

Report of: South East Area Health and Wellbeing Partnership

Report to: Outer South Area Committee

Date: Monday 13th February 2012

Subject: South East Health and Wellbeing Partnership Progress Update

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Ardsley and Robin Hood Morley North Morley South Rothwell
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary of main issues

1. The area health and wellbeing partnerships provide a local strategic forum and network, ensuring that partnerships between local area committees, NHS Leeds and Clinical Commissioning Groups are maintained and strengthened, as well as ensuring that plans are clearly aligned to citywide and local priorities. Key programmes of work being supported and prioritised by the South East health and wellbeing partnership are outlined along with progress.
2. The joint strategic needs assessment (JSNA) and middle super output area (MSOA) health area profiles for 2011/12 have recently been published. The key health issues these outline are to be taken into account by the health and wellbeing partnership in determining future priorities for the Outer south area.

Recommendations

1. Members of the area committee to note progress being made on addressing health inequalities within Outer south through the work of the area health and wellbeing partnership.

2. Members to consider area health profile findings and shape local priority setting and service delivery.

1 Purpose of this report

- 1.1 To provide an update for the Area Committee on activity being undertaken by the south east area health and wellbeing partnership.
- 1.2 To share with the Area Committee members, middle super output area (MSOA) health profiles developed by NHS Leeds. To highlight key evidence and provide an understanding of significant issues relating to health and wellbeing of those living in Outer south area.

2 Background information

- 2.1 The area health and wellbeing partnerships provide a local strategic forum and network, ensuring that partnerships between local area committees, NHS Leeds and Clinical Commissioning Groups are maintained and strengthened, as well as ensuring that plans are clearly aligned. They also facilitate opening up of information and networks to ensure that local views and needs from particular parts of the city and communities of interest are integral to citywide strategies and plans. The interdependency between different agencies is recognised and better outcomes for communities can be achieved by working together in a more productive way.
- 2.2 The partnerships use evidence from NICE (national institute for clinical excellence) and, more locally, joint strategic needs assessment (JSNA) area profiles to spread good practice from localities to the rest of the city and ensure successful implementation of citywide programmes in localities. The MSOA area health profiles for 108 neighbourhoods in Leeds were recently completed and are being used to inform both the updated joint strategic needs assessment and the area health and wellbeing partnerships.
- 2.3 Four overarching priorities from the area locality based health and wellbeing programme were identified last year and continue to be applied across all three area partnerships.
 - Ensure commissioned services and local service delivery better meets needs of communities living in deprived neighbourhoods.
 - Ensure translation of citywide priorities into actions at a local level.
 - Reduce health inequalities gap between deprived communities and the rest of Leeds through strengthening partnerships, building health capacity and maximising resources.
 - Improved communication channels and community engagement through locality partnership arrangements.
- 2.4 City priorities plan for 2011 to 2015 has also now been endorsed and the following are the agreed priorities and headline indicators in brackets that the area partnerships will be taking into account in setting their future focus:
 - Help protect people from the harmful effects of tobacco (reduce the number of adults over 18 that smoke).

- Support more people to live safely in their own homes (reduce the rates of emergency admissions to hospital and to residential care homes).
- Give people choice and control over their health and social care services (increase the proportion of people with long term conditions feeling supported to be independent and manage their condition).
- Make sure that people who are the poorest improve their health the fastest (reduce the differences in life expectancy between communities and in healthy life expectancy within communities).

3 Main issues

3.1 The Southeast area health and wellbeing partnership has undertaken its annual review of activity under these overarching priorities and is now in the process of determining future priorities for 2012/13.

3.2 The focus over the last year has been on developing a multi agency referral scheme (**MARS**). The aim of this was to increase access to and take up of preventative services through the development of a universal checklist that could be used opportunistically within targeted neighbourhoods or targeted population groups. A pilot was undertaken in Belle Isle and evaluated with reports presented to both the health improvement board and locality working programme board, with a view to endorsing and rolling out this approach through key local health related programmes such as infant mortality.

3.3 **Reducing Alcohol Related Community Safety Issues** is another theme. The following gives a snapshot of the work taking place under this theme.

