



Doncaster Council

Agenda

To all Members of the

HEALTH AND WELLBEING BOARD

Notice is given that a Meeting of the Health and Wellbeing Board is to be held as follows:

Venue Room 007a and b - Civic Office, Waterdale, Doncaster, DN1 3BU

Date: Thursday, 13th June, 2019

Time: 9.30 am.

Items	Time/ Lead
1. Welcome, introductions and apologies for absence.	2 mins (Chair)
2. Appointment of Vice-Chair.	5 mins (Chair)
3. Chair's Announcements.	5 mins (Chair)
4. To consider the extent, if any, to which the public and press are to be excluded from the meeting.	1 min (Chair)
5. Public questions.	15 mins (Chair)

(A period not exceeding 15 minutes for questions from members of the public.)

Jo Miller
Chief Executive

Issued on: Wednesday 5th June 2019

Governance Services Officer for this Meeting: Jonathan Goodrum
Tel. 01302 736709

Doncaster Metropolitan Borough Council
www.doncaster.gov.uk

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| 6. | Declarations of Interest, if any. | 1 min
(Chair) |
| 7. | Minutes of the Meeting of the Health and Wellbeing Board held on 14th March 2019.
<i>(Attached – pages 1 – 10)</i> | 3 mins
(Chair) |
|
Board Development | | |
| 8. | Report from Health and Wellbeing Board Steering Group and Forward Plan.
<i>(Paper attached – pages 11 – 38)</i> | 10 mins
(Dr Rupert Suckling) |
|
Delivery of Health and Wellbeing Strategy | | |
| 9. | Outcomes Framework: Doncaster 2018/19 Joint Strategic Needs Assessment (JSNA) State of Health Report and 2019/20 JSNA Work Plan.
<i>(Papers attached – pages 39 – 62)</i> | 20 mins
(Jon Gleek/
Laurie Mott) |
| 10. | Substance Misuse Strategic Update 2019 and Aspire Drug and Alcohol Services Perspective.
<i>(Presentation/Cover Sheet attached – pages 63 – 64)</i> | 15 mins
(Helen Conroy/
Tim Young/
Stuart Green) |
| 11. | Tobacco Control Update.
<i>(Presentation/Papers attached – pages 65 – 126)</i> | 15 mins
(Dr Victor Joseph/
Anna Brook) |
|
Board Assurance | | |
| 12. | Doncaster Health and Social Care Commissioning Strategy 2019-2021/Better Care Fund 2018-19 Quarter 4 Update.
<i>(Presentation/Paper attached – pages 127 – 182)</i> | 15 mins
(Anthony Fitzgerald/
Dr Rupert Suckling) |
|
Developments and Risk Areas | | |
| 13. | Autism Self-Assessment Framework 2018.
<i>(Presentation/Cover Sheet attached – pages 183 – 184)</i> | 25 mins
(Jayne Gilmour) |

Date/time of next meeting: Thursday, 5 September 2019 at 9.30 am. in Room 007a and b - Civic Office, Waterdale, Doncaster, DN1 3BU

Members of the Health and Wellbeing Board

Chair – Councillor Rachael Blake – Portfolio Holder for Adult Social Care

Councillor Nigel Ball	Portfolio Holder for Public Health, Leisure and Culture
Councillor Nuala Fennelly	Portfolio Holder for Children, Young People and Schools
Councillor Cynthia Ransome	DMBC Conservative Group Representative
Dr David Crichton	Chair of Doncaster Clinical Commissioning Group
Dr. Rupert Suckling	Director of Public Health, Doncaster Council
Kathryn Singh	Chief Executive of Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
Steve Shore	Chair of Healthwatch Doncaster
Karen Curran	Head of Co-Commissioning NHS England (Yorkshire and Humber)
Richard Parker	Chief Executive of Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust
Damien Allen	Interim Director of People, DMBC
Jackie Pederson	Chief Officer, Doncaster Clinical Commissioning Group
Chief Superintendent Shaun Morley	District Commander for Doncaster, South Yorkshire Police
Paul Tanney	Chief Executive, St. Leger Homes of Doncaster
Steve Helps	Head of Prevention and Protection, South Yorkshire Fire and Rescue
Paul Moffat	Chief Executive of Doncaster Children's Services Trust
Peter Dale	Director of Regeneration and Environment, Doncaster Council
Laura Sherburn	Chief Executive, Primary Care Doncaster
Lucy Robertshaw	Assistant Director arts, Doncaster Community Arts (Health and Social Care Forum representative)

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Agenda Item 7

DONCASTER METROPOLITAN BOROUGH COUNCIL

HEALTH AND WELLBEING BOARD

THURSDAY, 14TH MARCH, 2019

A MEETING of the HEALTH AND WELLBEING BOARD was held in ROOM 007A AND B - CIVIC OFFICE on THURSDAY, 14TH MARCH, 2019, at 9.00 am.

<u>PRESENT:</u>	Chair -	Councillor Rachael Blake, Portfolio Holder for Adult Social Care (Present up to and including minute number 56)
	Vice-Chair -	Dr David Crichton, Chair of Doncaster Clinical Commissioning Group (DCCG)
Councillor Nigel Ball		Portfolio Holder for Public Health, Leisure and Culture
Councillor Nuala Fennelly		Portfolio Holder for Children, Young People & Schools
Councillor Cynthia Ransome		Conservative Group Representative
Dr Rupert Suckling		Director of Public Health, Doncaster Council
Kathryn Singh		Chief Executive, Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)
Andrew Goodall		Chief Operating Officer, Healthwatch Doncaster, substituting for Steve Shore
Patrick Birch		Strategic Lead for Adults Transformation, Doncaster Council, substituting for Damian Allen
Richard Parker		Chief Executive, Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust
Paul Tanney		Chief Executive, St Leger Homes of Doncaster
Lucy Robertshaw		Assistant Director, Darts
Mark Douglas		Director of Children's Social Care, Doncaster Children's Services Trust, substituting for Paul Moffat
Laura Sherburn		Chief Executive, Primary Care Doncaster

Also in attendance:

Stephen Emmerson, Head of Strategy and Delivery – Mental Health, DCCG
Louise Robson, Public Health Theme Lead (Working Age and Healthy Lives), Doncaster Council
Jayne Gilmour, Interim Strategic Lead, Adults Health and Wellbeing, Doncaster Council
Cath Doman, Director of Health and Social Care Transformation, DCCG
Ailsa Leighton, Deputy Director, DCCG

48 WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE

Apologies were received from Jackie Pederson, Steve Helps, Peter Dale, Paul Moffat, Damian Allen and Steve Shore.

49 CHAIR'S ANNOUNCEMENTS

The Chair, Councillor Rachael Blake, informed the Board that Doncaster Council was now affiliated to Employers for Carers (organisationally part of Carer's UK) to support its own working carers internally. The affiliation also provided local businesses and

organisations in Doncaster to help identify, support and retain carers within their workforces. The affiliation could also be used as part of recruitment and on-boarding of staff as a quality marker. This online resource included practical resources, advice, information including case studies, legislation, policies, good practice guides, toolkits and e-Learning.

In Doncaster there were well in excess of 15,000 working carers. Nationally the number of carers across the board was expected to rise by 50%, reaching 9 million by 2037.

Many employees were juggling work with looking after someone who was older, ill or disabled, 1 in 6 carers were forced to give up work completely to care for others. There was evidence to show that the impact of staff turnover and associated issues as a result of juggling work and caring could be costing UK businesses over £3.5 billion every year, so there were significant savings to be made by supporting carers in the workplace.

The Chair stated that further information on Employers for Carers would be circulated to Board members following the meeting, and that she hoped that the partner organisations around the table would feel encouraged to sign up to this worthwhile initiative.

50 PUBLIC QUESTIONS

Mr Doug Wright referred to the Health and Social Care Joint Commissioning Management Board (JCMB), which was responsible to the Council's Cabinet and Doncaster CCG's Governing Board. He stated that he had been asking for a long time for the meetings of the JCMB to be opened up to the public, and also for the minutes of the JCMB to be made more publicly accessible, in terms of them being submitted to the Council's Cabinet in future for information.

Mr Wright also referred to the challenge of the South Yorkshire and Bassetlaw NHS (SYB) financial gap of £139.5M required by 2020/21 and asked when the relevant partner organisations would be providing the public with details of how they were going to achieve the required savings in order to bridge the funding gap.

In response, Dr David Crichton (DCCG) advised that the CCG's governing body was due to consider the governance arrangements in relation to the JCMB at a meeting on 28 March 2019, including the question of public access to meetings in future, the outcome of which could be fed back to Mr Wright.

With regard to the issue of the funding gap, Dr Crichton explained that the individual organisations represented on the Health and Wellbeing Board did currently publish details of their respective spending plans, so this information was already in the public domain. Kathryn Singh added that, as part of the Doncaster Plan, links were provided to the financial information referred to by Mr Wright, which was set out over the 7 areas of opportunity.

In thanking Mr Wright for his questions, the Chair confirmed that Mayor Ros Jones had previously acknowledged at Full Council the need to make the JCMB minutes more readily accessible, and on the question of the financial information, she suggested that there might be scope for partners to look at the possibility of presenting this in a more joined up way, so that it was easier for the public to find the information.

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Mr Tim Brown addressed the Board as follows:-

“Thank you Chair for giving me the opportunity to speak at this meeting.

Paraphrasing Dr Martin Luther King:

I had a dream that our children, including children from black and African Caribbean communities will one day live in a place like Doncaster where they will not be judged by the colour of their skin but by the content of their character.

Chair, my dream of a fair Doncaster Society has not been remotely realised by the organisations represented by the distinguished leaders today generally having a workforce that does not remotely reflect the communities that they serve.

I can no longer accept the deficit model of such people blaming the deep rooted and stagnant racial inequalities on black people.

I see from the workforce diversity statistics provided by some of the partner organisations represented on the Board that there is still much work to be done to improve the job opportunities and prospects in Doncaster for young people from BME communities:

St Leger Homes is 98% white;  
DMBC’s minority workforce is approximately 4.5%; including white Irish and White other;  
The Children’s Trust has very few people who look like me.

We have the qualifications. We have the experience. And yet disturbingly the relative likelihood of a white person being appointed after shortlisting is 2 x greater than for a black citizen.

Chair, what can be done about this?

In last year’s public health annual report Dr Suckling made the link between having a good job with have good general health and wellbeing.

In this year’s ‘No health without mental health’ annual report, he stresses the importance of working with people to address the problems they face. I support the notion of working with people.

It is in this context that I ask through your position as the Chair how this Board can address the racial inequalities in collaboration with affected black citizens?

How can black citizens be involved in selecting the new DMBC Chief Executive, which provides an opportunity to deliver a transformational race equality step change in Doncaster?”

During discussion on the points raised by Mr Brown, partners confirmed that information on the steps being taken by each organisation in relation to addressing racial inequalities and engagement with minority groups was publicly available and

published, for example, in their Annual Reports. It was acknowledged that, while there was always room for improvement, there were examples of good work being done in the area of engagement with BME communities, such as collaborative work with BME United.

Having thanked Mr Brown for his questions, the Chair explained that she was not aware of the recruitment process for the Council's Chief Executive but that his comments had been noted.

51 DECLARATIONS OF INTEREST, IF ANY

There were no declarations of interest made at the meeting.

52 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 17TH JANUARY 2019

RESOLVED that the minutes of the meeting held on 17<sup>th</sup> January 2019 be approved as a correct record and signed by the Chair.

53 REPORT FROM HEALTH AND WELLBEING BOARD STEERING GROUP AND FORWARD PLAN

The Board considered a report which provided an update on the work of the HWB Steering Group to deliver the Board's work programme and also provided a draft Forward Plan for future Board meetings, as set out in Appendix A to the report.

In particular, the report included updates for the Board on:

- Arts and Health;
- Research City;
- Recovery City; and
- Forward Plan for the Board.

During discussion, the Chair welcomed the news that the Arts and Health Project Board had secured funding for a series of pilot programmes to test how Arts on Prescription could work for Doncaster and she suggested that it would be useful for this Board to receive a presentation on this initiative at its next meeting in June.

RESOLVED that:

- (1) the update from the HWB Steering Group be received and noted; and
- (2) the proposed Forward Plan, as detailed in Appendix A to the report, be agreed, subject to the addition of a progress report/presentation to the Board's meeting on 13<sup>th</sup> June 2019 on the pilot programmes being run as part of the Arts on Prescription initiative.



The Board received a joint presentation by Stephen Emmerson (Head of Strategy & Delivery – Mental Health and Dementia, DCCG) and Louise Robson (Public Health Theme Lead, Working Age & Healthy Lives, DMBC) which provided an update on the progress being made in the Dementia area of focus and the areas for future development.

In summarising progress against the four areas of focus, Stephen Emmerson and Louise Robson highlighted the following points:

- Diagnosis, Referral Pathways and Care Planning – it was noted that work was underway in reviewing whether diagnosis was being carried out properly. A deep dive exercise would be undertaken to look at how systems currently operated, what worked well and what did not work so well, together with examples of best practice elsewhere. With regard to referral pathways, the ambition was to reduce the Referral to Treatment waiting time from 10 to 6 weeks. In relation to Care Planning, it was noted that performance was currently poor compared with the national statistics, and that this area would be addressed as part of the planned Deep Dive exercise.
- Post diagnostic care and support – an Accountable Care Partnership had been established in order to bring the various partners together in providing post diagnostic care and support.
- Physical Urgent and Emergency Care – it was reported that there were some positive trends and results showing in this area, with reductions in deaths within 3 days of admission and also in the total number of deaths within hospital for people with dementia. The average length of stay in hospital had also reduced compared to the previous year.
- Raise awareness, reduce stigma and proactively promote prevention – the Board noted the various awareness raising initiatives being carried out, which included:
  - Embedding dementia prevention messages in the local NHS health checks programme;
  - Co-ordinating dementia awareness campaigns throughout the year and the annual dementia awareness week;
  - Maintaining and developing local resources such as a Directory of Dementia Services in Doncaster, a 'Reduce Your Risk' leaflet, and a Dementia Roadmap website;
  - Working with Home Instead around the Dementia Alliance (local businesses), Dementia awards and engagement with the local Dementia Forum (Donmentia); and
  - Promoting the Dementia Friends initiative and supporting the 'In the Moment' dementia bid. Regarding the 'In the Moment' project, Lucy Robertshaw stated that she would arrange for details of the programme of creative activities being run by darts, Cast and Heritage Services for adults living with dementia and their families in Doncaster to be circulated to Board Members for their information.

During subsequent discussion, the Board acknowledged that much of the work being undertaken in the Dementia area of focus also contributed positively towards the prevention/treatment of other conditions. It was recognised that some people were in denial of having conditions such as dementia and it could be a difficult issue for relatives to address in these situations, particularly in terms of persuading the person to seek help and support. The officers explained that it was hoped that the work being carried out in this area would help with early diagnosis and provide the necessary support to people with dementia and their families. They added that the key was in raising awareness and ensuring that the support services were open and responsive.

After the Board had agreed to support and help promote the Dementia Friendly initiatives being undertaken, it was

RESOLVED to:-

- (1) acknowledge the progress made in this area of focus and the areas of future development; and
- (2) support and promote the Dementia Friendly initiatives currently underway.

55 OUTCOMES FRAMEWORK - DEEP DIVE: LEARNING DISABILITY AND AUTISM STRATEGY

The Board received a presentation by Jayne Gilmour (Interim Strategic Lead, Adults Health and Wellbeing, DMBC) on progress with the development of a Learning Disability and Autism Strategy.

Jayne outlined the latest position in relation to the development of a joint 'All Age' Strategy for people with Learning Disabilities and people with Autism. It was noted that the timeframe was for the joint strategy to be produced in draft form by mid-April, with consultation taking place in April and early May 2019. This would ensure that there were clear joint strategic aims and priorities for delivery and improvement. Delivery Plans (one for people with Learning Disabilities and one for people with Autism) would be in place by the end of June, and steps would be taken to ensure there was alignment with Children's plans.

Having summarised the key principles that would be enshrined within the joint Strategy, Jayne outlined the challenges being faced, one of which was the problem of conflicting data, which would need to be addressed as a priority going forward.

The Board noted the engagement process that had been carried out to inform the Strategy, and the feedback received on the themes of education, employment, health and housing, particularly in terms of what needed to change.

Jayne concluded the presentation by outlining the likely priorities for delivery of the Strategy, together with the next steps.

During subsequent discussion, the Board discussed various aspects of the Strategy and members made the following comments/observations:-

- It was noted that the focus from central Government had largely been on learning disabilities and health inequalities, so it was hoped that this Strategy would help to address this imbalance with its focus on people with autism.
- In reply to a question as to how the review of the Short Breaks Service would be conducted, Jayne explained that a needs assessment would be carried out, looking at all of the people who used the service. The review would help to identify how resources could be used equitably and would look at innovative models to determine if the current service needed reconfiguring.
- It was noted that there was a need to examine how people were accessing services in order to achieve clearer and more robust pathways between diagnosis and services.
- The Board questioned whether it would have been preferable to have two separate strategies rather than a joint strategy, but acknowledged that there would be two separate delivery plans to take things forward, and that there were also some areas of crossover.

In reply to further questions, Jayne explained that while the Strategy had not been co-produced, the engagement process had been. With regard to taking the Strategy forward, the Board was informed that a list had been compiled of individuals interested in helping with the delivery of the strategy, who had been involved in the engagement stage.

RESOLVED to:-

- (1) note the progress being made with development of the Strategy and to provide feedback as part of the consultation process; and
- (2) consider at a later date the findings of the Autism Self-Assessment Framework, and consider specific reference to Autism in the JSNA.

56 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2018

Dr Rupert Suckling presented to the Board the Director of Public Health Annual Report for 2018, which had been previously endorsed by Doncaster Council at its meeting in January 2019.

It was noted that the 2018 Annual Report was the first to focus on a specific topic and the topic was 'No health without mental health'. Dr Suckling summarised the salient points in the Report and the key initiatives being undertaken. He also pointed out that this year, the delivery of the main report was in the form of a short video at <https://youtu.be/SghEWPqi4Jg>.

During discussion, Councillor Nuala Fennelly informed the Board that Doncaster Council had employed 10 Young Advisors whose role was to help young people across Doncaster. One of the projects they would be involved in was supporting mental health in schools, and Councillor Fennelly suggested that this piece of work could be reported to a future meeting for the Board's information.

RESOLVED to note the contents of the Annual Report and consider how the recommendations could be taken forward in future strategy and delivery plans.

[Note: Dr David Crichton in the Chair for the remainder of the meeting.]

57 HEALTH AND CARE UPDATE

The Board received a joint presentation by Cath Doman (Director of Transformation, Doncaster Integrated Care Partnership) and Ailsa Leighton (Deputy Director of Commissioning, DCCG) which gave an overview of developments in respect of the next phase of the Place Plan and joint commissioning and provider plans.

During subsequent discussion, the Board noted that there was scope for further engagement with members of the public and staff in relation to the Place Plan. This was especially important where there were proposals to change the way services were being delivered.

The Board also acknowledged that the successful delivery of these plans would depend on achieving the right balance between ambition and the levels of resources available. Members agreed that the key would be in prioritising resources and being clear and realistic on what could be delivered.

RESOLVED to note the contents of the presentation.

58 ANTI-POVERTY UPDATE

The Board received a report which provided a summary of the work of the Anti-Poverty Strategy Group (APSG) in 2018. It also included information in relation to the first update against the annual commitments made by Team Doncaster partner organisations which was formally signed at a meeting held on 5 June 2018, together with case studies to show the benefits of joint working.

In presenting the report, Paul Tanney confirmed that the 2018 priority for the APSG had been to work to address welfare reform and he summarised the key highlights and achievements by the Group in this respect. He also referred to the Team Doncaster Commitment Statement which all partner members had signed up to, aimed at addressing poverty and the causes of poverty, a copy of which was appended to the report. Paul concluded by outlining examples of good work being carried out by way of two case studies, namely the Garage 32 Recycling Scheme, and the BBC Children in Need Emergency Grants Programme.

During discussion, Councillor Nigel Ball welcomed all the good work going on in the Borough to alleviate poverty. He stressed, however, that there was a need to consider ways of tackling the issue of 'poverty pay' as this was having a significant impact on many residents of the Borough, particularly after years of austerity.

In response to a query as to the scope for developing the Garage 32 scheme further, Paul Tanney advised that the immediate priority was to roll out the scheme across the whole of the Borough. Following the scheme's expansion, further possible options for developing/widening the scheme's remit in the future could then be considered.

It was then

RESOLVED to note the successes detailed within the report and the work of the Anti-Poverty Strategy Group in its strategic approach to alleviating poverty across Doncaster.

CHAIR: \_\_\_\_\_

DATE: \_\_\_\_\_

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## Doncaster Council

**Doncaster  
Health and Wellbeing Board**

**Date: 13 June 2019**

**Subject:** Report of the HWB Steering Group and Forward plan

**Presented by:** Dr Rupert Suckling

| <b>Purpose of bringing this report to the Board</b> |   |
|-----------------------------------------------------|---|
| Decision                                            |   |
| Recommendation to Full Council                      |   |
| Endorsement                                         |   |
| Information                                         | x |

| <b>Implications</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Applicable Yes/No</b>             |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------|---|--|---------------|---|--|----------|---|--|---------|---|--|-----------------------|---|--|
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">DHW Strategy Areas of Focus</td> <td style="padding: 5px;">Substance Misuse (Drugs and Alcohol)</td> <td style="width: 30%; text-align: center; vertical-align: middle;">x</td> </tr> <tr> <td></td> <td style="padding: 5px;">Mental Health</td> <td style="text-align: center; vertical-align: middle;">x</td> </tr> <tr> <td></td> <td style="padding: 5px;">Dementia</td> <td style="text-align: center; vertical-align: middle;">x</td> </tr> <tr> <td></td> <td style="padding: 5px;">Obesity</td> <td style="text-align: center; vertical-align: middle;">x</td> </tr> <tr> <td></td> <td style="padding: 5px;">Children and Families</td> <td style="text-align: center; vertical-align: middle;">x</td> </tr> </table> | DHW Strategy Areas of Focus          | Substance Misuse (Drugs and Alcohol) | x |  | Mental Health | x |  | Dementia | x |  | Obesity | x |  | Children and Families | x |  |
| DHW Strategy Areas of Focus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Substance Misuse (Drugs and Alcohol) | x                                    |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Mental Health                        | x                                    |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Dementia                             | x                                    |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Obesity                              | x                                    |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Children and Families                | x                                    |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
| Joint Strategic Needs Assessment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | x                                    |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
| Finance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                      |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
| Legal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
| Equalities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |
| Other Implications (please list)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                      |                                      |   |  |               |   |  |          |   |  |         |   |  |                       |   |  |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                                                                                                                                                                                                                                                                                                                                                                                                      |
| <p>This report provides an update on suicide prevention and mental health awareness, Get Doncaster dancing, Anchor Institutions and the Board's Recovery City workshop. There has been one meeting of the South Yorkshire and Bassetlaw, Shadow Integrated Care System Collaborative Partnership Board since the Health and Wellbeing Board's last meeting and one meeting of the Doncaster Joint Commissioning Management Board. It also provides a forward plan for the Board.</p> |

|                                                                                   |
|-----------------------------------------------------------------------------------|
| <b>Recommendations</b>                                                            |
| <p>The Board is asked to NOTE the report, DISCUSS and AGREE the forward plan.</p> |

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# Doncaster Council

## Report

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**Agenda Item No. 8**  
**Date: 13 June 2019**

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

### **REPORT FROM THE HEALTH AND WELLBEING BOARD STEERING 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 Steering Group to deliver the Board's work programme and also provides a draft forward plan for future Board meetings.

#### **EXEMPT REPORT**

2. N/A

#### **RECOMMENDATIONS**

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

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

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

#### **BACKGROUND**

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. In March 2016 this support was changed to a steering group.

The Steering group has had one meeting since the last Board in March 2019. It is refocussing to ensure progress on the Health and Wellbeing

Strategy and key Board priorities including health inequalities, loneliness/social isolation, oral health, the areas of focus (alcohol, obesity, dementia, and mental health) and prevention. Key updates include:

### **Suicide Prevention and Mental Health Awareness**

The '#Another way' suicide prevention campaign was launched to coincide with mental health awareness week on the 13<sup>th</sup> May. It received widespread media attention with the message of 'there is help, there is hope, there is another way'. A full evaluation will be carried out however to date the reach through Facebook is over 140,000 with over 50,000 views and 20,000 people engaging with the video. Through Twitter there is reach of almost 170,000 with almost 40,000 views and 7,500 people engaged and there is also standalone Youtube activity.

The local Time to Change Doncaster social movement changing how we think and act about mental health will launch on the 5<sup>th</sup> July 2019. Changing Lives are supporting this initiative and through and through the Time to Change Champions and Hubs a number of offers will be available including

- FREE training sessions on speaking out and campaigning
- Opportunities to attend Time to Change activities
- Free resources and tips to help you change the way we all think and act about mental health
- Access to Time to Change E-learning
- Access to free resources from the Time to Change website
- Support for Champions, local councils and organisations on running long term anti-stigma work in their community

### **Get Doncaster Dancing**

In December 2018, the Council commissioned One Dance UK to develop Doncaster's first 'Get Doncaster Dancing' strategy. Dance is uniquely placed to contribute to getting people active and improving health and social outcomes and is particularly popular with women and girls who are more inactive than their male counterparts, at every age across the life course. The Get Doncaster Dancing Steering Group whose members include representation from local arts sector, PE and School Sport organisations and Doncaster Council Public Health are leading the strategy. Consultation was carried out with the public via focus groups and an online survey (70% of whom do not currently dance) and with health and social care partners and the dance sector. The full strategy is currently in draft although emerging themes and priorities have been identified, and include:

- Promotion – encouraging people to take part in dance, building confidence and addressing attitudinal barriers
- Promotion – signposting what opportunities are on offer in the borough
- Address gaps in provision – stimulating dance activity for adults, initiating/incentivising creation of local activity for those living in the

most disadvantaged communities and for those living with health conditions and/or are disabled

- Increase access to dance in schools for children and young people from disadvantaged backgrounds and/or are disabled
- Increase and upskill professional and volunteer dance workforce to work with and support disadvantaged, those living with health conditions and/or disabled people.

The full strategy should be ready for wider consultation by the end of June.

### **Anchor Organisations**

The Board has previously discussed the Inclusive Growth Strategy agreed late last year, and that set out the role that Anchor Institutions can play in helping deliver inclusive growth in Doncaster through each of the 6 main drivers:

1. Quality of Place
2. Industry Specialisms
3. Education and Skills
4. Better Work and Jobs
5. Social Value and Community Wealth Building
6. Reaching Vulnerable People and Places

Team Doncaster partners and large businesses are the primary focus of this work with a significant focus on activity that can increase the amount of money spent locally, improving employment practices and creating new job opportunities. Doncaster Chamber are leading the Private Sector engagement activity which is equally focussed on opening up supply chains locally.

The immediate focus is on:

- Engagement with individual anchor organisations (booked or being booked)
- Creation of two Anchor Networks (Social Value and Better Work)
- Exploration of social value / buy local actions that each organisation can start to undertake
- Supporting the delivery of the Community Wealth Building ESF project (if successful);

Engagement activity is still underway, but from Team Doncaster and organisations already approached, the response has been positive. Health colleagues are being approached with the support of Healthwatch Doncaster. Organisations will need to be able to commit both their procurement and HR staff to the anchor networks when created. Nominations to Jonathan Bucknall.

## Recovery City Workshop

The April Health and Wellbeing Board workshop on Recovery City went ahead and was well attended. The focus of the discussion was on how we celebrate local success stories e.g. the recovery games, how we identify and work with existing community connectors and how statutory organisations can work with communities as opposed to doing to communities. The next steps for the Recovery City approach are to blend this approach with other existing asset based community development approaches.

## Forward Plan

The Forward Plan for 2019 is presented for debate, discussion and agreement (Appendix A).

## South Yorkshire and Bassetlaw Shadow Integrated Care System Collaborative Partnership Board

The minute of the 8<sup>th</sup> March 2019 meeting are attached for information (Appendix B).

## Doncaster Joint Commissioning Management Board

The minutes of the 28<sup>th</sup> March 2019 meeting are attached for information (Appendix C).

## OPTIONS CONSIDERED

6. None

## REASONS FOR RECOMMENDED OPTION

7. None

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

|  | Outcomes                                                                                                                                                                                                                                                                                                                                                      | Implications                                                           |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
|  | <p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"><li>• Better access to good fulfilling work</li><li>• Doncaster businesses are supported to flourish</li><li>• Inward Investment</li></ul> | <p>The Health and Wellbeing Board will contribute to this priority</p> |
|  | <p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of</p>                                                                                                                                                                                                                                         | <p>The Health and Wellbeing Board will contribute to this priority</p> |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                        |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
|  | <p>opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul>                                                          |                                                                        |
|  | <p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in Doncaster Schools that are good or better</li> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>                                                                | <p>The Health and Wellbeing Board will contribute to this priority</p> |
|  | <p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>                                                                                                                                        | <p>The Health and Wellbeing Board will contribute to this priority</p> |
|  | <p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and</li> </ul> | <p>The Health and Wellbeing Board will contribute to this priority</p> |

|  |                                                          |  |
|--|----------------------------------------------------------|--|
|  | residents to provide effective leadership and governance |  |
|--|----------------------------------------------------------|--|

## **RISKS AND ASSUMPTIONS**

9. None.

## **LEGAL IMPLICATIONS**

10. No legal implications have been sought for this update paper.

## **FINANCIAL IMPLICATIONS**

11. No financial implications have been sought for this update paper.

## **HUMAN RESOURCES IMPLICATIONS**

12. No human resources implications have been sought for this update paper.

## **TECHNOLOGY IMPLICATIONS**

13. No technology implications have been sought for this update paper.

## **HEALTH IMPLICATIONS**

14. There are no additional health implications in this report.

## **EQUALITY IMPLICATIONS**

15. The primary care committee and the Working Win approach both address the needs of some of the most vulnerable people in Doncaster. Assessing the impact of these approaches will be important.

