

**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 D.

PROGRESS

5. At the first full Board meeting on 6th 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 two meetings since the last Board in September 2014 (and a workshop in October) and can report the following:

- **Gambling Addiction**

A task and finish group has been established to enact the recommendations agreed at the last Health and Wellbeing Board. Actions to date include:

1. Lobbying of the Parliamentary Under Secretary of State for Sport and Tourism (with responsibility for gambling) about the epidemic growth in

the amount of gambling advertising in the broadcast media. 'The Board is aware that the Committee of Advertising Practice (CAP) and the Broadcast Committee of Advertising Practice (BCAP) are reviewing the relevant Advertising Codes of Conduct following the Responsible Gambling Trust study on gambling, advertising and problem gambling, the ASA complaint data and the Ofcom research on exposure to gambling advertising on TV. However, the Board is concerned that the volume and style of advertising used in the broadcast media is placing young people and vulnerable adults at risk and this is in conflict with the wider objectives of the Gambling Act (2005).'

2. Reviewing the location of gambling points across Doncaster and their proximity to at risk' populations. Collecting patient/public stories via Healthwatch.
3. Reminding the public and professionals of the availability of current services among the public and professionals,
4. Further work to be agreed includes
 - a. Improve the ability of professionals to identify problem gambling.
 - b. Developing and pilot a 'gambling' metric as part of the revised set of mental health metrics being developed by Adults and Communities.
 - c. Seek opportunities for external funding e.g. Joseph Rowntree Foundation to explore this issue further

- **Feedback from the Health and Wellbeing Board October workshop.**

On 2nd October 2014 a timeout was held at the Salvation Army and the aims of the session were:

- To review progress over the last year
- To identify areas for improvement
- To recommit to the business, relationships and processes of the Board
- To agree the next 12 month's forward plan
- To share and hear stories

The first part of the session was spent discussing in small groups the recommendations of the LGA Peer review in December 2013 .Each group were asked to work through the list of Peer review recommendations (listed on an A3 sheet) and assess whether they had been achieved or they felt that they had not been achieved. The exercise enabled discussion around board progress and development and considered what had worked well and not so well over the last 12 months. The summation of the exercise was a post it

exercise to identify areas from each group which needed to be considered for board development and all groups to identify their key areas for further development in 2014/15.

The second part of the session was a repeat of the priorities exercise conducted at a previous time out in 2013 to determine what the key priorities are for the Board and to refresh the current priorities in the HWB strategy. Each member was assigned a post it note and required to suggest **one** key priority. The outcomes of this are indicated in the results in **Appendix A**. The main themes/areas of focus identified were:

- **Substance misuse/drugs and alcohol**
- **Children and families**
- **Mental Health/Social and emotional wellbeing**
- **Maintaining Independence/Pathways**
- **Wider determinants/health inequalities**

The third part of the session was an exercise to look at the forward plan for the board and to identify key priorities – the ‘must dos’ and the ‘should dos’. Each table were given a list of the current items on the forward plan and other areas for consideration and asked to list on a flip chart. Each individual was then asked to allocate coloured dots in order of priority to the areas (green for first choice, blue for second and red for third choice). The results are illustrated in **Appendix B** and the key areas flagged as a priority (green/blue) were:

- **Preventative, proactive approach – holding people to account; positive stories around the narrative/qualitative reports/feedback on progress and share with other theme boards**
- **Communications and Engagement Plan**
- **Learning from projects on the ground and communicating better**

The final part of the session was to discuss the effectiveness and inter-relationships of the HWB Support Officer group and the Health and Wellbeing Board. The groups were asked to consider strengths and weaknesses of the Officer group and a list is illustrated in **Appendix C**. The key themes raised were:

- Clarity of roles – who sits on the Officer group
- Clarity of new members on both groups (due to recent changes)
- Profile and credibility of the Officer group
- TOR shared across both groups to ensure understanding of roles
- Inductions for new members – Board and Officer group
- Agenda setting process – who sets the agenda and how items get to the Board
- Influence up and down the structures
- Areas of focus directive and breadth of knowledge seen as strengths of the Officer group
- Performance monitoring – holding people to account/stories

Next Steps - the outcomes of the workshop were disseminated to Board members (and those deputising on the day) and members of the Officer

group for information and consideration.

- **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 small executive group of the CCG and relevant parts from DMBC are meeting to re-energise the approach to joint commissioning based on the ‘Plan on a Page’ agreed between DMBC Public Health and Learning and Opportunities; Children and young People. The group are addressing the commission implications of the new Education and Health Care plans and the Doncaster Early Help Strategy.

- **Correspondence**

Since its last meeting the Health and Wellbeing has received the following correspondence

7th October 2014. **Effective engagement between Health and Wellbeing Boards and Major Providers.** Letter from Jeremy Hunt MP, Secretary of State for Health asking Health and Wellbeing Boards to review how they engage with major providers in light of the Better Care Fund submissions.

