

3 June 2015**Agenda Item:12****REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD****CHAIR'S REPORT****Purpose of the Report**

1. To provide members with information on issues relevant to the Health and Wellbeing Board.

Information and Advice**The Community Programme – final report**

2. The Community Programme was established in 2012 to improve care for older people in Nottinghamshire and look at how to work better across organisational boundaries and between professional groups.

The Programme has now ended and a final report (Appendix 1) has been published summarising the work undertaken and identifying what will continue through others. The project initially looked at Comprehensive Geriatric Assessment, working with care homes and implementing summary care records. It later broadened its remit to include navigation, transfer of care and readmissions. Some of the work was proof of concept, other elements have been adopted as business as usual and the report identifies key contacts where this is the case.

This report links into the priority within the Health and Wellbeing Strategy to Support Older People to be Independent Safe and Well.

For more information about older people's services in Nottingham please contact Jane Cashmore: jane.cashmore@nottsc.gov.uk tel: 0115 9773922 or Gill Oliver: gill.oliver@nottsc.gov.uk tel: 0115 977 2427.

Tobacco Declaration workshop

3. A second workshop to support those organisations signed up/in the process of signing up to the Declaration on Tobacco Control has been arranged for **Tuesday 14th July 2015 10-12:30 at Mellish Rugby Club**. The aim of the workshop is for organisations to share action plans, learning and update on progress. Declaration leads in each organisation are encouraged to attend. Please register via [EventBrite](#).

For further information please contact Lucy Ball, Public Health Manager: lucy1.ball@nottsc.gov.uk

Progress from previous meetings

4. Autism self-assessment (April 2015)

The Board discussed the Autism self-assessment at the April meeting. The report highlighted a number of issues locally including awareness training. Board members agreed to undertake the training themselves and also discussion awareness raising within housing services and the criminal justice system.

During the discussion the Board agreed the following actions:

- Members to consider how autism training could be included in general equity training
- Members to provide named links for liaison on autism training to Cath Cameron-Jones.
- Members to undertake basic autism awareness training
- District housing officers to consider undertaking basic awareness training

The Board also agreed to receive details of on-line training resources which are attached as Appendix 2.

For more information please contact Cath Cameron-Jones e: Cath.Cameron-Jones@nottscg.gov.uk t: 0115 9773135.

5. Tobacco Declaration (April 2015)

The Board received an update report on the Nottinghamshire Tobacco Declaration which the Board had agreed in October 2015.

The update showed progress to date but all Board members were asked to check progress to sign the declaration and local action plans within their own organisations.

Update on policy and guidance

There have been a number of policies and guidance documents issued which are aimed at health and wellbeing boards. The following is a summary of those which may be of interest to Board members:

Starting well

6. **Improving mental health services for young people**

The Department of Health

[Future in mind: promoting, protecting and improving our children and young people's mental health and wellbeing](#) makes a number of proposals the government wishes to see implemented by 2020. These include: tackling stigma and improving attitudes to mental illness; introducing more access and waiting time standards for services; establishing 'one stop shop' support services in the community; and improving access for children and young people who are particularly vulnerable. The report sets out how much of this can be achieved through better working by working differently, rather than needing significant investment.

7. Person centred care for children and young people with complex needs

National Voices and Think Local Act Personal

[My life, my support, my choice](#) sets out how good, coordinated or integrated support looks like from the point of view of children and young people with complex lives up to the age of 25 - including the transition into adulthood. It offers a clear set of outcomes that commissioners and service providers should be working towards as part of the policy initiatives and legislation that are shaping services for children and young people, including The Care Act 2014 and the Children and Families Act 2014.

Living well

8. [Impact of physical activity and diet on health](#)

The House of Commons Health Committee

The Committee recommended that the next Government prioritises prevention, health promotion and early intervention to tackle the health inequalities and avoidable harm resulting from poor diet and physical inactivity. The Committee also regarded it as inexplicable and unacceptable that the NHS is now spending more on bariatric surgery for obesity than on a national roll-out of intensive lifestyle intervention programmes that were first shown to cut obesity and prevent diabetes over a decade ago.