## **CONSULTATION**

16. None

## **BACKGROUND PAPERS**

17. None

## **REPORT AUTHOR & CONTRIBUTORS**

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**Dr Rupert Suckling  
Director Public Health**

| Date                                                                                                 | Board Core Business                                                 |                                | Partner Organisation and Partnership Issues                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | HWBB Steering Group Work plan                                                                                                                                                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                      | Meeting/Workshop                                                    | Venue                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <p><b>18<sup>th</sup> July 2019 10.00-12.00</b><br/> <b>*Please note change of date and time</b></p> | <p><b>Workshop</b><br/>                     Health inequalities</p> | <p>High Speed Rail college</p> | <ul style="list-style-type: none"> <li>● Plans and reports from                             <ul style="list-style-type: none"> <li>○ CCG</li> <li>○ NHSE</li> <li>○ DMBC</li> <li>○ Health watch</li> <li>○ RDaSH</li> <li>○ DBH</li> </ul> </li> <li>● Safeguarding reports</li> <li>● Better Care Fund</li> <li>● DPH annual report</li> <li>● Role in partnership stocktake</li> <li>● Wider stakeholder engagement and events</li> <li>● Relationship with Team Doncaster and other Theme Boards</li> <li>● Relationship with other key local partnerships</li> <li>● Health Protection Assurance Framework</li> <li>● Wellbeing and Recovery strategy</li> <li>● Adults and Social care Prevention Strategy</li> <li>● Housing</li> <li>● Environment</li> <li>● Regeneration</li> </ul> | <ul style="list-style-type: none"> <li>● Areas of focus – schedule of reports and workshop plans</li> <li>● Integration of health and social care (BCF) workshop plan</li> <li>● Other subgroups – schedule of reports</li> <li>● Communications strategy</li> <li>● Liaison with key local partnerships</li> <li>● Liaison with other Health and Wellbeing Boards (regional officers group)</li> <li>● Learning from Knowledge Hub</li> </ul> |

|                                             |                                                                                                                                                                                                                                                                                                                                                                                                   |                                        |  |  |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--|--|
| <p><b>5<sup>th</sup> September 2019</b></p> | <p><b>Board meeting</b></p> <ul style="list-style-type: none"> <li>• HWBB Steering group update</li> <li>• Outcomes framework update (Area of focus deep dive)</li> <li>• Health and social care/BCF update</li> <li>• Children and Young people Impact report update</li> <li>• State of health Annual report</li> <li>• Arts and Health update</li> <li>• Impact of universal credit</li> </ul> | <p>Civic office room 007a and 007b</p> |  |  |
| <p><b>10<sup>th</sup> October 2019</b></p>  | <p><b>Workshop</b><br/>Topic tbc</p>                                                                                                                                                                                                                                                                                                                                                              | <p>Venue tbc</p>                       |  |  |
| <p><b>7<sup>th</sup> November 2019</b></p>  | <p><b>Board meeting</b></p> <ul style="list-style-type: none"> <li>• HWBB steering group</li> <li>• Outcomes framework update (new areas)</li> <li>• Health and social care/BCF update</li> <li>• Safeguarding report update (adults)</li> <li>• Safeguarding report update (children)</li> </ul>                                                                                                 | <p>Civic office room 007a and 007b</p> |  |  |



|                               |                       |           |  |  |
|-------------------------------|-----------------------|-----------|--|--|
| 5 <sup>th</sup> December 2019 | Workshop<br>Topic tbc | Venue tbc |  |  |
|-------------------------------|-----------------------|-----------|--|--|

**Health and Wellbeing Board: future meetings**

5 September 2019 (Venue : Civic office rooms 007a and 007b)

7 November 2019 (Venue : Civic office rooms 007a and 007b)

16 January 2020 (Venue : Civic office rooms 007a and 007b)

12 March 2020 (Venue : Civic office rooms 007a and 007b)

11 June 2020 (Venue : Civic office rooms 007a and 007b)

**Health and Wellbeing Workshop Dates – Topics/ venues/dates to be confirmed**

18<sup>th</sup> July 2019 10.00 -12.00 High Speed Rail college

10<sup>th</sup> October 2019 9.00 -12.00 to be confirmed

5<sup>th</sup> December 2019 9.00 -12.00 to be confirmed

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**South Yorkshire and Bassetlaw Integrated Care System**

**Collaborative Partnership Board**

**Minutes of the meeting of**

**8 March 2019**

**The Boardroom, NHS Sheffield CCG  
722 Prince of Wales Road, Sheffield, S9 4EU**

**Decision Summary**

| <b>Minute reference</b> | <b>Item</b>                                                                                             | <b>Action</b>                                                                                                                                                                                                                                            |
|-------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>06/19</b>            | <b>Integrated Care System (ICS) Workforce Update</b>                                                    | That a response to a national letter received on workforce would be sent on behalf of the system as well as a joint letter on behalf of the North ICS' which would be coordinated by the South Yorkshire and Bassetlaw Integrated Care System (SYB ICS). |
| <b>07/19</b>            | <b>Taking forward development of South Yorkshire and Bassetlaw strategic plan</b>                       | That KM would share the NHS Improvement correspondence to ensure a dual process was not taking place regarding misalignment of plans and that JC would then address this situation to resolve.                                                           |
| <b>08/19</b>            | <b>Establishment of hosted network across the South Yorkshire and Bassetlaw Integrated Care System.</b> | That AN would consider questions for discussion in advance of a Hospital Services Review Clinical Workshop.                                                                                                                                              |

**South Yorkshire and Bassetlaw Integrated Care System**

**Collaborative Partnership Board**

**Minutes of the meeting of**

**8 March 2019**

**The Boardroom, NHS Sheffield CCG  
722 Prince of Wales Road, Sheffield, S9 4EU**

| Name                     | Organisation                                                | Designation                                                        | Present | Apologies | Deputy for     |
|--------------------------|-------------------------------------------------------------|--------------------------------------------------------------------|---------|-----------|----------------|
| Sir Andrew Cash<br>CHAIR | South Yorkshire and Bassetlaw ICS                           | Chief Executive, SYB ICS                                           | √       |           |                |
| Adrian England           | Healthwatch Barnsley                                        | Chair                                                              | √       |           |                |
| Ainsley Macdonnell       | Nottinghamshire County Council                              | Service Director                                                   | √       |           | Anthony May    |
| Alison Knowles           | Locality Director North of England,                         | NHS England                                                        |         | √         |                |
| Alan Davis               | South West Yorkshire Partnership NHS FT                     | Director of Human Resources                                        | √       |           | Kathryn Singh  |
| Andrew Hilton            | Sheffield GP Federation                                     | GP                                                                 |         | √         |                |
| Anne Gibbs               | Sheffield Teaching Hospitals NHS FT                         | Director of Strategy                                               |         | √         |                |
| Anthony May              | Nottinghamshire County Council                              | Chief Executive                                                    |         | √         |                |
| Ben Jackson              | Academic Unit of Primary Medical Care, Sheffield University | Senior Clinical Teacher                                            | √       |           |                |
| Catherine Burn           | Voluntary Action Representative                             | Director                                                           | √       |           |                |
| Chris Edwards            | NHS Rotherham Clinical Commissioning Group                  | Accountable Officer                                                |         | √         |                |
| Chris Holt               | The Rotherham NHS FT                                        | Deputy Chief Executive and Director of Strategy and Transformation | √       |           | Louise Barnett |
| David Pearson            | Nottingham County Council                                   | Deputy Chief Executive                                             |         | √         |                |
| Des Breen                | South Yorkshire and Bassetlaw ICS                           | Medical Director                                                   | √       |           |                |
| Diana Terris             | Barnsley Metropolitan Borough Council                       | Chief Executive                                                    |         | √         |                |
| Greg Fell                | Sheffield City Council                                      | Director of Public Health                                          |         | √         |                |
| Frances Cuning           | Yorkshire & the Humber Public Health England Centre         | Deputy Director – Health and Wellbeing                             |         | √         |                |
| Helen Stevens            | South Yorkshire and Bassetlaw ICS                           | Associate Director of Communications and Engagement                |         | √         |                |
| Idris Griffiths          | NHS Bassetlaw Clinical Commissioning Group                  | Accountable Officer                                                |         | √         |                |
| Jackie Mills             | NHS Sheffield Clinical Commissioning Group                  | Deputy Director of Finance                                         | √       |           | Maddy Ruff     |
| Jackie Pederson          | NHS Doncaster Clinical Commissioning Group                  | Accountable Officer                                                | √       |           |                |
| Jeremy Cook              | South Yorkshire and Bassetlaw ICS                           | Director of Finance                                                | √       |           |                |

|                   |                                                          |                                                            |   |   |                |
|-------------------|----------------------------------------------------------|------------------------------------------------------------|---|---|----------------|
| John Mothersole   | Sheffield City Council                                   | Chief Executive                                            |   | √ |                |
| John Somers       | Sheffield Children's NHS Foundation Trust                | Chief Executive                                            |   | √ |                |
| Jo Miller         | Doncaster Metropolitan Borough Council                   | Chief Executive                                            |   | √ |                |
| Julia Burrows     | Barnsley Metropolitan Borough Council                    | Director of Public Health                                  | √ |   |                |
| Kathryn Singh     | Rotherham, Doncaster and South Humber NHS FT             | Chief Executive                                            |   | √ |                |
| Kathy Scott       | Yorkshire and Humber Academic Health and Science Network | Deputy Chief Executive                                     | √ |   | Richard Stubbs |
| Kirsten Major     | Sheffield Teaching Hospitals NHS FT                      | Chief Executive                                            | √ |   |                |
| Kevan Taylor      | Sheffield Health and Social Care NHS FT                  | Chief Executive                                            | √ |   |                |
| Lesley Smith      | NHS Barnsley Clinical Commissioning Group                | SYB ICS Deputy System Lead, Chief Officer NHS Barnsley CCG | √ |   |                |
| Lisa Kell         | South Yorkshire and Bassetlaw ICS                        | Director of Commissioning Reform                           |   | √ |                |
| Louise Barnett    | The Rotherham NHS FT                                     | Chief Executive                                            |   | √ |                |
| Maddy Ruff        | NHS Sheffield Clinical Commissioning Group               | Accountable Officer                                        |   | √ |                |
| Matthew Groom     | NHS England Specialised Commissioning                    | Assistant Director                                         | √ |   |                |
| Mike Curtis       | Health Education England                                 | Local Director                                             |   | √ |                |
| Neil Priestley    | Sheffield Teaching Hospitals NHS FT                      | Director of Finance                                        |   | √ |                |
| Neil Taylor       | Bassetlaw District Council                               | Chief Executive                                            |   | √ |                |
| Paul Moffat       | Doncaster Children's Services Trust                      | Director of Performance, Quality and Innovation            |   | √ |                |
| Patrick Birch     | Doncaster Metropolitan Borough Council                   | Strategic Lead for Adult Transformation                    | √ |   | Jo Miller      |
| Paul Smeeton      | Nottinghamshire Healthcare NHS Foundation Trust          | Executive Director                                         | √ |   | Ruth Hawkins   |
| Richard Henderson | East Midlands Ambulance Service NHS Trust                | Chief Executive                                            |   | √ |                |
| Richard Jenkins   | Barnsley Hospital NHS Foundation Trust                   | Chief Executive                                            |   | √ |                |
| Richard Parker    | Doncaster and Bassetlaw Teaching Hospitals NHS FT        | Chief Executive                                            | √ |   |                |
| Richard Stubbs    | Yorkshire and Humber Academic Health Science Network     | Chief Executive                                            |   | √ |                |
| Rob Webster       | South West Yorkshire Partnership NHS FT                  | Chief Executive                                            |   | √ |                |
| Rod Barnes        | Yorkshire Ambulance Service NHS Trust                    | Chief Executive                                            | √ |   |                |
| Rupert Suckling   | Doncaster Metropolitan Borough Council                   | Director of Public Health                                  |   | √ |                |
| Ruth Hawkins      | Nottinghamshire                                          | Chief Executive                                            |   | √ |                |

|                  |                                            |                                |   |   |               |
|------------------|--------------------------------------------|--------------------------------|---|---|---------------|
|                  | Healthcare NHS FT                          |                                |   |   |               |
| Sharon Kemp      | Rotherham Metropolitan Borough Council     | Chief Executive                |   | √ |               |
| Simon Morritt    | Chesterfield Royal Hospital NHS FT         | Chief Executive                |   | √ |               |
| Steve Shore      | Healthwatch Doncaster                      | Chair                          |   | √ |               |
| Teresa Roche     | Rotherham Metropolitan Borough Council     | Director of Public Health      | √ |   | Sharon Kemp   |
| Tim Moorhead     | NHS Sheffield Clinical Commissioning Group | Clinical Chair                 |   | √ |               |
| Tony Campbell    | Chesterfield Royal Hospital NHS FT         | Chief Operating Officer        |   | √ |               |
| Wendy Allott     | NHS Rotherham Clinical Commissioning Group | Chief Finance Officer          | √ |   | Chris Edwards |
| Will Cleary-Gray | South Yorkshire and Bassetlaw ICS          | Chief Operating Officer        | √ |   |               |
| Yvonne Elliott   | Primary Care Sheffield                     | Deputy Chief Executive Officer | √ |   |               |

| Minute reference | Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Action |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 01/19            | <p><b>Welcome and introductions</b></p> <p>The Chair welcomed members to the meeting, noting congratulations to Kirsten Major on her appointment as Chief Executive at Sheffield Teaching Hospitals NHS Foundation Trust.</p>                                                                                                                                                                                                                                                                                                                                          |        |
| 02/19            | <p><b>Apologies for absence</b></p> <p>The Chair noted the apologies for absence.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
| 03/19            | <p><b>Minutes of the previous meeting held 19<sup>th</sup> October 2018</b></p> <p>The minutes of the previous meeting were agreed as a true record and would be posted on the website after this meeting.<br/> <a href="http://www.healthandcaretogethersyb.co.uk">www.healthandcaretogethersyb.co.uk</a></p>                                                                                                                                                                                                                                                         |        |
| 04/19            | <p><b>Matters arising</b></p> <p><b>Mental Health workstream progress update (Item 105/18 refers)</b><br/> The Board was updated on a positive Mental Health and Learning Disabilities (MHL D) workstream meeting, noting a planned joint Primary Care (PC) and MHL D workshop.</p>                                                                                                                                                                                                                                                                                    |        |
| 05/19            | <p><b>National Update</b></p> <p><b>CEO ICS Report</b></p> <p>The Collaborative Partnership Board noted the contents of the report.</p> <p>The Board noted the NHS Long Term Plan (LTP) had been released identifying a new service model that would join primary and community services, with a concentration on:</p> <ul style="list-style-type: none"> <li>- Out of hospital care and reducing pressure on emergency hospital services</li> <li>- Delivering person centered care</li> <li>- Focus on digital care</li> <li>- Focus on population health</li> </ul> |        |

The Board noted the release of the Primary Care Strategy and changes to the GP contract, noting 36 proposed neighbourhoods across the South Yorkshire and Bassetlaw (SYB) system.

Discussions would take place further in a planned North meeting on workforce.

The Board noted NHS England (NHSE) and NHS Improvement (NHSI) had implemented one Chief Executive for both organisations as well as discussions around the potential creation of integrated care trusts and establishing joint committees.

The response to the NHS LTP would be submitted from the SYB ICS by Autumn 2019.

The Board was updated on a meeting with SYB ICS and Local Authority (LA) colleagues regarding the wider determinants of health, agreeing at that session to work in detail together on several areas including complex lives. Doncaster had agreed to share detail from work taking place already to apply at system level. Discussions took place around loneliness and how social prescribing and investing in voluntary and community sectors affected this. Physical activity and the active travel agenda were discussed, as well as digital population and employment. The priorities would be worked up in detail and discussed further at system level as part of the response to the LTP. This workshop was established to discuss where health and care comes together. A set of key priorities across health and care would begin to form the basis of the agenda for future Board meetings.

The Board noted changes to ICS governance:

- From 01 April 2019 for 12 months, the NHS organisations would move into a different meeting structure, with Chief Executives and Accountable Officers of every organisation, plus regulatory organisations coming together monthly. Once a quarter a full day session would take place with wider partners. Quarterly, an Oversight Board would take place and NHS E/I would join the SYB ICS for this. The Board would continue to meet, noting the membership of the group would likely be addressed and changed accordingly to reflect the wider care agenda
- The Board noted work taking place around the commissioning review in the light of primary care functions, how local commissioning and integrated commissioning with Local Authorities and how commissioning may work at a system level
- The Board noted changes to structures within NHS E/I

### **Feedback from Place**

#### **Barnsley**

LS updated the Board on legislation around integrated care trusts and that a strategic outline case had been set out a year prior, undergoing a procurement process. The group noted that this had been placed on hold in October 2018. At this point work took place around localities, with workshops taking place with primary care exploring moving from 6 neighbourhoods to 3. Work was taking place with practices around Primary Care Networks (PCN).

Work was also taking place around establishing a joint commissioning board.

A section 75 Prevention agreement had been established.

BJ highlighted discussions in Doncaster around the Primary Care Networks (PCNs) that suggested their approach was going to amalgamate the investment for clinical leadership to create more substantive city-wide roles. It was noted that, as far as possible, common principles would be required for the ICS to best respond to the new contract across the region.

A comment was made that work would be required to support and guide Primary Care staff through changes. It was also noted that different models of Networks could be a risk. LS confirmed that practices were engaged in the process of developing the Networks.

### **Bassetlaw**

It was noted that 3 PCN's were established at varying stages of development. These were multi agency Networks with clinical focus.

Place plans had been launched of which 3 primary care homes were integral.

Workstreams were established, focusing on wider determinants of health.

A social prescribing offer was established.

### **Doncaster**

The Board noted PCN developments were underway. A well represented debate had taken place around this. The Board noted that the GP Federation had put an offer out to practices to host the 4 PCNs, and discussions would take place at practice level to allow the model to develop.

The Board debated sharing the common principles across the 5 places. A discussion would take place at the ICS Primary Care Steering Group.

The Board noted interviews taking place of 5 GPs as a leadership cohort to get involved with system leaders. It was anticipated that the GP leaders would work with the GP Federation. It was agreed this would be useful.

The Board noted the joint strategy from 01 April with the Local Authority including joint delivery plans across health and social care, focusing on integration and delivery of LTP priorities.

A monitoring process would be embedded as a whole system

A Place plan refresh was underway, addressing delegated authority for a joint commissioning function.

A review was taking place on governance arrangements of the Integrated Care Partnership.

On the back of the joint commissioning strategy, a joint commissioning function was being explored for living well and aging well.

Contracts were on track, with ambitions to get the system into the best place for delivery.

### **Sheffield**

The Board noted that an independent chair would be appointed for the Accountable Care Partnership Board.

Developments around integrated commissioning were taking place across the system.

Shaping Sheffield Plan engagement workshops had been taking place.

Work was taking place for stronger integrated care around patients at risk of admission and to develop single point of access for all health and care.

An ongoing issue around integrated care for young people in transition regarding



|       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|       | <p>mental health was noted and an agreement reached for a single commissioning process for the whole age range. This had been agreed through a Board commitment from Sheffield Health and Social Care NHS Foundation Trust and Sheffield Children's NHS Foundation Trust and was supported by the whole system.</p> <p>The Board noted an issue raised around a sharp increase in reported knife crime in Sheffield. KM updated the Board on work being done around this as a city. A discussion took place around scaling up these discussions at system level. A comment was made that there were wider issues to explore around the complex lives work as part of this.</p> <p><b><u>Rotherham</u></b></p> <p>The Board noted a locality structure within Rotherham, and that partnerships with the Local Authority and localities were formed to explore how these converted to Primary Care Networks.</p> <p>A Place Board was established with governance structures and a partnership work programme was underway.</p> <p>The Board was asked to note system level performance on the key health constitutional targets and issues around cancer waiting times and that plans were in place to address this.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| 06/19 | <p><b>ICS workforce update</b></p> <p>The Board was presented with an update on workforce and activity around the review initiated to assess the current position, and clarify what needed to be delivered effectively at ICS level over the coming months.</p> <p>Two key messages were noted on leadership, acknowledging that workforce was one of the biggest challenges and that the system should drive the agenda for this. This would require a structure and governance change within the system with the ICS taking on wider responsibilities for key decisions.</p> <p>KT updated the group on correspondence received noting key themes on:</p> <ul style="list-style-type: none"> <li>- Making the experience of working for health and care rewarding</li> <li>- Leadership culture and the further work required on this</li> <li>- Key challenges around nursing and midwifery recruitment</li> <li>- New roles and different skill mixes needed coordinating</li> <li>- Devolution of existing accountability to ICS'</li> </ul> <p>The group was invited to comment.</p> <p>A comment was made on the semantics around title of human resources, (HR) leadership development and organisational development role and it was felt that the scope of work within this was wider than one role.</p> <p>A comment was made around ensuring that links were made to five new, additional roles in the GP contract into any work taking place.</p> <p>A comment was made around the importance of implementing a compassionate and values led system.</p> <p>A comment was made around considering the geography of training and whether as a system, and whether the ICS could consider making the bursaries part of the contract of employment, linking job offers to paying back fees.</p> <p>A comment was made around the importance of governance and investments by the system was crucial and potential to explore coordinated system training in conjunction with HR.</p> <p>The Board noted discussions with Health Education England and the ambulance</p> |  |

|       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                              |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
|       | <p>service, noting four paramedic rotation pilot schemes (rotating into primary care).</p> <p>Discussions were summarised as follows:</p> <ul style="list-style-type: none"> <li>- It was noted that the NHS and Care sectors must be attractive place to work</li> <li>- The workforce challenges in nursing needed to be resolved</li> <li>- This needed to be developed as a major part of the system plan</li> </ul> <p>It was agreed that a response to the national letter received would be sent on behalf of the system and a joint letter on behalf of the North ICS' would also be coordinated by the SYBICS.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><b>KEVAN TAYOR,<br/>ANDREW CASH</b></p>   |
| 07/19 | <p><b>Taking forward development of SYB strategic plan</b></p> <p>The Board noted that a system operating plan for SYB would be required, which would be a summation of organisation and Place plans.</p> <p>The plan captured the achievements of previous years and set out objectives for 19/20 and the first year of the strategic plan. The Board was asked to note the alignment of plans for this year being worked through which would be submitted.</p> <p>It was highlighted that changes to governance would be detailed in the submission to demonstrate how delivery would be supported.</p> <p>There would be an initial outline draft for the submission for a focused region discussion taking place in May. A task and finish group would be coordinated to develop this plan. Final submission of this plan would take place in October 2019.</p> <p>JC highlighted that Place based discussions were taking place to ensure Plans were aligned and discussions would take place where required. A query was raised around joining together alignment plans and request for alignment from NHS I. KM agreed to share the NHS I correspondence to ensure a dual process was not taking place. JC agreed to address this situation to resolve.</p> <p>The Board noted that 9 April CEO/AO meeting would be utilised to further discussions on the submission.</p> | <p><b>KIRSTEN MAJOR,<br/>JEREMY COOK</b></p> |
| 08/19 | <p><b>Establishment of hosted network across the SYB ICS</b></p> <p>The Board noted developments on establishing the hosted networks to focus on strengthening shared working to support sustainability within the five Hospital Services Review (HSR) specialties with a view to rolling out wider.</p> <p>With regard to a scheduled workshop on 21<sup>st</sup> March to discuss whether changes were required to clinical models for paediatrics and maternity, a comment was made around question 1 – “can we maintain status quo” which was proposed to be addressed in the workshop. As it had been established that status quo would be not sustainable it was suggested this was amended to “how do we build on what we currently have?” AN agreed to address this in the narrative going forward.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <p><b>ALEXANDRA NORRISH</b></p>              |
| 09/19 | <p><b>Finance update</b></p> <p>The Board was updated on month 9 noting the ICS was ahead of financial plan. An issue was noted around potential changes to the Memorandum of Understanding as a result of improved financial plans submitted in September. This has been queried with NHSI/E. It was noted that two organisations in the ICS were unlikely to meet their financial plan. A comment was made that the rules and potential for unintended consequences need clarifying.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                              |
| 10/19 | <p><b>Integrated Care System Highlight Report</b></p> <p>The Collaborative Partnership Board received the ICS Highlight Report.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                              |

|              |                                                                                                                                                                                       |  |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|              | <p>The report provided a summary of progress on the SYB ICS workstreams identifying the key risks.</p> <p>This should be shared by all with Boards and Governing bodies.</p>          |  |
| <b>11/19</b> | <p><b>NHS long term plan engagement update</b></p> <p>This item was included for information.</p>                                                                                     |  |
| <b>12/19</b> | <p><b>Any Other Business</b></p> <p>There was no other business to consider.</p>                                                                                                      |  |
| <b>13/19</b> | <p><b>Date and Time of Next Meeting</b></p> <p>The next meeting will take place at 9.30am to 11.30am on 9 May 2019 in the Boardroom, 722 Prince of Wales Road, Sheffield, S9 4EU.</p> |  |

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**Meeting:** Joint Commissioning Management Board

**Date:** 28<sup>th</sup> March 2019

**Time:** 9 – 10.30am

**Location:** Room 313, Civic Building, Waterdale, Doncaster, DN1 3BU

Attendees

|                                                                    |                                                                                            |                                                              |
|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| Cath Doman - Director of Health & Social Care Transformation DMBC  | Jackie Pederson - Chief Officer Doncaster CCG                                              | Damian Allen - Director of People – Doncaster Council        |
| Anthony Fitzgerald - Director of Strategy & Delivery Doncaster CCG | Steve Mawson – Assistant Director of Finance and Chief Financial Officer Doncaster Council | Hayley Tingle - Chief Financial Officer Doncaster CCG        |
| Rupert Suckling – Director of Public Health                        | Lee Golze – Head of Business Transformation & Strategic Commissioning Doncaster Council    | Andrew Russell – Chief Nurse Doncaster CCG                   |
| Dr Nick Tupper – Strategic Clinical lead Doncaster CCG             | Dr David Crichton – Clinical Chair Doncaster CCG                                           | Denise Bann – Strategic Lead Commissioning Doncaster Council |
| Linda Tully – Lay Person, Doncaster CCG Governing Body             |                                                                                            |                                                              |

Gill Parker – note taker

Apologies

|                                                         |                                                                                              |  |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------|--|
| Cllr Rachael Blake – Portfolio Holder Doncaster Council | Leanne Hornsby – Assistant Director Commissioning and Business Development Doncaster Council |  |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------|--|

| Item | Discussion/Comments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Action |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1    | <b><u>Welcome, introductions and apologies</u></b><br>Jackie welcomed everyone. Apologies as above.                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| 2    | <b><u>Minutes of the previous meeting and matters arising</u></b><br>Minutes of JCMB 3 <sup>rd</sup> January and joint JCMB with JCOG on 14 <sup>th</sup> February both agreed as accurate.<br>Action log updated as follows:<br>39 – 2 parts to this item – first part was discussed in December, second part on today’s agenda, so to be closed.<br>40 – to be put on forward plan for next JCMB – Jane Gilmore will be attending to update on two items, so to be closed<br>44 – closed – on agenda<br>53 – closed – on agenda<br>54 - closed<br>55 – closed |        |



|          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
|          | <p>56 – closed</p> <p>57 – closed</p> <p>58 – closed</p> <p>59 – closed – on forward plan</p> <p>60 – closed – on forward plan</p> <p>61 - closed</p> <p>62 – close - the figures will depend on the appointed person</p> <p>63 – close – duplicate of action 61</p> <p>64 – closed</p> <p>65 – closed</p> <p>66 – closed</p> <p>67 – closed</p> <p>68 – closed</p> <p>69 – Jackie confirmed to use JCMB dates already in diaries for the joint meetings with JCOG, but to extend to 3 hours duration. Every third JCMB will be a joint meeting with JCOG.</p> <p>70 – close – on agenda</p> <p>71 – close – on agenda</p> <p>72 – close – on agenda</p> <p>73 – close – on agenda</p> <p>74 – close, but to be clarified – Complex Lives was agreed for 2 years</p> <p><b>Actions:</b></p> <ul style="list-style-type: none"> <li>• Joint JCOG/JCMB 3 hour meetings to be convened every third meeting</li> </ul> | <b>GP</b> |
| <b>3</b> | <p><b><u>Joint Commissioning Strategy and Joint Delivery Plans Progress</u></b></p> <p>Anthony acknowledged the huge amount of work which has gone into this from both front line staff and managers following our joint meeting on 14<sup>th</sup> February. We now have a coherent strategy for the next two years which meets the requirements of both organisations, regulators, the NHS Long Term Plan, local commitments and the requirements of the citizens of Doncaster.</p> <p>We have a set of specific delivery plans detailing who, what and when, which captures joint work.</p> <p>We have a set of outcomes to be implemented, the next step being sign off by the Council’s Exec Board and the CCG’s Governing Body.</p> <p>The strategy is to be taken to providers over the next 3-4 months, alongside the refresh of the</p>                                                                   |           |



|          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                            |
|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|          | <p>Place Plan.</p> <p>The next steps will be further work undertaken to ensure we are set up to deliver the strategy – to be brought back to JCMB and JCOG within the next two months.</p> <p>JCMB agreed this has been an excellent piece of work. Linda raised the need to ensure all staff are made aware of how closely our organisations are working together. JCOG to pick up OD work to ensure this is put in place. Also further work to do to improve mutual understanding of each organisation’s governance.</p> <p>JCMB agreed that reference needs to be made in the Executive Summary of the estimated financial gap – an indicative figure to be included.</p> <p>Steve informed that a Cabinet decision wasn’t required as the delegations are in place. The strategy is going to Executive Board on the 2<sup>nd</sup> April for consideration.</p> <p>Damian noted that the existing commissioner agreement enables the partnership to continue developing joint commissioning. A revised Joint Commissioning Agreement will be developed at an appropriate point when substantial changes are required. Damian and Rachel Blake will support Cabinet through the process.</p> <p>Jackie re-iterated thanks to the teams involved on this mammoth task. Rupert added there has been so much improvement and the building blocks are in place, however, there is still more thinking to be done. The next joint session between JCOG and JCMB will focus on implementation.</p> <p><b>Actions:</b></p> <ul style="list-style-type: none"> <li>• AF and CD to share the strategy and Place Plan refresh with Providers over the next 3 – 4 months <b>AF and CD</b></li> <li>• JCOG forward plan:             <ul style="list-style-type: none"> <li>○ JCOG to develop the approach to strategy implementation <b>AF/JCOG</b></li> <li>○ JCOG to plan organisational development to support joint working</li> </ul> </li> <li>• JCOG/JCMB forward plan: to note next joint JCOG/ JCMB will focus on implementation <b>GP</b></li> <li>• Estimated figures on the financial gap to be included in the strategy <b>HF/SM</b></li> </ul> | <p>AF</p> <p>AF</p> <p>AF</p> <p>HT/SM</p> |
| <p>4</p> | <p><b><u>Joint Commissioning Agreement Extension Approach</u></b></p> <p>Covered under previous item.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            |
| <p>5</p> | <p><b><u>Joint Commissioning Governance and TOR</u></b></p> <p>CD presented a paper setting out options to support the development of joint commissioning governance. The governance was initially established to deliver the Place Plan comprised of 7 discrete Areas Of Opportunity, however as our ambition grows, we need to revise the governance to enable the delivery of the joint commissioning strategy and refreshed Place Plan.</p> <p>JCMB agreed that the implementation of the joint commissioning strategy will determine the</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            |



|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                   |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
|   | <p>mechanisms to support this, including S75 agreements where relevant. To be progressed through Joint Commissioning SMT and JCOG, which will make recommendations to JCMB.</p> <p>JCMB considered meeting in public. DA advised that Cllr Blake’s recommendation was to increase public accountability through the Health and Wellbeing Board. JP advised that we need a clear public statement on this. DA’s team to set out the rationale and protocol for consideration by JCMB at the next meeting.</p> <p><b>Actions</b></p> <ul style="list-style-type: none"> <li>• Joint SMT to develop mechanisms to support the joint strategy implementation <b>AF/DB</b></li> <li>• DA to produce protocol for JCMB minutes to go through HWB</li> </ul>                                                                                                                                                                                                                                |                                   |
| 6 | <p><b><u>Implementation of the Strategy – joint finance paper</u></b></p> <p>DICPB have proposed the development of a System Transformation Fund. Further work to be undertaken by Directors of Finance to construct the fund and associated principles.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• DOFs to construct the fund and associated principles and bring back to JCMB for approval <b>HT/SM</b></li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                   |
| 7 | <p><b><u>Update and Timescales re Desk Top Review of BCF Schemes</u></b></p> <p>Anthony informed the paper was here for information. Business cases will continue going through JCOG. There is still further work to do on the Desk Top Review. Quarterly reports will come to JCMB.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |
| 8 | <p><b><u>Messages for JCOG</u></b></p> <p>Denise provided the following update from JCOG:</p> <ul style="list-style-type: none"> <li>• The strategy and reporting process was provided.</li> <li>• The reporting approach was presented. A report will be coming to the next JCOG. We need one version of the truth we can all use.</li> <li>• Training on Pentana for CCG staff is being arranged.</li> <li>• Update on neighbourhood development – provided. Two projects being prototyped. The first concerns older people and people who are frail (Thorne area). The second covers Early Help and Demand Management (Hexthorpe and Denaby areas). The projects are supported by the Innovation Unit and FutureGov. The programme is known as ‘Doncaster Innovates’ Cath to provide an update at the next JCOG – May/June time.</li> <li>• BCF return – Olwen is drafting the return which needs to be submitted by the 18<sup>th</sup> April.</li> </ul> <p><b>Actions:</b></p> | <p><b>CD</b></p> <p><b>OW</b></p> |





|                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
|                                                                                                                                      | <ul style="list-style-type: none"> <li>• CD to provide an update on 'Doncaster Innovates' to the next JCOG meeting (May/June)</li> <li>• OW drafting BCF return to be submitted by 18<sup>th</sup> April</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |
| 9                                                                                                                                    | <p><b><u>Business Cases</u></b></p> <ul style="list-style-type: none"> <li>• <b>Wellbeing Officers</b></li> </ul> <p>The BC now addresses proposed savings, focus on prevention and early intervention, impact and monitoring. JCOG supported the business case.</p> <ul style="list-style-type: none"> <li>• <b>Increased Capacity at Positive STEPS</b></li> </ul> <p>9 posts linking in with Intermediate Care requested to extend for a further 12 months. There needs to be a push to implement the new model. Anthony feels the system transformation needs bottoming out otherwise funds will run out. Jackie commented on services coming back through BCF.</p> <p>JCOG supported the BC but the extension needs to be in line with Intermediate Care – i.e. for 6 months. It may be subject to further extension, depending on where Intermediate Care is at.</p> <ul style="list-style-type: none"> <li>• <b>LD and Autism Area of Opportunity Strategic Lead</b></li> </ul> <p>This was well supported by JCOG</p> <ul style="list-style-type: none"> <li>• <b>Extension to Director of Transformation post</b></li> </ul> <p>Jackie informed the post is due to end in March 2020, and proposed it be extended for a further 12 months.</p> <p>Agreed that decision was premature and to be considered in the future when the work plan is clear.</p> <p><b>Key Decisions:</b></p> <ul style="list-style-type: none"> <li>• Wellbeing Officers – business case supported</li> <li>• Increased capacity at Positive Steps – supported on the condition that it is aligned to Intermediate Care – i.e. for 6 months</li> <li>• LD and Autism Area of Opportunity Strategic Lead – business case supported</li> <li>• Extension to Director of Transformation post – it was felt it was too early to extend this – to be brought back to JCMB in the summer</li> </ul> |            |
| 8                                                                                                                                    | <p><b><u>Any other business</u></b></p> <p>Jackie re-iterated all future papers to be sent round no later than 5 days prior to the meeting, otherwise they are not included. They all must have a cover sheet – no exceptions.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>All</b> |
| <p><b>Date and time of next meeting:</b><br/> <b>9<sup>th</sup> May 2019 – 10.30am</b><br/> <b>Civic Office meeting room 313</b></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |

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## Doncaster Council

Doncaster  
Health and Wellbeing Board

Date: 13 June 2019

**Subject:** The State of Health - JSNA

**Presented by:** Jon Gleek & Laurie Mott

| Purpose of bringing this report to the Board |   |
|----------------------------------------------|---|
| Decision                                     |   |
| Recommendation to Full Council               |   |
| Endorsement                                  |   |
| Information                                  | ✓ |

| Implications                     |                                      | Applicable Yes/No |
|----------------------------------|--------------------------------------|-------------------|
| DHWB Strategy Areas of Focus     | Substance Misuse (Drugs and Alcohol) |                   |
|                                  | Mental Health                        | ✓                 |
|                                  | Dementia                             |                   |
|                                  | Obesity                              | ✓                 |
|                                  | Children and Families                | ✓                 |
| Joint Strategic Needs Assessment |                                      | ✓                 |
| Finance                          |                                      |                   |
| Legal                            |                                      |                   |
| Equalities                       |                                      | ✓                 |
| Other Implications (please list) |                                      |                   |

| How will this contribute to improving health and wellbeing in Doncaster?    |
|-----------------------------------------------------------------------------|
| Improved Intelligence about wellbeing, health and social care in Doncaster. |

| Recommendations                                            |
|------------------------------------------------------------|
| The Board is asked to consider the findings of the report. |

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# Doncaster 2018/19 Joint Strategic Needs Assessment

## State of Health

## **1. What is the State of Health Report?**

1.1. The State of Health Report is a collection of some of the key insights that have emerged from the various work packages that have been undertaken in the last year. Some of the findings in this report have not been reported elsewhere, some of these work packages are yet to be finished.

## **2. Health in Doncaster**

2.1. Doncaster has generally poorer health than England as a whole. Around 22% of children live in low income families (16% in England). The life expectancy at birth and healthy life expectancy in men and women are lower than the England average.

2.2. The Latest Doncaster Health profile measures 33 health indicators. Of these 19 are statistically significantly worse than the England average and only 4 are significantly better (see below).

## **3. Health inequalities**

3.1. Life expectancy is 10.1 years lower for men and 7.8 years lower for women in the most deprived areas of Doncaster compared to the least deprived. Findings from a more detailed analysis of the changes in these inequalities is included in this report.

3.2. Doncaster is in the 20% most deprived areas in England.

## **4. Child health**

4.1. The rates of smoking at time of delivery, the numbers of women initiating breastfeeding and the numbers of children in year 6 who are overweight and obese are all significantly worse than England.

4.2. Later in this report there are some results of a more detailed analysis of the National Child Measurement Programme. This includes some new insights into inequalities across the borough.

