

<b>HEALTH AND WELLBEING BOARD</b>	<b>AGENDA ITEM No. 4</b>
<b>21 JANUARY 2013</b>	<b>PUBLIC REPORT</b>

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**PETERBOROUGH DRAFT HEALTH AND WELLBEING STRATEGY 2012-2015:  
PROGRESS REPORT**

R E C O M M E N D A T I O N S	
<b>FROM :</b> Director of Public Health; Director of Adult Services; and Assistant Director for Strategy, Commissioning, Prevention (Children's Services)	<b>Deadline date :</b> N/A
<p>The Health and Wellbeing Board is recommended to:</p> <ol style="list-style-type: none"> <li>1. Approve the revised Health and Wellbeing Strategy in the light of consultation responses.</li> <li>2. Agree that the objectives in the strategy are incorporated in the commissioning plans of the key statutory agencies.</li> <li>3. Review the impact of the Health and Wellbeing Strategy in September 2013 through an analysis of those commissioning plans and associated outcomes.</li> <li>4. Acknowledge the importance of the work of other strategic partnerships that operate under the banner of the Greater Peterborough Partnership in the achievement of the objectives of the strategy and commend those partnerships to own and act on the health and wellbeing priorities as part of their work programmes.</li> </ol>	

**1. ORIGIN OF REPORT**

1.1 This report is submitted to the Health and Wellbeing Board in order for the board to deliver its statutory responsibility to publish a joint health and well-being strategy.

**2. PURPOSE AND REASON FOR REPORT**

2.1 The purpose of this report is to:

2.1.1 Obtain the Board's endorsement of the revised Health and Wellbeing Strategy (appendix 1) following the three month consultation process.

2.1.2 Initiate the establishment of an accountability process to ensure that progress on achieving the objectives and associated outcomes is effectively monitored and reported to the Health and Wellbeing Board, member organisations and wider partnerships.

2.2 This report is for the Board to consider under its Terms of Reference No. 3.1, to develop a Health and Well Being Strategy for the city which informs and influences the commissioning plans of partner agencies.

**3. PETERBOROUGH HEALTH AND WELLBEING STRATEGY 2012-2015**

3.1 Introduction and context

- 3.1.1 On the 18<sup>th</sup> June 2012, the Health and Wellbeing Board received a report that introduced the process for developing its first Health and Wellbeing Strategy. In addition, the board was presented with a series of “illustrative priorities” that had been drawn from the 2012 Joint Strategic Needs Analysis. In the period that followed, the accountable officer group worked up the priorities in more detail and produced a draft strategy that was shared with members of the board. A final draft document was issued for consultation to a wide group of stakeholders. The consultation process will be addressed in paragraph four below.
- 3.1.2 The three year strategy is intended to:
- Identify health and wellbeing priorities that can be owned and acted upon by the key strategic partnerships
  - Set clear markers for NHS and Local Authority commissioners as they act to put in place the right mix of services and initiatives to meet the needs of the population
  - Hold commissioners to account for their decisions
  - Help to develop partnerships that provide solutions to commissioning challenges with statutory and voluntary sector colleagues, including the wider determinants of health and wellbeing e.g. housing .
- 3.1.3 The priorities selected related closely to the findings of the Joint Strategic Needs Assessment (JSNA) and the draft strategy provides a summary of key JSNA findings in the section titled “How healthy are we?” Whilst it is difficult to do justice to the depth and range of information generated by the JSNA in a relatively brief section, some strong themes were identified and these underpinned the selection of strategic priorities that are presented in section four of the draft strategy. Each priority is accompanied by:
- A more descriptive objective
  - Evidence for its inclusion in the priorities
  - Broad recommendations on how the priority and objective will be addressed
  - The relevant linked outcomes frameworks that will inform the specific outcomes to be selected when the strategy is finalised, post consultation and board approval
- 3.1.4 In section five the strategy sets out a set of principles that should guide commissioners as they respond to the priorities and outcomes that need to be addressed. These principles represent a checklist for commissioners. This checklist is further supported by a recommended commissioning model that is outlined in the appendix to the draft strategy.
- 3.1.5 The draft strategy concludes with reference to the consultation process and the main areas that respondents are being asked to comment on (covered in more detail in the next section). In addition it makes reference to proposed schedule of outcomes that will be developed as the board’s framework for setting a baseline and monitoring performance on the delivery of the agreed priorities.

## **4. CONSULTATION**

- 4.1 The Consultation Plan was developed with the support of NHS Peterborough and Peterborough City Council officers. The consultation ran for three months from 23<sup>rd</sup> August until 22<sup>nd</sup> November 2012 in line with the Council/Voluntary Sector Compact Agreement. It included an electronic mail-out of the document to a wide-ranging list of organisations and individuals across the statutory and non-statutory and community sectors. Groups representing those people with protected characteristics under equalities legislation were specifically targeted. Responses to the consultation questions were requested either by using the consultation form at the end of the document, by responding electronically using a survey tool, or by responding to the specific email address that has been set-up for the purpose. There were 14 separate responses, some representing individual views, others, the views of representative bodies. A stakeholder consultation event was held on the 21<sup>st</sup> November 2012 with upwards of 70 people attending all or part of the session. NHS Cambridgeshire and NHS Peterborough and Peterborough City Council Scrutiny Commission for Health Issues have commented.

- 4.2 Responses have been collated and considered and where appropriate, have been incorporated into the revised strategy. A summary of key comments are attached as Appendix 2, including responses to each of those points. These include changes to the draft strategy, suggestions of additional appropriate action and in some cases, noting the comment but agreeing no change to the strategy. This includes targeted work on specific areas of needs assessment as part of the revision of the Joint Strategic Needs Assessment.
- 4.3 Overall, the feedback suggests that the picture of Peterborough's population and its needs is accurate and that the priorities that have been selected reflect the needs. Consultees have emphasised the importance of ensuring that there are some concrete outcomes that will be used as measures of achievement. They have commented on the need to maintain a focus on carers support and on those with long term conditions. In addition there has been proper recognition of the need to look at health and wellbeing in a comprehensive manner, acknowledging, for example the impact of wider determinants of health such as poverty and poor housing. The role of the voluntary sector as a key partner and voice for vulnerable people was emphasised.

## **5. CONCLUDING COMMENTS**

- 5.1 The key test for the relevance and impact of the Health and Wellbeing Strategy is the difference made to the lives of Peterborough's residents. In the first instance this will be evidenced by the degree to which Health and Local Authority commissioners respond to the priorities and incorporate actions and initiatives that address the priority needs. Subsequently, through the duration of the strategy the focus will be on the impact on outcomes. The accountability arrangements devised as part of the Board development programme in 2013 will be the Health and Wellbeing Board's mechanism for assessing that impact. In addition, the ownership of the Health and Wellbeing Strategy by other key partnership bodies will be an important element of the successful delivery of the strategy.

## **6. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985)

Peterborough Joint Strategic Needs Assessment 2012

Health and Social Care Act 2012

Peterborough Health and Wellbeing Strategy 2012-15

Consultation feedback August-November 2012

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