

¹MIDDLESBROUGH COUNCIL
OVERVIEW AND SCRUTINY BOARD

Agenda Item 6

4 MARCH 2014

HEALTH AND WELLBEING BOARD ASSURANCE REPORT

GILL ROLLINGS: CHIEF EXECUTIVE

PURPOSE OF THE REPORT

1. To provide an overview of the Middlesbrough Health and Wellbeing Board's progress against the Joint Health and Wellbeing Strategy.

SUMMARY OF RECOMMENDATIONS

2. That Overview and Scrutiny Board notes the Health and Wellbeing Boards progress against the Joint Health and Wellbeing Strategy.

BACKGROUND AND EXTERNAL CONSULTATION

Commissioning Intentions 2014/15

3. A Commissioning Intentions task and finish group was set up to review the commissioning intentions for the NHS South Tees Clinical Commissioning Group, NHS England Durham, Darlington and Tees area team, Middlesbrough council (Public Health, Adult Social Care and Children and Young People's services) to ensure alignment with the Health and Wellbeing strategy and the JSNA as well as identifying opportunities for joint working.
4. The detailed commissioning intentions have been presented to the three delivery partnerships; children and young people's trust executive, public health and the health and social care delivery partnership. The delivery partnerships will monitor the implementation of the commissioning intentions as part of their work programmes and performance management arrangements. Progress will be reported through to the Health and Well-being board.
5. There are four Big Lottery Fund investment programmes that Middlesbrough is bidding for all of which will address issues highlighted within the strategy. BLF: Fulfilling Lives; Better start: BLF Fulfilling lives aging well, BLF Headstart and BLF Talent March. The commissioning intentions TAFG recommend for the four delivery partnerships to coordinate the development of the bids to ensure they align with the JSNA and HWBS.
6. The commissioning task and finish group identified the need for improving the JSNA and to ensure its recommendations inform commissioning and service planning. A steering group, chaired by the director of public health, is being established to oversee and coordinate the actions required to update and improve the JSNA and the Pharmaceutical Needs Assessment.

7. The Health and Wellbeing Board:

- were assured that the 14/15 commissioning intentions for the NHS, social care, public health and children's services have been developed in line with the Health and well-being strategy.
- Approved plans for the delivery partnerships to monitor the implementation of commissioning intentions
- Approved plans for the delivery partnerships to monitor the development of the BLF investment bids to ensure their alignment with the HWBS and coordinated
- Approved plans for the establishment of a JSNA steering group to oversee and coordinate the actions required to update and improve the JSNA and the Pharmaceutical Needs Assessment

Healthwatch Middlesbrough

8. The Health and Wellbeing Board noted the progress made by Healthwatch Middlesbrough and the newly appointed chair of the Middlesbrough Healthwatch Board has been asked to join the Middlesbrough Health and Wellbeing Board.

Raising Aspirations Event

9. The Raising Aspirations Event was held on 25th October 2013 at the Fabrick Offices Middlesbrough. Approximately 100 delegates attended the event; delegates were from a range of organisations including schools, colleges, training providers and employers. The general feedback from delegates was excellent, they felt the event was very positive and it highlighted lots of good opportunities and programmes that are on offer to young people. The event raised awareness of opportunities and initiatives that are currently taking place but also highlighted the need for a more co-ordinated approach in joining up these opportunities.

10. WIMP have agreed to establish a task and finish group to develop a programme of work to take forward some of the issues raised at the Employability Event.

Talent Match

11. Talent Match is a £100 million Big Lottery Fund investment project to help long-term unemployed young people, aged 18-24, to gain employment across England. It has been designed by young people, for young people. Talent Match, in partnership with voluntary, public and private sector organisations and young people panels, will deliver local employment solutions in response to local needs. In particular, it will work closely with local businesses to develop opportunities for young people to access jobs.

12. Middlesbrough has been awarded around £1.5 million to :

- provide more positive, innovative opportunities to develop and value young people as well as their home town
- help stop young people struggling and improve their lives, creating better futures
- make young people more aware of opportunities to make informed, positive choices
- improve communication between companies, organisations and young people so that it opens up avenues for career opportunities that benefit everyone.

Establishing Children's Health & Wellbeing Delivery Partnership

13. The Health and Wellbeing Board noted the progress made to establish a Children's Delivery Partnership and agreed to receive a further update at the next health and Wellbeing Board meeting.

Big Lottery - Fulfilling Lives - A Better Start

14. The Big Lottery's Fulfilling Lives: A better Start aims to deliver a step change in preventative approaches in pregnancy and the first three years of life to improve life chances of babies and young children. £30-£50 million will be invested in three to five areas for between eight to ten years.