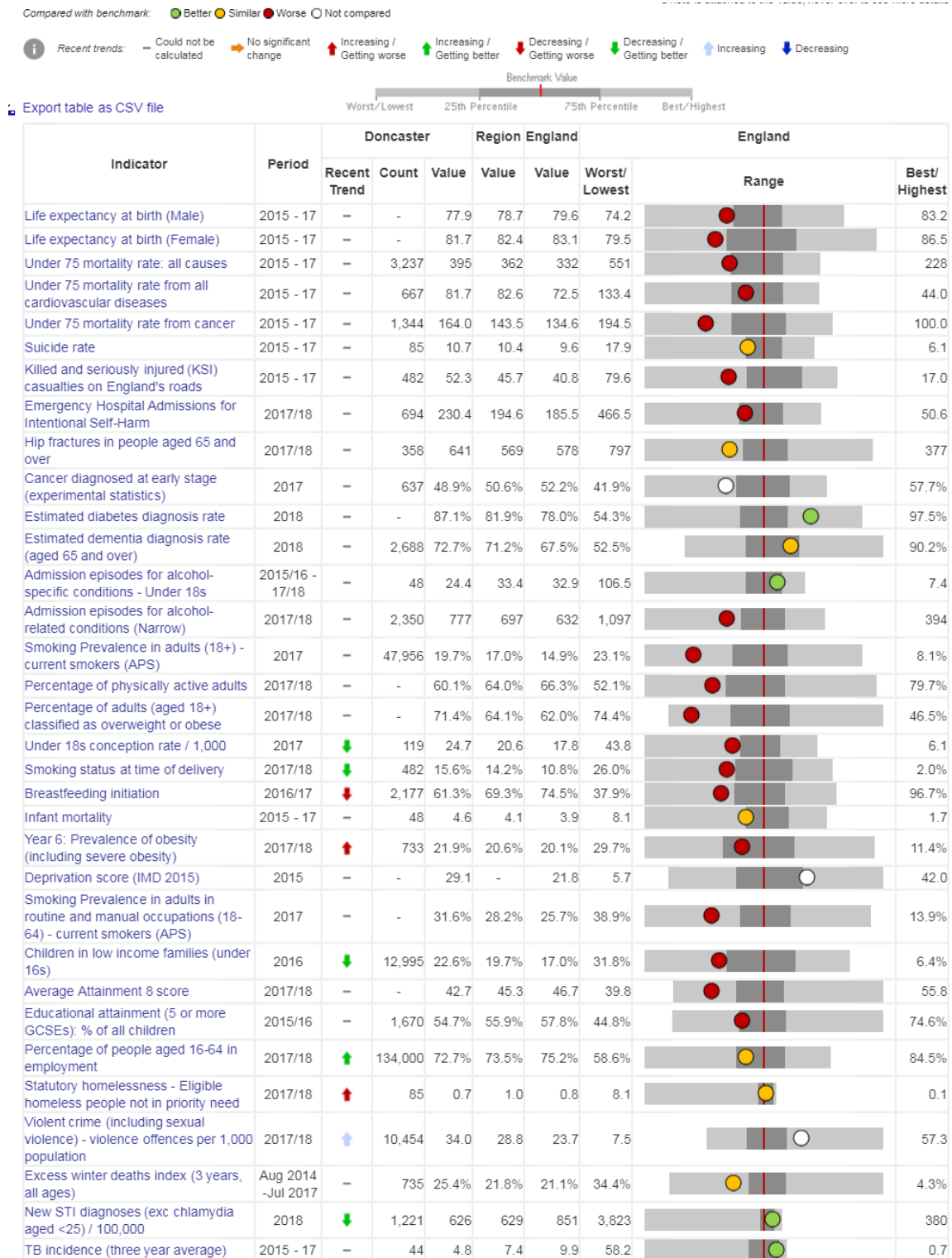
## **5. Adult Health**

5.1. The rates of admissions for alcohol related conditions are significantly worse in Doncaster compared to England. In 2017/18 there were 2,300 hospital stays directly linked to alcohol consumption. An alcohol needs assessment is currently underway to further understand alcohol in Doncaster. This will report later in the year.

5.2. Smoking prevalence amongst people in routine and manual occupations is 31.6% compared to the England rate of 25.7%.

5.3. The levels of physical in-activity amongst adults in Doncaster are significantly higher than England and around 71.4% of adults are overweight or obese. This report includes some improved insights into the changes in the levels of physical activity taking place within the borough.

## Health summary for Doncaster



## **6. New insights from this year's JSNA work packages**

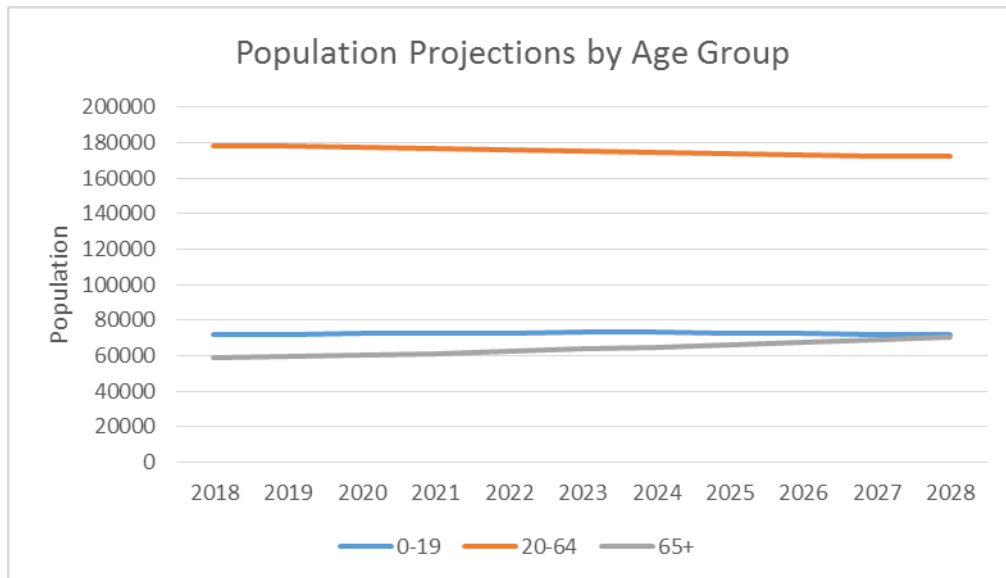
- 6.1. There is a great deal of new intelligence available to support strategic commissioning and service planning across the health and social care environment. The population of Doncaster will change over the next few years due to the ageing population and changes in migration.
- 6.2. There are important challenges to be faced around health inequalities. There are significant differences in the prevalence of childhood obesity (including overweight) between the most deprived and least deprived parts of the borough. Whilst there seem to be improvements in Doncaster men's healthy life expectancy, the levels of inequalities in mortality rates appear to be widening, particularly in women.
- 6.3. More intelligence is now available about the 4 localities of the borough. The locality profiles and the workforce planning work are providing insights into the health, social care, social and economic differences across these areas. The reports draw particular attention to the challenges presented by Central locality.
- 6.4. There is now evidence that adults in Doncaster reporting significantly lower levels of self-reported wellbeing. On the other hand secondary school pupils appear to be reporting higher levels of resilience.
- 6.5. An initial scoping project relating to Adverse Childhood Experiences found some evidence that Doncaster may have a high prevalence of children who are facing multiple social and psychological stressors. The Pupil Life-style Survey has found that LGBT Children in secondary school also face mental health challenges.
- 6.6. This year the data analysis component of the Learning Disability Strategy was completed and Doncaster is now in a good position to produce a comprehensive strategy supported by the latest available intelligence.
- 6.7. While Doncaster has achieved a number of improvements Inequalities remains an important component of the health experiences of Doncaster people and communities.



## 7. Demography

### 7.1. Ageing population

7.1.1. The numbers of people aged 65+ are set to increase from around 59,500 in 2019 to around 70,200 in 2028. This is a 19% increase in 10 years. The numbers of young people (0-19) will fall slightly (-0.5%) as will the numbers of working age adults (-3.4%)

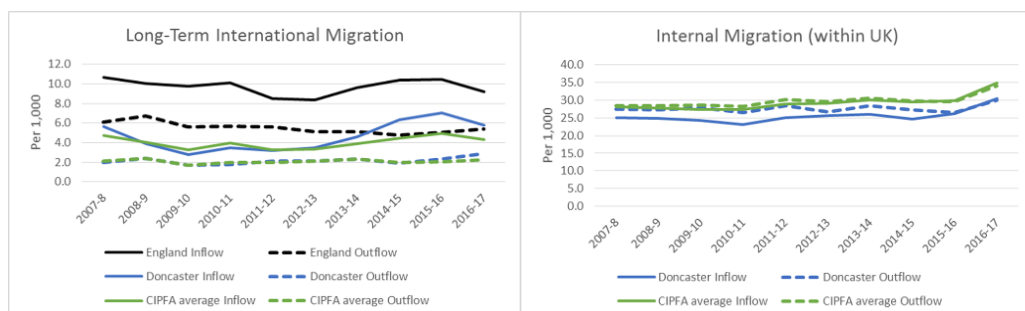


### 7.2. Changes in Migration

7.2.1. International and internal migration patterns appear to have changed in Doncaster.

7.2.2. Doncaster has significantly less migration (inflow and outflow) than England. Around 2012/13 International migration (Inflow) increased. The latest data for 2016/17 show that the inflow rate has fallen significantly and outflow has increased slightly.

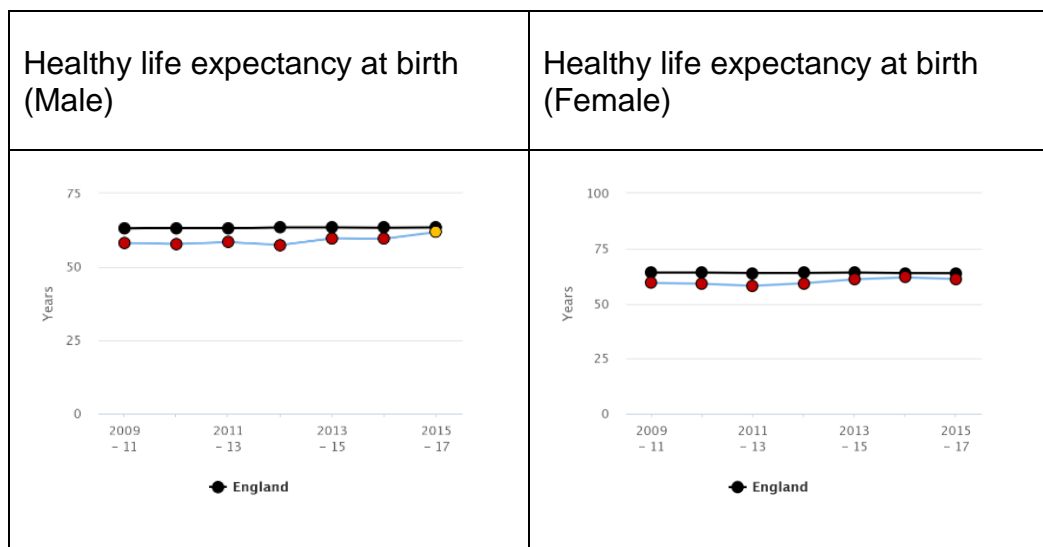
7.2.3. At the same time as international migration has fallen internal migration has increased this year. Around 50% of all internal migration is accounted for by movements within Yorkshire and a smaller amount from North Lincolnshire.



### 7.3. Improvement in Healthy life expectancy in men in Doncaster (PHOF)

7.3.1. Most high level population health indicators show Doncaster faces significant public health challenges. The latest update of the Public Health Outcomes Framework shows that, for the first time since 2009, healthy life expectancy at birth for men in Doncaster is no longer significantly worse than the national rate. Healthy life expectancy is 61.8 years compared to the England rate of 63.4 yrs. The average difference between England and Doncaster has been around 4.7 years. The difference in 2015-17 (latest data) is now 1.6 years. Further work may enable us to understand what has caused this change.

7.3.2. Healthy life expectancy in women has remained significantly worse than the national average. The latest data show a difference between Doncaster women and England of 2.7 years.

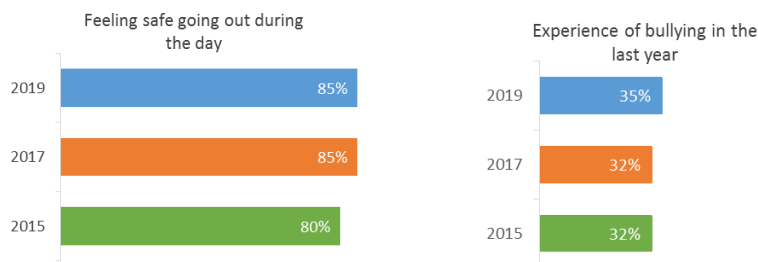


## 8. Starting well

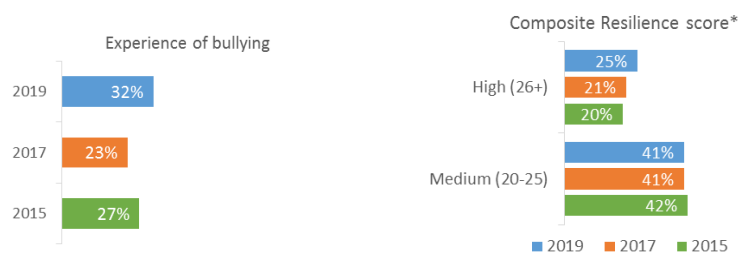
### 8.1. Pupil Lifestyle Survey

8.1.1. The Pupil Life Style Survey (PLS) is a Doncaster-wide survey carried out in both primary and secondary school aged children. The survey covers a wide variety of health and wellbeing topics that affect children, and provides useful data to show the impact of strategies in place and to inform future planning. The survey was commissioned by Doncaster's Public Health team in 2015, 2017 and again in 2019. The survey provides data on a range of different aspects of health and wellbeing in young people, including mental health. The survey concentrates on pupils in year 4 and year 8.

8.1.2. Among primary school children the numbers of primary school children who report 'feeling safe going out during the day' has increase to 85%, however the numbers of children who experienced bullying has increased to 35%.



8.1.3. Amongst secondary school pupils the experience of bullying was reported to have increased. But the proportion reporting high resilience score had increased to 25% from 20% in 2015.

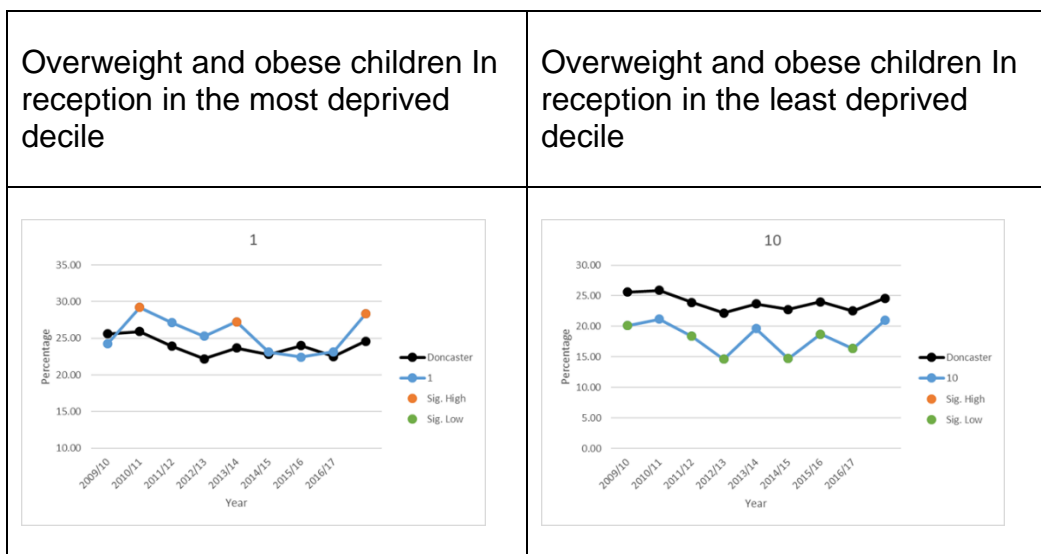


## 8.2. Childhood obesity

8.2.1. The following insights have only recently become available after a more detailed analysis of the 'National Childhood Measurement Programme'. The programme measures the heights and weights of All children in Reception and Year 6 in Doncaster Schools.

8.2.2. The prevalence of children who are overweight or obese has slightly increased over the last 5 years. The latest published data shows that the rate of Overweight and obese children in reception was significantly higher than the national rate (Doncaster: 25.5%; England: 22.4%).

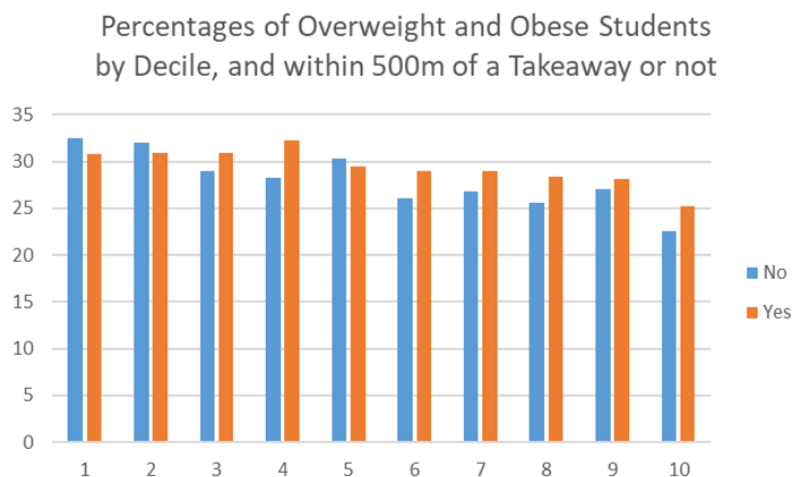
8.2.3. Reception: More deprived areas have higher rates of overweight children, however these equalities have narrowed since 2014/15.



8.2.4. Year 6: Prevalence appears to be increasing in the more deprived areas but remains consistently below average in the least deprived areas.



8.2.5. A further analysis looked at the relationship between overweight and obese children and takeaway food outlets. For reception year children the presence of a takeaway appears to make no difference to the likelihood of being overweight or obese. Among year 6 the best predictor for being overweight is deprivation, however among children in the least deprived parts of the borough they were more likely to be overweight or obese if they were living within 500m of a takeaway.



### 8.3. Adverse Childhood Experiences

8.3.1. Adverse Childhood Experiences (ACEs) are stressful events occurring in childhood, such as witnessing domestic violence or having a parent with a mental health condition.

8.3.2. There is a ‘a strong graded relationship between the breadth of exposure to abuse or household dysfunction during childhood and multiple risk factors for several of the leading causes of death in adults’.

8.3.3. These findings reflect the groundwork undertaken to prepare for a more detailed project next year.

8.3.3.1. Doncaster has significantly higher incidences of children experiencing alcohol misuse, drug misuse, neglect, and sexual abuse than both regional and statistical neighbours.

8.3.3.2. After Sheffield, Doncaster has the highest numbers of incidences of domestic violence, mental health, and emotional abuse than regional and statistical neighbours.

8.3.3.3. In terms of total number of episodes of abuse or neglect, Doncaster is ranked the highest compared to regional and statistical neighbours.

## **9. Inequalities**

### **9.1. Locality profiles**

- 9.1.1. There is an increasing focus on local intelligence and next year detailed geographical profiles are going to be produced.
- 9.1.2. This year a set of Locality profiles were produced, one for each of the 4 localities. The following are some of the key findings:
  - 9.1.2.1. Central: this has the most deprived residents, the highest crime rates. It also contains proportionally more young people than the other localities.
  - 9.1.2.2. East: This is the least deprived locality and has the lowest levels of smoking and the lowest levels of mental health contacts and IAPT referrals.
  - 9.1.2.3. North: This area has the lowest A&E attendances but also the highest prevalence for smoking and adult obesity (data from GP practices).
  - 9.1.2.4. South: The South has proportionally more middle aged and elderly people but also the lowest rates of social care contacts.

### **9.2. Workforce data**

- 9.2.1. The following tentative findings have come from a piece of work looking at how to describe population needs and service utilisation in relation to the geographical distribution of staff resources. The work is under the auspices of Doncaster Place Plan.
- 9.2.2. The analysis was split along the lines of the life course: Starting well, Living well, Ageing well.
- 9.2.3. The results currently look like this for the working age population. The higher the weighted population the higher the need or the utilisation of that population. Central locality has around 26% of the population of Doncaster (20-64 years) but could represent 38% of the health and social care needs. Central accounts for 29% of the service utilisation.
- 9.2.4. Below is an example of the initial results from this project.

| Need        |            |       |              |       |
|-------------|------------|-------|--------------|-------|
|             | Population | %     | Weighted pop | %     |
| Central     | 46409      | 26.2  | 67610        | 38.1  |
| East        | 39940      | 22.5  | 34064        | 19.2  |
| North       | 40769      | 23.0  | 33402        | 18.8  |
| South       | 50206      | 28.3  | 42248        | 23.8  |
| Total       | 177324     | 100.0 | 177324       | 100.0 |
|             |            |       |              |       |
| Utilisation |            |       |              |       |
|             | Population | %     | Weighted pop | %     |
| Central     | 46409      | 26.2  | 51327        | 28.9  |
| East        | 39940      | 22.5  | 38622        | 21.8  |
| North       | 40769      | 23.0  | 38135        | 21.5  |
| South       | 50206      | 28.3  | 49240        | 27.8  |
| Total       | 177324     | 100.0 | 177324       | 100.0 |

### 9.3. Learning Disabilities

9.3.1. A comprehensive data pack to support the development of the new Learning Disability strategy was produced this year this included a review of all of the routinely available data. These data were presented according to DGT themes (Learning, Working, Living, Caring)

9.3.2. The data revealed the following issues:

9.3.2.1. Learning - Overall absence rates and fixed term exclusions for SEND children and young people are significantly higher than non - SEND children and young people. Educational attainment at 19 years old is significantly worse than the national average for SEND support.

9.3.2.2. Working - There are 100 people with a learning disability in paid employment out of a cohort of 671, during quarter 1 2018/19. This is better than regional and national performance.

9.3.2.3. Living - Between May 2014 and June 2018 there have been 9 recorded installations of Assistive Technology by DMBC HEART Team, supporting people with LD to live independently, with the recorded age range predominantly above 56 years old.

9.3.2.4. Caring - Health checks and cancer screening are very low within the LD population.

9.3.3. 'Speakup' and 'Inclusion North' were commissioned to run engagement sessions with members of the LD community. The following were the key findings in relation to the health system.

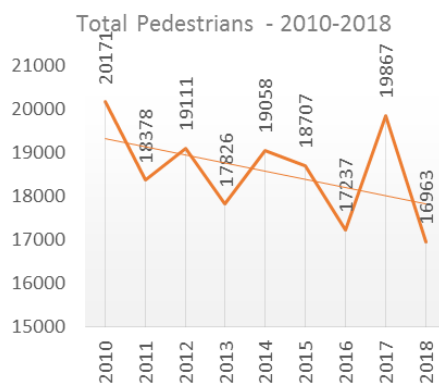
- "Need good databases of information for individuals, requesting past history and medical details"
- "There needs to be a clear consistent approach to information, all GP practices should help people who cannot use the GP screens"

- “All nurses to have experience of dealing with people with learning disabilities and autism”
- “Social workers should be told straight away that someone has been diagnosed”
- “Need more joined up care, putting the pieces of the jigsaw together, parent, GP and Health Professionals”
- “People need to know about annual health checks some people know, some people don’t”
- “CAMHs –we need a diagnosis not a label, the diagnosis is key to accessing services”

## 10. Living well

### 10.1. Active travel

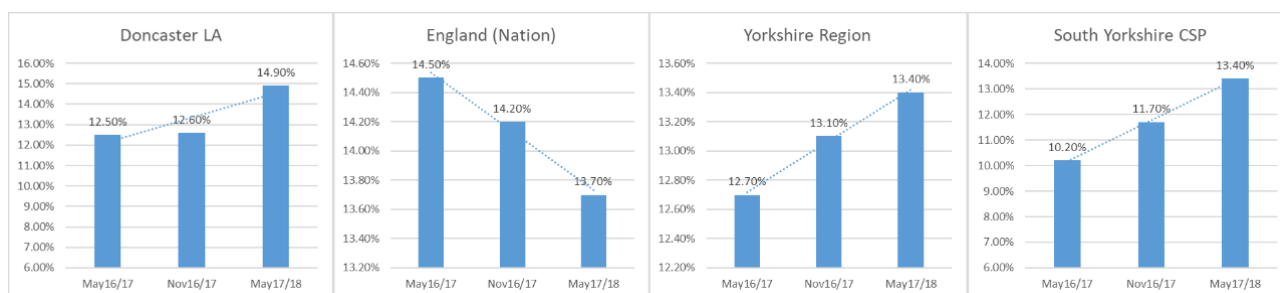
10.1.1. Cordon counts based around the town centre have found that since 2002 the numbers of pedestrian have been gradually increasing but since 2010 numbers have been falling.



10.1.2. Cycling is increasing in Doncaster both as a sporting/leisure pursuit and as a general form of travel. This reflects increases in Yorkshire as a whole. In England the rate has been falling. The latest Doncaster rate is 14.9%, this is the higher than the Yorkshire region average.



## Cycling for Leisure and Sport: participation at least twice in the last 28 days



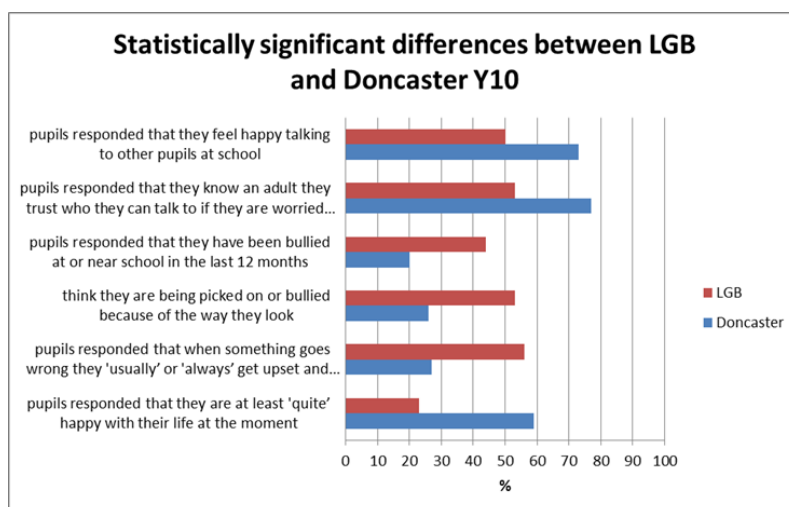
## 10.2. Mental Health Needs Assessment

10.2.1. The 'Mental Health Needs Assessment (2019)' is currently collecting data in relation to mental health across the life course. The report is currently being written. The following are some examples of the insights the report is revealing.

10.2.2. Doncaster people report lower levels of Wellbeing compared to the national average. People who report lower levels of personal wellbeing are also more likely to report poor health and are more likely to have a long term illness or disability.

|                             | Doncaster | England |
|-----------------------------|-----------|---------|
| Low life satisfaction score | 6.8%      | 4.4%    |
| Low worthwhile score        | 5.8%      | 3.6%    |
| Low happiness score         | 12.3%     | 8.2%    |
| High levels of anxiety      | 21.6%     | 20%     |

10.2.3. Data from the Doncaster Pupil Lifestyle Survey (year 10 cohort) has revealed that LGB pupils in Doncaster report higher levels of bullying, found it more difficult to find people they feel confident to talk to, and reported lower levels of happiness.



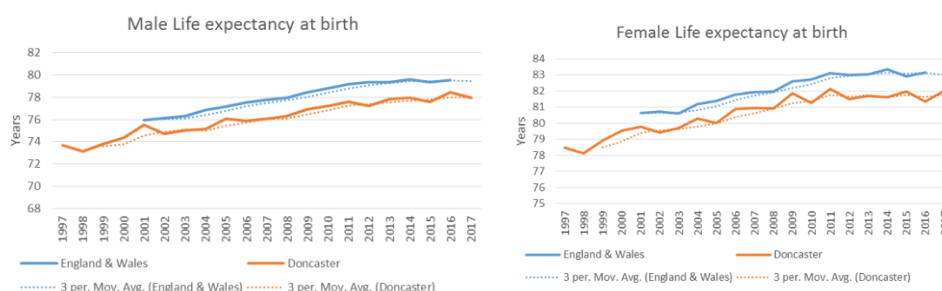
# 11. Ageing well

## 11.1. Life expectancy and inequalities

11.1.1. Life expectancy at birth in the UK between 2001 and 2005 improved, on average around 0.34 a year in men and around 0.25 a year in women.

11.1.2. Between 2012 and 2017 the average improvement in life expectancy at birth in men was 0.02 years and in women 0.004 years. This appears to be a significant slow-down in the rate of improvement.

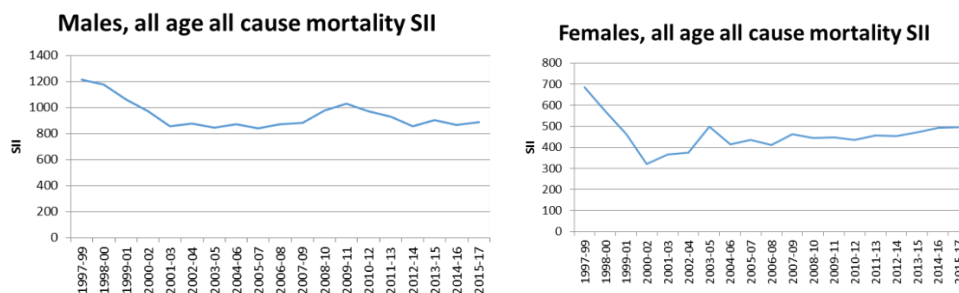
11.1.3. Life expectancy in Doncaster has largely reflected the changes that have occurred nationally.



11.1.4. In Doncaster amongst men during the years 2006 to 2011 life expectancy improved on average by 1/4 of a year each year. Between 2012 and 2017 it improved by 0.06 of a year.

11.1.5. Amongst women between 2006 and 2011 life expectancy improved by more than 1/3rd of a year each year. Between 2012 and 2017 this declined to -0.02 years.

11.1.6. Inequalities within Doncaster are measured using the Slope Index of Inequality (SII). The higher the score the greater levels of inequality within the borough. Initial Improvements achieved in the late 1990s have largely ceased. In the case of women the inequalities have been increasing.



## **12. Website**

- 12.1. A website is now exists and holds a repository of past JSNA and related reports. The website will be formally launched soon.

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# Doncaster Council

**Doncaster  
Health and Wellbeing Board**

**Agenda Item No. 9  
Date: 13 June 2019**

**Subject:** JSNA Work Plan 2019/20

**Presented by:** Jon Gleek & Laurie Mott

| <b>Purpose of bringing this report to the Board</b> |   |
|-----------------------------------------------------|---|
| Decision                                            |   |
| Recommendation to Full Council                      |   |
| Endorsement                                         | ✓ |
| Information                                         |   |

| <b>Implications</b>              |                                      | <b>Applicable Yes/No</b> |
|----------------------------------|--------------------------------------|--------------------------|
| DHWB Strategy Areas of Focus     | Substance Misuse (Drugs and Alcohol) |                          |
|                                  | Mental Health                        |                          |
|                                  | Dementia                             |                          |
|                                  | Obesity                              |                          |
|                                  | Children and Families                |                          |
| Joint Strategic Needs Assessment |                                      | ✓                        |
| Finance                          |                                      |                          |
| Legal                            |                                      |                          |
| Equalities                       |                                      | ✓                        |
| Other Implications (please list) |                                      |                          |

| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                          |
|----------------------------------------------------------------------------------------------------------|
| This is a plan for the next JSNA. The plan includes 11 work packages to be delivered over the next year. |

| <b>Recommendation</b>                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Board is asked to:-<br><br>Agree the JSNA work programme and agree that the Director of Public health has the delegated authority to make modifications to the work as changing circumstances demand. |

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# Doncaster Council

## Report

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**Agenda Item No. 9**  
**Date: 13<sup>th</sup> June 2019**

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

#### **2019/20 JSNA WORK PLAN**

#### **EXECUTIVE SUMMARY**

1. This is a plan for the next JSNA. The plan includes 11 work packages to be delivered over the next year.

#### **EXEMPT REPORT**

2. N/A

#### **RECOMMENDATIONS**

3. Agree the JSNA work programme and agree that The Director of Public health has the delegated authority to make modifications to the work as changing circumstance demand.

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

4. Improved health and social care intelligence to inform the Health and Wellbeing Strategy and strategic commissioning.

#### **BACKGROUND**

5. The JSNA is an assessment of the health, wellbeing and social care needs of Doncaster and its communities. The current form of the JSNA is a set of individual work packages to be delivered over the next year. The findings of these packages are then summarised in the annual State of Health report. Last year was the first year of this new style of JSNA. An assessment of the needs of people with Learning Disabilities has been completed and will inform the new LD strategy currently being written. Data from the Pupil lifestyle surveys have provided valuable insights into the health and wellbeing of both primary and secondary school children in the borough. Changes in life expectancy and health life expectancy have been analysed and provided new understanding of the changes in health inequalities within Doncaster.

[www.doncaster.gov.uk](http://www.doncaster.gov.uk)

## **OPTIONS CONSIDERED**

6. The following work packages are proposed for the 2019/20 period.
- a. An assessment of the prevalence and distribution of multi-morbidity. Multi-morbidity is when people have 2 or more long term conditions at the same time. It is associated with early mortality and complex challenges for integrated health and social care services.
  - b. Older People (Ageing well) needs assessment. An assessment of the needs and services that will be required in the light of Doncaster's rapidly ageing population.
  - c. Veteran's Needs Assessment. This is a proposed refresh and update of the 2015 needs assessment.
  - d. Adverse Childhood experiences (ACE). ACEs are stressful events occurring in childhood, such as witnessing domestic violence or having a parent with a mental health condition. While ACEs are found across the population, there is more risk of experiencing ACEs in areas of higher deprivation. ACEs have been found to have lifelong impacts on behaviour; when children are exposed to adverse and stressful experiences, it can have long-lasting impact on their ability to think, interact with others and on their learning.
  - e. Alcohol Needs Assessment. An assessment of the prevalence of Alcohol related conditions and the changes in the usage of the services available to address the issues created by alcohol usage.
  - f. Complex Lives. An evaluation of the effects of the complex lives programme on the clients of this service offer.
  - g. Geographical profiles. To support the increasing focus on locality based joint commissioning and service planning, a product will be developed to provide data and intelligence at community, electoral ward and locality levels.
  - h. Outcomes framework. Continue to provide performance data in relation to the Health and Wellbeing Outcomes Framework.
  - i. Demand management in adult social care. This an ongoing work package from last year. The analysis will provide adult social care with improved intelligence in relation to demand for its services.
  - j. Get Doncaster Moving. Continue to improve and expand intelligence and analysis in relation to the Get Doncaster Moving Programme.
  - k. State of Health. A summary report of the findings and insights gained from the work packages outlines above.

