

**NHS Leeds and Leeds City Council Action Plan in response to the KPMG Audit on Tackling Health Inequalities.**

Recommendations	Actions	Lead	Outcomes	Timescales
<p>At a strategic level, agree the parameters by which locality partnerships function and the tools that they need to deliver outcomes including joint commissioning and procurement arrangements and the use of financial flexibilities to empower locality teams to deliver outcomes.</p>	<p>Establish Area Health and well being Partnerships, including engagement with PBC's</p>	<p>John England / Ian Cameron</p>	<p>Health improvement priorities are agreed and delivered by a full range of stakeholders.</p>	<p>April 2010</p>
	<p>Develop Governance arrangements for citywide and locality joint commissioning, within the context of the Area partnerships, including consideration of the full range of Health Act flexibilities.</p>	<p>John England / Ian Cameron</p>	<p>Commissioning decisions more accurately reflect local needs.</p>	<p>April 2011</p>
	<p>Identify key services which can be used as a test bed for locality commissioning – eg, healthy living services, community development for health.</p>	<p>John England / Ian Cameron</p>	<p>Services tailored to meet local needs.</p>	<p>First pilot by June 2010</p>
	<p><b>Tools:</b> Development of area and locality profiles within JSNA work programme.</p>	<p>Alistair Cartwright / Sue Wynne</p>	<p>JSNA is based on quantitative and qualitative findings.</p>	<p>Jan 2011</p>

<p>Develop an implementation mechanism to take forward the agenda focused on the locality level..</p>	<p>Identify the 10% most deprived SOA's for the city – and agree priority Middle layer SOA's between NHS Leeds and LCC.</p> <p>Develop protocol for work by Area Health and Well Being Implementation Managers based in Area Management Teams co-working.</p> <p>Finalise membership of Area Health and Well Being Partnerships.</p> <p>Agree how new NHS Leeds commissioning pathway teams will support locality based commissioning.</p> <p>Ensure each Area Delivery Plan contains well developed health and well being actions for delivery in 2010/11,</p>	<p>Alistair Cartwright / Sue Wynne</p> <p>Health and Well Being Improvement Managers</p> <p>Health and Well Being Improvement Managers</p> <p>John England / Ian Cameron</p>	<p>Resources targeted at those with poorest health outcomes</p> <p>All stakeholders adopting/benefiting from a consistent and coherent approach to reducing health inequalities</p> <p>Partnerships reflect the full range of stakeholders who have authority to influence decisions and action at local level</p> <p>Commissioning decision are more responsive to local needs and appropriately targeted towards reducing health inequalities.</p> <p>Residents experience a seamless and sustainable</p>	<p>Neighbourhood Index completed by January 2010</p> <p>Protocol developed by Jan 2010</p> <p>April 2010</p> <p>June 2010</p>
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	<p>including local investment priorities.</p> <p>Each Area to have a community engagement plan (for health and wellbeing) at a locality level and identifying how the expertise of the community engagement or Patient and Public Involvement teams can be utilised to support this process.</p>	<p>Dennis Holmes / Nigel Grey</p> <p>Health and Well Being Improvement Managers</p> <p>Health and Well Being Improvement Managers</p>	<p>range of health improvement services</p> <p>Local people feel strong ownership of actions implemented</p>	<p>April 2010</p> <p>May 2010</p>
<p>Ensure that the programme management approach being developed by the PCT is fully joined up with the local authority, incorporates those projects which cross</p>	<p>Streamlined Programme Management arrangements to align with Strategic Leadership teams has been agreed by the JSCB. A report setting out terms of Reference and governance is to be prepared</p>	<p>John England / Ian Cameron</p>	<p>Resources are used more effectively, there is less duplication and the whole system is focused on delivering the agreed improvement priorities.</p>	<p>April 2010</p>

<p>organisational boundaries and is owned by staff from both organisations.</p>	<p>Proposals for the establishment of a Joint Director of Public Health an integrated management of key delivery plans to be developed.</p> <p>Initiate regular dialogue of health and well being priorities across Strategic Leadership teams, Corporate Leadership Team and in political Forums, including Area Committees.</p>	<p>John England / Ian Cameron /</p> <p>John England / Ian Cameron</p>	<p>More opportunities to realise health benefits across all services – at both strategic and service delivery level</p>	<p>April 2010</p> <p>Ongoing</p>
<p>Leeds City Council should undertake further work to raise awareness of the health inequalities agenda amongst managers and at an</p>	<p>Identify a lead for health and well being workforce development across the LCC .</p>	<p>Cath Sullivan</p>	<p>Managers and front line service deliveries understand the health impact their services can have, both for the</p>	<p>January 2010</p>

<p>operational level emphasising:</p> <ul style="list-style-type: none"> <li>• the breadth of the agenda;</li> <li>• the positive impact that their Directorate and team can have on the issues; and</li> <li>• the benefits of staff thinking about their work with the public in a more holistic manner.</li> </ul>	<p>The establishment of a common health and wellbeing commissioning skills competency framework</p> <p>Develop skills and knowledge of health impact assessment methodology, through dissemination of toolkit and training support</p> <p>Develop healthy workplace programme and healthy lifestyle opportunities across LCC workforce</p> <p>Annual Health Inequalities conference targeted at the LCC Workforce</p>	<p>Brenda Fullard / Cath Sullivan</p> <p>Health and wellbeing Strategic Leadership Team</p> <p>Lisa Mallinson /</p> <p>Helen Freeman</p>	<p>workforce and the citizens of Leeds.</p> <p>Strategies and service plans are able to identify the health impact and risks are managed where there is a possibility of a negative impact.</p>	<p>April 2010 onwards</p> <p>Ongoing – building on successful 2009 programme</p> <p>2010 conference planned for March</p>
<p>Develop a single performance management framework for the health inequalities agenda across both organisations. This should eliminate duplication and potential</p>	<p>Scoping of existing information systems (collation, storage and analysis) relating to Health and well-being across the local authority and the PCT to be completed</p> <p>Options appraisal for</p>	<p>Alistair Cartwright / Stuart Cameron Strickland.</p> <p>Alistair Cartwright /</p>	<p>Improved performance through a better understanding of improved outcomes for people, a pooling of information and analysis and earlier identification of gaps in knowledge and how the gaps are to be</p>	<p>March 2010</p>

<p>inconsistencies and ensure a common language and data set supports decision making.</p>	<p>integrating information systems and information management across commissioning organisations to be completed</p> <p>Immediately performance management data and information to be collected on a single 'extranet' system,</p> <p>Improvement of qualitative information including patient and customer experience, through greater collaboration and information sharing. In the short term the development of an information sharing and partnership protocol</p>	<p>Lee Hemsworth.</p> <p>Christine Farrer / Steve Clough</p> <p>Paul Sandom / John England</p>	<p>addressed.</p>	<p>October 2010</p> <p>January 2010</p> <p>June 2010</p>
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