Joint Health and Well-Being Strategy.

**Background**

2. In response to NHS reform, the Cabinet established a Shadow Health and Well-Being Board as a new Committee for the Council beginning in the 2011/12 municipal year.
3. There are a number of key functions for the Shadow Health and Well Being Board. These include the need to develop a Joint Health and Well-Being Strategy.
4. The Strategy should be built on the analysis of the Joint Strategic Needs Assessment which is a responsibility of the Directors of Children's Services, Adult Social Services and Public Health. This assessment combines analysis of both quantitative and qualitative data. Quantitative data includes issues such as demography; health issues such as substance misuse or obesity; and policy issues such as the number of looked after children or the number of adults receiving direct payments for their care. Qualitative data includes the outcomes of consultation and engagement with Dudley people either formally or informally.
5. The Shadow Board has met in public session as well as to undertake Board Development work. This has included consideration of proposed content of a draft Joint Health and Well-Being Strategy which is included as an Appendix to this Report. The Draft builds on the analysis of our Joint Strategic Needs Assessment.
6. The production of a Joint Health and Well Being Strategy is a key activity of the Shadow Health and Well Being Board. The work associated with such a Strategy supports the duty on Local Authorities and Clinical Commissioning Groups to improve health and the quality of health services.
7. The Shadow Health and Well Being Board has shaped its initial direction for a Joint Health and Well Being Strategy where key considerations have included:

- the need to address the needs of all people “from cradle-to-grave,” across the whole life-course including an initial suggestion of the “Top Ten” Key Facts from our Joint Strategic Needs Assessment;
  - focus on important principles such as closing the health inequalities and care gap through health improvement and improvement in quality of health services;
  - next steps in improving our approach to integrated commissioning and provision between the Council and the Clinical Commissioning Group so that people using services have better pathways to care;
  - responding to the content of the discussion by the Shadow Health and Well-Being Board at both its public meetings and Development Sessions to date e.g. what a definition of “Well Being” has meant to the Shadow Board Members;
  - that the Strategy should be concise and produced to meet the needs of a range of audiences; and
  - that the public should be engaged in the development of the Strategy.
  - Knowing that more analysis on the needs of children and young people will be needed in the area.
8. Practically, a Planning / Editorial Group was formed on behalf of the Shadow Board and a First Draft Joint Health and Well Being Strategy was developed. This version was the basis for consultation with the public and stakeholders at the Shadow Board’s Engagement Event of 5<sup>th</sup> July 2012. Connected but targeted arrangements have been made to meet the needs of children and young people for engagement on the draft Strategy. In developing the Draft Strategy, the Shadow Board has also had available to it, the outcomes of a separate but connected engagement event organised by the Clinical Commissioning Group in June 2012 on connected issues linked to their Authorisation Timetable.
9. Nearly 150 people attended the Engagement Event from the public, partner agencies and other stakeholders in a single late afternoon session. A rich volume of material was gained through the Event.
10. Attendees were invited to consider the main facts arising from the Joint Strategic Needs Assessment as included in the Draft Strategy. Some “headline” responses to the Draft Joint Health and Well Being Strategy which have been used to inform the current Draft included:
- *“better engagement with communities need to allow time to explain and for life experiences to be shared to distil views” ... “need to get representative structure right”*
  - *Start with child as that is the future*
  - *“better focus/greater understanding of mental health problems and the impact this can have on communities (particularly dementia)*
  - *“need to have clear links with other local strategies ie. child poverty strategy”*
  - *“promote walking groups, activities”*
  - *“divide in Dudley – look at poor areas what are the problems – can the better areas help the other areas?”*
  - *“pressure on young people, body image”*

- *“smoking/drinking – bigger than Dudley, can create local opportunities but issue wider than here”*
- *“poverty an issue but middle class/ Mr & Mrs Average are actually struggling”*
- *“issues are around pathways of care and lack of communication”*
- *“sandwich people in 50’s and 60’s age groups caring for young children and elderly parents... stressed unable to work – how do we help them taking on bigger –loads”*
- *“doesn’t address unseen needs – people who don’t access healthcare for whatever reasons”*
- *“people with learning difficulties living with older carers – more support to individuals to allow carers to have a break”*
- *“need to give change a chance”*
- *“Missing – is anything about building personal resilience to tackle what life throws at you”*
- *“the doctors appointments do not come through quickly*
- *“changing attitudes and mindsets of users to help themselves e.g. people wait hours for a prescription for aspirin*

11. As follow-up to this Engagement Event, further engagement activity is being undertaken in September the outcome of which is not available at the time of writing.

12. It has been recognised that there is much to learn from the process that has been undertaken for this Draft Joint Health and Well Being Strategy and that we can learn from this with a view to producing an even more developed product during 2013/14. This process has also provided learning for next year which will be incorporated into the Board’s engagement strategy / arrangements.

13. The Shadow Health and Well-Being Board very much welcomes the comment and contribution of the Childrens Select Committee and the Health and Adult Care Select Committee on the content of the Draft Joint Health and Well-Being Strategy so that it can influence the direction of the Strategy overall.

### **Finance**

14. Any financial implications arising from the content of this Report will be met from within existing budgets between the agencies.

### **Law**

15. The background to the development of Health and Well Being Boards and the production of Joint Health and Well-Being Strategies lies in the guidance issued to date leading up to the enactment of the Health and Social Care Act 2012.

### **Equality Impact**

16. The establishment of a Shadow Dudley Health and Well-Being Board provides an opportunity to extend the influence of the Council in working more closely with partners, particularly GP and Clinical Commissioners, to consider equality issues through the work of the Board including the development of a Joint Health and

Well Being Strategy. This Strategy will need to be informed by other strategies and principally the Health Inequalities Strategy.

17. Work on an Equality Impact Assessment is being undertaken in respect of the developing Joint Health and Well Being Strategy.

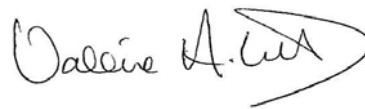
**Recommendation**

18. That the Committee -

- Comment on the current content of the draft Joint Health and Well-Being Strategy.



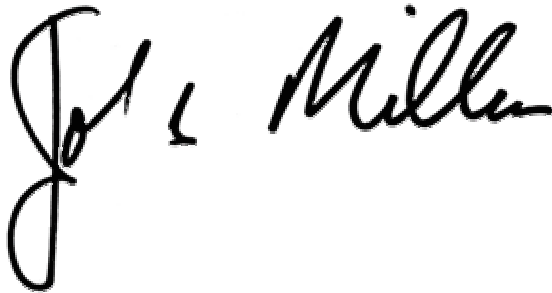
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