It is also proposed that the Director of Public Health have delegated responsibility to modify this programme in the light of changes in priorities that will happen in the course of the year.

## **REASONS FOR RECOMMENDED OPTION**

7. N/A

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

- 8.



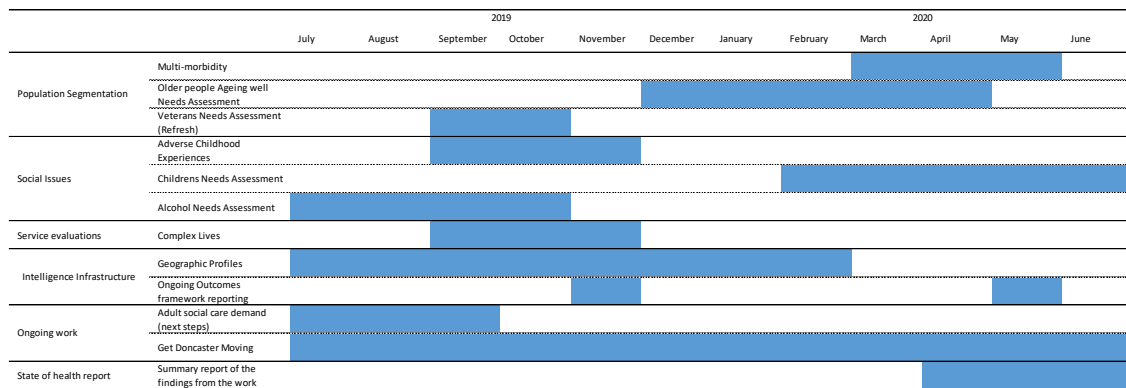
|  | <b>Outcomes</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Implications</b>                                                                                                                                   |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>                                                                                                                                                                                                       |                                                                                                                                                       |
|  | <p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul> |                                                                                                                                                       |
|  | <p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in Doncaster Schools that are good or better</li> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>                                                                                                                      |                                                                                                                                                       |
|  | <p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>                                                                                                                                                                                              | <p>The insights gathered from the packages outlines above will improve the commissioning and service development of both the NHS and social care.</p> |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|  | <p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul> |  |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

## BACKGROUND PAPERS

### 9. Copy of the proposed time-lines and work packages.

JSNA workplan 2018/19



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**Rupert Suckling, Director of Public Health**



## Doncaster Council

**Doncaster  
Health and Wellbeing Board**

**Date: 13/06/19**

**Subject:** Substance Misuse Strategic Update 2019 and Aspire Perspective

**Presented by:** Helen Conroy, Public Health Specialist, DMBC/Stuart Green, Aspire Drug & Alcohol Services Manager/Tim Young, CEO – Alcohol & Drug Service

| <b>Purpose of bringing this report to the Board</b> |   |
|-----------------------------------------------------|---|
| Decision                                            |   |
| Recommendation to Full Council                      |   |
| Endorsement                                         |   |
| Information                                         | X |

| <b>Implications</b>              |                                      | <b>Applicable Yes/No</b> |
|----------------------------------|--------------------------------------|--------------------------|
| DHWB Strategy Areas of Focus     | Substance Misuse (Drugs and Alcohol) | X                        |
|                                  | Mental Health                        |                          |
|                                  | Dementia                             |                          |
|                                  | Obesity                              |                          |
|                                  | Children and Families                |                          |
| Joint Strategic Needs Assessment |                                      |                          |
| Finance                          |                                      |                          |
| Legal                            |                                      |                          |
| Equalities                       |                                      |                          |
| Other Implications (please list) |                                      |                          |

| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| An understanding of local needs will assist in setting strategic priorities and in developing operational service responses relative to the needs of local people. |

| <b>Recommendations</b>                                                                              |
|-----------------------------------------------------------------------------------------------------|
| The Board is asked to note the information contained in the Substance Misuse strategic update 2019. |

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## Doncaster Council

**Doncaster Health and Wellbeing Board**

**Date:** 13 June 2019

**Subject:** Tobacco Control Update

**Presented by:** Dr Victor Joseph, Public Health Consultant/  
Anna Brook, Public Health Registrar

| <b>Purpose of bringing this report to the Board</b> |   |
|-----------------------------------------------------|---|
| Decision                                            | X |
| Recommendation to Full Council                      | X |
| Endorsement                                         | X |
| Information                                         | X |

| <b>Implications</b>              |                                      | <b>Applicable Yes/No</b> |
|----------------------------------|--------------------------------------|--------------------------|
| DHWB Strategy Areas of Focus     | Substance Misuse (Drugs and Alcohol) | Yes                      |
|                                  | Mental Health                        | Yes                      |
|                                  | Dementia                             |                          |
|                                  | Obesity                              |                          |
|                                  | Children and Families                | Yes                      |
| Joint Strategic Needs Assessment |                                      | Yes                      |
| Finance                          |                                      | Yes                      |
| Legal                            |                                      | No                       |
| Equalities                       |                                      | Yes                      |
| Other Implications (please list) |                                      |                          |

| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Reviewing our approach to tobacco control, re-balancing towards prevention and taking up some big opportunities so that we can improve our performance and reduce the ill-health, death and inequalities from smoking. |

## Recommendations

The Board is asked to:-

- **Note the report** including its appendices:
  - The CLear Peer Assessment
  - The proposed response to this
  - The Smoke-free Doncaster consultation
  - The Smoke-free Doncaster proposal
  - The latest dashboard
  - The latest strategic objectives and action plan
- **Discuss and agree any amendments to the priorities**
- **DECISION: Endorse the recommendations in the report** (subject to amendments discussed), **including sign-off by all organisations**. These are summarised below:
  - CLear:
    - Publish our report
    - prioritise some of the recommendations for immediate action
    - agree all the responses to the recommendations and work through them over time
    - repeat our self-assessment in 12 months' time to track how your score changes
    - consider commissioning a CLear peer re-assessment in 2022
  - Priorities:
    - Agree the priorities listed (subject to amendments discussed and agreed in the meeting)
- **RECOMMENDATION TO CABINET / FULL COUNCIL**
  - Smoke-free
    - Agree the Smoke-free Doncaster proposal



# Doncaster Council

## Report

---

Agenda Item No. 11  
Date: 13 June 2019

To the Chair and Members of the HEALTH & WELLBEING BOARD

### TOBACCO CONTROL UPDATE

#### EXECUTIVE SUMMARY

1. This report summarises:
  - Our current position with regard to Tobacco Control
    - Performance
    - Strategy & Action Plan
  - Tobacco Control Review:
    - The reasons for reviewing our Tobacco Control Activity
    - The review process we have undertaken so far
    - The proposed next steps
  - Smoke-free Doncaster
    - The consultation work undertaken
    - The draft proposal for discussion
  - The priorities recommended

#### RECOMMENDATIONS

2. That the Health & Wellbeing Board:
  - **Note the report** including its appendices:
    - The CLear Peer Assessment
    - The proposed response to this
    - The Smoke-free Doncaster consultation
    - The Smoke-free Doncaster proposal
    - The latest dashboard
    - The latest strategic objectives and action plan
  - **Discuss and agree any amendments to the priorities**
  - **DECISION: Endorse the recommendations** in the report (subject to amendments discussed), including sign-off by all organisations. These are summarised below:
    - CLear:
      - Publish the report on the council website

[www.doncaster.gov.uk](http://www.doncaster.gov.uk)

- prioritise some of the recommendations for immediate action
  - agree all the responses to the recommendations and work through them over time
  - repeat our self-assessment in 12 months' time to track how our score changes
  - consider commissioning a CLearR peer re-assessment in 2022
- Priorities:
    - Agree the priorities listed (subject to amendments discussed and agreed in the meeting)
- **RECOMMENDATION TO CABINET / FULL COUNCIL**
    - Smoke-free
      - Agree the Smoke-free Doncaster proposal

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

3. Reviewing our approach to tobacco control, re-balancing towards prevention and taking up some big opportunities so that we can improve our performance and reduce the ill-health, death and inequalities from smoking.

## BACKGROUND

### 4.1 Our current position

#### 4.1.1 Performance

Performance is currently monitored through the Tobacco Control dashboard. This is attached as a separate document. The latest performance against our headline goals is shown below. As outlined in this report, we plan to change these targets, which are no longer realistic, so that we can still achieve them but over a longer timeframe.

| Goal                                                                                                                       | Current performance towards goal                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Reduce the prevalence of 15 year olds who regularly smoke to 3.0% <b>by 2022</b>                                           | We don't have trend data for this measure. Latest data is 8.9% in 2014/15                                                                      |
| Reduce smoking prevalence amongst adults in Doncaster to 10% or less <b>by 2022</b>                                        | 19.7% of the Doncaster population smoke (CI: 17.1-22.4) <sup>1</sup> , this is the fourth highest within Yorks & Humber                        |
| Reduce the inequality gap in smoking prevalence between those in routine and manual occupations and the general population | 31.6% prevalence in routine & manual workers in 2017 It had been improving, but in the last monitoring periods the gap appears to have widened |

#### 4.1.2 Strategy & Action Plan

Our latest Strategy & Action Plans are monitored through the Tobacco Control Alliance, which meets quarterly.

The approach is based on evidence about effective approaches to Tobacco Control, namely MPOWER. The plan was also updated to reflect the Tobacco Control Plan for England (2017). This is a whole-systems approach developed by

<sup>1</sup> PHE Fingertips, 2017 data, accessed October 2018



the World Health Organisation to recognise the importance of taking action on a number of fronts. Countries and states that have implemented comprehensive tobacco control programmes i.e. the MPOWER model, have the lowest smoking prevalence in the world e.g. USA, specifically New York 13.9% (2014) and California 11.6% (2014) and Australia 14% in 2016.

The strands of MPOWER are:

- Monitor tobacco use and prevention policies
- Protect people from exposure to second-hand tobacco smoke
- Offer help to quit tobacco use
- Warn about the dangers of tobacco
- Enforce bans on tobacco advertising, promotion and sponsorship
- Raise taxes on tobacco products

These have been adapted for the local context. At present, the majority (c.80-90%) of our resources are spent on supporting people to quit smoking, with significantly less spent on prevention activities such as communications and social norms campaigns.

## **4.2 Reviewing our Tobacco Control Activity**

### **4.2.1 Reasons for review**

We decided to review our overall approach because:

- Smoking is still the leading cause of preventable death: each year an estimated 675 people die early in Doncaster due to smoking – an average of 13 people per week<sup>2</sup>.
- Smoking prevalence in Doncaster is flat-lining: after dropping steadily until 2015, for the last three years, smoking prevalence has stayed around 19.5% - in other places smoking has continued to fall<sup>3</sup>.
- Health Inequalities are widening: in 2017, prevalence was 31.6% for routine and manual workers, which was an increase on 2016<sup>4</sup>.
- Our performance is not on-track to hit our goals – and these goals have now become unrealistic.
- Our strategy does not have interim targets.
- Our action plan does not clearly link to our performance monitoring.
- We wanted to take advantage of some opportunities:
  - To improve accountable leadership: this would include consideration of how to ensure the strategy is owned by the partnership as a whole
  - Prevention: Breathe2025 and how we can stop people from starting smoking, especially children and young people, this would incorporate social norms and communication work and smoke-free agenda
  - QUIT programme and nicotine dependency treatment in secondary care.

### **4.2.2 The review process so far: CLear assessment**

We undertook a CLear assessment as a Tobacco Control Alliance. CLear is an improvement tool which enables a comprehensive review of local tobacco control

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<sup>2</sup> CLear Peer Assessment report for Doncaster 2019

<sup>3</sup> PHE Fingertips, 2017 data, accessed October 2018

<sup>4</sup> PHE Fingertips, 2017 data, accessed October 2018

efforts against the latest evidence-based practice. It has been designed for local authorities, tobacco alliances, health and wellbeing boards and NHS partner organisations. It includes various self-assessment tools as well as peer assessment.

We undertook a self-assessment followed by a peer assessment.

The Peer Assessment included:

- a facilitated day enabling partners to consider specific aspects of the CLeaR assessment
- an independent report to ratify our self-assessed scores and identify local strengths and areas that will benefit from further development
- the opportunity to learn from practice elsewhere
- a list of resources and further information relevant to the assessment
- the right to use the CLeaR logo, a recognized quality standard, on local promotional material.

The CLeaR peer-assessment report is attached. It identifies local strengths and areas for development. This will help identify further opportunities to follow the best available practice, deliver value for money and provide practical suggestions to move local action on tobacco control forward.

#### **4.2.3 Proposed next steps**

Responses to the recommendations from the CLeaR assessment have been considered by the Tobacco Control Alliance. These are attached.

It is proposed that we:

- prioritise some of the recommendations for immediate action (see end)
- agree all the responses to the recommendations and work through them over time
- repeat our self-assessment in 12 months' time to track how your score changes
- consider commissioning a CLeaR peer re-assessment in 2022

### **4.3 Smoke-free Doncaster**

#### **4.3.1 Consultation**

Doncaster's Smoke-free task group ran a consultation around people's attitudes towards smoking and smoking in public places. The consultation was launched on the 17th November 2018 at the "Count Down to Christmas" event, continuing into the remainder of November and closing in late December 2018.

Methods of consultation included:

- Inviting attendees at "Countdown to Christmas" to fill out the questionnaire (either on-line or a paper copy).
- Face to face consultations in eight different locations, supported by the Public Health Team.
- Questionnaires were also handed out to members of the community throughout Doncaster by the Stronger Community Officers.
- The online questionnaire was developed using Survey Monkey and was available to complete from week commencing 19 November 2018 for 4 weeks.

The full findings are available if requested. In summary:

- The majority of participants agreed with the proposal for designated voluntary smoke-free spaces especially areas where there are children present.

- People who smoke and vape were generally positive about the proposal. Nevertheless both smokers and non-smokers believe that there should be an alternative location for people who smoke or vape to go to either in the town centre/public places or at events.
- Regardless of this there were people - both smokers and non-smokers - who thought that a ban in certain places would stop people from attending events and going into Doncaster so therefore effecting businesses in the town.

#### **4.3.2 Proposal**

The proposal is attached. It is based on experience from other local authorities as well as academic evidence. It is proposed that we:

- identify a co-ordinating resource for this work
- develop the communications approach
- launch and roll-out as outlined in the plan.

#### **4.4 Recommended priorities**

The recommended priorities for immediate action are:

- Leadership & Partnership
  - Review and revitalise the Tobacco Control Alliance
  - Connect Tobacco Control clearly into HWB & Team Doncaster agendas
- Strategy & Performance
  - Update overall strategy (as an alliance) including goals and interim targets
  - Maintain broad MPOWER approach but review the relative balance between prevention / treatment
- Communications
  - Develop an Alliance-wide communications approach and test it with Smoke-free Doncaster proposals

### **OPTIONS CONSIDERED**

5. Other options were:
  - To continue as we were without review. This would go against our priorities to improve the health and wellbeing of Doncaster because we can see that our current approach is no longer achieving the reductions in smoking prevalence that we should be seeing.
  - To take a different set of priorities or focus. Specific options for each subset of activity are outlined in each of the appendices and priorities will be discussed by the Health & Wellbeing board before decisions are made.

### **REASONS FOR RECOMMENDED OPTION**

6. Based on current research evidence, experience and consultation with stakeholders, this gives us the best opportunity to reduce smoking prevalence. We will continue to review and make improvements as we go.

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

7.

|  | <b>Outcomes</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Implications</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>                                                                                                                                                                                                       | <p>If the wider impacts of tobacco-related harm are considered, it is estimated that each year smoking costs Doncaster £50.7m in lost productivity.</p> <p>In addition, the local population in Doncaster spend £99.5m on tobacco related products. (Approximately £2,050 per smoker) As smoking is closely associated with economic deprivation this money will be disproportionately drawn from Doncaster's poorest citizens and communities. If this money was spent on other things instead of smoking the effect would be to create jobs in the local economy.</p> <p>Reducing smoking prevalence will support Doncaster Working ambitions through reducing this lost productivity.</p> |
|  | <p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul> | <p>It is estimated that South Yorkshire Fire and Rescue Service will attend 11 smoking related house fires with a cost to the Borough of around £2m</p> <p>Smokers in Doncaster consume around 533,490m cigarettes each day resulting in approximately 79kg of waste daily.</p> <p>Reducing smoking will contribute to a clean vibrant Doncaster.</p>                                                                                                                                                                                                                                                                                                                                        |
|  | <p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in</li> </ul>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p>Doncaster Schools that are good or better</p> <ul style="list-style-type: none"> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|  | <p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>                                                                                                                                                                                                 | <p>Smoking is still the leading cause of preventable death: each year an estimated 675 people die early in Doncaster due to smoking – an average of 13 people per week.</p> <p>Health Inequalities are widening: in 2017, prevalence was 31.6% for routine and manual workers, which was an increase on 2016.</p> <p>If the wider impacts of tobacco-related harm are considered, it is estimated that each year smoking costs Doncaster £78m of which costs to the NHS contribute approximately £14.7m and Social Care £10.5m (of which £5.7m is attributable to the local authority social care budget).</p> <p>Reducing smoking prevalence will contribute to improved healthy life expectancy, giving children a great start in life and reducing health inequalities.</p> |
|  | <p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

## RISKS AND ASSUMPTIONS

8. Doing nothing will see the smoking prevalence in Doncaster continuing to plateau, and possibly even increase. Smoking is one of the major public health challenges, including locally in Doncaster. A risk management log will be developed for this project. All risks are considered low, especially when

compared with the risk of not taking action.

## **LEGAL IMPLICATIONS**

9. Not sought for this report.

## **FINANCIAL IMPLICATIONS**

10. Not sought for this report.

## **HUMAN RESOURCES IMPLICATIONS**

11. Not sought for this report.

## **TECHNOLOGY IMPLICATIONS**

12. Not sought for this report.

## **HEALTH IMPLICATIONS [Officer Initials: VJ Date: 28<sup>th</sup> May 2019]**

13. Smoking is the single largest cause of preventable deaths. The proposal outlined in this report is aimed at addressing smoking prevalence in Doncaster, drawing on lessons from peer assessment carried out in March 2019; and a wide range of initiatives from public consultation on smoke-free environments. If implemented, the actions are likely to reduce smoking prevalence, thus improving the health of the people of Doncaster.

## **EQUALITY IMPLICATIONS [Officer Initials: VJ Date: 28<sup>th</sup> May 2019]**

14. Evidence shows that the impact of smoking is disproportionately high among people from low socio-economic backgrounds. The challenge of smoking can be found across age groups, sexes, race and disability although rates tend to vary from one group to the other. For example, adults with mental health illnesses have three times the smoking prevalence of adults in the general population.

## **CONSULTATION**

15. The Tobacco Control Alliance has been consulted and contributed to the proposals. Consultation with the public has been undertaken for the SmokeFree Doncaster proposal and the findings are summarised in the background section above.

## **BACKGROUND PAPERS**

16.  
Appendix 1 Tobacco Control Dashboard January 2019  
Appendix 2 Doncaster Tobacco CLear Final  
Appendix 3 Responding to the opportunities for development identified through CLear  
Appendix 4 Draft plan and proposal Smokefree Doncaster

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# Doncaster Tobacco Control Alliance Dashboard

| Prevalence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <h3 style="text-align: center;">Mothers smoking status at delivery</h3> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Year</th> <th>Quarter</th> <th>Doncaster (%)</th> <th>England (%)</th> </tr> </thead> <tbody> <tr><td rowspan="4">15/16</td><td>Q1</td><td>15.60%</td><td>10.70%</td></tr> <tr><td>Q2</td><td>11.60%</td><td>10.50%</td></tr> <tr><td>Q3</td><td>11.20%</td><td>10.60%</td></tr> <tr><td>Q4</td><td>13.10%</td><td>10.80%</td></tr> <tr><td rowspan="4">16/17</td><td>Q1</td><td>12.70%</td><td>10.20%</td></tr> <tr><td>Q2</td><td>10.90%</td><td>10.40%</td></tr> <tr><td>Q3</td><td>11.00%</td><td>10.60%</td></tr> <tr><td>Q4</td><td>12.80%</td><td>10.80%</td></tr> <tr><td rowspan="4">17/18</td><td>Q1</td><td>14.40%</td><td>10.80%</td></tr> <tr><td>Q2</td><td>15.90%</td><td>11.00%</td></tr> <tr><td>Q3</td><td>15.00%</td><td>10.80%</td></tr> <tr><td>Q4</td><td>15.60%</td><td>10.80%</td></tr> </tbody> </table> | Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Quarter        | Doncaster (%) | England (%)    | 15/16    | Q1       | 15.60% | 10.70%   | Q2       | 11.60%   | 10.50%   | Q3       | 11.20% | 10.60%   | Q4       | 13.10%   | 10.80%   | 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Q1   | 12.70%        | 10.20%      | Q2   | 10.90%   | 10.40%   | Q3   | 11.00%   | 10.60%   | Q4   | 12.80%   | 10.80%                                                                                                                                                                                                                                                    | 17/18 | Q1       | 14.40% | 10.80% | Q2       | 15.90% | 11.00% | Q3       | 15.00% | 10.80% | Q4       | 15.60% | 10.80% | <h3 style="text-align: center;">Smoking prevalence 18+ yrs</h3> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Year</th> <th>Doncaster (%)</th> <th>England (%)</th> </tr> </thead> <tbody> <tr><td>2010</td><td>26.50%</td><td>20.00%</td></tr> <tr><td>2011</td><td>27.50%</td><td>20.00%</td></tr> <tr><td>2012</td><td>25.30%</td><td>19.00%</td></tr> <tr><td>2013</td><td>21.40%</td><td>18.00%</td></tr> <tr><td>2014</td><td>22.70%</td><td>17.00%</td></tr> <tr><td>2015</td><td>19.60%</td><td>16.00%</td></tr> <tr><td>2016</td><td>19.80%</td><td>15.00%</td></tr> <tr><td>2017</td><td>19.70%</td><td>14.00%</td></tr> </tbody> </table> | Year | Doncaster (%) | England (%) | 2010 | 26.50% | 20.00% | 2011 | 27.50% | 20.00% | 2012 | 25.30% | 19.00% | 2013 | 21.40% | 18.00% | 2014 | 22.70% | 17.00% | 2015 | 19.60% | 16.00% | 2016 | 19.80% | 15.00% | 2017 | 19.70% | 14.00% |
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| <h3 style="text-align: center;">Mothers smoking status at delivery - Women know to be smokers at the time of delivery as a % of all maternities. Latest data available March 2018.</h3>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <h3 style="text-align: center;">Smoking prevalence 18+ yrs - % of current smokers in the Household Survey for England. Latest data available June 2017.</h3>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| <h3 style="text-align: center;">All smokers</h3> <h4 style="text-align: center;">Set quit date</h4> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Quarter</th> <th>Set quit date</th> </tr> </thead> <tbody> <tr><td>Q3 16/17</td><td>~450</td></tr> <tr><td>Q4 16/17</td><td>~700</td></tr> <tr><td>Q1 17/18</td><td>~700</td></tr> <tr><td>Q2 17/18</td><td>~650</td></tr> <tr><td>Q3 17/18</td><td>~550</td></tr> <tr><td>Q4 17/18</td><td>~650</td></tr> <tr><td>Q1 18/19</td><td>~550</td></tr> <tr><td>Q2 18/19</td><td>~750</td></tr> </tbody> </table>                                                                                                                                                                                                                                 | Quarter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Set quit date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Q3 16/17       | ~450          | Q4 16/17       | ~700     | Q1 17/18 | ~700   | Q2 17/18 | ~650     | Q3 17/18 | ~550     | Q4 17/18 | ~650   | Q1 18/19 | ~550     | Q2 18/19 | ~750     | <h3 style="text-align: center;">Smoking prevalence R&amp;M 18+ yrs</h3> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Year</th> <th>Doncaster (%)</th> <th>England (%)</th> </tr> </thead> <tbody> <tr><td>2013</td><td>~30%</td><td>~28%</td></tr> <tr><td>2014</td><td>~32%</td><td>~28%</td></tr> <tr><td>2015</td><td>~28%</td><td>~26%</td></tr> <tr><td>2016</td><td>~28%</td><td>~26%</td></tr> <tr><td>2017</td><td>~32%</td><td>~26%</td></tr> </tbody> </table> | Year | Doncaster (%) | England (%) | 2013 | ~30%     | ~28%     | 2014 | ~32%     | ~28%     | 2015 | ~28%     | ~26%                                                                                                                                                                                                                                                      | 2016  | ~28%     | ~26%   | 2017   | ~32%     | ~26%   |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
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| Q3 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
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| Q1 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~700                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~650                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~550                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~650                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~550                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~750                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Doncaster (%)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | England (%)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| 2013                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ~30%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~28%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| 2014                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ~32%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~28%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| 2015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ~28%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~26%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| 2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ~28%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~26%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| 2017                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ~32%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~26%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| <h3 style="text-align: center;">Number of smokers successful quit</h3> <h4 style="text-align: center;">Number of clients successfully quit</h4> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Quarter</th> <th>No. Quitting</th> <th>% CO validated</th> </tr> </thead> <tbody> <tr><td>Q2 16/17</td><td>~300</td><td>~40%</td></tr> <tr><td>Q3 16/17</td><td>~300</td><td>~40%</td></tr> <tr><td>Q4 16/17</td><td>~450</td><td>~40%</td></tr> <tr><td>Q1 17/18</td><td>~400</td><td>~40%</td></tr> <tr><td>Q2 17/18</td><td>~350</td><td>~40%</td></tr> <tr><td>Q3 17/18</td><td>~300</td><td>~40%</td></tr> <tr><td>Q4 17/18</td><td>~400</td><td>~40%</td></tr> <tr><td>Q1 18/19</td><td>~300</td><td>~40%</td></tr> <tr><td>Q2 18/19</td><td>~450</td><td>~40%</td></tr> </tbody> </table> | Quarter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | No. Quitting                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | % CO validated | Q2 16/17      | ~300           | ~40%     | Q3 16/17 | ~300   | ~40%     | Q4 16/17 | ~450     | ~40%     | Q1 17/18 | ~400   | ~40%     | Q2 17/18 | ~350     | ~40%     | Q3 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ~300 | ~40%          | Q4 17/18    | ~400 | ~40%     | Q1 18/19 | ~300 | ~40%     | Q2 18/19 | ~450 | ~40%     | <h3 style="text-align: center;">Smoking prevalence Routine &amp; Manual 18+ yrs - % of current smokers in R&amp;M occupations in the Household Survey for England (sample of 1,500-1,800 per quarter in Doncaster). Latest data available June 2017.</h3> |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Quarter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | No. Quitting                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | % CO validated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~400                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~350                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~400                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Stop Smoking Service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <h3 style="text-align: center;">All clients</h3> <p>Total number of clients setting a quit date<br/>Source: date - Doncaster Stop Smoking Service, Quarterly Monitoring Form. Latest data available October 2018.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <h3 style="text-align: center;">Pregnant smokers</h3> <table border="1" style="width: 100%; font-size: small;"> <thead> <tr> <th>Quarter</th> <th>Set quit date</th> <th>% CO validated</th> </tr> </thead> <tbody> <tr><td>Q4 14/15</td><td>~85</td><td>~40%</td></tr> <tr><td>Q1 15/16</td><td>~35</td><td>~90%</td></tr> <tr><td>Q2 15/16</td><td>~45</td><td>~30%</td></tr> <tr><td>Q3 15/16</td><td>~25</td><td>~45%</td></tr> <tr><td>Q4 15/16</td><td>~35</td><td>~45%</td></tr> <tr><td>Q1 16/17</td><td>~65</td><td>~65%</td></tr> <tr><td>Q2 16/17</td><td>~30</td><td>~45%</td></tr> <tr><td>Q3 16/17</td><td>~55</td><td>~45%</td></tr> <tr><td>Q4 16/17</td><td>~55</td><td>~45%</td></tr> <tr><td>Q1 17/18</td><td>~60</td><td>~25%</td></tr> <tr><td>Q2 17/18</td><td>~55</td><td>~55%</td></tr> <tr><td>Q3 17/18</td><td>~65</td><td>~45%</td></tr> <tr><td>Q4 17/18</td><td>~85</td><td>~25%</td></tr> <tr><td>Q1 18/19</td><td>~85</td><td>~35%</td></tr> <tr><td>Q2 18/19</td><td>~75</td><td>~45%</td></tr> </tbody> </table> | Quarter        | Set quit date | % CO validated | Q4 14/15 | ~85      | ~40%   | Q1 15/16 | ~35      | ~90%     | Q2 15/16 | ~45      | ~30%   | Q3 15/16 | ~25      | ~45%     | Q4 15/16 | ~35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~45% | Q1 16/17      | ~65         | ~65% | Q2 16/17 | ~30      | ~45% | Q3 16/17 | ~55      | ~45% | Q4 16/17 | ~55                                                                                                                                                                                                                                                       | ~45%  | Q1 17/18 | ~60    | ~25%   | Q2 17/18 | ~55    | ~55%   | Q3 17/18 | ~65    | ~45%   | Q4 17/18 | ~85    | ~25%   | Q1 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ~85  | ~35%          | Q2 18/19    | ~75  | ~45%   |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
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| Q4 14/15                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~85                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 15/16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~90%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 15/16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~45                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~30%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 15/16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 15/16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~65%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 16/17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~60                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~25%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~55%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q3 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q4 17/18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~85                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~25%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q1 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~85                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~35%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| Q2 18/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ~75                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ~45%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |
| <h3 style="text-align: center;">Pregnancy only</h3> <p>Total number of pregnant clients setting a quit date in the quarter and the % validated by CO monitoring. Source - Doncaster Stop Smoking Service, Quarterly Monitoring Form. Latest data available October 2018.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <h3 style="text-align: center;">All clients</h3> <p>Total number of clients quitting (self-reported) and % validated by CO monitoring. Latest data available October 2018.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |                |          |          |        |          |          |          |          |          |        |          |          |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |               |             |      |          |          |      |          |          |      |          |                                                                                                                                                                                                                                                           |       |          |        |        |          |        |        |          |        |        |          |        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |               |             |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |      |        |        |

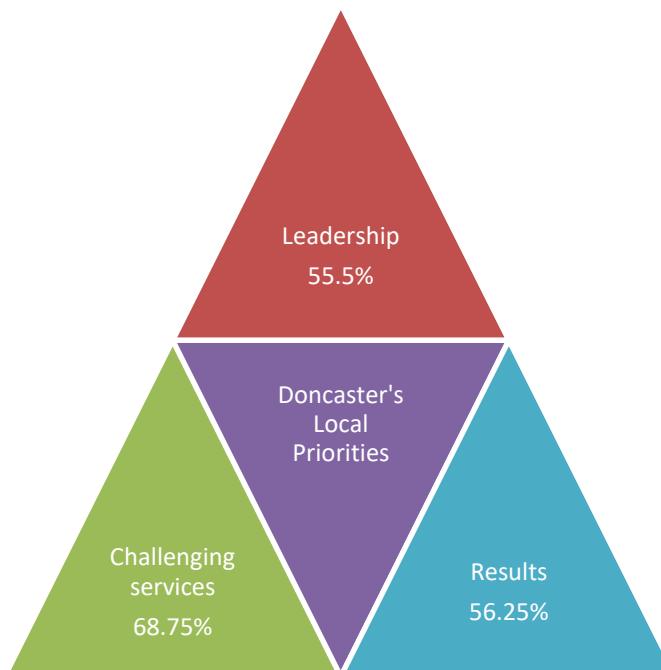
| Smoke-free homes | <h3>Domestic fires caused by smoking</h3> <h4>Doncaster rolling 12 months</h4> <p><b>Domestic fires caused by smoking</b> - Rolling 12 months number of accidental dwelling fires caused by materials relating to the smoking of tobacco, including injuries or deaths arising from these incidents. Source - South Yorkshire Fire &amp; Rescue. Jan 2018 incomplete data</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <h3>Smoke-free homes at new birth visit</h3> <h4>% smoke free homes at new birth visit</h4> <p><b>Smoke free homes</b> - % of homes recorded as smoke-free at the new birth visit by Health Visitors. Source - RDaSH, Doncaster Community Integrated Services Performance Quarterly Report. Updated April 2018</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
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|                  | <h3>Underage tobacco test purchase</h3> <p><b>Underage tobacco test purchase</b> - Test purchase operations carried out at licensed tobacco retailers, including those failing. Source - Doncaster Council Trading Standards Team. Latest data available January 2019.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <h3>Illicit tobacco seizures</h3> <p>Seizures since the last Tobacco Control Alliance</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Illicit Whites</th> <th>Counterfeit</th> <th>EU</th> <th>Total</th> <th>HRT Counterfeit</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>14480</td> <td>15760</td> <td>54840</td> <td>85080</td> <td>16.4kg</td> </tr> <tr> <td>2016/17</td> <td>30080</td> <td>29380</td> <td>109680</td> <td>169140</td> <td>34.0kg</td> </tr> <tr> <td>2017/18</td> <td>5599</td> <td>11876</td> <td>96656</td> <td>114131</td> <td>12.7kg</td> </tr> <tr> <td>2018/19</td> <td>3500</td> <td>8520</td> <td>47000</td> <td>59020</td> <td>19.0kg</td> </tr> </tbody> </table> <p><b>Illicit tobacco seizures</b> - Illicit tobacco seizures carried out by enforcement officers within Doncaster Council. Source - Doncaster Trading Standards Team. HRT= Hand Rolling Tobacco. Latest data available January 2019.</p> | Year      | Illicit Whites | Counterfeit     | EU       | Total | HRT Counterfeit | 2015/16 | 14480   | 15760   | 54840   | 85080   | 16.4kg  | 2016/17 | 30080 | 29380 | 109680 | 169140 | 34.0kg | 2017/18 | 5599 | 11876 | 96656 | 114131 | 12.7kg | 2018/19 | 3500 | 8520  | 47000 | 59020 | 19.0kg |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| Year             | Illicit Whites                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Counterfeit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | EU        | Total          | HRT Counterfeit |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| 2015/16          | 14480                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 15760                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 54840     | 85080          | 16.4kg          |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
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| 2017/18          | 5599                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 11876                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 96656     | 114131         | 12.7kg          |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
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|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Employees |                |                 | Premises |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
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| RDaSH            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ✓         |                |                 | ✓        |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| DBHFT            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| SLHD             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                |                 | ✓        |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| SWYFT            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ✓         |                |                 | ✓        |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| SY Fire Service  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | ✓              |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| SY Police        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
| Health outcomes  | <h3>Low birth weight babies</h3> <p><b>Low birth weight babies</b> - Live and stillborn infants with birth weight &lt;2,500g as a % of a all live and still born infants with recorded weight. Source - PHE, Public Health Outcomes Framework web tool. Latest data available December 2016.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <h3>Emerg adms for resp infections &lt;16yrs</h3> <p><b>Emergency admissions for lower respiratory tract infections &lt;16yrs</b> - Indirectly Standardised Rate per 100,000. Primary diagnosis of ICD10 codes J10.0, J11.0, J11.1, J12.-, J13, J14, J15.-, J16.-, J18.0, J18.1, J18.9, J21.-. Source - HSCIC Indicator Portal.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |                |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
|                  | <h3>Smoking attributable hospital admissions</h3> <p><b>Directly standardised rate of Smoking Attributable Admissions in people aged 35 and over.</b> Source Public Health Outcome Framework, Local Tobacco Control Profiles. Latest data at June 2017.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <h3>Smoking attributable mortality</h3> <p><b>Directly Standardised Rate of smoking attributable mortality.</b> Source Public Health Outcome Framework, Local Tobacco Control Profile. Latest data at June 2017.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                |                 |          |       |                 |         |         |         |         |         |         |         |       |       |        |        |        |         |      |       |       |        |        |         |      |       |       |       |        |  |  |   |       |  |   |  |  |  |  |      |  |  |  |  |  |   |       |  |  |   |  |  |   |                 |  |   |  |   |  |  |           |  |  |  |  |  |  |  |
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CLeaR thinking

# CLeaR model assessment for excellence in local tobacco control

Doncaster Borough Council 19<sup>th</sup> March 2019



Doncaster's CLeaR scores as a percentage of the total available in each domain



# About Public Health England

Public Health England's mission is to protect and improve the nation's health and to address inequalities through working with national and local government, the NHS, industry and the voluntary and community sector. PHE is an operationally autonomous executive agency of the Department of Health.

