

# Leeds Health & Wellbeing Board

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**Report of:** Joint Health and Wellbeing Strategy Steering Group

**Report to:** Leeds Health and Well Being Board

**Date:** 22<sup>nd</sup> May 2013

**Subject:** The Joint Health and Wellbeing Strategy for Leeds 2013-2015

Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input 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 type="checkbox"/> No

## Summary

The Local Authority and the three Leeds Clinical Commissioning Groups (CCGs) have a joint statutory duty to prepare and publish a Joint Health & Wellbeing Strategy (JHWS) through the Health and Wellbeing board (H&WBB). This report summarises the development of the strategy, which has overseen Shadow H&WBB, and the latest version will be presented at the meeting for discussion and approval. Although partnership health plans have been developed for many years, this is the first time that they will be developed on a statutory footing. The publication of the JHWS is an important and exciting step for the H&WBB as the JHWS will set the strategic direction of travel for Leeds and be the framework against which commissioners across the city will be expected to base their plans. The JHWS should help the board to encourage greater integration of services and commissioning across the city leading to improved outcomes for the children, young people, adults and communities of Leeds and improved efficiency.

## Recommendations

The Health and Wellbeing Board is asked to:

- Note the work of the Shadow Health and Wellbeing Board to develop the draft JHWS
- Discuss and comment on the final draft of the strategy for publication
- Subject to comments, approve the strategy for publication in June 2013

## **1 Purpose of this report**

- 1.1 The Local Authority and the three Leeds Clinical Commissioning Groups (CCGs) have a joint statutory duty to prepare and publish a Joint Health & Wellbeing Strategy (JHWS) through the Health and Wellbeing board (H&WBB). The Shadow H&WBB has overseen the development of the strategy. Now that the H&WBB is legally constituted, it has the responsibility to formally approve the strategy for publication. This report summarises its development to enable the board to consider the draft of the strategy (Appendix 1).

## **2 Background information**

- 2.1 One of the main statutory responsibilities of the Health and Wellbeing Board is to produce a Joint Health and Wellbeing Strategy for Leeds. This will provide the strategic direction, priorities and framework for commissioning decisions of the Council, the Clinical Commissioning Groups and NHS England.
- 2.2 The requirement to produce a Joint Health and Wellbeing Strategy (JHWS) was set out in Liberating the NHS: Legislative Framework and Next Steps (Dec 2010) and confirmed in the Health and Social Care Act 2012. Further statutory guidance from the Department of Health was published in March 2013. This requires Health and wellbeing boards to produce a high level strategy that brings together healthcare, social care and public health and should also consider the wider determinants of health such as education and housing. It should demonstrate how the city will address the health and wellbeing needs of the population of Leeds and reduce inequalities in health and wellbeing.

## **3 Main issues**

### **3.1 Purpose of the JH&WS**

- 3.2 The Leeds JHWS will be the focus for improving health and wellbeing and will help achieve the vision for Leeds to be a healthy caring city for all ages. It will:

- Achieve better health and wellbeing outcomes for the people of Leeds
- Ensure partners on the Health and Wellbeing Board agree together the outcomes we want to achieve and how they will contribute to the long term vision for Leeds 2030
- Provide the framework for commissioning plans for children, young people and adults healthcare, social care and public health
- Promote integration and partnership working between the NHS, social care, public health and other local services
- Inform the business plans of service provider organisations
- Promote more effective and efficient actions across the partnership

- Help to measure progress in making Leeds a Healthy and caring city for all ages

### 3.3 **How the content of the strategy was established**

3.4 Over the course of the last year a cross partnership steering group met to undertake the preparatory work for the JHWS. This group considered all the potential issues that might be incorporated as part of the strategy. The deliberations culminated in a high level partnership workshop (Chairs, Directors, Accountable Officers across LCC and CCGs) which synthesised the options about what should be included and excluded into a discrete proposal for the Shadow H&WBB to consider.

3.5 Many drivers were considered as part of this process including:

- The national outcomes frameworks for NHS, Adult Social Care, Public Health, Children
- The Joint Strategic Needs Assessment and demographic changes
- Current financial situation
- Improved quality of services and innovation
- Vision for Leeds 2030 and Leeds City Priority Plan 2011-2015
- National guidance
- NHS Mandate

3.6 In order to assist the steering group and shadow board to consider the options systematically, a set of principles were established to guide the development of the strategy. It was agreed that the JHWS should:

- Be simple, unambiguous and measurable
- Be small enough focus attention of H&WB Board
- Use an Outcomes Based Accountability approach
- Have no more than 5 outcomes
- Have as few priorities as possible
- Have as few indicators as necessary- 1-2 per priority
- Have indicators which measure one thing only
- Have indicators that relate primarily to the outcome
- Be to 2015 but subject to review over shadow year
- Have a clear rationale for each item
- Enable collective responsibility by achieving consensus, clear ownership and enable us to hold each other to account
- Priorities should normally apply to all ages
- Priorities should normally require action from >1 partner
- Not normally included something Leeds is good at
- Take into account trends and predictions not just as is
- Include priorities from all partners
- Include things capable of change locally

- Not try to do everything, or it might achieve nothing
- Have a wider set of plans which sit beneath it
- Achieve a sustainable Health and Social care system
- Be the right thing to do

3.7 Some of the most significant issues that were considered as part of the process but not proposed for the final draft were: Dementia, Safety and Disability. In the case of Safety, it was considered that this was best taken forward by the adults and children's safeguarding boards and the community safety partnership.

3.8 Dementia and Disability were considered to be of such significance that it would not be possible to achieve the JHWS without concerted action to address these needs across many of the priorities, and that they needed to be part of how we deliver the strategy as a whole rather than by identifying actions at a specific indicator.