15. Middlesbrough has been successful in being selected as one of 15 local authorities to reach the final stage of application for funding. This has been a highly competitive process to date, starting from 117 local authorities putting in expressions of interest, with 41 selected for first stage scrutiny and now we have been selected to go through to the final stage.

Big Lottery - Headstart mental Health and Resilience

16. The Big Lottery Fund has launched the £75m HeadStart programme aimed at helping children aged 10 -14 to cope with the pressures of modern life. Middlesbrough has been identified as one of 12 areas of investment for HeadStart. An expression of interest was submitted by Middlesbrough Council on the 17th January following a multi-sector visioning day. Following this £10,000 development funding will be made available.

Director of Public Health Annual Report 2013

17. The 2013 DPH annual report, is entitled Moving Upstream, and it begins by summarising the transfer of public health into local government and the opportunities this presents for making sustainable improvements in health and wellbeing and tackling health inequalities. The report outlines the key health and wellbeing challenges for the town and makes a number of recommendations to strengthen upstream action, in responding to the widening health inequalities, poor outcomes for children and young people and the management of long-term conditions. The report also summarises the impact of the welfare reforms and concludes with an update on the health promoting settings approach we are taking in Middlesbrough. The table below summarises the chapters and the key recommendations from the report.

- ***Public health returns home! (and NHS reforms)***

The Marmot review recommendations and the asset based approach need to be embedded into local action to improve health and wellbeing and tackle health inequalities.

The Health and Wellbeing Board should ensure that the JSNA and the Health and Wellbeing Strategy priorities and principles are directing the commissioning and delivery of services for the local population.

- ***Best start in life***

An integrated multi-agency approach is needed to ensure all children in Middlesbrough have the best start in life.

- ***Prevention and early intervention for long-term conditions***
There is need for an integrated and coordinated approach to prevention, early intervention and effective management of long-term conditions in Middlesbrough.
- ***Impact of the welfare reforms***
There is a need for more multi-agency working with involvement from all agencies, in the welfare reform action plan and Middlesbrough's welfare reform strategic group.
- ***Creating health promoting environments and settings***
Lesson from implementing the health promoting settings framework at the hospital, university, college and community pharmacy should be applied to other settings to 'Make Every Contact Count'.

Pharmaceutical Needs Assessment

18. Local Health and Wellbeing Boards have a statutory requirement for the production of the Pharmaceutical Needs Assessment (PNA) since April 2013. The PNA inherited from the PCT was, according to the Regulations in place at the time, intended to in February 2014. The Middlesbrough Health and Wellbeing Board's first PNA, will be published by 1st April 2015. The review and publication of the PNA refresh will be overseen by the JSNA steering group and regular updates will be presented to the Health and Wellbeing Board.

Public Health Campaigns Group

19. A Public Health Campaigns Group was recently established upon the recommendation of the Health and Wellbeing Strategic Co-ordination Group to co-ordinate communications activity amongst partners across Middlesbrough. The following have been agreed as key areas to concentrate communications efforts on for 2014/15:

- Alcohol
- Cancers
- Heart disease
- Lung diseases
- Mental health
- Obesity and nutrition
- Smoking
- Sexual Health
- Summer health
- Winter health

Better Care Fund

20. The Integrated Transformation Fund (ITF) was announced in the spending review at the end of June. It was stated that the fund would total £3.8 billion and come into force in 2015/16, to be spent locally on health and social care to drive closer integration and improve outcomes for patients and service users.

21. The national ITF pot was set at £3.8bn, the funds would be allocated partly by formula and partly linked to performance. The NHS planning framework will require CCG's to agree five-year strategies, including a two-year operational plan that covers the ITF through their Health & Wellbeing Boards. A key part of the plans is the importance being placed on the role of Health & Wellbeing Boards in driving through the integration

agenda:

22. Local Health and Wellbeing Boards must have agreed plans in place by April 2014, to access the first phase of the performance reward element. NHS England produced draft planning guidance in December 2013 that confirmed that the ITF would be renamed the Better Care Fund and that the total funding would still be £3.8bn.
23. The approval process states that Health and Wellbeing Boards should provide NHS England the first cut of their completed Better Care Plan template, as an integral part of the constituent CCGs' Strategic and Operational Plans by 14th February 2014. The final version of the Better Care Plan should be submitted to NHS England, as an integral part of the constituent CCGs' Strategic and Operational Plans by 4th April 2014.
24. The Health and Wellbeing Board approved the elements of the emerging model and delegated final approval of the Better Care Fund submission to the Health & Social Care Delivery Partnership. The Health and Wellbeing Board requested a further update at a future meeting

Fulfilling Lives - Ageing Well

25. Ageing better is about reducing social isolation for older people to improve their wellbeing and give them confidence and support so that they can be more active within their neighbourhoods. The Big Lottery fund made £70million available, to fund 15-20 local authority areas across England. The expectation is that local communities within each area would come together to form a partnership. Successful partnerships will be awarded between £2 and £6million for a project lasting between three to six years.
26. Middlesbrough Council submitted an expression of interest and was successful in progressing to the vision and strategy stage. In order to move forward a lead community and voluntary organisation was required, the successful lead organisation will be Middlesbrough & Stockton Mind.
27. Whilst the outcome of the Big lottery appraisal regarding the suitability of the lead partner is awaited, work is now progressing to complete the full vision and strategy which must be submitted by 30th April 2014. This work will begin the discussions in regard to innovative ideas to address the issues of social isolation faced by older people. Notification of success will be made public in July 2014.