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## Foreword

CLear has been developed by Action on Smoking and Health (ASH) with assistance from partners in Cancer Research UK, the Chartered Institute for Environmental Health, FRESH, the National Centre for Smoking Cessation and Training, Smoke Free South West, the Trading Standards Institute, Tobacco Free Futures and colleagues from the NHS and local authority.

Through their hard work and diligence, they have provided the platform by which every council, upper tier local authority or tobacco control alliance can assess their delivery plans and take assurance from review by their peers, that they are investing their resources wisely and in full knowledge of the evidence which supports this.

Public Health England thanks ASH and their partner organisations for developing such a simple, yet challenging assessment and for their continued dedication to securing a tobacco free future through evidence-based tobacco control.



A handwritten signature in black ink that reads "Duncan Selbie". The signature is written in a cursive, flowing style.

Duncan Selbie  
*PHE chief executive*

## 1. CLear context

CLear is an improvement model which provides local government and partners with a structured, evidence-based approach to achieving excellence in local tobacco control.

The model comprises a self-assessment questionnaire, backed by an optional external challenge process from a team of expert and peer assessors. The purpose of the peer-assessment is to review the scoring and evidence selected by organisations when completing the self-assessment questionnaire and to provide objective feedback on performance against the model.

The report also provides a number of recommendations (CLear messages) and the assessment team's revised scores, accompanied by detailed feedback on specific areas of the model (CLear results). In addition, we suggest some resources you may find useful in further developing your work on tobacco control (CLear resources).

### 1.1 CLear in Doncaster

Dr Victor Joseph, Consultant in Public Health and Tobacco Control Alliance Chair invited the CLear team to validate the CLear self-assessment process in Doncaster.

It is intended that this report be used to inform members and officers of various organisations in the Borough of the wider impacts of tobacco consumption; on the health and wellbeing of Doncaster and to generate support at an operational level to develop the alliance leading to more collaborative working and a better understanding of partners' roles and responsibilities.

This report summarises the conclusions of the CLear peer-assessment team following their appraisal of the self-assessment; accompanying evidence and discussions during the visit on 19<sup>th</sup> March 2019. It sets Doncaster's challenge in context, providing information on the economic and other impacts of smoking in the authority.

In carrying out the CLear peer assessment we built on the insights into areas that needed improvement, as recognised through your self-assessment questionnaire.

Special thanks go to Victor, Anna Brook and Claire Hewitt for their assistance in organising the assessment visit.

Thanks also go to all those who gave their time as part of the peer-assessment visit for their enthusiasm and willingness to engage with the process. This was greatly appreciated. Some potential interviewees were unable to attend so their views may not be represented here.

The CLear Peer Assessment Team consisted of Paul Hooper, iPiP (Core Assessor); Sarah Hepworth, Health Improvement Principal Place – Culture, Environment & Leisure – Public Health, Sheffield City Council and Sue Smith, Public Health Specialist (Lead for Tobacco Control, Oral Health Improvement and Dementia)

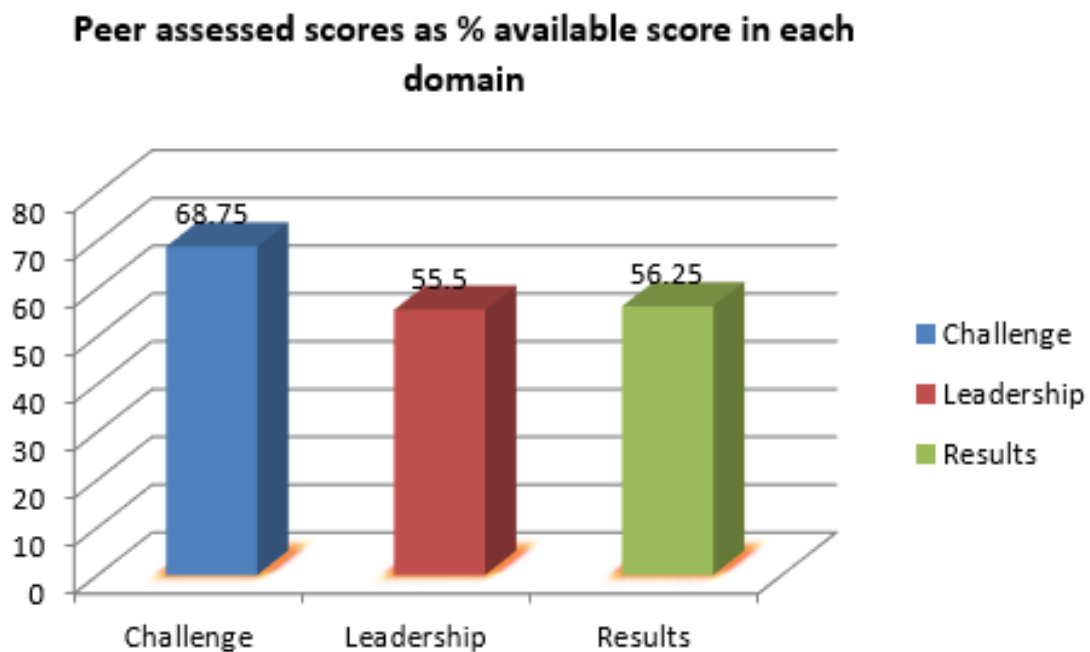
Interviewees from Doncaster (various sessions)

- Robert Suckling, Director of Public Health
- Victor Joseph, Consultant in Public Health and Chair of Tobacco Control Alliance
- Anna Brook, Public Health Registrar
- Councillor Nigel Ball, Cabinet Member for Public Health, Leisure and Culture
- Councillor Rachael Blake, Chair of the Health and Wellbeing Board and Cabinet Member for Social Care
- Dave McMurdo, Trading Standards Manager, Trading Standards
- Peter Jones, Partnership Officer, Fire Service
- Steve Betts, Communications Officer with focus on public health.
- Carrie Wardle, Public Health Theme Lead on Children and Young People
- Victoria Shackleton, Public Health Officer
- Carys Williams, Public Health Improvement Officer, Wider Determinants Team
- Simon Lister, Service Manager Yorkshire Smokefree Service, South West Yorkshire Partnership NHS Foundation Trust
- Zahra Velji, Specialist Yorkshire Smokefree Service, South West Yorkshire Partnership NHS Foundation Trust
- Debby McKnight, Nursing and Midwifery, Hospital QUIT Lead, Doncaster and Bassetlaw Teaching Hospital
- Emma Brown, Public Health Officer, Vulnerable Lives
- Helen Conroy, Public Health Theme Lead Vulnerable Lives
- Caroline Burrows, QUIT lead, ICS

NOTE: The term ‘Doncaster’ refers to the areas covered by Doncaster Borough Council throughout.



## 2. CLear messages



| CLear domain       | Max score | Self-assessment score | Peer-assessment score |
|--------------------|-----------|-----------------------|-----------------------|
| Leadership         | 36        | 23                    | 20                    |
| Challenge services | 48        | 36                    | 33                    |
| Results            | 32        | 18                    | 18                    |

### 2.1 Your insights

The following section includes key information provided in the self-assessment and associated evidence and what the peer-assessment team heard on the visit:

- Adult smoking prevalence in Doncaster is higher than the regional and national averages. There is also higher than average prevalence in certain groups including pregnant women; routine and manual workers and young people. There are also certain geographic communities where smoking prevalence is particularly high.
- In a challenging environment there are ambitious targets for reducing smoking prevalence in Doncaster, but most partners seemed to be unaware of them. The current tobacco control strategy and plan do

not match the ambitions and therefore the targets are unrealistic, based on current/planned activity.

- Evident from the useful tobacco control dashboard, Doncaster's steady decline in adult smoking, smoking among routine and manual worker groups and rates of smoking at the time of delivery (SATOD) have flatlined or even started to increase.
- Tobacco control does not feature specifically in the Council's Corporate Plan (which is light on health issues generally).
- Although Doncaster has a lead in public health and a supporting team, tobacco control and smoking cessation commissioning are only part of their roles and this work has diminished as work in other areas has expanded.
- There are various funding streams for both cessation and tobacco control work. Some are secure and others may be affected by general reductions.
- Tobacco Control may be seen by some organisations as a public health responsibility only. The Tobacco Control Alliance in Doncaster is well established but attendance at meetings and commitment to targets by some partners could be improved.
- There is a tobacco control action plan but it does not seem to be fit for purpose (i.e. to achieve targets).
- Tobacco control's contribution to the overall health and financial wellbeing of Doncaster District is not as well understood as would be desired.
- Although the stop smoking services are only one part of the broader tobacco control delivery, and evidence would suggest that wider tobacco control has the biggest impact on reducing prevalence, there seemed to be an expectation that the services would play a major part in delivering the prevalence targets.
- You recognise that opportunities exist to build a broader consensus for tobacco control across a wide range of council functions and partnership agendas. For instance, highlighting the contribution tobacco control makes to priorities such as community safety, children and young people, debt management, and economic prosperity.

- Boundaries of organisations (such as health trusts and the local authority) are not always co-terminus, but they are not overly complicated.

## 2.2 Your strengths:

The following two sections include key highlights from the peer assessment and the reflections and observations of the peer assessment team.

- Active support for the tobacco control agenda in Doncaster is reflected in practice through senior leadership and your committed team from whom we saw enthusiasm and passion for delivering quality innovative work.
- Key elected members are supportive of actions that will lead to a reduction in the impact of tobacco on the overall health and prosperity of the borough.
- Doncaster Council signed the Local Authority Declaration on Tobacco Control in April 2015 and is therefore a member of the Smoke Free Action Coalition. It was suggested that the CLearR process could be a catalyst for refreshing commitments.
- Your public health supported regulatory services have made progress on illicit and underaged sales.
- There is some level of sub-regional joint working especially with regard to regulatory services (e.g. illicit tobacco, 'fakes cause fires', home safety fire checks)
- The Doncaster stop smoking service, a separately commissioned part of a larger group of services for South Yorkshire, is well-established achieving good 4-week quit outcomes with a focus on high prevalence groups.
- Yorkshire Smokefree service has been performing well to a revised specification that prioritises high prevalence groups.
- Electronic cigarettes are incorporated into the cessation offer.
- Public health expressed commitment to raise the profile of tobacco control and to provide support and leadership of the alliance.

- You are keen to review progress and develop your plans further and interviewees were clearly committed to improving Doncaster and spoke with genuine enthusiasm around their areas of responsibility.
- Some clinical champions have been identified particularly in secondary care.
- Investment has been made in maternity services to improve referrals and communication. Combined with a stop smoking service that works closely with maternity, this should contribute to a reduction in rates of smoking at the time of delivery. A health visitor led service enables follow up into 0-5 year olds' environments, extending the relapse prevention period and enhancing your smoke free homes work.
- There is some understanding of how tobacco control can address local health inequality issues.
- Smokefree homes work is being based on a pragmatic approach through the housing provider.

## 2.3 Opportunities for development

- You have an opportunity, through the Health and Wellbeing Board and other groups, to influence understanding of the way tackling tobacco can impact on other priorities (e.g. inequalities, economic growth). However, key strategic documents are disconnected. You may consider tobacco-specific reports in order to ensure the importance of the topic is not lost.
- There are opportunities to ensure a wider ownership of the strategic goals (both by individuals and organisations) and to strengthen the governance arrangements for monitoring progress. A starting point may be to review the strategy itself.
- In particular you should revise the vision of 'reducing nicotine dependence' which contradicts your open view of electronic cigarettes.
- You appear to concentrate on secondary prevention. Consideration should be given to broadening the scope of tobacco control activities to incorporate local elements of the MPOWER six-strands of comprehensive tobacco control. <https://www.who.int/tobacco/mpower/en/>

- There is an opportunity to further encourage the development of tobacco control champions from partner organisations and opportunities to increase understanding in partner organisations on which policy levers and interventions will be most impactful on their priorities (e.g. CCG)
- The current targets within the tobacco control strategy are unrealistic and as we get nearer to the critical dates consideration should be given to how expectations of elected members and partners can be managed to avoid the positive progress made being discredited. Your intention to schedule discussions with partners to identify gaps and how to narrow them will help to make your tobacco control plan more realistic and achievable.
- In order to aid monitoring of progress you may wish to develop interim actions and ensure outputs from the alliance are measurable.
- You may consider modelling potential outcomes as part of the process of setting new interim targets.
- The alliance needs to be clearer about its purpose and perhaps give more direction as opposed to passive receipt of progress updates. Consideration should also be given to whether a change in chair, perhaps an elected member, might provide a degree of independence and scrutiny to the Alliance. The selection of the chair of a reinvigorated alliance may determine how others perceive the group.
- The corporate plan and other high-level documents have little or no mention of tobacco control ambitions but there are various elements to which tobacco control might play a positive role. Consideration should be given to re-making the case for tobacco control to internal and external partners. These can be framed as 'business' decisions for increased productivity and/or reduced costs as opposed to purely health improvement.
- The Director of Public Health and relevant elected members could be key influencers to revitalise partnership working on tobacco control, but they may have limitations on their time. A revised comprehensive tobacco control plan linked to corporate objectives may help keep tobacco on relevant agendas.
- Elected members may wish to make use of the new Councillors' network as part of the LGA Declaration on tobacco control resources.
- Understanding of the potential issue of tobacco industry interference was strong. It may be helpful to develop a deeper understanding and awareness

of the tobacco industry amongst a broader group of elected members and wider stakeholders. This would support framing tobacco control activities around a childhood protection and prevention focus and help increase support for future actions.

- You have a strong public health team supported by a number of other partners who, if the available time devoted to tobacco control is not reduced, could make considerable progress on a revised plan. At this critical point in time you may wish to designate responsibility for revising the plan and working more widely on smokefree Doncaster to a full-time post.
- You may wish to consider commissioning a new tobacco control JSNA and linking it to the Health and Wellbeing Board and other key groups.
- Careful consideration should be given to which other organisations and individuals would be essential for a viable alliance and to actively seek their support and attendance.
- There is an opportunity to capitalise on and develop tobacco control champions from partner organisations to increase understanding in partner organisations on which policy levers and interventions will be most impactful for themselves and the tobacco control agenda in general.
- The impact of a 'holistic' public health approach to communications is difficult to measure. In addition, there is currently no partnership communications plan for tobacco control. Consideration should be given to the development of a comprehensive communications plan for the alliance which would allow for greater notice of events and campaigns and enable partners to use their respective resources to support each other.
- All partners could review their online communications around tobacco control to ensure quick and easy wins were being realised.
- You may wish to consider introducing a local campaign to target specific groups or areas.
- There is an opportunity to further use insights to determine prevailing attitudes and knowledge of smokers and other audiences. This may help guide activity.
- The QUIT and other programmes show promise and there is a real opportunity to support a concerted effort to embed a smokefree NHS regime

that supports in patients to abstain and quit. This could be extended to primary care settings.

- Training on VBA has been undertaken in many settings, but it was not clear what the outcomes are. You may wish to evaluate these programmes to ensure that you are receiving a reasonable return on your investment.
- As part of a smokefree Doncaster vision there may be opportunities to work more closely with businesses, especially those with routine and manual workers to promote smokefree businesses and the benefits of a reduced prevalence workforce and tackle inequalities.
- The CLear process provides an opportunity to review all public sector smoking policies to ensure they are consistent with the latest evidence regarding electronic cigarettes and include more active support for those wishing to quit.
- Consideration should be given to removing any barriers to receiving stop smoking medication for those making a quit attempt (e.g. people who do not qualify for free prescriptions).
- Consideration could be given to a limited application of incentive schemes where this would have an impact on inequalities (e.g. smoking in pregnancy).
- The stop smoking service is largely following best practice guidance and is responsive to the need to adapt and change practice. There are opportunities for partner organisations to support the service in increasing referrals specifically primary care.
- There are specific opportunities for more systematic and robust referral pathways from acute health trusts into the local support to quit service as part of the drive towards a smokefree NHS.
- Action could be taken that would engage more with local communities, perhaps through the voluntary sector, regarding the ambition to create more smokefree outdoor areas. You may wish to prioritise tackling the high levels of smoking outside the local college.
- The use of the CLear peer assessment in a local networking event may help to maintain focus and provide opportunities to explore joint working and

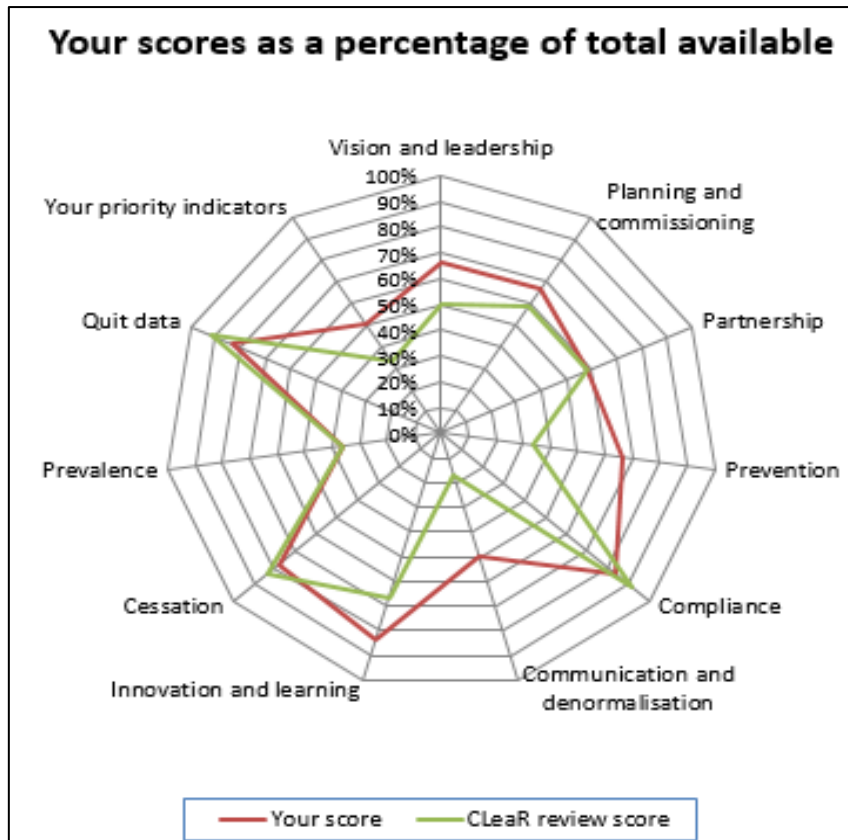
the formation of a new tobacco control alliance. This may lead to the use of other CLeaR tools.

- The accredited 'positive approaches' course could be useful for a number of professions who are working with the public.
- Consideration should be given to the recommendations of the RCP report 'Hiding in Plain Sight' (June 2018).
- There are examples of working across boundaries. Doncaster could take a more active role in regional and sub-regional groups and by doing so share good practice.
- Investigation into how young smokers are identified and worked with by youth services could result in greater opportunities for them to quit.
- Consideration should be given to how, in the light of tight budgets, to fund the changes needed to achieve your ambitions.

### 3. CLeaR results

The chart below shows (in red) Doncaster's original self-assessment scoring, as a % of available marks in each section and (in green) the CLeaR team's peer-assessment results. The scores of the peer assessment were frequently similar but lower and higher in some areas to those of the self-assessment. Detailed comments below show where the assessments differ. Both assessment scores highlight areas where improvements can be made.





### 3.1 Detailed comments on your peer-assessment

Note: Scoring by the peer assessment team was based on the current position rather than any potential or planned activities (e.g. proposed new Tobacco Control Plan) that were described. If implemented successfully your plans will have a positive effect on future scores.

| Clear Theme                                | Your score | Our score | Max | Comments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------------------|------------|-----------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Leadership</b>                          |            |           |     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Vision and leadership (including WHO FCTC) | 8          | 6         | 12  | <p>The Health and Wellbeing Board receives information on tobacco, but it is only as a part of an annual Health Protection Assurance report. Whilst it is important to show the connectivity and interdependence of topics there may be a value in tobacco-specific reporting.</p> <p>Although we did not see all of the clinical champions identified in the self-assessment, there was some evidence of clinical champions being established but it was acknowledged that more work was needed to develop champions in all areas.</p> <p>There was a lack of clinical champions in primary care; this may improve with the</p> |

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|  |  |  | <p>introduction of tobacco control indicators in the Primary Care Evaluation Matrix. The QUIT programme has advanced the agenda in secondary care where there has also been high level supported demonstrated.</p> <p>The LGA declaration on tobacco control has been signed by both the local authority and the CCG.</p> <p>The elected members interviewed showed a commitment to local community involvement and a desire to achieve improvements in health.</p> <p>There appeared to be a desire to help Doncaster become truly smokefree and work towards a smokefree generation but the concept of what this might look like in reality and the steps needed to achieve it were not well defined.</p> <p>It was acknowledged that the adopted targets are unrealistic. Discussions were held on how this should be managed.</p> <p>Your aim to reduce nicotine dependence is at odds with your 'ditch or switch' message, and with NICE guidance on tobacco harm reduction.</p> <p>It was not clear that the wider impact of tobacco would be known by elected members in general.</p> <p>It was recognised by some that tobacco control could contribute to wider determinates such as the economy, poverty etc, but It was difficult to identify how the tobacco control agenda was being systematically included in other work streams. To this end, tobacco control could be promoted wider within the Borough Council e.g. economic development.</p> <p>You recognise that your current tobacco control plan is out of date. It also does not capture your work to promote a smokefree Doncaster. It is acknowledged that a more comprehensive review will take place including action following the CLearR peer assessment.</p> <p>The tobacco control strategy appears to be essentially an introduction to the action plan.</p> <p>Public Health are seen as leaders of the topic but the need to ensure other</p> |
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|                            |   |   |    | <p>organisations play their appropriate part was recognised.</p> <p>The Director of Public Health has shown strong leadership around this topic and a willingness to raise the issue specifically (as opposed to part of broader reports) as a way of gaining support for the ambitious targets.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Planning and commissioning | 8 | 7 | 12 | <p>Whilst your service specifications generally reflect NICE guidance there are some gaps in implementation.</p> <p>It is acknowledged that in-patients are specifically excluded from the adult stop smoking service.</p> <p>The commissioning of stop smoking services has been consistent and led to a relatively stable market. (see later comments)</p> <p>Work has been undertaken in maternity services to embed smoking cessation. The provision of smoking cessation via the Health Visiting Service has both advantages (ability for long term follow up and family involvement) and disadvantages (not the responsibility of maternity services). Until recently there have been improvements in SATOD data.</p> <p>There is a stated desire to work towards a smokefree NHS in part through the use of QUIT and CQUIN programmes. Some of this work has been undertaken on a sub-regional basis and by sticking to the model Doncaster may be ahead of others.</p> <p>It is important to embed what 'Smokefree NHS' means (i.e. not simply environmental) in the acute sector. Progress to help staff quit; train security staff and others and have a flexible approach to the use of electronic cigarettes are all helpful.</p> <p>There appears to be a reluctance to engage in harm reduction (i.e. temporary abstinence). This may have an impact on the effectiveness of smokefree NHS policies and reduce the opportunities for some smokers to experience abstinence.</p> <p>The Health and Well Being Board, by not receiving reports on tobacco control as a single issue, may not be as well sighted on this topic as others.</p> |

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|                                                    |   |   |    | <p>The connections between key documents could be better. We heard the corporate plan does not lend itself to topic specific issues, but tobacco control is currently being lost in the whole system approach. There is a tension between having specific targets and actions for tobacco and showing how tobacco contributes to many other issues e.g. tackling inequalities.</p> <p>Although there are some SMART targets in the tobacco control plan it was acknowledged that interim targets were needed that could be made more specific regarding timescales and/or quantifiable outcomes.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Partnership, cross-agency and supra-local working. | 7 | 7 | 12 | <p>You have a tobacco control alliance with regular meetings and reporting. Although membership is quite extensive attendance is limited. You acknowledge that the Alliance could be more active. You have stated your future aims such as embedding smokefree NHS and moving onto social norms work.</p> <p>The peer assessment team acknowledged the intention of revitalising the alliance and that the CLear process was one way of generating interest and commitment in new partners.</p> <p>There are other groups that could act as a proxy for the alliance for some topics (e.g. the ICS group)</p> <p>We were able to have discussions with a wide range of people from several different agencies many of whom recognised their role in the wider partnership, but many did not seem to be aware of the ambitious local targets.</p> <p>The work of the public health team in the organising of the alliance and developing plans was recognised but there is a risk that others, in the light of reduced resources, will use this as a reason to be less involved.</p> <p>You are considering the involvement of elected members in the alliance, which the assessment team recognise could be a positive step in engaging partners from outside of public health organisations.</p> <p>There are conflicting views on whether there is an identified lead for tobacco control and the alliance.</p> |

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|  |  |  |  | <p>The overall time devoted to tobacco control has reduced in recent years due to competing priorities and additional duties.</p> <p>We acknowledge that a new action plan is to be developed. The new plan should identify the actions that each partner organisation will be accountable for, the role of the partnership and mechanisms for monitoring progress along with the scrutiny and escalation processes if not delivered.</p> <p>Interviewees demonstrated a good understanding of the need to protect local plans from the vested interests of the tobacco industry and this is embedded in some contracts. We heard strong statements on pensions and the desire to disinvest from tobacco in the medium to long term.</p> <p>Consideration was given to further action to inform all elected members and guard against tobacco industry influence.</p> <p>Sub-regional networking arrangements are strong and Doncaster benefits from working in partnership with others although this arrangement seemed passive rather than active and it was not clear how this might progress going forward.</p> <p>Doncaster is the host for the 'fakes cause fires' website.</p> <p>It was difficult to quantify the level of understanding of the importance of tobacco control (as opposed to smoking cessation) by frontline workers.</p> <p>There has been some good partnership working and joint commissioning with respect to the secondary care sector.</p> |
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### **Challenging Your Services**

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| Prevention | 4 | 2 | 6 | <p>Evidence of training about secondhand smoke and associated brief interventions by the stop smoking service was offered but as this has not been in operation long the results are not yet available.</p> <p>Limited evidence of a smokefree homes scheme was offered.</p> <p>We heard that there is an ambition to designate some town centre areas as smokefree, but this has yet not been developed or expressed as a coherent plan.</p> |
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|            |    |    |    | <p>We heard that you have emerging plans to address the issue of smoking in young people. Serious concern was expressed over the apparent misconceptions among young people of the prevalence of smoking and the numbers of young people smoking outside a local college.</p> <p>The healthy schools re-launch does not have smoking as one of its priorities.</p> <p>There has been some work around smokefree playgrounds and local authority-controlled schools.</p> <p>You have an ambition to follow up with smokefree events, but plans are under developed.</p> <p>We heard about how Project 3 receives referrals from the school nursing service, but in low numbers.</p> <p>We also heard that smokers were identified by RDASH working with under 19s, but few interventions followed.</p>                                                                                                                                                                                                                  |
| Compliance | 10 | 11 | 12 | <p>Trading Standards work on tobacco has been substantially funded by public health for around four years during which significant progress has been made. This is demonstrated by level of seizures and action on specific premises.</p> <p>Breaches of tobacco laws have been linked to the alcohol licensing process.</p> <p>There is involvement in the Trading Standards Regional Network including the tobacco and alcohol group.</p> <p>Intelligence on illicit tobacco is dealt with well through the use of the Consumer Advice Hotline and national intelligence systems.</p> <p>There has been some coordinated (and funded) work on test purchasing, nicotine inhaling products and surveillance.</p> <p>Across South Yorkshire the 'fakes cause fires' joint campaign with the fire service has been jointly funded and in part administered by Doncaster.</p> <p>There are few shisha premises in Doncaster and little evidence of the use of other niche products. However, regulatory officers are</p> |

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|                                    |   |   |   | <p>maintaining vigilance and working collaboratively.</p> <p>Enforcement by both environmental health and trading standards was intelligence led and described as balanced between proactive and reactive.</p> <p>There were few reported complaints regarding smokefree places and compliance is thought to be high.</p> <p>Cooperation from HMRC was cited as poor in spite of continued attempts to engage.</p> <p>There has been some activity regarding compliance with product legislation. This has been combined with work on fake chargers for electronic cigarettes.</p> <p>There were strong policies and procedures described about protecting work from the influence of the tobacco industry. Robust procedures were in place regarding any necessary contacts needed for enforcement purposes. However, this could be promoted wider than regulatory officers.</p> |
| Communications and denormalisation | 3 | 1 | 6 | <p>Whilst Yorkshire Smoke Free has a comprehensive communications plan there is no Alliance Plan and an acknowledged lack of coordination between local partners.</p> <p>Although the self-assessment suggested a number of national campaigns had been supported and amplified the communications team could only demonstrate ad hoc superficial press release and social media activity.</p> <p>Local media coverage was described as 'limited'.</p> <p>It was difficult to attribute local activity as the reason for any significant uplift in referrals to the stop smoking service during campaign periods such as Stoptober.</p> <p>We did not hear of any plans for new locally driven campaigns to support the vision of a smokefree Doncaster.</p>                                                                                                                      |
| Innovation and learning            | 5 | 4 | 6 | <p>The Tobacco Control Alliance has a regular reporting mechanism for monitoring data and it is a standing item on the alliance agenda.</p> <p>This data is not shared as widely as it could be and could form part of a broader</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

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|           |    |    |    | <p>information sharing process of reports and updates.</p> <p>The current level of challenge has been around the self-assessment. This may form the basis of challenge going forward and there appears to be a desire to achieve this through constructive comment.</p> <p>We heard that a 'positive approaches' course had been accredited as part of the safe and well referral partnerships initiative.</p> <p>Innovative campaigns have been developed around misuse of electronic cigarettes.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Cessation | 14 | 15 | 18 | <p>The adult cessation service is well established with a relatively stable workforce. It has been maintained as a discrete service but within the broader MECC agenda.</p> <p>The service specifications are linked to the priority populations. Although gaps were identified in acute in-house provision an overall level of service would need to be increased if Doncaster's ambitions were to be realised.</p> <p>The service website is comprehensive and tailored to local users. Although because it is part of a wider network of services the local data is limited and, at the time of accessing, out of date.</p> <p>Along with other promotions and the development of pathways with various stakeholders the service would appear to be generating sufficient referrals from target audiences.</p> <p>The peer assessment team heard a lot about training of staff through various schemes (MECC, VBA, QUIT and SCIP) in some areas this had resulted in increased referrals in others this was yet to develop.</p> <p>The CQUIN is in place but there is more to do to realise its full potential including the establishment of an efficient electronic referral.</p> <p>The peer assessment team heard that electronic cigarettes had been adopted in some premises for in patient use.</p> <p>In addition, the use of e-cigs as a way of quitting is encouraged with the 'Ditch or Switch' message well known</p> |



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|                |   |   |    | <p>The issuing of medication through different means is a little complicated and you are considering changes. There are some limitations imposed on the supply of nicotine replacement products through the triage process.</p> <p>We heard that budget shortfalls were being mitigated by underspends in some areas.</p> <p>The adult service exceeds the minimum standard for CO validation of quits. However, concern was expressed over the difficulty of getting good data for smoking at the time of delivery.</p> <p>The general stop smoking service has a robust system for engaging with lapsed quitters.</p> <p>Activity to reduce smoking in pregnancy is included in a larger contract and may be subject to proportional reductions in budget of 2.5% pa for three years. This may seriously impact on the ability to deliver on the ambitious targets.</p> <p>Work with offenders has shifted from in prison to working with those leaving detention.</p> |
| <b>Results</b> |   |   |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Prevalence     | 5 | 5 | 14 | <p>Smoking prevalence of adults in general and routine and manual workers in Doncaster, although still relatively high, has been reducing but the last monitoring period showed a possible flattening in the trendline. This has prompted a review of the approach and a determination to ensure progress continues.</p> <p>Smoking at the time of delivery had been improving with the gap between local and national levels narrowing but latest data shows a slight increase.</p> <p>A task and finish group is implementing the results of a recent 'deep dive' into secondary care at Doncaster and Bassetlaw Hospital.</p> <p>Other CLearR 'deep dive' tools have not yet been used.</p>                                                                                                                                                                                                                                                                           |

|                  |    |    |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|------------------|----|----|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Quit data        | 10 | 11 | 12 | <p>YSF perform well with higher than average quits per 100,000 population with an improving trend.</p> <p>Service also has impressively low levels of lost to follow up rates (10%).</p> <p>Data is submitted to NHS Digital.</p> <p>Referrals from the CQUIN route have been slow to develop in the general acute sector (mental health have been referring more consistently over time) The deep dive action plan will help to address this.</p> <p>The service has contributed to reductions in health inequalities in general and reducing smoking in routine and manual groups has been enhanced by including a quality premium in the specification.</p> <p>Locations for service delivery are now in areas of greatest need and have included community fire stations</p> |
| Local Priorities | 3  | 2  | 6  | <p>It is acknowledged that progress on reducing prevalence has recently stalled.</p> <p>Priority 1 – Young People. No trend information is available</p> <p>Priority 2 – Adult Prevalence. Acknowledged not reducing quickly enough to meet targets.</p> <p>Priority 3 – Reducing Inequalities – new service provision in place since data collected so may show improvement.</p> <p>All of the above priorities should be articulated as part of the new tobacco control plan for Doncaster.</p> <p>It would be helpful to have appropriate metrics to measure progress for each of these priorities.</p>                                                                                                                                                                       |

**The key challenges the peer assessment team identified for Doncaster are:**

1. Making the new tobacco control ambitions for Doncaster explicit ensuring all organisations are aware of how they can contribute to the wider agenda and local priorities.
2. Ensuring that the flattening of the trends to reduce smoking prevalence does not continue or worsen with consequent significant

effects on health and wellbeing tobacco among certain populations in the Borough.