- reducing high intensive users (HIUs) of hospital services through a multi agency support package. Focus is on people who have attended A & E on 5 or more occasions in a year. 5 GP practices (2 of which are in Outer south) are to take part in phase one. If the approach is found to be effective the intention is to roll this out across the city.
- addressing the link between alcohol and domestic violence is another key area of work and through using the outcomes based accountability approach an action plan for south east area has been developed. Work is planned to take place in Morley with the children's cluster to bring the two issues together through education programmes run in the schools. If the approach is found to be successful the intention is to roll this out across other areas. Services having also joined up to provide reciprocal training to their staff teams bringing together these linked agendas.
- to progress activity around community engagement, awareness raising and addressing social norms the group have been supporting the alcohol awareness week promotional activity and to support services also developed a local Leeds directory that outlines the range of treatment support in the city.
- developing local cumulative impact policies for areas with alcohol issues to restrict numbers of off licenses is something that is being explored. New legislation is expected to come out in autumn 2012 that will make this easier for agencies to also give evidence including impact on peoples health. In the meantime sessions are being run for staff and separately for Councillors and community members on 'making a good representation' at licensing panel.

- addressing under age drinking and anti social behaviour is another theme for the group. A successful project the police are running in Rothwell and Morley is to be rolled out to inner south areas starting with Middleton, which entails a referral process with standard letters being sent to parents.

3.4 Communications/Community Engagement

- The portal www.wellbeingleeds.com now up and running was developed by partners to provide staff and local residents with an umbrella site for Leeds health and wellbeing activity. Further index categories are continuously being added as more agencies become aware and see the benefit of connecting. A marketing strategy is being developed which includes using 'lifechannel' screens in GP practices and providing access to GPs on their own home pages. Enhancing usage by council services is also being explored with libraries already using the site.
- **Citizens panel** development is still underway. The Council are currently undertaking recruitment process for panel members. The health and wellbeing questionnaire for this is in draft form and will be shared shortly with partners for their views. Resources for managing the analysis have now been confirmed by NHS Leeds and it is hoped the first survey will run in 2012.
- The **standardised local health and wellbeing questionnaire** developed by our team in South for staff to use at local community engagement events can now be accessed through the Councils 'talking point' system. The evaluation of findings from the first year of the trial of the questionnaire was well received by the ASC equality performance group, as well as being used by NHS colleagues as part of the qualitative feedback for the JSNA. Other teams across the city are now using this tool to engage with targeted communities such as BME communities in Hyde Park. In South the area management teams are now using this in Morley and Rothwell with existing groups and at events to gain feedback on local needs. The intention is that the partnership could annually consider feedback from the qualitative feedback as well as quantitative data intelligence in setting priorities.

3.5 For 2012/13 the following priorities have also been agreed by the partnership:

- **Community Capacity Building Programme** – the focus of which is to engage local people interested in learning more about their health and wellbeing and sharing and cascading messages to their family and friends through becoming local volunteer health champions.
- **Improved Referral Pathways between commissioners and providers** is another area that the partnership recently agreed they wish to work on to prepare for changes taking place within public health and GP commissioning responsibilities.
- Finally the partnership are supporting the **Transformation Programme** – with a focus on establishing integrated health and social care teams initially in 3 demonstration sites. The area chosen in South by the South and East Leeds clinical commissioning group is Garforth and Kippax. Once the model has been developed it will gradually be rolled out across the city. The key outcome is to predict using GP practices data potential people in need of future long term care and undertake some early intervention prevention support. A full report on this programme will be shared with area committees at a future meeting.

- 3.6 The **MSOA health area profiles** have been analysed by staff and key messages emerging for outer south that the area health and wellbeing partnership will be taking into account in agreeing future programmes. See separate paper.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 The south east partnership in determining their objectives have engaged key partners and considered both local and citywide emerging priorities. These are reviewed on an annual basis with the support of area committee health champions.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 The focus for the partnership has been to address health inequalities and tackle causes of premature mortality through local programmes.

4.3 Council Policies and City Priorities

- 4.3.1 The partnerships work directly contributes to the city wide health and wellbeing priorities of reducing smoking and tackling health inequalities through addressing the needs of the poorest the fastest.

4.4 Resources and Value for Money

- 4.4.1 Much of the work has been to add value and enhance existing programmes and to look at ways of doing things differently within existing resources.

4.5 Legal Implications, Access to Information and Call In

- 4.5.1 None.

4.6 Risk Management

- 4.6.1 None.

5 Conclusions

- 5.1.1 The work of the south east area health and wellbeing partnership has successfully demonstrated the benefits of collaborative working. The approach has been one of early intervention and prevention through developing new ways of working and improving communications and community engagement.

6 Recommendations

- 6.1.1 Area Committee members note progress being made by the South East health and wellbeing partnership.

Background documents

MSOA health area profiles and city priority plan 2011 to 2015.