9. Return on investment tools

National Institute for Health & Clinical Excellence

NICE have developed a series of return on investment tools:

- [Alcohol return on investment tool](#)
- [Physical activity return on investment tool](#)
- [Tobacco return on investment tool](#).

Developed to help evaluate a portfolio of interventions which can be used to model the economic returns that can be expected in different payback timescales. The different interventions in each tool can also be mixed and matched to see which intervention portfolio or package provides the best 'value for money', compared with 'no package of interventions' or any other specified package.

10. [Making the case for tackling obesity - why invest?](#)

Public Health England

These slides illustrate the facts and figures about obesity, the costs, the benefits of investing and the potential routes to action.

11. [Local tobacco control profiles for England: May 2015 data update](#)

Public Health England

The profiles provide a snapshot of the extent of tobacco use, tobacco related harm, and measures being taken to reduce this harm at a local level. These profiles have been designed to help local government and health services to assess the effect of tobacco use on their local populations.

Coping well

12. Caring for patients with long term conditions

The Richmond Group of Charities

[Vital Signs](#) report draws on the knowledge of the charities involved, the experiences of people with long-term conditions and the latest academic and policy research. It provides a snapshot of the gaps in care quality that matter most to service users and patients.

13. Excess winter deaths and morbidity and the health risks associated with cold homes

National Institute for health & Clinical Excellence (NICE)

The guideline recommends that health and social care professionals, as well as those working in the heating, plumbing and electricity industries sign post people who live in cold homes to a single-point-of-contact system for help in making their home warmer. Local health and wellbeing boards should ensure that a single-point-of-contact health and housing referral service is designed and commissioned to help vulnerable people who live in cold homes.

14. New fund to improve the health of homeless people

The Department of Health has announced details of how [homeless people](#) will benefit from a new £55 million fund to upgrade existing accommodation and provide new housing. The money will be used for two types of projects: the Homeless Change project will provide upgraded hostel accommodation to improve physical and mental health outcomes for rough sleepers and to help reduce A&E attendances and the Platform for Life project will create new low-rent shared accommodation for young people who want to work, but are struggling to hold down a job or attend college because of a lack of stable housing.

15. [Mental health task force](#)

NHS England

A new task force is being established to develop a new five year national strategy for mental health, for people of all ages across England. It will explore the variation in the availability of mental health services across England, and look at the outcomes for people who are using services, and identify key priorities for improvement. It will also consider ways of promoting positive mental health and wellbeing, and ways of improving the physical health of people with mental health problems.

16. [Adult autism strategy: statutory guidance](#)

The Department of Health

The guidance sets out how local authorities and NHS organisations should carry out their responsibilities under the Autism Act 2009 to develop services that support and meet the needs of people with autism, and their families and carers.

17. Increase in mental health staff working with police and courts

Half of the country is now covered by a [new service](#) to make sure people with mental health conditions, learning disabilities or other vulnerabilities such as debt or homelessness are supported in police custody and the courts. Sixteen new 'Liaison and Diversion' teams are now up and running, bringing the total to twenty six schemes nationwide and covering 28.5 million people or half of the country. The first wave of ten schemes, which see specialist mental health workers working alongside police officers, were launched in April last year. In the first twelve months the services have helped 16,315 adult cases and 2,450 children and young people's cases access specialist support when in contact with the criminal justice system.

Working together

18. [Acute hospitals and integrated care: from hospitals to health systems](#)

The Kings Fund

This report describes lessons from five case studies where acute hospitals are working collaboratively with local partners to build integrated models of care. Three of these sites have since been chosen as vanguards by NHS England. The report assesses the achievements made so far, distils the lessons learnt for other local health economies, and makes recommendations for national policy-makers.

19. [Workforce Planning in the NHS](#)

Kings Fund

The NHS workforce is the primary driver of future health costs. Given the substantial changes in population demographics and health care needs, the workforce needs to be fit for purpose. That means responding to immediate needs and financial pressures while adapting to deliver the future care models outlined in the NHS five year forward view. Getting the right balance requires a robust understanding of the nature of workforce pressures locally and nationally and what can be done to address them in the short and the long term.