3. Broadening the involvement of partners in developing and monitoring of progress in implementing a new tobacco control action plan as part of a revitalised alliance.
4. Delivering a fully implemented Smokefree NHS including both a positive environment and integrated support for people to quit.
5. Ensuring stop smoking services can fully engage with vulnerable groups and have a positive impact on health inequalities.
6. Developing a partnership tobacco control communications plan.
7. Ensure compliance work continues to be supported to a level that enables both reactive and proactive work to be undertaken.

## 4. CLear opportunities

This section highlights the effects of tobacco consumption in Doncaster

With an estimated 18+ population of **239,030** and a median salary of **£19,940** Doncaster falls within the middle deprivation quintile among boroughs in South Yorkshire (Met County)

Doncaster's over 18s smoking prevalence is estimated as **19.8% (2016)**. This equates to **47,705 adult smokers**.

If the wider impacts of tobacco-related harm are considered, it is estimated that each year smoking costs Doncaster **£78m** of which costs to the NHS contribute approximately **£14.7m**; lost productivity **£50.7m** and Social Care **£10.5m** (of which **£5.7m** is attributable to the local authority social care budget).

It is estimated that South Yorkshire Fire and Rescue Service will attend **11** smoking related house fires with a cost to the Borough of around **£2m**

Smokers in Doncaster consume around **533,490m** cigarettes each day resulting in approximately **79kg** of waste daily.

In addition, the local population in Doncaster spend **£99.5m** on tobacco related products. (Approximately £2,050 per smoker) As smoking is closely associated with economic deprivation this money will be disproportionately drawn from Doncaster's poorest citizens and communities. If this money was spent on other things instead of smoking the effect would be to create jobs in the local economy.

With an estimated 18+ smoking prevalence of 19.8% (2016), Doncaster has a population of about



47,705 adult smokers



Each year we estimate that smoking in Doncaster costs society a total of approx **£78m**

This cost is accrued across a range of social domains:



### Healthcare

Smoking both causes and exacerbates long term health conditions and is the leading cause of preventable death and disease in England



The total annual cost of smoking to the NHS across Doncaster is about **£14.7m**

**£4.3m** is due to approx 3,462 hospital admissions for smoking-related conditions

**£10.4m** is due to treating smoking-related illness via primary and ambulatory care services  
(that's as a result of around 145,348 GP consultations, 42,751 practice nurse consultations, 80,690 GP prescriptions, and 25,985 outpatient visits)



### Productivity

Smokers take more sick-leave from work than non-smokers and smoking increases the risk of disability and premature death



**£50.7m** of potential wealth is lost from the local economy in Doncaster each year as a result of lost productivity due to smoking

675 early deaths due to smoking result in 821 years of lost economic activity, costing businesses about **£18.9m**  
Each year absenteeism due to smoking-related illness results in about 113,998 days of lost productivity, costing a further **£10.1m**  
Additionally, it is estimated that smoking breaks cost businesses in Doncaster **£21.8m**



## Social Care

Many current / former smokers require care in later life as a result of smoking-related illnesses.



Each year this costs society in  
Doncaster an additional **£10.5m**

**£5.7m** is funded from the local authority  
social care budget

**£4.8m** is paid by individuals or families  
who self-fund private care



## House Fires

Smoking materials are a major contributor to accidental fires in England, with around 7% being smoking-related. Fatalities are disproportionately high in smoking-related fires, representing 49% of all house fire deaths



It is estimated that South Yorkshire Fire and Rescue Service will attend about 11 smoking-related house fires each year in Doncaster

**£2m** is lost annually in the Borough as  
a result

Smoking-related fires are expected to be responsible for approx 1 fatality every 2 years, resulting in average annual societal losses of **£1.1m**

In addition to deaths, smoking-related fires are expected to result in 3 non-fatal injuries each year, further increasing the societal cost by **£374,930**

Smoking-attributable fires will also result in property damage at an average annual cost of **£531,820**

and the annual cost to South Yorkshire Fire and Rescue Service for responding to these fires is **£36,210**



## Littering

62% of people drop litter and smoking materials constitute 35% of all street litter.

The majority of cigarette filters are non-biodegradable and must be collected and disposed of in landfill sites.



Smokers in Doncaster consume about 533,490 cigarettes every day. Of these, roughly 466,860 are filtered, resulting in around

**79kg**  
of waste daily

This represents 29 tonnes of waste annually, of which 12 tonnes is discarded as street litter that must be collected by the Local Government  
 That's enough cigarette butts being discarded on the street to fill 525 standard wheelie bins every year (and that's not counting cigarette packaging and other smoking-related litter!)



## Tobacco Expenditure

Smokers in Doncaster spend roughly £99.5m on tobacco products each year

**That's about £2,050 per smoker**



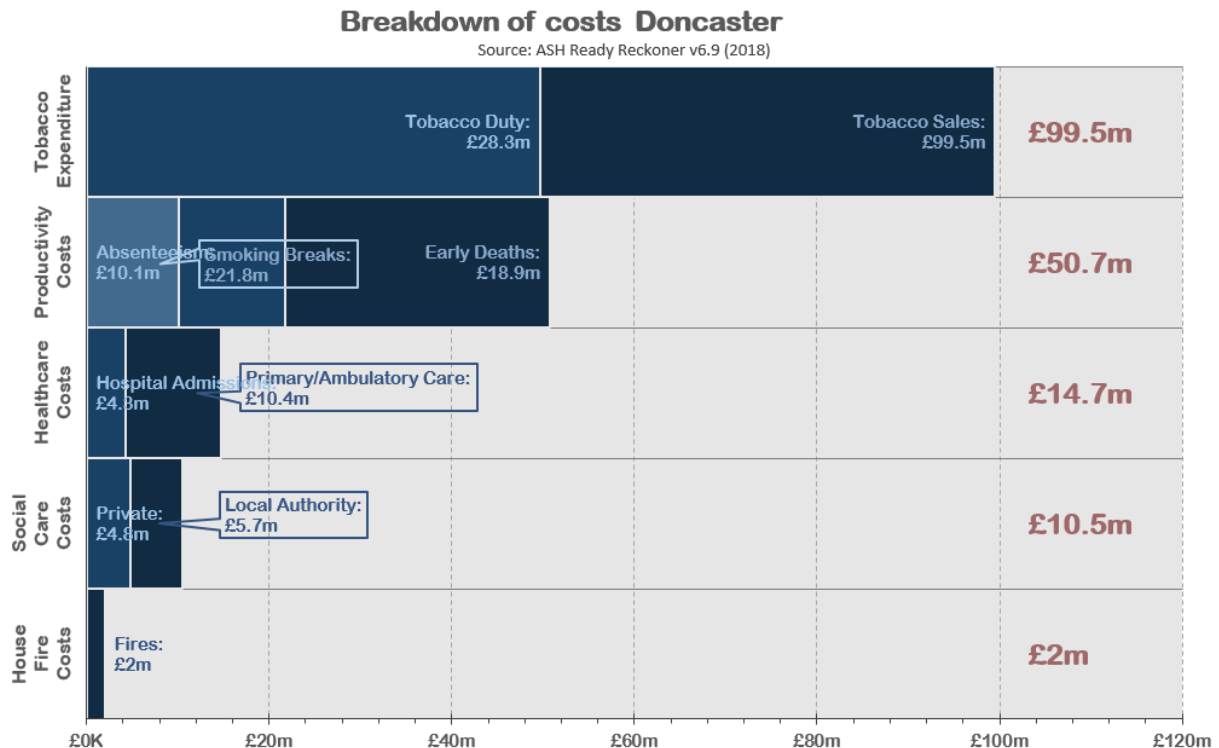
**Of the total expenditure on smoking products, £49.6m is collected by the Exchequer as tobacco duty. Despite this extra revenue, tobacco still costs the community in Doncaster one and a half as much as the duty raised**

This represents a net annual cost to society of

# £28.3m

### Breakdown of costs and expenditure in Doncaster

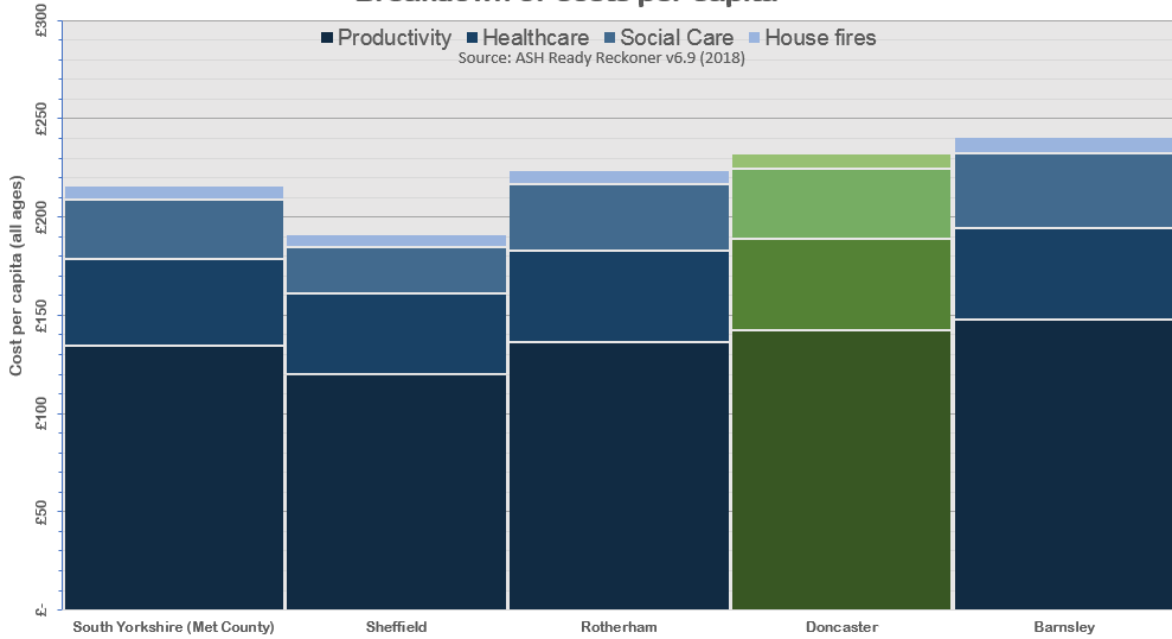
Source: ASH Ready Reckoner v6.9 (2018) Accessed 30/03/19



### Smoking Costs (as % of GDP)



### Breakdown of costs per capita



See <http://ash.lelan.co.uk/> for more details



## 5. CLear Resources

### **Tobacco Control Plan Delivery Plan 2018**

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/714365/tobacco-control-delivery-plan-2017-to-2022.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/714365/tobacco-control-delivery-plan-2017-to-2022.pdf)

### **PHE guidance for a Smokefree NHS**

<https://campaignresources.phe.gov.uk/resources/campaigns/61-smokefree-nhs/resources>

### **Royal College of Physicians report on the role of the NHS in treating tobacco dependency**

<https://www.rcplondon.ac.uk/projects/outputs/hiding-plain-sight-treating-tobacco-dependency-nhs>

### **Smoking in Pregnancy Challenge Group reports and resources**

<http://smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/>

### **Information for Directors of Public Health, local authority officers and members can be found at**

<http://ash.org.uk/category/information-and-resources/local-resources>

### **Local information on the business case for tobacco can be found at**

<http://www.nice.org.uk/About/What-we-do/Into-practice/Return-on-investment-tools/Tobacco-return-on-investment-tool>

### **Information on effectively engaging with priority smoking populations can be found in the Tobacco Control – commissioning support pack 2018/19**

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/647221/Tobacco\\_commissioning\\_2018-19\\_principles\\_and\\_indicators.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/647221/Tobacco_commissioning_2018-19_principles_and_indicators.pdf)

### **A briefing on investment and local authority pension funds (March 2018) is here**

[http://ash.org.uk/files/documents/ASH\\_831.pdf](http://ash.org.uk/files/documents/ASH_831.pdf)

### **ASH and iPiP have created a toolkit for all those interested in protecting public policy from the influence of the tobacco industry. (FCTC Article 5.3) More information can be found and downloaded here**

<http://ash.org.uk/localtoolkit/toolkit-article-5-3-framework-convention-tobacco-control/>

### **Information on the Local Government Tobacco Control Declaration can be found here**

<http://smokefreeaction.org.uk/declarationsindex-html/>

### **with additional councillor resources here**

<http://smokefreeaction.org.uk/smokefree-local-government/smokefree-councillor-network/>

**Information on the Smokefree NHS pledge here**

<http://smokefreeaction.org.uk/smokefree-nhs/nhs-smokefree-pledge/>

**Local Tobacco Control Profiles site has a range of latest data on smoking and the impact of smoking locally**

<https://fingertips.phe.org.uk/profile/tobacco-control>

\*Note this data may vary from the broader ASH Ready Reckoner Data included above. Please use whatever is most appropriate for your audience.

The NCSCT have a range of resources which may be of use for example:

**NCSCT Training and Assessment Programme (free) - developed for experienced professionals working for NHS or NHS commissioned stop smoking services who want to update or improve their knowledge and skills - as well as newcomers to the profession, who can gain full NCSCT accreditation.** [http://www.ncsct.co.uk/pub\\_training.php](http://www.ncsct.co.uk/pub_training.php)

**Very Brief Advice on Smoking – a short training module for GPs and other healthcare professionals to help increase the quality and frequency of Very Brief Advice given to patients who smoke.**

<http://www.ncsct.co.uk/VBA>

**Very Brief Advice on Smoking for Pregnant women**

[http://www.ncsct.co.uk/publication\\_briefing\\_for\\_midwifery\\_staff.php](http://www.ncsct.co.uk/publication_briefing_for_midwifery_staff.php)

**Specialty module on mental health, aimed at anyone who works with smokers with mental health issues. An online training module and resource, it focuses on supporting clients with a diagnosed mental health condition, who may be treated in the community or a specialist setting.**

[http://www.ncsct.co.uk/publication\\_MH\\_specialty\\_module.php](http://www.ncsct.co.uk/publication_MH_specialty_module.php)

**Very Brief Advice on secondhand smoke – a short training module designed to assist anyone working with children and families to raise the issue of second-hand smoke and promote action to reduce exposure in the home and car.**

[http://www.ncsct.co.uk/publication\\_secondhand-smoke-training-module.php](http://www.ncsct.co.uk/publication_secondhand-smoke-training-module.php)

## 6. CLear next steps

Thank you for using CLear. We invite you to:

- share the report with partners and stakeholders, and develop actions based on the recommendations;
- contact PHE if you'd like to discuss commissioning further support for tobacco control;
- allow local members of staff trained as peer assessors to participate in, and learn from, other assessments by acting as peer assessors;
- repeat your self-assessment in 12 months' time to track how your score changes; and
- consider commissioning a CLear peer re-assessment in 2022.

### **Contacts**

**Paul Hooper - [phooper@ipip.co.uk](mailto:phooper@ipip.co.uk)**

**iPiP – 01926 490111**

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## All opportunities for development along with proposed approach to respond

These are taken from the CLear peer assessment report

| Theme                  | Recommendation                                                                                                                                                                                                                                                                                                                                                                    | Proposed approach to respond                                                                                                                                                                                                                                            | Comments and contributions from partners in the TCA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Strategy & performance | 1. You have an opportunity, thorough the Health and Wellbeing Board and other groups, to influence understanding of the way tackling tobacco can impact on other priorities (e.g. inequalities, economic growth). However, key strategic documents are disconnected. You may <b>consider tobacco-specific reports</b> in order to ensure the importance of the topic is not lost. | <ul style="list-style-type: none"> <li>Annual? report on Tobacco to HWB</li> <li>Integrate TCA dashboard into the corporate reporting systems for key partner organisations</li> </ul>                                                                                  | <p><b>General Ideas</b></p> <p>Benefits map<br/>Step by Step<br/>Goals should be set collectively<br/>Trading standards and other parts of the strategy could amplify each other's work.<br/>News feeds: Promotional cases</p> <p><b>Offers</b></p> <p>Trading Standards - Case studies for Tobacco and alcohol control<br/>Public Health – can bring report SPU – Dashboard on pentana can be shared with team Doncaster partners</p> <p><b>Help Needed</b></p> <p>Case Studies and information to bring to life<br/>Test purchases with cigarettes and trading standards</p> |
| Strategy & performance | 2. There are opportunities to ensure a <b>wider ownership of the strategic goals</b> (both by individuals and organisations) and to <b>strengthen the governance arrangements for monitoring progress</b> . A starting point may be to <b>review the strategy</b> itself.                                                                                                         | <ul style="list-style-type: none"> <li>Update (rather than revise?) overall strategy including goals and interim goals</li> <li>As part of this, invite leadership from different partners for different aspects of the strategy – perhaps through champions</li> </ul> | <p><b>Ideas</b></p> <p>Programme management needs to be more robust<br/>Sponsors – specifically Director of Public Health?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Strategy & performance | 3. In particular you should revise the vision of 'reducing nicotine dependence' which                                                                                                                                                                                                                                                                                             | <ul style="list-style-type: none"> <li>Can be reviewed in the revised strategy</li> </ul>                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

| Theme                                                       | Recommendation                                                                                                                                                                                                                                                                                                                            | Proposed approach to respond                                                                                                                                                                                                             | Comments and contributions from partners in the TCA                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                             | contradicts your open view of electronic cigarettes.                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Strategy & performance                                      | 4. You appear to concentrate on secondary prevention. Consideration should be given to broadening the scope of tobacco control activities <b>to incorporate local elements of the MPOWER</b> six-strands of comprehensive tobacco control.<br><a href="https://www.who.int/tobacco/mpower/en/">https://www.who.int/tobacco/mpower/en/</a> | <ul style="list-style-type: none"> <li>Review the relative weight given to different aspects of MPOWER as part of strategy update</li> </ul>                                                                                             | <p><b>Ideas</b><br/>Physical activity especially race for life etc</p> <p><b>Offer</b><br/>Feedback on health promotion events evaluation (Smoking in pregnancy)</p>                                                                                                                                                                                                                                                                                                                              |
| Strategy & performance<br>AND<br>Leadership and partnership | 5. There is an opportunity to further encourage the development of <b>tobacco control champions from partner organisations</b> and opportunities to increase understanding in partner organisations on <b>which policy levers and interventions will be most impactful on their priorities</b> (e.g. CCG)                                 | <ul style="list-style-type: none"> <li>Develop champions in each organisation (not necessarily the same as the people attending TCA)</li> <li>Hold a series of discussions with each partner as part of updating the strategy</li> </ul> | <p><b>Ideas</b><br/>Targeting meetings – workshop style<br/>Leadership within different organisations.<br/>Scott Crosby attends the TCA<br/>Cllrs invited to attend TCA<br/>Directory of all TCA members or champions for all TCA to speak to each other/<br/>More clarity on what a champion’s role is.</p> <p><b>Offers</b><br/>Trading standards – post codes for mapping intel on seizures.</p> <p><b>Help</b><br/>Trading standards – need intelligence on underage sales from agencies.</p> |
| Strategy & performance                                      | 6. The current targets within the tobacco control strategy are unrealistic and as we get nearer to the critical dates consideration should be given to how expectations of elected members and                                                                                                                                            | As part of updating the strategy: <ul style="list-style-type: none"> <li>develop interim targets</li> <li>review the deadlines for the overall targets (potentially extending them)</li> </ul>                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

| Theme                      | Recommendation                                                                                                                                                                                                                                                                                                                                                                                                                            | Proposed approach to respond                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Comments and contributions from partners in the TCA |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
|                            | <p>partners can be managed to avoid the positive progress made being discredited. Your intention to schedule discussions with partners to <b>identify gaps and how to narrow them</b> will help to make your tobacco control plan more realistic and achievable.</p>                                                                                                                                                                      | <ul style="list-style-type: none"> <li>• identify what it would take to reach the targets</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                     |
| Strategy & performance     | <p>7. In order to aid monitoring of progress you may wish to <b>develop interim actions and ensure outputs from the alliance are measurable.</b></p>                                                                                                                                                                                                                                                                                      | See above                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                     |
| Strategy & performance     | <p>8. You may consider <b>modelling potential outcomes</b> as part of the process of setting new interim targets.</p>                                                                                                                                                                                                                                                                                                                     | See above                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                     |
| Leadership and partnership | <p>9. The alliance needs to be <b>clearer about its purpose</b> and perhaps <b>give more direction</b> as opposed to passive receipt of progress updates. Consideration should also be given to whether a <b>change in chair</b>, perhaps an elected member, might provide a degree of independence and scrutiny to the Alliance. The selection of the chair of a reinvigorated alliance may determine how others perceive the group.</p> | <ul style="list-style-type: none"> <li>• Review ToR for TCA including membership and chairing</li> <li>• Consider splitting the meeting in two to have: <ul style="list-style-type: none"> <li>○ a short business / general section for urgent matters arising and ongoing monitoring</li> <li>○ a longer workshop section focused on a theme from the strategy / action plan that requires more concerted partnership efforts – this could involve inviting national / regional VCF and other partners for specific elements of work</li> </ul> </li> </ul> |                                                     |
|                            | <p>10. The corporate plan and other high-level documents have little or no mention of tobacco control ambitions but there are various elements to which tobacco control might play a positive role. <b>Consideration</b></p>                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                     |

| Theme                      | Recommendation                                                                                                                                                                                                                                                                                                                                                                                                          | Proposed approach to respond                                                                                                                                                                  | Comments and contributions from partners in the TCA |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
|                            | <p><b>should be given to re-making the case for tobacco control to internal and external partners.</b> These can be framed as 'business' decisions for increased productivity and/or reduced costs as opposed to purely health improvement.</p>                                                                                                                                                                         |                                                                                                                                                                                               |                                                     |
| Strategy & performance     | <p>11. The Director of Public Health and relevant elected members could be key influencers to revitalise partnership working on tobacco control, but they may have limitations on their time. <b>A revised comprehensive tobacco control plan linked to corporate objectives</b> may help keep tobacco on relevant agendas.</p>                                                                                         | <p>As above: updated strategy and integrate dashboard into corporate reporting systems</p>                                                                                                    |                                                     |
| Leadership and partnership | <p>12. Elected members may wish to make use of the <b>new Councillors' network</b> as part of the LGA Declaration on tobacco control resources.</p>                                                                                                                                                                                                                                                                     | <ul style="list-style-type: none"> <li>Elected members to consider joining new Cllrs network</li> </ul>                                                                                       |                                                     |
| Leadership and partnership | <p>13. Understanding of the potential issue of tobacco industry interference was strong. It may be helpful to <b>develop a deeper understanding and awareness of the tobacco industry amongst a broader group</b> of elected members and wider stakeholders. This would support framing tobacco control activities around a childhood protection and prevention focus and help increase support for future actions.</p> | <ul style="list-style-type: none"> <li>Develop and run a briefing session for elected members</li> <li>And for other key stakeholders (ask partners which stakeholders to include)</li> </ul> |                                                     |
| Leadership and partnership | <p>14. You have a strong public health team supported by a number of other partners who, if the available time devoted to tobacco control is not reduced, could make considerable progress on a revised plan. At this critical point in time you <b>may wish to designate responsibility for revising the</b></p>                                                                                                       | <ul style="list-style-type: none"> <li>Public health team to consider approaches to co-ordination</li> </ul>                                                                                  |                                                     |



| Theme                                                       | Recommendation                                                                                                                                                                                                                                                                                                                                                                                                                                     | Proposed approach to respond                                                                                                                                                                                                                                       | Comments and contributions from partners in the TCA |
|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
|                                                             | <b>plan and working more widely on smokefree Doncaster to a full-time post.</b>                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                    |                                                     |
| Strategy & performance                                      | 15. You may wish to <b>consider commissioning a new tobacco control JSNA</b> and linking it to the Health and Wellbeing Board and other key groups.                                                                                                                                                                                                                                                                                                | <ul style="list-style-type: none"> <li>Consider when to update TC JSNA (perhaps focus on updated strategy now, then fully revised strategy following JSNA?)</li> </ul>                                                                                             |                                                     |
| Leadership and partnership                                  | 16. Careful consideration should be given to which <b>other organisations and individuals would be essential for a viable alliance and to actively seek their support and attendance.</b>                                                                                                                                                                                                                                                          | As above: review ToR for TCA                                                                                                                                                                                                                                       |                                                     |
| Strategy & performance<br>AND<br>Leadership and partnership | 17. There is an opportunity to capitalise on and develop tobacco control champions from partner organisations to increase understanding in partner organisations on which policy levers and interventions will be most impactful for themselves and the tobacco control agenda in general.                                                                                                                                                         | As above: champions and discussions with partners                                                                                                                                                                                                                  |                                                     |
| Communications                                              | 18. The impact of a 'holistic' public health approach to communications is difficult to measure. In addition, there is currently no partnership communications plan for tobacco control. <b>Consideration should be given to the development of a comprehensive communications plan for the alliance</b> which would allow for greater notice of events and campaigns and enable partners to use their respective resources to support each other. | <ul style="list-style-type: none"> <li>Development of a TCA wide communications plan – initially proactive activity to be focused on smoke-free Doncaster plan, with reactive / amplification work to be considered for national and regional campaigns</li> </ul> |                                                     |
| Communications                                              | 19. All partners could <b>review their online communications</b> around tobacco control to ensure quick and easy wins were being realised.                                                                                                                                                                                                                                                                                                         | As above: comms plan                                                                                                                                                                                                                                               |                                                     |
| Communications                                              | 20. You may wish to consider introducing a local campaign to target specific groups or areas.                                                                                                                                                                                                                                                                                                                                                      | As above: comms plan                                                                                                                                                                                                                                               |                                                     |

| Theme                                                       | Recommendation                                                                                                                                                                                                                                                                    | Proposed approach to respond                                                                                                                                                                             | Comments and contributions from partners in the TCA                                        |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Communications                                              | 21. There is an opportunity to <b>further use insights to determine prevailing attitudes and knowledge of smokers and other audiences</b> . This may help guide activity.                                                                                                         | As above: comms plan                                                                                                                                                                                     |                                                                                            |
| Strategy & performance<br>AND<br>Leadership and partnership | 22. The QUIT and other programmes show promise and there is a real opportunity to support a concerted effort to embed a smokefree NHS regime that supports in patients to abstain and quit. This <b>could be extended to primary care settings</b> .                              | <ul style="list-style-type: none"> <li>Development of smoke-free NHS approach with primary care</li> </ul>                                                                                               |                                                                                            |
| Strategy & performance                                      | 23. <b>Training on VBA</b> has been undertaken in many settings, but it was not clear what the outcomes are. You <b>may wish to evaluate</b> these programmes to ensure that you are receiving a reasonable return on your investment.                                            | We are already checking on some of this – perhaps we need to incorporate into the updated strategy?                                                                                                      |                                                                                            |
| Leadership and partnership<br>AND<br>Smoke-free             | 24. As part of a <b>smokefree Doncaster vision there may be opportunities to work more closely with businesses</b> , especially those with routine and manual workers to promote smokefree businesses and the benefits of a reduced prevalence workforce and tackle inequalities. | <ul style="list-style-type: none"> <li>Incorporate this into plans for smoke-free Doncaster</li> </ul>                                                                                                   |                                                                                            |
| Leadership and partnership                                  | 25. The CLear process provides an opportunity to <b>review all public sector smoking policies to ensure they are consistent with the latest evidence regarding electronic cigarettes</b> and include <b>more active support for those wishing to quit</b> .                       |                                                                                                                                                                                                          |                                                                                            |
| Stop smoking service                                        | 26. <b>Consideration should be given to removing any barriers to receiving stop smoking medication</b> for those making a quit attempt (e.g. people who do not qualify for free prescriptions).                                                                                   | Could be reviewed through strategy update, however, given that we are also advised to consider balance of spend – towards more preventative activity, are there ways of doing this that are no/low cost? | <b>Contribution</b><br>SWYFT has purchased medication which is available at drop off sites |

| Theme                                                       | Recommendation                                                                                                                                                                                                                                                                        | Proposed approach to respond                                                                                                                                            | Comments and contributions from partners in the TCA                                                                                                                                                                                             |
|-------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                             |                                                                                                                                                                                                                                                                                       | e.g. what role could vaping play here?<br>CRUK have evaluated pilots of partnerships with vape shops (where staff have undergone training in supporting people to quit) |                                                                                                                                                                                                                                                 |
| Smoking in Pregnancy service                                | 27. Consideration could be given to a <b>limited application of incentive schemes where this would have an impact on inequalities (e.g. smoking in pregnancy).</b>                                                                                                                    |                                                                                                                                                                         |                                                                                                                                                                                                                                                 |
| Strategy & performance<br>AND<br>Leadership and partnership | 28. The stop smoking service is largely following best practice guidance and is responsive to the need to adapt and change practice. There are <b>opportunities for partner organisations to support the service in increasing referrals specifically primary care.</b>               | As above: development of smoke-free NHS approach with primary care                                                                                                      |                                                                                                                                                                                                                                                 |
| Leadership and partnership                                  | 29. There are specific opportunities for <b>more systematic and robust referral pathways from acute health trusts into the local support to quit service</b> as part of the drive towards a smokefree NHS.                                                                            | Ongoing work on QUIT                                                                                                                                                    |                                                                                                                                                                                                                                                 |
| Leadership and partnership<br>AND<br>Smoke-free             | 30. Action could be taken that would <b>engage more with local communities, perhaps through the voluntary sector,</b> regarding the ambition to create more <b>smokefree outdoor areas.</b> You may wish to prioritise tackling the high levels of smoking outside the local college. | <ul style="list-style-type: none"> <li>• Consider VCF as part of update of strategy and ToR on TCA</li> <li>• Consider as part of Smoke-free proposals</li> </ul>       | <p><b>Ideas</b><br/>Can businesses make vaping not smoking<br/>Switch messages and focus on vaping to switch<br/>Prioritise target group eg R&amp;M CYP</p> <p><b>Help</b><br/>Need help accessing big employers especially R&amp;M workers</p> |
| Leadership and partnership                                  | 31. The use of the CLear peer assessment in a <b>local networking event may help to maintain focus and provide opportunities to explore joint working and the formation</b>                                                                                                           | A workshop approach in TCA building on these recommendations is an initial response to this                                                                             |                                                                                                                                                                                                                                                 |

| Theme                                                       | Recommendation                                                                                                                                                               | Proposed approach to respond                                                        | Comments and contributions from partners in the TCA                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                             | <b>of a new tobacco control alliance.</b> This may lead to the <b>use of other CLearR tools.</b>                                                                             | Followed by (as above) briefings and sessions with elected members and key partners |                                                                                                                                                                                                                                                                                                                                                                                                                |
| Training                                                    | 32. The <b>accredited ‘positive approaches’ course</b> could be useful for a number of professions who are working with the public.                                          | This is the work the Fire Service do – how could this be applied in other settings? | Commissioned Northern College to support staff to have positive conversations, 60 staff trained, within the Safe and Well home safety checks.                                                                                                                                                                                                                                                                  |
| Strategy & performance<br>AND<br>Leadership and partnership | 33. Consideration should be given to the <b>recommendations of the RCP report ‘Hiding in Plain Sight’</b> (June 2018).                                                       | Could hold a TCA workshop focused on this?<br>Consider as part of strategy update   |                                                                                                                                                                                                                                                                                                                                                                                                                |
| Leadership and partnership                                  | 34. There are examples of working across boundaries. <b>Doncaster could take a more active role in regional and sub-regional groups and by doing so share good practice.</b> | Consider as part of co-ordinator role                                               |                                                                                                                                                                                                                                                                                                                                                                                                                |
| Young people’s stop smoking service                         | 35. Investigation into <b>how young smokers are identified and worked with by youth services could result in greater opportunities for them to quit.</b>                     | PH CYP theme lead is investigating this                                             | <b>Ideas</b><br>Mentor Adepis – behaviour change approach suitable evidence based. Specific and separate campaign for young people.<br>Vaping complex issue: need to be about our line and stick to it.<br>Vaping for Young People is a different issue.<br>Need some creative approaches: e.g. one area distributed sheep (with the intention of them being stolen) or traffic-cones with smoke free messages |
| Strategy & performance<br>AND<br>Leadership and partnership | <b>36. Consideration should be given to how, in the light of tight budgets, to fund the changes needed to achieve your ambitions.</b>                                        | TCA as a whole to consider this                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                |

# Inspiring a smoke-free generation in Doncaster

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*part of Breathe 2025*

## Summary of aims, recommendations and deadlines

- We have an overall aim to reduce smoking prevalence and be part of the national effort to inspire a smoke-free generation – Breathe2025.
- We want to trial some voluntary (not enforced) smoke-free spaces, which will all include information about support to quit, starting with family-friendly spaces
- We will want a steer from the Cabinet Member for Public Health, Leisure & Culture and the Director of Public Health about the overall proposal and the ordering of the staged approach
- We will need a Cabinet decision to proceed.

## Main report

### Aims

- **Reduce smoking prevalence** – in particular as part of the smoke-free generation – stopping starting
- **Decreasing the opportunity for children to see adults smoking around them** – children more likely to start smoking if they see smoking around them and tend to overestimate the proportion of people who smoke
- **Making smoke-free the social norm** - potentially reducing the likelihood for young people to start smoking and motivating smokers to cut down or to quit
- Protecting the environment and saving money by **reducing tobacco-related litter**
- Provide opportunity for **public acceptance of voluntary smoke-free locations.**

### Rationale

- 19.7% of the Doncaster population smoke (CI: 17.1-22.4)<sup>1</sup>, this is the fourth highest within Yorks & Humber
- Around half of all life-long smokers will die prematurely and on average, cigarette smokers die 10 years younger than non-smokers.<sup>2</sup>
- Smoking is a major factor in illnesses that limit daily living such as COPD, heart attacks and lung cancer<sup>3</sup>
- Smoking is the biggest driver in health inequalities in the UK.<sup>4</sup> Doncaster has the second-highest socio economic gap in adult smokers in Yorkshire & the Humber.<sup>5</sup>
- Smoking prevalence for all ages has decreased (from 25.8% in 2011) in Doncaster in line with the national average; however, for the past 3 years (since 2015) prevalence has stayed roughly the same. In contrast, the prevalence in Yorkshire & the Humber and England has continued to reduce over this time period.
- We have committed to reducing smoking prevalence to 10% by 2021. To achieve this, we need to reduce the number of people who start smoking as well as helping existing smokers to quit.
- Three-quarters of smokers aged 16-24 in 2014 said they began smoking before the age of 18. Children who live with parents or siblings who smoke are up to 3 times more likely to become smokers themselves than children of non-smoking households.<sup>6</sup>

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<sup>1</sup> PHE Fingertips, 2017 data, accessed October 2018

<sup>2</sup> Doll et al. Mortality in relation to smoking: 50 years' observations on male British doctors. *Bmj*. 2004 Jun 24;328(7455):1519.

