

**To the Chair and Members of the  
HEALTH AND WELLBEING BOARD**

**REPORT FROM THE HEALTH AND WELLBEING BOARD OFFICER GROUP  
AND FORWARD PLAN**

**EXECUTIVE SUMMARY**

1. The purpose of this report is to provide an update to the members of the Health and Wellbeing Board on the work of the Officer Group to deliver the Board's work programme and also provides a draft forward plan for future Board meetings.

**WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?**

2. The work programme of the Health and Wellbeing Board has a significant impact on the health and wellbeing of the Doncaster population through the Joint Health and Wellbeing Strategy, the Joint Strategic Needs Assessment, system management and any decisions that are made as a result of Board meetings.

**EXEMPT REPORT**

3. N/A

**RECOMMENDATIONS**

4. That the Board RECEIVES the update from the Officer Group, and CONSIDERS and AGREES the proposed forward plan at Appendix A.

**PROGRESS**

5. At the first full Board meeting on 6<sup>th</sup> June 2013, Board members agreed that there would be a Health and Wellbeing Officer group to provide regular support and a limited support infrastructure to the Board.

The Officer group has had one meeting since the last Board in July and can report the following:

- **Tobacco Alliance and Local Government Declaration**

Tobacco is still the leading preventable cause of death in England and in Doncaster. In England over 80,000 people a year are killed by tobacco, more than obesity, alcohol, road traffic accidents and illegal drugs added together. The Doncaster Tobacco Alliance is a partnership that meets to agree the local implementation of international, national and local tobacco control strategies. In England, the North East has

seen particular success in reducing the harmful effects of tobacco and the adoption of a 'Tobacco Declaration' by partners has increased the ownership of this agenda. The declaration commits partners to:

Reduce smoking prevalence and reduce health inequalities  
Develop plans with partners and local communities  
Participate in local and regional networks  
Support Government action at a national level  
Protect tobacco control work from the commercial and vested interests of the tobacco industry  
Monitor the progress of plans  
Join the Smokefree Action Coalition

The Doncaster Tobacco Alliance proposes that all members of the Health and Wellbeing Board should consider adopting the 'Tobacco Declaration' (attached as an appendix to this report).

ACTION: Board members are asked to CONSIDER and AGREE the above proposal.

- **Maternity, Children and Young People Joint Commissioning Group**

The Maternity, Children and Young People's commissioning group continues to meet on a monthly basis. A final Maternity, Children and Young People's needs assessment was agreed by the Children and Families Strategic Partnership. The group are addressing the commission implications of the new Education and Health Care plans and the Doncaster Early Help Strategy. Annie Callanan (Interim AD CYPS) is leading on developing a commission strategy for CYPS and this will involve a workshop of local commissioners.

- **Pharmaceutical Needs Assessment Update**

## **Background**

In 2011 a Pharmaceutical Needs Assessment report (2011-2014) was produced by Doncaster Primary Care Trust (PCT) and disseminated to key stakeholders across Doncaster following an extensive consultation period. The current Pharmaceutical Needs Assessment expires in 2014. Since the Health and Social Care Act 2012 the responsibility of developing and updating Pharmaceutical Needs Assessments has now transferred to Health and Wellbeing Boards and, each Health and Wellbeing Board in accordance with regulations must:

- *Assess needs for pharmaceutical services in its area;*
- *Publish a statement of its first assessment and of any revised assessment by 1<sup>st</sup> April 2015;*
- *Take account of the JSNA and other relevant strategies e,g Joint Health and Wellbeing Strategy; Children and Young People Plan, local Housing plan, crime and disorder strategy to avoid duplication through the engagement process;*
- *Consult the bodies set out in Regulation 8 at least once during the process (Local Pharmaceutical Committee; Local Medical Committee; all*

*pharmaceutical providers and dispensing doctors; Local Healthwatch; any NHS Trust or NHS Foundation trust ;any Local pharmacy service which has NHSCB arrangements; the NHS Commissioning Board and any neighbouring Health and Wellbeing Board;*

- *Have a minimum 60 day consultation period and provide access to a website containing the draft or provide hard or electronic copies on request;*
- *HWB's will be required to publish a revised assessment within 3 years of publication of their first assessment.*

In January 2014 a paper was presented to the Health and Wellbeing Board outlining the requirement to produce a Pharmaceutical Needs Assessment. It was confirmed at the January Board that the process should commence immediately and that Public Health would lead the process in conjunction with key partners. Progress to date includes:

- A core working Group was established in March 2014 and members include DCCG, NHS England Area team, LPC representative and DMBC Communications and Public Health team
- A virtual stakeholder group was set up in March 2014
- The scoping of the PNA and a Gantt chart outlining the timescale was developed in April 2014 and initial actions undertaken to begin the assessment. The DMBC Community engagement tool was used and the process registered as an active consultation
- In June 2014 a survey to map current pharmacy provision was undertaken with key stakeholders and the results analysed – 44 responses out of a possible 79 were received
- In July 2014 a public survey was launched and 279 responses were received through on line promotion (website/email communication) and mail outs and the analysis was completed in August 2014
- Regional meetings have been attended with neighbouring areas including North Lincolnshire, Rotherham, Sheffield and Barnsley. Contact will be maintained throughout the consultation in relation to cross boundary pharmacy provision
- A draft PNA document is near completion and will be launched for a 60 day consultation in September through social media and through the engagement structures
- A final draft of the PNA following feedback from the consultation will be presented to the January 2015 board and will be signed off by March 2015
- The final PNA document will be published on 1<sup>st</sup> April 2015 and will be available on the websites and hard copies on request

**ACTION:** The Board to NOTE progress

- **Other Health and Wellbeing Needs Assessments**

A number of Health and Wellbeing Needs Assessments have been undertaken over the course of the last year to improve the commission of services. Each Needs Assessment is undertaken in a structured way and as a result of the assessment an action plan is developed, agreed and implemented. The most recent Health Needs Assessment are for Looked After Children and Physical Disability and Sensory Impairment.

ACTION: The Board to NOTE the publication of these assessments.

- **Veterans Health and Wellbeing**

The Royal British Legion has contacted the Council regarding the 5 principles that the Local Authority has signed up to as part of the community covenant. Of particular relevance to the Health and Wellbeing Board is the requirement to consider the needs of the Armed Forces Community in the Joint Strategic Needs Assessment.

ACTION: The Officer Group will review the JSNA and advise on amendments or the need for a separate assessment.

- **Effectiveness of the Officer Group**

It is proposed to review the effectiveness of the Officer Group and review its business, membership and process at the same time as the Board reviews and considers the Health and Wellbeing Strategy and updates the forward plan at its October workshop.

- **Forward plan for the Board.**

This is attached at Appendix A.

## **IMPACT ON THE COUNCIL'S KEY PRIORITIES**

6.

	<b>Priority</b>	<b>Implications</b>
	<p>We will support a strong economy where businesses can locate, grow and employ local people.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Creating Jobs and Housing</i></li> <li>• <i>Mayoral Priority: Be a strong voice for our veterans</i></li> <li>• <i>Mayoral Priority: Protecting Doncaster's vital services</i></li> </ul>	<p>The Board should understand the health and wellbeing needs of local Veterans.</p>
	<p>We will help people to live safe, healthy, active and independent lives.</p>	<p>The Health and Wellbeing Board will contribute to this priority</p>

	<ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Safeguarding our Communities</i></li> <li>• <i>Mayoral Priority: Bringing down the cost of living</i></li> </ul>	
	<p>We will make Doncaster a better place to live, with cleaner, more sustainable communities.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Creating Jobs and Housing</i></li> <li>• <i>Mayoral Priority: Safeguarding our Communities</i></li> <li>• <i>Mayoral Priority: Bringing down the cost of living</i></li> </ul>	The Health and Wellbeing Board will contribute to this priority
	<p>We will support all families to thrive.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Protecting Doncaster's vital services</i></li> </ul>	The Health and Wellbeing Board will contribute to this priority
	<p>We will deliver modern value for money services.</p>	The Health and Wellbeing Board will contribute to this priority
	<p>We will provide strong leadership and governance, working in partnership.</p>	The Health and Wellbeing Board will contribute to this priority

## **RISKS AND ASSUMPTIONS**

7. None.

## **LEGAL IMPLICATIONS**

8. None.

## **FINANCIAL IMPLICATIONS**

9. None

## **EQUALITY IMPLICATIONS**

10. The work plan of the Health and Wellbeing Board needs to demonstrate due regard to all individuals and groups in Doncaster through its work plan, the Joint Health and Wellbeing Strategy and Areas of focus as well as the Joint Strategic Needs Assessment. The officer group will ensure that all equality issues are considered as part of the work plan and will support the Area of Focus Leads to fulfil these objectives.

## **CONSULTATION**

11. None

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