20. [Local leadership, new approaches – how new ways of working are helping to improve the health of local communities](#)

Public Health England & Local Government Association

This report describes how local authorities and health teams are working together to improve the health of local communities through prevention and early intervention. It also features seven case studies, each of which describes a particular programme or close partnership between a local authority and local public health or health care teams, often with the additional support of the voluntary sector.

21. [How to.. understand & measure impact](#)

The Better Care Fund

This 'How to' guide aims to help local areas to understand and measure the impact of their efforts to integrate services across the provision of health and care. The scope of this document covers practical support when developing:

- Outcomes that are appropriate to achieve the impacts
- Measures to help assess progress
- An evaluation framework to support ongoing monitoring and enable judgement
- A process for using feedback to promote continuous improvement and maintain creativity and innovation.

General

22. [Stick with it! A review of the second year of the Health and Wellbeing Improvement Programme](#)

Shared Intelligence and the Local Government Association (LGA)

The purpose of this review is to do three things: understand the impact of the programme; capture system learning, and; make a significant contribution to the national body of knowledge on health and wellbeing boards. This final report draws together conclusions from across the three objectives.

23. **[Building the NHS of the Five Year Forward View – NHS England Business Plan 2015/16](#)**

NHS England

The plan sets out ten priorities to improve quality and access to services for patients, drive better value for money and to build the foundations for the future health and care system.

24. **How is the new NHS structured?**

The King's Fund has updated its series of organograms explaining [how the NHS is now structured](#), including how providers are regulated, who can influence the commissioning of services and how the money flows.

25. **[Asset-based approaches in health care](#)**

The Health Foundation

This report summarises the theory and evidence behind asset-based approaches in health care and wellbeing and gives details of six case studies, describing these approaches in action. The aim of the report is to engage people in health care that are looking to introduce asset-based working into mainstream health and care sectors while also challenging current practitioners in community development to look at the dimensions and benefits of developing assets for improving community health and wellbeing.

26. **[One place, one budget? Approaches to pooling resources for public service transformation](#)**

In 2014, the Local Government Association (LGA) People and Places Board commissioned RAND Europe to prepare nine case studies of local authorities in England where LGA knew a pooled approach was being used for service delivery. The objective was to describe the development of different initiatives and to comment on what appeared to be the enablers and barriers to progress. The specific initiatives implemented by local authorities using a pooled approach covered different services including health and social care, skills and vocational training, regeneration, economic growth, troubled families and the management of public assets. This report makes recommendations for what a 'public sector reform deal' - a series of 'asks' of government and 'offers' from places - might look like, based on the evidence gathered.

27. **Local Health Profiles: May 2015 data update**

Public Health England

The [online Health Profiles](#) data has been updated for May 2015, and are now being updated quarterly. The PDF Health Profiles reports will be updated annually as usual, this year on 02 June 2015. The profiles provide a snapshot overview of health for each local authority in England. These profiles are intended to help local government and health services make plans to improve local people's health and reduce health inequalities.

28. **[Letting go: How English devolution can help solve the NHS care & cash crisis](#)**

Reform

This report explores the potential benefits of NHS devolution for the provision of health and care services.

Consultations

29. Health & Wellbeing consultations

Nottinghamshire County Council have the following open consultation relating to health and wellbeing:

- a. [Adolescent Health Strategy – establishing health priorities for young people](#)
- b. [Pilot school health & wellbeing survey](#)
- c. [Nottinghamshire Wellbeing@Work - Workplace Award Scheme](#)

All consultations can be found at:

<http://www.nottinghamshire.gov.uk/thecouncil/democracy/have-your-say/consultations/>

Other options considered

30. Report to be noted only.

Reason for recommendation

31. Report to be noted only.

Statutory and Policy Implications

32. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

1) That the report be noted.

Councillor Joyce Bosnjak
Chairman of Health and Wellbeing Board

For any enquiries about this report please contact:

Nicola Lane, Public Health Manager. Tel: 0115 977 2130. Email: nicola.lane@nottscc.gov.uk

Constitutional Comments

14. This report is for noting only.

Financial Comments

15. There are no financial implications contained within the report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

Electoral Divisions and Members Affected

- All