<sup>3</sup> ASH, Facts at a Glance, 2018

<sup>4</sup> ASH, Smoking and health inequalities, accessed 2018

<sup>5</sup> PHE Fingertips data from 2017, accessed Oct 2018: defined as Smoking prevalence in adults - gap between current smokers in routine and manual occupations and other occupations (APS)

<sup>6</sup> ASH, Young People & Smoking, 2015

- In a recent trial consultation with college students in Doncaster, we found that the vast majority (49 students which was 87.5% of those who responded) over-estimated smoking prevalence – they thought it was 60% or 80% prevalence. Although this consultation only involved small numbers, it suggests people think smoking is much more common than it is. We need to do more work to understand perceptions.
- Other parts of the country (and the world) have started implementing smoke-free places, mainly on a voluntary basis, and have had good public support for this, especially in areas where children go.
- In our own recent consultation, the majority of participants agreed or strongly agreed with proposals for designated voluntary smoke-free spaces, for example 94% (320 responses) for schools, 85% (291 responses) for hospital grounds and 83% (282 responses) for council family-friendly events. The majority said they would visit spaces more frequently if they became smoke-free, for example outside seating areas where people eat and drink, entrances to shopping centres and public buildings and specific places in Doncaster town centre. Of those participants that stated they smoked tobacco (40 responses, 11.8%), 17.5% (7 responses) smoked less when children were around, 60% (24 responses) moved away from children and 15% (5 responses) never smoked around children. 55% (184 responses) would feel more comfortable to ask someone to stop smoking if signage was displayed. 66% (225 responses) agreed that e-cigarettes should be included in a ban.
- Evidence suggests a population-wide approach to encourage quit attempts is most effective with targeted media, within a comprehensive tobacco control programme, to ‘decrease tobacco use, reframe social norms and cultural acceptance, increase quit attempts and promote use of stop smoking tools and services’<sup>7</sup>
- People are four times as likely to quit if they get expert help. We have an excellent stop smoking service with a high quit rate for all smokers and targets for routine & manual workers and other high risk groups.

## Proposals

We have identified a range of ways in which we could encourage smoke-free spaces to inspire a smoke-free generation through de-normalising smoking and making it less visible, thereby reducing the number of children and young people who decide to start.

Our proposal, for discussion, is to combine a strong coordinated communications campaign with a big launch, followed by a staged approach to smoke-free spaces. We suggest that we start with trialling and developing smoke-free spaces in a staged way as follows (more details in the appendix).

- Ongoing: develop and implement communications plan
- Stage 1: play parks and park events, schools and school gates, hospital grounds and family-friendly council events
- Stage 2: Outdoor eating and drinking areas, Pedestrianised areas in town centre, Parks – not just play areas, Smoke-free sidelines
- Stage 3: Other council events
- Stage 4: Bus stops, railway station and airport (note that the railway station may need to be considered earlier due to redevelopment)
- Stage 5: Smoke-free high streets (other town centres), Smoke-free markets (including no sale of tobacco products)

This staged approach is based on experience from elsewhere and the following reasoning:

- To allow the campaign to develop over time so that we can continue to publicise the messages
- To work within the resources and capacity we have
- To learn as we go

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<sup>7</sup> Towards a Smoke-free Generation, National Tobacco Control Strategy, 2017

- To start with the elements that are most likely to be acceptable to Doncaster residents and continue to consult and engage with them as we develop the work further

Throughout all stages, the communications campaign will:

- provide additional opportunities for getting the smoke-free messages across
- support the specific stage by amplifying the messages for that space
- get the offer of support to quit out to more of the population
- change the social norms around smoking to support our aims for a smoke-free generation

## Key messages: Questions & Answers

1. **Consultation and co-production:** ensuring our approach will be supported by Doncaster residents
  - a. There is public support in England for smoking to be banned in outdoor areas not covered by the legislation<sup>8</sup>:
    - i. 82% agreed with banning smoking in outdoor children’s play areas (7% disagreed).
    - ii. 72% agreed with banning smoking in hospital grounds (15% disagreed).
    - iii. 59% agreed with banning smoking in communal spaces such as parks and beaches (23% disagreed).
  - b. We will continue to consult in Doncaster about the proposals as well as undertaking trials.
  - c. We will work with representatives of the target audience to develop materials and ideas.
2. **Clear and honest primary aim:** to reduce smoking prevalence by stopping children from starting smoking
  - a. Chapman (2009) criticises authorities for introducing smoking bans and using public health reasons when the primary reasons may often be because of litter. We are clear about our primary reasons and where the evidence supports this (changing social norms).
3. **Voluntary approach:** support not stigma or enforcement – will it work and how will it work?
  - a. ASH (2008: 4) found that the public will only support tobacco measures that restrict their individual liberty in certain instances, such as the protection of children. We are proposing a voluntary approach focused on family-friendly events and spaces.
  - b. Most people who smoke are considerate, as experience with smoke-free spaces has shown, and will smoke away from smoke-free spaces. We found this in our consultation and will continue to test through the staged approach.
  - c. We would have signage and use social media, press releases and any event materials to ask people to help us in keeping the event smoke-free for our children and young people.
  - d. We would not expect to do any enforcement – this is about voluntary social norms
  - e. Our consultation found some people felt that smoke-free spaces would deter them from visiting but the vast majority would continue to visit places or be more likely to.
  - f. We will focus on the message that smokers need support not stigma. All smoke-free publicity will include information about support to quit. We will work with SWYFT and RDASH to ensure support is available.
4. **E-cigarettes:** we propose that e-cigarettes would be included in the voluntary smoke-free spaces
  - a. E-cigarettes are too new for us to fully understand the health impacts
  - b. Although our smoking cessation service is ‘e-cigarette friendly,’ in that it will support people to quit using an e-cigarette if they choose to do so, our messaging ‘ditch or switch’ is clear that stopping smoking is the main aim with e-cigarettes supported only as a quitting aid and e-cigarettes are not allowed to be sold to children
  - c. It is potentially confusing for members of the public and children if e-cigarettes are not included
  - d. We consulted specifically on this point as part of our consultation approach and found 66% support for this position.

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<sup>8</sup> ASH and YouGov, Smokefree Survey 2017. The survey was carried out online by YouGov for ASH; the total sample size was 10488 adults in England. Fieldwork was undertaken between 16th February 2017 and 19th March 2017. The figures have been weighted and are representative of all adults (aged 18+).

- e. As we go through the staged approach we will remain considerate of the need to ensure there are spaces within a reasonable distances of spaces and events for people who are vaping to quit.
- 5. **Perceived negative targeting of smokers:**
  - a. We will ensure there is a support to quit message in all media and signage
  - b. There was a perception in the consultation by small number that this was a waste compared with other ASB in the town centre. We are clear that this is not instead of other work on Complex Lives. This is a separate issue about protecting our children from becoming addicted and having poor health as adults.
- 6. **Education in schools** – perception this is more important than smoke-free spaces
  - a. We are considering how to improve support and work with schools through Healthy Learning Healthy Lives
  - b. We will be working to improve young people’s understanding of the true levels of smoking in Doncaster and UK
  - c. There is good evidence that children who are not exposed or less exposed to smoking growing up are less likely to start smoking
- 7. **Some questions were asked in the consultation about why the council was not leading the way** – staff smoking visibly outside the Civic building was given as an example
  - a. We propose that staff are offered time to attend counselling during work time (initial appointment is half an hour face to face followed by 15 minute appointments which can be made by telephone) instead of smoking breaks
  - b. We need an ongoing communications approach via for example the weekly blog and including some quitting incentives such as gym passes and more innovative approaches to supporting quitting

### Alternatives considered in brief

1. Do nothing different – this will not help us to narrow health inequalities or reduce smoking-related harm and death to the extent we have set out in our strategy and targets
2. Start with a different type of smoke-free space – the order has been suggested based on experience from other areas and levels of public support in Doncaster but could be altered.
3. Do the whole programme at once – we do not have the capacity to do all of this at once, we are likely not to get public support for too many changes at once. Also, by running a staged approach, the communications lasts longer and therefore has more impact.

## Consultation Results



Smokefree Spaces  
Consultation Results :



## Appendix: staged plan

| Stage   | Theme          | What would this look like                                                                                                                                                                                                                                                                                                                                                                                                                                   | Communications approach                                                                                                                                                                                                                                                                                                                                                                          | Costs and resources                                                                                                                                                                                                                                                 |
|---------|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ongoing | Communications | Communications plan developed and implemented<br>This needs to be a partnership approach to include TCA members, local businesses and relevant partners for each stage – we should work through Team Doncaster communications                                                                                                                                                                                                                               | Brand developed<br>Messaging developed – especially focused on social norms and targeted at key groups<br>Webpages developed (could be part of regional or local website)<br>Film clips of local services – what to expect / what we expect (e.g. smoke-free hospitals) / case studies (e.g. from events)<br>Materials<br>Channels of communication (potentially advertising, social media etc)  | Each stage will be costed<br>The overall costs are estimated minimum £10,000 – possibly less if we could get free filming (e.g. via the college), use an existing website and not spend on general materials and communications except for each stage (costs below) |
| 1       | Play parks     | In 2017/18, Public Health ran a competition with children to design signage for parks, the topics were smoking and litter including dog fouling and now all council-run play areas within parks have smoke-free signage designed by local children<br>The next phase could be to work with remaining parks in Doncaster such as ‘friends-of’ run and village parks, we could also encourage parks to have smoke-free family-friendly events such as picnics | Work with FIS to develop smoke-free directory of parks that are family-friendly<br>Link in with environment teams and communities teams<br>Also work with YourLifeDoncaster on smoke-free information<br>Connect with any social media and websites for parks to ask them to promote the smoke-free message and support for people to quit                                                       | Materials such as banners, logo and signage for remaining parks and for schools would be needed<br><br>We would want creative approaches to materials – not necessarily just banners and signs, but have some costs included for information                        |
| 1       | Schools        | Run some sort of competition within schools to engage children and young people e.g. poems and stories into a compilation to include on Healthy Learning Healthy Lives website and link in with Library Challenge in the summer<br>Providing existing toolkit adapted from Barnsley and banners for schools                                                                                                                                                 | Smoke-free school gates – look into examples from other areas:<br><a href="https://www.bbc.co.uk/newsround/44614625">https://www.bbc.co.uk/newsround/44614625</a><br><a href="https://www.bbc.co.uk/news/uk-england-south-yorkshire-45389034">https://www.bbc.co.uk/news/uk-england-south-yorkshire-45389034</a><br><br>Social Norms – e.g. comparing perceptions and reality on roving mics etc | 30 x A1 = £426.40<br>6ft x 2 ft banners (c.£25-30 per banner)                                                                                                                                                                                                       |
| 1       | Hospitals      | Doncaster & Bassetlaw Hospitals are already working on smoke-free site work including improved signage, training for staff including security guards in Very Brief Advice and a launch event on World No Tobacco Day 2019                                                                                                                                                                                                                                   | Press and social media work planned by DBH<br>Letters to patients will include this message<br>Bedside information has been updated to include smoke-free site message and offer of support                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                     |

|                                                                                                       |                                                            |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1                                                                                                     | Council events – family friendly                           | Countdown to Christmas<br>Summer events<br>Tour de Yorkshire viewing<br>Colour run | Signage<br>Social media advertising the event to include smoke-free messaging and signposting to support<br>For each event, some sort of ‘hook’ to promote interest, e.g. free ticket draw or local celebrity endorsement                                                                                                                                                                                                                                                                               |  |
| Further consultation specifically around the proposed next spaces and how they would work in practice |                                                            |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 2                                                                                                     | Outdoor eating and drinking areas                          |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 2                                                                                                     | Pedestrianised areas in town centre                        |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 2                                                                                                     | Parks – not just play areas                                |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 2                                                                                                     | Smoke-free sidelines                                       |                                                                                    | <a href="https://www.activehumber.co.uk/news/2018/09/smokefree-sidelines-launched-in-the-humber">https://www.activehumber.co.uk/news/2018/09/smokefree-sidelines-launched-in-the-humber</a><br><a href="https://www.itv.com/news/calendar/2018-09-17/parents-banned-from-smoking-on-the-sidelines/">https://www.itv.com/news/calendar/2018-09-17/parents-banned-from-smoking-on-the-sidelines/</a><br><a href="https://www.bbc.co.uk/programmes/p062ml2p">https://www.bbc.co.uk/programmes/p062ml2p</a> |  |
| 3                                                                                                     | Council events – other                                     |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 4                                                                                                     | Bus stops, railway station and airport                     |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 5                                                                                                     | Smoke-free high streets                                    |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| 5                                                                                                     | Smoke-free markets (including no sale of tobacco products) |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |



## Doncaster Council

**Doncaster  
Health and Wellbeing Board**

**Date: 13 June 2019**

**Subject:** Doncaster Health and Social Care Commissioning Strategy 2019-2021/  
Better Care Fund 2018/19 Quarter 4 Update

**Presented by:** Anthony Fitzgerald/Rupert Suckling

| <b>Purpose of bringing this report to the Board</b> |   |
|-----------------------------------------------------|---|
| Decision                                            | ✓ |
| Recommendation to Full Council                      |   |
| Endorsement                                         |   |
| Information                                         | ✓ |

| <b>Implications</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>Applicable Yes/No</b>             |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------|--|--|---------------|--|--|----------|--|--|---------|--|--|-----------------------|--|--|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px; vertical-align: top;">DHWB Strategy Areas of Focus</td> <td style="padding: 5px;">Substance Misuse (Drugs and Alcohol)</td> <td style="width: 40%;"></td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">Mental Health</td> <td></td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">Dementia</td> <td></td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">Obesity</td> <td></td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">Children and Families</td> <td></td> </tr> </table> | DHWB Strategy Areas of Focus         | Substance Misuse (Drugs and Alcohol) |  |  | Mental Health |  |  | Dementia |  |  | Obesity |  |  | Children and Families |  |  |
| DHWB Strategy Areas of Focus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Substance Misuse (Drugs and Alcohol) |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Mental Health                        |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Dementia                             |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Obesity                              |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Children and Families                |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
| Joint Strategic Needs Assessment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
| Finance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                      |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
| Legal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
| Equalities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |
| Other Implications (please list)<br>To comply with the statutory requirement for BCF plans and returns to be jointly agreed and signed off by Health and Wellbeing Boards                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ✓                                    |                                      |  |  |               |  |  |          |  |  |         |  |  |                       |  |  |

| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Better Care Fund (BCF) is a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authority which is then signed off by the Health and Wellbeing Board. The BCF encompasses a substantial level of funding in order to support health and social care integration. |

## Recommendations

The Board is asked to note the presentation on the Doncaster Health and Social Care Commissioning Strategy 2019-2021 and, in relation to the Better Care Fund update :-

1. note progress against the BCF national conditions, performance indicators, the final BCF outturn position for 2018/19 and general positive progress towards the integration of health and social care in Doncaster;
2. consider the challenges in delivering the BCF plan and actions that could be taken to address these at the strategic level;
3. note that a BCF plan for 2019-20 and supporting Section 75 Agreement will be finalised as soon as funding allocations and planning guidance are received;
4. agree sign off arrangements for the BCF plan for 2019-20 between Board meetings;
5. note the action that is being taken to prepare for more major changes to the BCF anticipated for 2020/21 onwards.

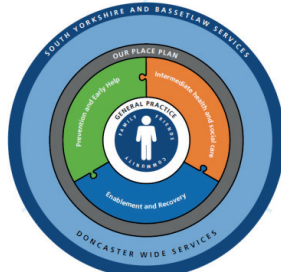


Doncaster  
Council



Doncaster  
Clinical Commissioning Group

**Doncaster  
Health and  
Social Care  
Commissioning  
Strategy**  
2019-2021



|                                      |    |
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| Finance                              | 26 |
| Next Steps                           | 27 |

## **Doncaster Council and NHS Doncaster Clinical Commissioning Group (CCG) are seeking to jointly commission services for the Doncaster borough to:**

- Maintain health and wellbeing
- Improve individual experience
- Improve individual and community outcomes
- Avoid duplication
- Develop our workforce
- Make best use of the Doncaster pound

We have a long history of working together in Doncaster and a crucial step was taken in 2016 when health and social care commissioners and providers came together to jointly agree a plan for the future in Doncaster: The Doncaster Place Plan. This set out a vision for health and social care in Doncaster:

Our joint vision is:

Care and support will be tailored to community strengths to help Doncaster residents maximise their independence, health and wellbeing. Doncaster residents will have access to excellent community and hospital based services when needed.

We have made some significant strides towards that vision. We now have a joint forum between health and social care commissioners and providers in Doncaster which provides leadership on our journey to achieve our joint vision.

This strategy has been jointly produced by health and social care and sets out how our collective action can make the most impact, moving further towards the vision. It sets out our joint commissioning journey for the next two years to enable us to undertake the next steps to:

### **Work closely with local communities and neighbourhoods**

- To aid and build communities, giving individuals hope and a positive vision for themselves and their families.

### **Ensure coordinated access**

- To services when they are needed, ensuring they are accessible and matched to people's level of need.

### **Deliver a more holistic approach to care and support**

- Ensuring all health, care and support needs of individuals and their families are considered.

### **Provide care and support for individuals when they are in crisis**

- Making it easier to access health and care services when they need them the most.

### **Improve support for people with complex needs**

- When it is identified that an individual has complex needs, social, physical or mental health issues, organisations will work together and wrap care and support around them.

**Jackie Pederson,**  
Chief Officer,  
NHS Doncaster CCG



**Damian Allen,**  
Director of People  
Doncaster Council

**Our Vision**  
*Care and support will be tailored to community strengths to help Doncaster residents maximise their independence, health and wellbeing. Doncaster residents will have access to excellent community and hospital based services when needed.*

| Our Gaps       | Health and wellbeing gap                                                                                                                                                                                                                                 | Care and quality gap                                                                                                                                                                                          | Finance and efficiency gap                                                                                                                                                            |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Our Challenges | Health and wellbeing in Doncaster are improving, but still not as fast as the rest of the country, particularly for: Avoidable deaths; Emergency admissions; Proportion of children in need; Permanent admissions to care homes; Healthy life expectancy | Fragmentation and complexity of health & social care services<br>Continued rising demand for health and care services<br>Workforce shortages and the need to ensure the right skills mix to meet future needs | The cost of delivering health and social care continues to increase<br>The collective commissioning gap will continue to grow if we do not deliver the changes we are looking to make |

| Life course vision | <b>Starting Well:</b> To be the most child friendly borough in the country | <b>Living Well:</b> People feel supported within their community; where people do need health and care services they are coordinated and timely | <b>Ageing Well:</b> Doncaster ageing population will receive person-centred, flexible, integrated care and support in their own "home", that aims to maximise their health and independence |
|--------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|--------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Making the change happen**

- Working with our neighbourhoods:**
  - Establish a community and voluntary sector infrastructure
  - Build on what is already available within our communities and support them to develop
  - Develop an integrated approach for the first 1001 days
  - Adopt new ways of working that build resilience in Young People, their families and communities
- Ensuring co-ordinated access to services:**
  - Digitally supported access points to enable signposting to services
  - Explore options for co-ordination across access points
  - Improve and simplify access to children's services
  - Over time reduce the number of access points
- Delivery of integrated health and social care through:**
  - Taking a holistic approach to care and support:**
    - Commission services closer to home
    - Develop locally based primary care networks
    - Jointly commission dementia services from an alliance of providers
    - Bring together physical and mental health services for older people to deliver a "frailty" approach
  - Person centred approach to support complex needs:**
    - Commission a person centred approach for people with substance misuse and mental health needs
    - Commission services to meet the needs of vulnerable people
    - Work to eliminate inappropriate out of area placements
    - Develop the future placements approach to keep as many children and young people at home or close to home as possible
  - Rapid response for those in crisis:**
    - Commission further rapid response approaches, enabling more people to stay in their own home
    - Commission alternatives to A&E for mental health crisis
    - Further develop children's community nursing and therapy services

## REDUCING INEQUALITIES





## Purpose

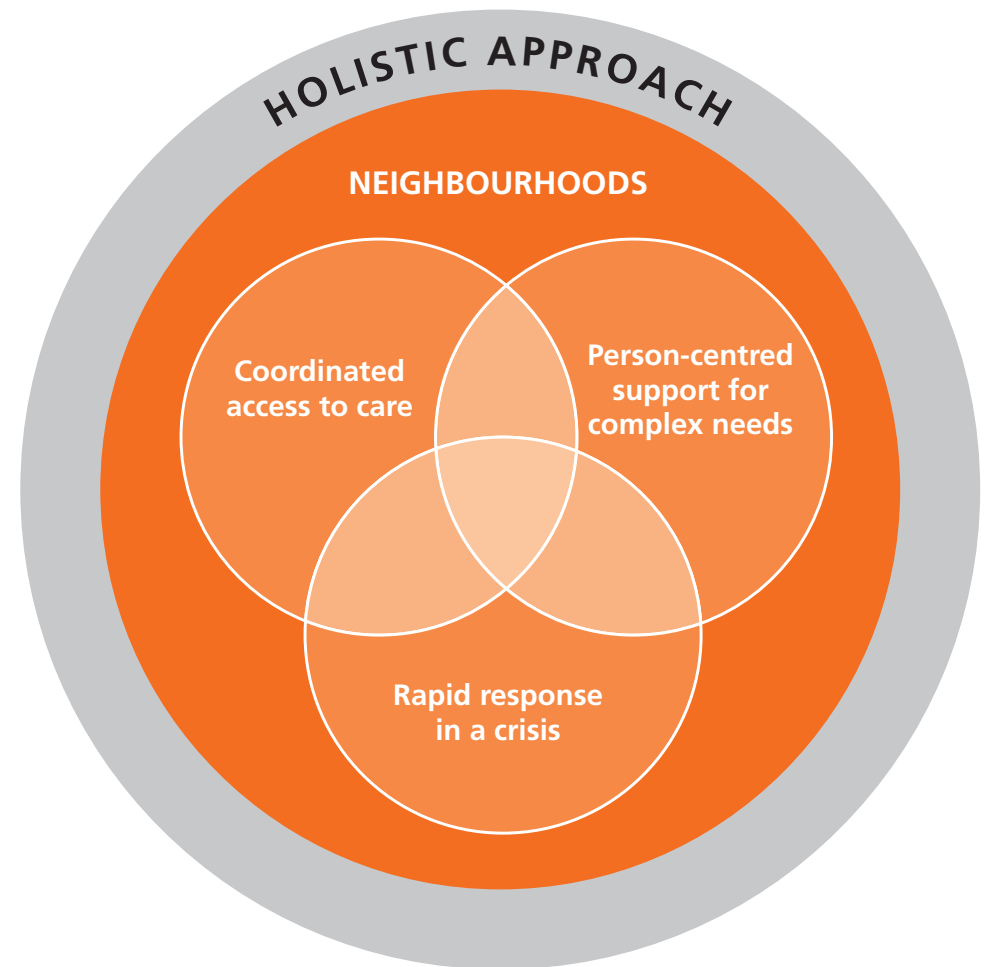
This document sets out the joint commissioning strategy for health and social care in Doncaster for the period April 2019 to March 2021.

It describes the next stage in an ambitious journey to ensure that Doncaster residents receive care, treatment and support that is person centred, designed around their own strengths and needs and that of their families and carers. Ultimately creating services that support Doncaster residents to access support and services at the **right place, in the right way at the right time.**

A key focus of the strategy is to support a managed shift towards health and care that is increasingly preventive and delivered at community level, rather than in acute settings.

If we get this right it will mean that for our population in Doncaster they will:

- Be able to access support developed within their community
- Have co-ordinated access to different health and care services across the borough
- Receive a holistic approach to care and support needs
- Be able to easily and quickly access support and services when in crisis
- Receive enhanced services where there are complex needs



## Scope

This commissioning strategy sits across both health and social care, including Public Health, for adults and children. It captures the services commissioned by both Doncaster Council and NHS Doncaster CCG, with a particular focus on the areas where we will jointly commission together.

The joint commissioning strategy forms one of two key documents for 2019-20 that will drive how we continue to deliver our vision in Doncaster:

- **The Doncaster Place Plan Refresh**
- **The Joint Commissioning Strategy** (this document)

NHS Doncaster CCG is also part of a wider commissioning footprint, the South Yorkshire & Bassetlaw Integrated Care System (ICS). This strategy, however, only refers to commissioning at local place level.



|            | Doncaster Place Plan Re-refresh                                                                                                                                                                                                                                                                                       | Joint Health & Social Care Commissioning Strategy                                                                                                                                                                                                                                                                                                                         |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Purpose    | Sets out the vision for the Doncaster health and social care <b>system</b> over the next two years                                                                                                                                                                                                                    | Sets out the joint <b>commissioning</b> ambitions for health and social care in Doncaster over the next two years                                                                                                                                                                                                                                                         |
| Scope      | Sits across all health and social care organisations, linking in to wider partners such as education.<br>Set in the wider context of Doncaster Growing Together shared vision of Doncaster as a place to learn, work, live and care.<br>Sets out the system drivers to deliver the new health and social care system. | Sits across the health and social care commissioners in the first instance; also recognises the work underway with a broader range of commissioners in Doncaster<br><br>Focused on the full range of priorities for NHS Doncaster CCG and Doncaster Council – setting out both joint priorities and those that remain for one organisation only e.g. medicines management |
| Timeframe  | 2019-22                                                                                                                                                                                                                                                                                                               | 2019-21                                                                                                                                                                                                                                                                                                                                                                   |
| Governance | Doncaster Integrated Care Board                                                                                                                                                                                                                                                                                       | NHS Doncaster CCG - Governing Body<br>Doncaster Council - Cabinet                                                                                                                                                                                                                                                                                                         |

For further detail on how these documents align please see [Appendix 2](#)

## What is Commissioning?

**This strategy considers both strategic and neighbourhood level commissioning, with a strong focus on joint commissioning.**

There will also always be areas of health and social care commissioning that do not require a fully joint up approach. Both NHS Doncaster CCG and Doncaster Council have respective statutory duties and regulatory requirements that will continue to be independent.

This commissioning strategy remains the only commissioning strategy for NHS Doncaster CCG and therefore contains reference to the wider remit that will remain NHS Doncaster CCG only commissioning responsibilities within the appendices.



**Commissioning**

Commissioning is a process to determine how to best use available resources on the basis of needs analysis, evaluating existing services, past performance and notable practice elsewhere.

**Strategic**

Strategic Commissioning takes place over longer time frames. It is also expected that Strategic commissioning will set the framework and standards for commissioning activity at other levels.

**Locality**

Local place shaping and capacity building - move to a model where services are available for people to access without coming to the council, but the council does have a role in supporting these types of services to grow and evolve.

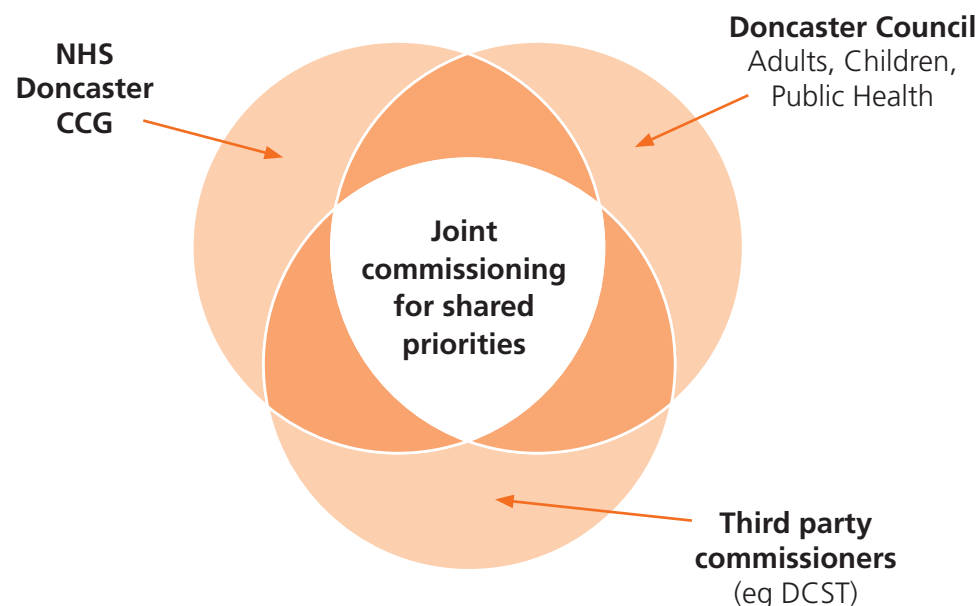
Use/community engagement - generating a richer picture of needs, desired outcomes, local quality and gaps. This could be directly or through community leaders, strengthening the role as an influencer and generating further connectivity across neighbourhoods, communities, wider services and partner footprints.

**Individual**

Done by the individual, a carer, an independent broker, a staff member or a combination of these. The role of Adults Health and Wellbeing Board in this is to ensure individuals have the tools to identify and access the right services; to do so safely, cost effectively and sustainably and to monitor the effectiveness of services in meeting outcomes and managing demand (reviewing Management Information generated via the customer journey).

## What does joint commissioning mean for Doncaster?

There are a number of health and social care commissioners in Doncaster and we already have a history of working together.



At the centre of our approach is an intention to jointly commission services where it makes sense to do so. This means that a range of functions will need to align across our organisations, to deliver the commissioning process noted on page 7.

We have already made good progress towards this in a number of areas, such as Starting Well (see opposite for more detail). Underpinning the continued progression is a joint agreement to move forwards from the Commissioning Agreement signed in 2018.

This will take us along the spectrum outlined on page 9 and will build on the developments seen during 2018, heralded by a number of joint commissioning workshops. The next steps to be taken will include:

- Refresh of the Joint Commissioning Agreement
- Expansion of joint governance mechanisms to include a broader a range of services broader than the seven Areas of Opportunity, commencing with Starting Well
- Development of joint reporting processes
- Consideration of lead commissioner roles across both organisations

With regards to joint commissioning for Starting Well, which includes services for children and maternity, there is an agreed intention to move to one integrated commissioning model, with a standardised approach across NHS Doncaster CCG and Doncaster Council. This will be done in a phased way beginning with co-location of staff across the existing NHS Doncaster CCG and Doncaster Council teams early in the life of the Strategy.

Both organisations recognise that this document is the start of a journey and the strategy will guide the conversations to understand where shared budgets and shared services can build and develop for the benefit of the population across Doncaster.

In addition to NHS Doncaster CCG and Doncaster Council, there are a wider set of commissioners for health and social care, for example the Doncaster Children’s Services Trust (DCST). Work is underway to start to work more closely with our wider partners but we are at differing stages on these particular journeys.

## What does joint commissioning mean for Doncaster?

### The spectrum of joint commissioning

| Key Aspect  | Co-ordinated Commissioning                                                                                                                            | Lead Commissioner                                                                                                                                                                                                        | Joint Commissioning                                                                                                                                                                                                                                                                                                               | Integrated Commissioning                                                                                                          |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Description | Health and social care organisations work closely to align commissioning intentions and contract requirements but do not commission services together | One commissioner takes the lead responsibility to develop commissioning intentions and contract with a provider. Contract associates can work either to the main contract or require separate Key Performance Indicators | Commissioners across health and social care work together to define joint commissioning intentions, supported by shared values, objectives and a pooled budget. Ultimately one contract and one service specification for providers. Teams not necessarily located together but can be supported by an agreement to work together | Fully integrated commissioning team across health and social care. Located together, working as an independent commissioning unit |

The principles that were developed and agreed by all partners during the journey to develop the Place Plan continue to underpin and influence this strategy. These are:

Decisions will be focused on the interests and outcomes of patients and people in Doncaster, and organisations will collaborate to prioritise those interests

Doncaster commissioners, providers, patients, carers and partners will shape the future of Doncaster services together

We will work in an open, honest and constructive way

All partners will actively promote a picture of 'One Doncaster' and speak with a single voice for the greater good

The default position will be that organisations share information to support the provision of good care

As a Doncaster partnership, we will be prepared to take calculated risks

Each organisation will actively promote a culture that facilitates integrated working and empowers staff

We will develop services that respond to the needs and personal goals of the person and their family/ carers

Services will be developed to meet physical, mental health and social care needs

Patients will access excellent hospital based services when needed but there will be a focus on out of hospital care, enablement, maximising independence, promoting self-care and maintaining social networks

## National Policy Context

In 2015, the Local Government Association published the '**Commissioning for Better Outcomes**' Framework. This framework was revised in 2017, in partnership with NHS Clinical Commissioners and published in 2018 as the '**Integrated Commissioning for Better Outcomes: a Commissioning Framework**' (ICBO). It sets out the standards to support local health and care systems to strengthen and progress their integrated commissioning arrangements.

The **NHS Long Term Plan**, published in December 2018, signalled the direction for health and care services over the next ten years. It aims to give everyone the best start in life, deliver world-class care for major health problems, such as cancer and heart disease, and help people age well.

The NHS Long Term Plan also sets out how the challenges that the NHS faces, such as staff shortages and growing demand for services, can be overcome by:

1. **Doing things differently:** giving people more control over their own health and the care they receive
2. **Preventing illness and tackling health inequalities: increasing the focus on** some of the most significant causes of ill health, such as smoking, drinking problems and avoid Type 2 diabetes
3. **Backing the workforce:** increasing the NHS workforce, training and recruiting more professionals
4. **Making better use of data and digital technology**
5. **Getting the most out of taxpayers' investment in the NHS:** through identifying ways to reduce duplication in how clinical services are delivered

The **Care Act 2014**, which came into effect in 2015, represents the most significant reform of care and support in more than sixty years, putting people and their carers in control of their care and support. Some of the main changes include:

1. A minimum national threshold for eligibility for care and support
2. A requirement for the council to arrange **care and support in the community** (not in care homes) for a person who pays for their own care, if requested
3. Increased rights and **help for carers**
4. People in need of support will be encouraged to think about **what outcomes they want to achieve** in their lives
5. Stronger arrangements to protect the most vulnerable people in our society from **abuse and neglect**
6. A greater emphasis on **prevention** - through encouraging and assisting people to lead healthy lives, reducing the chances of them needing more support in the future
7. A greater emphasis on existing **Personal Budgets**, enabling individuals to take control of their care and support delivery
8. Increased support for people who have difficulty in **understanding the care and support assessment** and have no family or friends to help with this

These changes lie at the heart of what we are doing locally.