3.9 It should be noted that the dementia strategy for Leeds is being presented as a separate paper for the board at this meeting.

### 3.10 **Must do's**

3.11 The board will work hard to ensure that the JHWS makes a difference to the children, young people, adults and communities of Leeds. All of the priorities are important to make sure that the outcomes are achieved. However, consistent with an Outcomes Based Accountability approach and building on the focus of the City Priority Plan, it is proposed to focus on four *must do's*:

- Support people to choose healthy lifestyles
- Ensure everyone has the best start in life
- Improve people's mental health and wellbeing
- Increase the number of people supported to live safely in their own home

### 3.12 **Next steps**

3.13 In order to ensure that the strategy is delivered the JHWS steering group will oversee the following:

- A cross partnership communications strategy has been developed by the shadow H&WBB. It is intended to publish the strategy using established networks.
- Action plans linked to the priorities will be reviewed and revised
- The strategy will be disseminated to the CCGs, NHS England and Leeds City Council to inform their respective commissioning plans
- The H&WBB will receive future updates on the extent to which partners have taken due regard to the strategy.
- The Board will undertake deep dives into the outcomes and priorities to influence pace and achievement

- The board will receive reports outlining progress [baseline presented as a separate paper to the Board at this meeting].

## **4 Health and Wellbeing Board Governance**

### **4.1 Consultation and engagement**

4.1.1 A steering group was established to drive forward the development of the strategy for the shadow H&WBB. Representatives included, Third Sector, Public health, CCGs, Adult Social Care and Children's services. Public engagement has taken place throughout the development of the Vision for Leeds 2030 and the City Priority Plan 2011 – 2015. The work on the JHWS builds on the City Priority Plan for Health and Wellbeing, the Joint Strategic Needs Assessment (JSNA) and maintains the focus on the priorities agreed by partners. A number of early engagement events were held culminating in a workshop with CEO/Director/Chairs on 7<sup>th</sup> July 2012 to develop the first full draft. This was agreed subject to revisions by the Shadow H&WBB on 13 July 2012 and a final working draft was agreed by the shadow H&WBB on 10 October 2012. Further engagement work has taken place during 2012/13 by partners with a number of groups including CCG membership, elected members [over third cross party], the Third Sector, Community groups, NHS providers' boards/exec teams, the Integrated Commissioning Executive [including NHS Commissioning Board- now NHS England], Scrutiny [as part of a wider shadow H&WBB report], and Children's Trust Board.

### **4.2 Equality and Diversity/Cohesion and Integration.**

4.2.1 H&WB boards must meet the Public Sector Equality duty under the Equality Act 2010 and this includes the preparation of the JHWS. Its development follows on from a number of other strategic planning documents including the Leeds City Vision, City Priority Plans and the Joint Strategic Needs Assessment. As these have all been subject to full equality impact assessment, an equality impact assessment screening document was used for the JHWS. The key findings were:

4.2.2 Consultation and engagement with some groups needs to be improved to fully understand their health and social care needs

4.2.3 Health related data for some groups/conditions needs to be improved including older people; Lesbian Gay Bisexual and Transgender people; people with dementia; people with autism; carers; and physical and sensory impairments.

4.2.4 Groups have not routinely received feedback to consultation exercises.

4.2.5 At the heart of the strategy is the principle that "People who are the poorest, will improve their health the fastest". This will clearly have very positive impacts with regard to equality characteristics.

4.2.6 The board should be assured that plans to address the above form part of the JSNA development process. It will be important that equality considerations are

embedded within individual JHWS action plans for each of the five outcomes across relevant and appropriate equality characteristics. Each action plan should specifically consider relevant issues of equality. It should be particularly mindful of any negative impacts and propose ways in which to mitigate these

4.2.7 In addition the Board should be assured that the JHWS will provide a framework to encourage greater integration of services and commissioning.

#### 4.3 **Resources and value for money**

4.3.1 The strategy establishes the overarching framework for the city against which commissioners will be expected to base their commissioning plans. This will encourage greater integration of commissioning plans and decisions with a view to making the best use of the collective resources at the city's disposal- the '*Leeds pound*'.

#### 4.4 **Legal implications, access to information and call in**

4.4.1 The publication of the strategy discharges the duty of Leeds City Council, Leeds South & East Clinical Commissioning Group, Leeds North Clinical Commissioning Group and Leeds West Clinical Commissioning Group to prepare and publish a Joint Health and Wellbeing Strategy via the health and wellbeing board.

#### 4.5 **Risk Assessment**

4.5.1 Failing to publish a JHWS leaves the LA, CCGs and H&WBB in breach of their statutory duty.

4.5.2 Failure to publish a JHWS leaves the care of children, young people and adults at risk due to the lack of a coordinated strategy

4.5.3 Failure to identify the most appropriate outcomes, priorities and indicators jeopardises the efficiency of commissioning decisions.

### 5 **Conclusions**

5.1 The establishment of the H&WBB presents a new and exciting way for the Council, NHS, Third sector and Healthwatch to provide leadership together with other partners to improve health and care services and to reduce health inequalities by placing partnership arrangements on a statutory footing.

5.2 The preparation and publication of the Joint Health and Wellbeing Strategy for Leeds is an important decision for the Board to take, as it provides the blueprint for the work of the Health and Wellbeing board and the framework for future commissioning decisions.

5.3 It will be the first step that the Board takes on its journey to achieve the vision for Leeds to be a healthy caring city for all ages, where people who are the poorest will improve their health the fastest.

## **6 Recommendations**

6.1 Board members are asked to:

- Note the work of the Shadow Health and Wellbeing Board to develop the draft JHWS
- Discuss and comment on the final draft of the strategy for publication
- Subject to comments, approve the strategy for publication in June 2013