Health Funding & Processes for CCG Authorisation

28. Prior to the Health Reforms and the establishment of Clinical Commissioning Groups, a range of initiatives and posts within Middlesbrough Council Adult Social Care were funded by NHS Tees. These arrangements were agreed through the process of a basic memorandum of understanding document. These arrangements were reviewed as part of the transition arrangements to South Tees CCG and in many instances alternative funding mechanisms were agreed either public health, reduction in funding or transfer to another health partner. However there were some remaining funding commitments for STCCG. STCCG require these funding commitments to be specified through a more formal legal arrangement, which are either a section 75 partnership agreement or through a section 256 legal agreement. The CCG have further specified that they wish to secure sign off for these agreements through a formal mechanism,

which mirrors that of the social care transfer funding. It is stipulated by Department of Health that the social care transfer funding (£2.7million) must be agreed through a formal section 256 agreement between the local authority and the NHS Area Team; they will also consult with the CCG.

Process

29. In order to achieve these requirements it is proposed that all section 75 partnership agreements and section 256 agreements follow the similar route. It is proposed that the Health & Wellbeing Board delegates responsibility to the Health & Social Care Delivery Partnership to formally sign off on all agreements. All relevant partners attend this group and therefore all legal agreements will be sent through this delivery partnership for formal sign off. Two copies of each agreement will be signed to be retained by each partner. The minutes will record the approval of the agreement. All agreements signed off by the H&CSDP will be reported to the following meeting of the H&WBB for information.

Health and Social Care Bill - Caring for Our Future - Reforming Care and Support

30. The Care Bill May 2013 updates the Draft Care and Support Bill July 2012 (the draft bill) in light of the following developments:

- extensive stakeholder consultation
- pre-legislative scrutiny by the Joint Committee set up to examine the draft bill
- the decision to implement the cap on lifetime care costs
- the Francis report into care at Stafford Hospital.

31. The Bill is in three parts:

Part 1 Care and support

This section aims to establish a clear, unified modern statute for adult social care based on recommendations from the Law Commission review, and the vision for social care set out in the white paper Caring for our future reforming care and support.

Part 2 Care standards

This section provides the legislative framework for the government's response to unacceptable failings in health and social care provision in relation to the work of the Care Quality Commission (CQC).

Part 3 Establishing non departmental public bodies

This section covers the establishment and responsibilities of Health Education England and the Health Research Authority. It is not covered in this policy briefing.

32. The Department of Health is expecting each local authority area to work in partnership with communities, voluntary sector, providers and others to prepare for and see through the implementation of the Bill.

33. The Health and Social Care Delivery Partnership has established a project group to oversee the implementation of the bill and develop a joint action plan.

IMProVE

34. The number of people who are elderly, vulnerable and living with a long-term condition in South Tees is increasing. The CCG working closely with social care and other health partners, want to improve the quality of care this group of people receive and to ensure

that services remain safe now and are sustainable in the future

35. The vision is that All Care is Planned Care' – aim to move away from a reactive care model to one which focuses on proactive care, preventing deterioration into ill health and hospital admission.

Work to date includes:

- Work with local GPs, hospital clinicians, nurses, other health care professionals and social care partners to consider the many challenges facing health and social care in Tees and how to address them;
- Engaging with services users and carers to gain their views on services and the vision for the future;
- Implementing a number of initiatives to support more proactive care in the community eg., rapid response teams supporting those in crisis who require more support at home and predictive risk tools, predicting those at risk of future admission and developing management plans to support independence and exacerbation of ill-health.

Next Steps

The CCG will continue to work with partners to develop and realise our vision, taking advantage of the national Better Care Fund to support this. We intend to formally consult with the public with regard to potential options for service change. This is likely to include making best use of our existing hospital estate to enable more investment into community and home services.

IMPLICATIONS FOR THE COUNCIL AND LOCAL COMMUNITIES

36. **Financial implications** – None

37. **Legal implications** – None.

38. **Ward Implications** – None.

RECOMMENDATIONS

39. That Overview and Scrutiny Board notes the Health and Wellbeing Boards progress against the Joint Health and Wellbeing Strategy.

BACKGROUND PAPERS

None

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