22nd October 2014. **Getting Ready for Winter.** Letter from Jane Ellison MP, Parliamentary Under Secretary of State for Public Health outlining the launch of the Get Ready for Winter campaign and the other key element of winter preparedness including plans for influenza, norovirus, health and social care integration and the Cold Weather plan.

- **Forward Plan for the Board.**

This is attached at Appendix D.

IMPACT ON THE COUNCIL’S KEY PRIORITIES

6.

	Priority	Implications
	<p>We will support a strong economy where businesses can locate, grow and employ local people.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster’s vital services</i> 	<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"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	
	<p>We will make Doncaster a better place to live, with cleaner, more sustainable communities.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	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"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	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. The outputs from the LGA Peer Challenge may affect some or all of these actions.

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

REPORT AUTHOR & CONTRIBUTORS

Dr Rupert Suckling, Assistant Director, Public Health
01302 734010 rupert.suckling@doncaster.gov.uk

Louise Robson, Public Health Specialist, Public Health
01302 734015 louise.robson@doncaster.gov.uk

Dr Tony Baxter
Director Public Health

Appendix A: Outcomes from the Priorities Exercise

Priorities from HWB Workshop (2nd October 2014): Salvation Army

Substance Misuse (Drugs and alcohol)

Substance misuse (drugs and alcohol) and the effect on individuals, families and communities

Drugs and alcohol

A focus on area not being strategically addressed elsewhere – impact of alcohol and drug misuse on young people

Substance misuse and tobacco. High impact and influence as treatment & preventing mechanisms in place that can be improved

Engaging people in wellbeing conversations

Children and Families

Better develop holistic service approach to H&WB

Whole family support

Children's wellbeing;

- Breast feeding
- Attainment

Smoking in Pregnancy Support for young families to enable the development of their responsibility for their own health & well being

Education

Mental Health/Social and emotional wellbeing

Tackle mental health issues to improve social and emotional wellbeing through a person centred approach

Impact of poverty – social and emotional mental health

Work on the underlying causes that lead to educational and mental health 'issues'

Maintaining Independence/Pathways

Pathway working across health symptoms and early intervention and practice

Frailty (maintaining independence at home)

Living well (LTC & Frailty)

Wider determinants/social and emotional wellbeing/health inequalities

Wider determinants of health

The social and emotional well-being but the details below the primary statement

Education/employment & obesity as a vehicle for H&W

Addressing real health inequalities in areas of deprivation – tackle the wider determinants (root causes)

Obesity

Appendix B: Priorities for HWB Board Forward Plan

Health & Well Being Board Forward Plan - Prioritisation Exercise

2nd October 2014 Workshop Salvation Army

	Green (1st)	Blue (2nd)	Red (3rd)
National & Regional Strategy Updates		1	1
Local Strategy/plans/commiss. Updates	2		
Primary & Secondary Care Updates			
Communication & Engagement Plan		4	
Third Sector Plans/Updates		1	
Other Theme Board Updates			
Priority Theme Updates (Area of Focus OBA)		1	2
Board Development			1
Wellbeing & Recovery Strategy			2
Health Protection & Health Improve. Updates			1
Education Employment HS2			2
Education - wider determinants TD theme board links			2
Ensuring direct support for young families in developing their health and wellbeing awareness Children's Trust Strategy	1		2
Feedback & Update *Board on progress against 'priority' delivering outcomes - qualitative, narrative What can we learn from our projects on the ground and our successes. How can these be better communicated Ongoing board narrative --> rethink story keep everyone up to speed	4		3
Primary Care Strategy (DCCG)			
Preventative approach rather than reactive approach --> achieve positive outcomes - need to be more proactive How does the board hold people/orgs to account for the actions/results in their strategies and plans. And learn from that and communicate that to make a difference *OTHER THEME BOARDS*	5	3	3
Link with Public Health. England to identify priorities of wider determinants & potential funding opportunities	2	1	
What level plans should we see (e.g. Procurement) integrated procurement & commissioning			2

Appendix C: Strengths and Weaknesses of Support Officer group

<p>Influence up as well as manage down</p>	<p>Influence not same across partners →</p>	<p>Performance monitoring - Attend to give story behind data ↓</p>
	<p>Officer Group not given profile/stress importance (credibility) →</p>	<p>Delivered on above – members of officer group see benefit to themselves. Participating</p>
<p>Breadth of knowledge</p>		
	<p>Don't know who is on the officer Group</p>	<p>Inform the board of the role and make-up of the officer Group</p>
	<p>Need to clarify role of new members</p>	<p>Induction for new members</p>
	<p>Perception that officer Group set the agenda</p>	<p>The board sets the forward plan – with chair Make it clear how to contact the officer Group</p>