## The Local Context

The challenges posed by the national context are clearly recognisable in Doncaster, heightened by the three gaps as originally recognised in our Place Plan:

- **The Health & Wellbeing Gap:** health is improving in Doncaster but life expectancy is significantly lower in the most deprived areas of Doncaster
- **The Care & Quality Gap:** although we have made some excellent improvements in the ways that services are delivered, we still continue to have some services that are fragmented and difficult to navigate
- **The Finance & Efficiency Gap:** whilst our services are becoming more efficient, and we are delivering more for the Doncaster pound, demand continues to rise

It is important to note that the strategy also sits within a local policy context:



## What needs to be in place to make this strategy a success?

Across the Doncaster health and social care system there are a number of fundamental changes underway, which are enablers to achieving our vision. They take forward the developments started within the Doncaster Place Plan and include:

- **Population health management and population segmentation**
- **Asset based community development**
- **Integrated neighbourhood teams**
- **Development of co-ordinated access across health and social care**
- **Workforce development to meet future needs**
- **Borough wide estates strategy**
- **Communication, IT and digital capacity across health and social care**



## Community feedback: Why we need to change

During the development of this overarching strategy, we made a commitment to communicate and engage with members of the public, including existing service users and patients.

On 7 January 2019, we launched a six week engagement period, providing a range of online and face-to-face opportunities so people could have their say on our vision to jointly commission health and care services. We asked five key questions and the feedback received is summarised below.

Over the next two years, we will continue to work with and for Doncaster people and local communities to shape, deliver and evaluate health and social care services. We expect this approach to become a normal way of working and details of the next steps can be found in **Appendix 2**

Do you think working across the three life stages will help ensure that local people will get the appropriate health and care services to meet their needs?

Word cloud containing terms like: definitely, right, vision, possible, accessible, people, hopefully, convinced, good, works, improved, service, support, information, needs, point, vision, think, communication, integration, different, size, flow, information, services, providing, one, support, fit, GP, help, feel, listen, based, covered, staff, listening, talk, ask, good, don't, keep, time, th, already, engage, survey, access, service, public, media, want, now, open, level, use, take, local, patients, better, time, th, main, patients, better, time, th, public, media, want, now, open, level, use, take, local, patients, better, time, th, already, engage, survey, access, service.

Is there anything you think that is missing from the vision?

Word cloud containing terms like: vision, support, think, communication, integration, different, size, flow, information, services, providing, one, support, fit, GP, help, feel, listen, based, covered, staff, listening, talk, ask, good, don't, keep, time, th, already, engage, survey, access, service, public, media, want, now, open, level, use, take, local, patients, better, time, th, main, patients, better, time, th, public, media, want, now, open, level, use, take, local, patients, better, time, th, already, engage, survey, access, service.

What one thing could we do better to ensure you are able to take control over your own care?

Word cloud containing terms like: services, providing, one, support, fit, GP, help, feel, listen, based, covered, staff, listening, talk, ask, good, don't, keep, time, th, already, engage, survey, access, service, public, media, want, now, open, level, use, take, local, patients, better, time, th, main, patients, better, time, th, public, media, want, now, open, level, use, take, local, patients, better, time, th, already, engage, survey, access, service.

How could we work better with you to plan, deliver and evaluate health and care services in Doncaster?

Word cloud containing terms like: services, providing, one, support, fit, GP, help, feel, listen, based, covered, staff, listening, talk, ask, good, don't, keep, time, th, already, engage, survey, access, service, public, media, want, now, open, level, use, take, local, patients, better, time, th, main, patients, better, time, th, public, media, want, now, open, level, use, take, local, patients, better, time, th, already, engage, survey, access, service.

Would you like to be involved in future work to develop the strategy?

Word cloud containing terms like: Yes, Maybe, vision, support, think, communication, integration, different, size, flow, information, services, providing, one, support, fit, GP, help, feel, listen, based, covered, staff, listening, talk, ask, good, don't, keep, time, th, already, engage, survey, access, service, public, media, want, now, open, level, use, take, local, patients, better, time, th, main, patients, better, time, th, public, media, want, now, open, level, use, take, local, patients, better, time, th, already, engage, survey, access, service.



## The Journey so far.....

2016

**The Place Plan signalled a step change...**

All age, person centred

Strengthened commitment to joint commissioning and provision

2017

**We started to make our plans a reality...**

The **7 Areas of Opportunity**

Commissioners and providers agreed to plan and deliver services in a more joined up way for: Starting well, Vulnerable Adolescents, Urgent Care, Dermatology, Learning Disability, Intermediate Care, Complex Lives

2018

**We took this a step further...**

The **Joint Commissioning Agreement** was agreed, which detailed the commitment to join together commissioning resources that support the seven Areas of Opportunity

## What have we delivered to date?

The Doncaster Place Plan and subsequent work introduced seven Areas of Opportunity for joint work across commissioners and providers for health and social care. Good progress has been made across the Areas of Opportunity, as highlighted below:

| Seven Areas of Opportunity                     | So far                                                 | Where next?                                              |
|------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------|
| <b>Complex lives</b>                           | Concept proved<br>Team in place<br>Good impact         | Commissioning model development including funding model  |
| <b>First 1001 days</b>                         | Comprehensive business case                            | Securing funding to prove concept and test model         |
| <b>Vulnerable Adolescents</b>                  | Comprehensive business case                            | Securing funding to prove concept and test model         |
| <b>Learning disability and autism strategy</b> | Strategy developed                                     | Presentation to Cabinet/ Governing body in April         |
| <b>Dermatology</b>                             | Care model developed<br>Implementation plan clear      | Commissioning and funding model to be agreed             |
| <b>Intermediate care</b>                       | Rapid in place and concept proved<br>Good impact       | Securing funding to prove concept and test rest of model |
| <b>Urgent and emergency care</b>               | System perfect<br>Intelligence mapping<br>Patient flow | UEC strategy, discharge, integrated urgent care          |

The Place Plan is now being refreshed to consider a broader agenda, balanced across the health and social care system. The refresh will drive the next steps in moving towards our vision from a whole system perspective. This is very much linked to the developments outlined in our plans in the following pages.

As commissioning organisations, NHS Doncaster CCG and Doncaster Council also held a series of joint workshops for commissioners over the course of summer 2018, in order to:

- Get to know one another and establish how we do business
- To begin to develop joint commissioning intentions and delivery plans around three life stages: Starting, Living and Ageing Well
- Share how far we have come on our journey already and start to identify our next steps

## Our Catalysts for Change

In order to address these challenges we face in Doncaster we have recognised a number of catalysts to make the change:

### Working with our neighbourhoods

### Delivery of integrated health and social care through:

- Taking a holistic approach to delivering care and support
- Rapid response for those in crisis
- Person centred approach to support complex needs

### Ensuring co-ordinated access to services

These catalysts run throughout our plans as they are important to our population as a whole. The catalysts have been developed through reviewing the needs of our population, and tested out during our engagement on this strategy.

## Understanding the needs of our population

We already have a wealth of health and care data at the Doncaster level, as set out in the Joint Strategic Needs Assessment, which identifies our key health and wellbeing issues in Doncaster.

However, in taking this forwards we have recognised that we need to tailor our approach for our population and we are using Population Health Management as a tool to guide this work.

### Population Health Management (PHM)

#### What is population health?

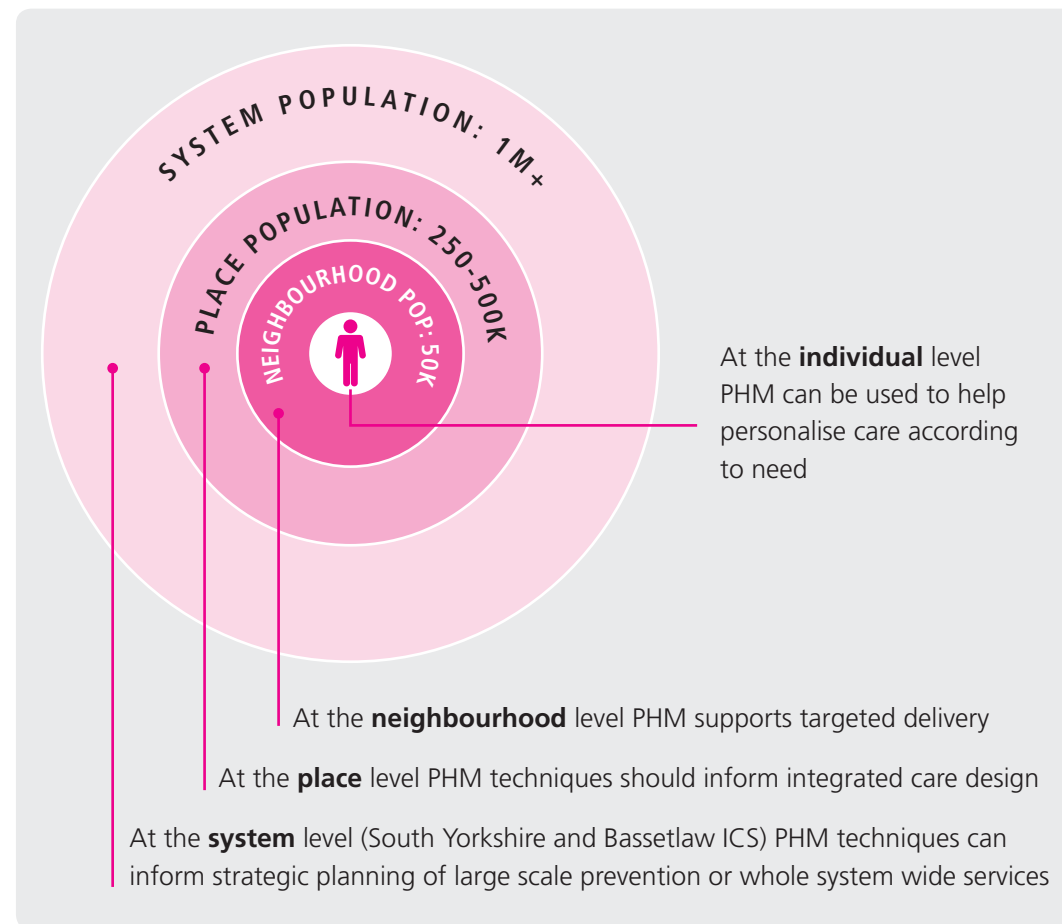
Population Health is an approach aimed at improving the health of an entire population. It is about improving the physical and mental health outcomes and wellbeing of people, whilst reducing health inequalities within and across a defined population. It includes action to reduce the occurrence of ill-health, including addressing the wider determinants of health, and requires working with communities and partner agencies.

#### Principles of population health management

PHM improves population health by data driven planning and delivery of care to achieve maximum impact.

It includes segmentation, stratification and impact modelling to identify local “at risk” cohorts. This in turn enables the design of targeted interventions to prevent ill-health and improve care and support for people, resulting in reduced variations in outcomes.

In taking forwards the PHM management approach we are now starting to be able to identify how we need to target our commissioning across the life stages and within our neighbourhoods. The intention is to build on a standard offer for all our population, by identifying specific challenges at neighbourhood level, using new combinations of data and lived experience, to identify and deliver targeted interventions. This could include developing specific approaches for population segments as opposed to using any pre-existing disease based categories.



We have identified three key life stages and these form the framework for our plans:

**Starting Well:** focussed on our children, adolescents and maternity

**Living Well:** focussed on working age people

**Ageing Well:** focussed on our older population

## Approach to prevention

Embedding prevention in all our services is critical in order to ensure that our services are sustainable and that they achieve the desired outcomes for the people of Doncaster. Whilst prevention means different things to different people, we have used a model of prevention (see opposite) that is holistic and captures the different levels of prevention, within each of the life stages:

- **Wider determinants** or strengthening the resilience of individuals and communities e.g. housing, transport, healthy food, green spaces, asset based community development, etc. These also are described as “Wellbeing” theme in Doncaster Health and Wellbeing Board outcome framework.
- **Primary prevention** such as reducing risk factors of diseases e.g. stopping smoking, and weight management – (relevant to Starting Well, Living Well, and Ageing Well programmes)
- **Secondary prevention** (early detection of diseases e.g. screening programmes) - (relevant to Starting Well, Living Well, and Ageing Well programmes);
- **Tertiary prevention:** This includes the management of long-term conditions such as self-management; complex lives, end of life care, etc. While this type of prevention is considered to be most relevant for Ageing Well, it is also relevant for Starting Well and Living Well programmes.

## Model for prevention

**Supporting people living with chronic conditions to manage their health. With the aim of preventing further disease and reducing the impact on health care services e.g. medications, care planning,**

Tertiary Prevention  
**Long Term  
Conditions  
Management**

**Finding people living with undiagnosed disease. Early detection can lead to better disease outcomes. e.g. cancer screening programmes, NHS Health Checks.**

Secondary Prevention  
**Early Detection**

**Reducing risk factors that cause disease, before disease is prevalent. E.g. smoking cessation, weight management.**

Primary Prevention  
**Risk Factors**

**Wider determinants**

**Population wide interventions available to everyone. Ensuring the environment people live in is conducive to a healthy lifestyle. E.g. green space, active transport, healthy food policy.**

## What is a Delivery Plan?

To achieve our ambitions, we need a number of delivery plans that will ensure key priorities are addressed and delivered by health and social care organisations in Doncaster, working with and for patients and members of the public

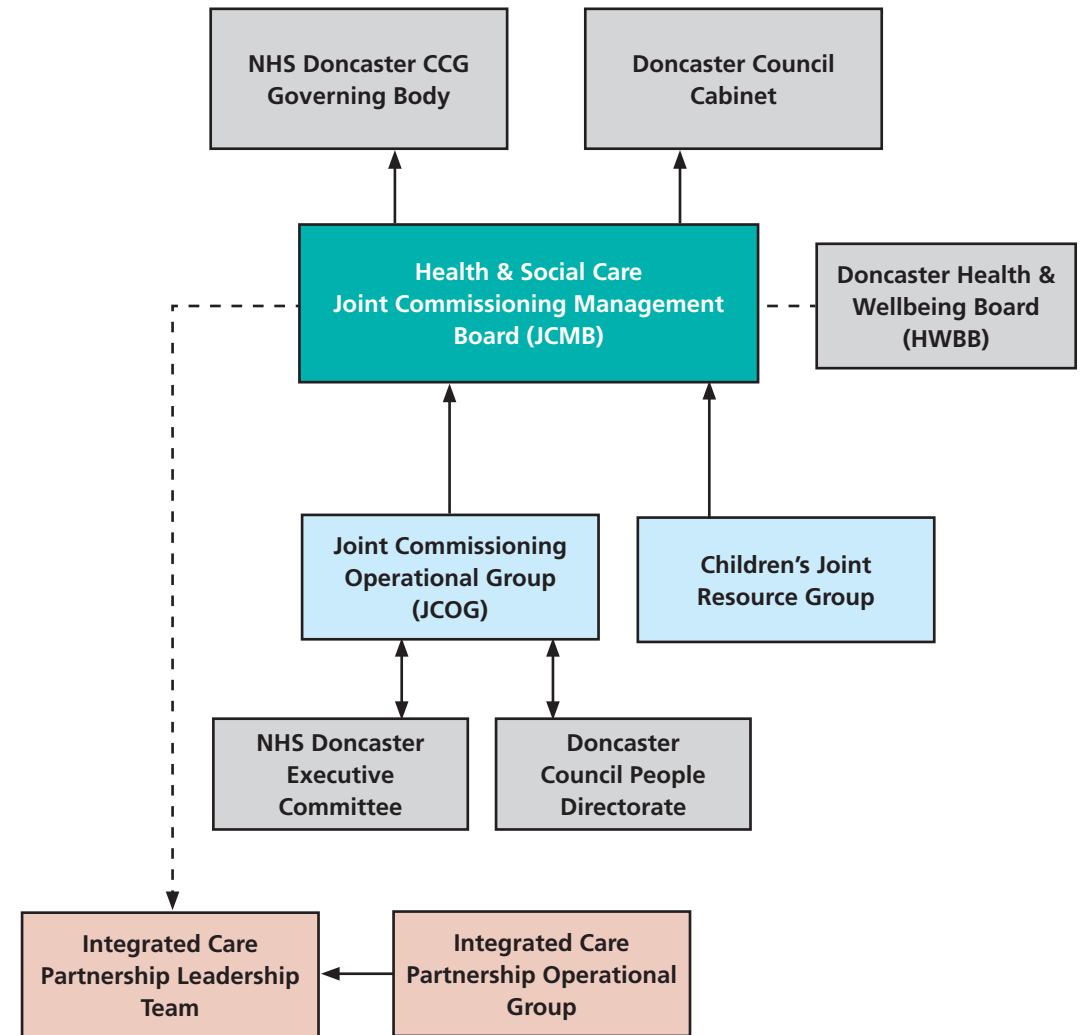
Delivery plans have been agreed at both at strategic and operational level and the full plans can be found in [Appendix 1](#). The following pages within this document capture the essence of each of those plans:

- What we want to achieve
- How we will know if we are making a difference
- Actions to make the change happen

The specific plans are aligned to the three life stages and these will be used in year to drive the commissioning activities of our organisations and to hold ourselves to account.

## Accountability

The Delivery Plans form a key driver for holding ourselves to account in year, against the actions we plan to take. In order to do this we will be developing joint reporting mechanisms, using the governance framework shown opposite. The refresh of the Commissioning Agreement will set out the underpinning detail to enable this to happen.



## STARTING WELL - Summary Plan 2019-21

**Scope** Starting well is the local term to define all aspects of the children and maternity agendas and sits within the strategic framework of the Doncaster Children and Young People's Plan (2017 -20). This plan marks a significant step forward in our collective efforts driven by the vision to be the most child friendly Borough in the country.

**Starting well vision** *To be the most child friendly borough in the country*

| <b>What do we want to achieve for the children and young people of Doncaster?</b> | <b>Low level interventions based in our neighbourhoods</b>                                                                                                                                                                                                                                                           | <b>Co-ordinated access to services when needed</b>                                                                                                                                                          | <b>Holistic delivery of care and support</b>                                                                                                                                                                                                                                                                                             | <b>Responsive and accessible care in a crisis</b>                                                           | <b>Person centred support for people with complex needs</b>                                                                                       |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                   | <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Teenagers and Young People are Safe</li> <li>• Children and Young People are healthy and have a sense of wellbeing</li> <li>• Children and Young People's development is underpinned through a healthy lifestyle</li> </ul> | <ul style="list-style-type: none"> <li>• Children have access to the right services at the earliest opportunity</li> <li>• Young People are equipped to access education, employment or training</li> </ul> | <ul style="list-style-type: none"> <li>• All Children are school ready</li> <li>• All Children attend a good or better setting educational setting and aspirations are raised to ensure that they reach their potential</li> <li>• No child suffers significant harm from neglect</li> <li>• Fewer Children living in poverty</li> </ul> | <ul style="list-style-type: none"> <li>• Domestic abuse practice is transformed across Doncaster</li> </ul> | <ul style="list-style-type: none"> <li>• Diminish the difference between disadvantaged and non-disadvantaged Children and Young People</li> </ul> |

## STARTING WELL - Summary Plan 2019-21

| Making the change happen                                   | Low level interventions based in our neighbourhoods                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Co-ordinated access to services when needed                                                                                                                                                  | Holistic delivery of care and support                                                                                                                                                                                                                                                                                                                                                                  | Responsive and accessible care in a crisis                                                                                                                                                                          | Person centred support for people with complex needs                                                                                                                                                 |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                            | <ul style="list-style-type: none"> <li>Listen to what Children and Young People have told us is important to them, and improve outcomes in these areas.</li> <li>Adopt new ways of working that builds resilience in Young People, their families and communities.</li> <li>Develop an integrated commissioning approach for the first 1001 days</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <ul style="list-style-type: none"> <li>Improve access to autism and ADHD services, ensuring a smooth pathway</li> <li>Improve access to children's mental health support services</li> </ul> | <ul style="list-style-type: none"> <li>Place a renewed focus on social mobility and how services enable Children and Young People to get on</li> <li>Deliver the Better Births Programme to ensure woman have access to information to make decisions about their own care centred around their individual needs</li> <li>Further develop children's community nursing and therapy services</li> </ul> | <ul style="list-style-type: none"> <li>Develop an integrated commissioning approach for Vulnerable Adolescents</li> <li>Develop the local dynamic risk register for identified children and young people</li> </ul> | <ul style="list-style-type: none"> <li>Develop a future placements strategy</li> <li>Develop joint commissioning arrangements across health and social care for special educational needs</li> </ul> |
| <p><b>How will we know we are making a difference?</b></p> | <ul style="list-style-type: none"> <li>There will be a reduction in Stillbirths, Maternal mortality, neonatal mortality and serious brain injury</li> <li>There will be 0 suicides for Children and Young People in Doncaster</li> <li>Any child or young person referred into a consultant paediatrician-led rapid-access service can be seen within 24 hours of the referral being made</li> <li>Children and young people have a positive experience of care</li> <li>Sustainable improvements in emotional wellbeing and mental health</li> <li>Improving Waiting Times for Urgent and Routine Referrals for Children and Young People's Eating Disorder Services</li> <li>Reducing and preventing Children with a learning disability, autism or both being admitted to a Tier IV inpatient service</li> <li>A reduction in the achievement gap between disadvantaged pupils and their peers</li> <li>Reduction in the Rate of Children in Need and in Care</li> </ul> |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                     |                                                                                                                                                                                                      |

The respective actions to commission services to deliver this along with the full set of expected outcomes are set out in the Starting Well Strategic Delivery Plan; please see [Appendix 1](#)

## LIVING WELL - Summary Plan 2019-21

|                                                                |                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |
|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Scope</b>                                                   | Living Well covers a very broad segment of our population. The focus for this population segment is around helping working age people to keep healthy and active where possible, receiving timely treatment where needed.                                                                                                                            |                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |
| <b>Living well vision</b>                                      | <i>People feel supported within their community; where people do need health and care services they are coordinated and timely</i>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                        |
| <b>What do we want to achieve for the people of Doncaster?</b> | <b>Low level interventions based in our neighbourhoods</b>                                                                                                                                                                                                                                                                                           | <b>Co-ordinated access to services when needed</b>                                                                                                                                                                                                                                              | <b>Holistic delivery of care and support</b>                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Responsive and accessible care in a crisis</b>                                                                                                                   | <b>Person centred support for people with complex needs</b>                                                                                                                                                                                                                                                            |
|                                                                | <ul style="list-style-type: none"> <li>• People are engaging with community neighbourhood support to manage aspects of their health and wellbeing, including physical and mental health</li> <li>• Where low level interventions are required these are delivered within communities, through an integrated voluntary and statutory offer</li> </ul> | <ul style="list-style-type: none"> <li>• Where services are required they are readily accessible and responsively matched to people's level of need</li> <li>• Access points are co-ordinated across the health and social care system to enable people to be proactively signposted</li> </ul> | <ul style="list-style-type: none"> <li>• Pathways consider the holistic "whole" needs of the individual in the context of their family and community</li> <li>• This includes access to and integration of a broader informal support network in addition to any formally commissioned health and social care provision</li> <li>• Local markets are shaped to ensure that delivery meets the needs of our population in a holistic manner</li> </ul> | <ul style="list-style-type: none"> <li>• Where people are in crisis care and support services are simple to access and community based where appropriate</li> </ul> | <ul style="list-style-type: none"> <li>• Agencies work together to deliver effective, person centred care for people with complex health and or social need</li> <li>• Agencies also work together and identify missed opportunities to engage with people who may have needs that would otherwise be unmet</li> </ul> |



## LIVING WELL - Summary Plan 2019-21

| Making the change happen | Low level interventions based in our neighbourhoods                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Co-ordinated access to services when needed                                                                                                                                                                                                                                                                                                                                                                                                                    | Holistic delivery of care and support                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Responsive and accessible care in a crisis                                                                                                                                                                                                                                                                                                                          | Person centred support for people with complex needs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | <ul style="list-style-type: none"> <li>• Work with our Learning Disability population to ensure that the recommendations from the LD Strategy are implemented</li> <li>• Commission a Social Isolation Alliance, to tackle all age loneliness and social isolation</li> <li>• Commission dispersed housing and outreach support for victims of domestic violence</li> <li>• Develop four neighbourhood based social cafes to provide person centred support and champion mental wellbeing within communities</li> </ul> | <ul style="list-style-type: none"> <li>• Increase the use of Your Life Doncaster, the Integrated Doncaster Care Record and other technologies across health and social care to enable a coordinated response at any point of access</li> <li>• Building on care navigation, explore the scope for Primary Care Extended Access hubs to become the co-ordinating centre for a number of services, alongside the development of Primary Care networks</li> </ul> | <ul style="list-style-type: none"> <li>• Deliver the local Living With and Beyond cancer strategy, to support people that have undergone cancer treatment to manage the next steps on their journey</li> <li>• Develop a community based health single point of access to ensure that people are able to access the right service in the community, only being admitted when there is no other alternative and enhance discharge support.</li> <li>• Maximise use of Assistive Technology</li> <li>• Continue to redesign health services to ensure community based delivery where appropriate, such as fibromyalgia, ophthalmology and spinal</li> </ul> | <ul style="list-style-type: none"> <li>• Develop and implement proposals for the front end modernization of Mental Health Access Services, providing genuine alternatives to A&amp;E and hospital admission</li> <li>• Review the Doncaster Urgent Care model, to ensure that people are able to get to the right service quickly and in the right place</li> </ul> | <ul style="list-style-type: none"> <li>• Develop a joint agency agreement for homelessness and rough sleeping, including intensive wrap around support models and a Doncaster Housing first offer</li> <li>• Review the panels that oversee management and support for complex and high intensity users, working with the police to ensure one coordinated approach across the local system</li> <li>• Agencies to develop a person centred approach for people with substance misuse and mental health needs currently within supported accommodation</li> </ul> |

## LIVING WELL - Summary Plan 2019-2021

### How will we know we are making a difference?

- There will be a 10% reduction in suicides
- Fewer people in Doncaster will be overweight or obese
- 100% of all adults with a learning disability will receive a timely Care and Treatment Review pre and post admission
- Fewer people in Doncaster will smoke
- Doncaster residents' quality of life will be improved and inequalities reduced
- People will be more often managed in the appropriate setting
- Fewer people under age 75 will die from Cancer, Cardiovascular disease and Respiratory disease
- People of all ages will be able to access a range of urgent care in different settings, dependent on clinical need
- Urgent care services will work smoothly and effectively across all parts of the system, at both points of access and discharge
- Patient-reported outcomes from Physical healthchecks will improve for patients with a Serious Mental Illness
- At least 50% of people who complete IAPT treatment should move towards recovery
- Improved satisfaction of Doncaster residents with the health and care services they receive
- The number of people with a Delayed Transfer of Care will be at least maintained in line with the nationally required trajectory, and reduced as far as possible
- Improvement in the proportion of people who use services and carers, who report that they have as much social contact as they would like.
- The rate of domestic abuse incidents reported to the police, per 1,000 population will be reduced

*The respective actions to commission services to deliver this along with the full set of expected outcomes are set out in the Living Well Strategic Delivery Plan and Supporting Operational Plans; please see [Appendix 1](#)*

| AGEING WELL - Summary Plan 2019-21                                   |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                               |                                                                                                                                                                                                                                                  |
|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Scope</b>                                                         | Healthy ageing will be supported across Doncaster, recognising preventative approaches that reduce loneliness and social isolation, promote self-care and independence.                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                               |                                                                                                                                                                                                                                                  |
| <b>Ageing well vision</b>                                            | <i>Doncaster ageing population will receive person-centred, flexible, integrated care and support in their own "home", that aims to maximise their health and independence</i>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                               |                                                                                                                                                                                                                                                  |
| <b>What do we want to achieve for the older people of Doncaster?</b> | <b>Low level interventions based in our neighbourhoods</b> <ul style="list-style-type: none"> <li>Healthy ageing is supported across Doncaster through preventative approaches that reduce loneliness and social isolation, promote self care and independence</li> <li>People will be supported to live in their homes for longer by services that are able to respond to their increasing complexity of need</li> </ul> | <b>Co-ordinated access to services when needed</b> <ul style="list-style-type: none"> <li>Care and support is co-ordinated and seamless</li> <li>Individuals, their families and carers will be engaged in their care and support</li> </ul> | <b>Holistic delivery of care and support</b> <ul style="list-style-type: none"> <li>Individuals are supported and in control of their condition, care and support, optimising their independence to enable them to live better quality of lives</li> <li>Person centred approaches are taken that ensure more involvement and control, through direct payments and greater choice</li> <li>The health and social care workforce have the skills to safely care and support individuals within their neighbourhood</li> <li>Individuals have choice in their place of death</li> </ul> | <b>Responsive and accessible care in a crisis</b> <ul style="list-style-type: none"> <li>No individual is admitted to or will remain in hospital or residential care unnecessarily</li> </ul> | <b>Person centred support for people with complex needs</b> <ul style="list-style-type: none"> <li>People are supported to live in their homes for longer by services that are able to respond to their increasing complexity of need</li> </ul> |

## AGEING WELL - Summary Plan 2019-21

| Making the change happen | Low level interventions based in our neighbourhoods                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Co-ordinated access to services when needed                                                                                                                                                                                                            | Holistic delivery of care and support                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Responsive and accessible care in a crisis                                                                                                                                                                             | Person centred support for people with complex needs                                                                                                                                                                                                                                                                                                                                          |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | <ul style="list-style-type: none"> <li>• Improve recognition of and support for carers</li> <li>• Continue to raise awareness and reduce stigma regarding dementia, across Doncaster</li> <li>• Raise public awareness of the importance of the last year of life across Doncaster</li> <li>• Develop commissioning intentions for day opportunities , ensuring links into emerging neighbourhood developments</li> <li>• Commission a Social Isolation Alliance, to tackle all age loneliness and social isolation</li> </ul> | <ul style="list-style-type: none"> <li>• Ensure admission and discharge processes into Acute Hospitals are seamless, ensuring a “home first” approach supported by robust direct pathways and signposting to alternatives where appropriate</li> </ul> | <ul style="list-style-type: none"> <li>• Jointly design and commission an integrated frailty model, including people in care homes</li> <li>• Explore the opportunities for a joint community therapies offer to improve outcomes associated with rehabilitation and re-ablement</li> <li>• Jointly commission post-diagnostic dementia support services, contracting with an accountable care partnership</li> <li>• Continue to work with wider stakeholders on the development of a neighbourhood model for community based multi-professional teams</li> </ul> | <ul style="list-style-type: none"> <li>• Continue to work with providers to implement the Intermediate Care service model, building on the Rapid Response model, avoiding hospital admission where possible</li> </ul> | <ul style="list-style-type: none"> <li>• Increase system-wide adoption of advanced care planning as part of the Doncaster approach for managing frailty and end of life care</li> <li>• Ensure the urgent and emergency pathway for people with dementia aligns with the intermediate care program, to develop out of hospital care that responds to increasing complexity of need</li> </ul> |

## AGEING WELL - Summary Plan 2019-2021

### How will we know we are making a difference?

- There will be an increase in people with Dementia whose care plan has been reviewed in primary care in the last 12 months
- At least 67% of people with Dementia will be diagnosed in line with the national standard in 2019-20
- People aged 65 and over will report an improvement in their functioning and quality of life following the episode of care
- More people aged 65 and over will report that they would be likely to recommend community services to friends and family
- There will be an Increase in people aged 65 and over being discharged to their usual place of residence in 2019-20
- There will be an increase in the percentage of people aged 65 and over still at home 91 days after discharge from hospital into reablement/rehabilitation services
- There will be a reduction in the percentage of people who died and had 3 or more emergency admissions in the 90 days prior to death
- The percentage of people recorded on the end of life pathway as dying in their preferred place of death will increase
- There will be a reduction in people aged 65 and over attending A&E, including those from care homes

*The more detailed actions to commission services to deliver this, along with the full set of expected outcomes are set out in the Ageing Well Strategic Delivery Plan and supporting Operational Plan; please see [Appendix 1](#)*

The financial environment for all health and social care organisations is challenging. The Doncaster Place Plan recognised the scale of this challenge in 2016, and despite significant efficiencies being delivered by both commissioners and providers since then, the challenge remains:

- **Demand is increasing**
- **Complexity of need is increasing**
- **Costs are increasing**
- **Resources are restricted**

As a result, our plans to reduce duplication, work with existing strengths within communities and promote prevention/keep people as well for as long as possible, are essential.

Both NHS Doncaster CCG and Doncaster Council face the continued challenge of closing the financial gap whilst continuing to invest in services. The CCG has an overall allocation of £530m which includes ring-fenced allocations for Primary Care (£46m) and running costs (£7m). The remainder of the allocation is to deliver Acute, Mental Health, Community, Prescribing and Individual Placement activity. NHS Doncaster CCG has significant investment to make in Primary Care and Mental Health in order to deliver the Five Year Forward View and expectations contained within the NHS Long Term Plan. The CCG has identified an overall gap of approximately £10.3m for 2019-20 and has detailed plans to close this gap, working alongside Doncaster Council wherever possible to jointly commission services and individual care for patients

Doncaster Council has an estimated £21m budget gap in 2019-20 on a gross budget of £495m across all services. Following the use of £3m one-off reserves, the gap for 2020-21 is estimated at £13m. The 2019-20 budget plan includes £19.6m additional funding for Adults & Children's Services to meet demand, cost pressures and undelivered savings from previous years. It also includes £7.0m savings for Adults Services covering all areas of the care ladder; Residential Care Working Age, Home Care & Direct Payments and the impact of the Front Door and Community Offer. In addition savings are targeted for staffing restructuring & functional review to manage our workforce to deliver effective and efficient services.



This joint commissioning strategy sets a number of challenges:

- **To work in different ways with our communities**
- **To work together, in a much more joined-up way as commissioning organisations**
- **To encourage our providers to work differently with regards to the services delivered – both how and where they are delivered**

In order to achieve this, the commissioning strategy must be used as a live document:

- We have a number of prerequisites which we must continue to develop across our system and then adopt as business as usual.
- We have broad ranging strategic delivery plans, supported by operational delivery plans to deliver (see [Appendix 1](#))
- We have a challenging financial environment to deliver.

The table below sets out the next steps and indicative timeframes for our joint commissioning journey.

| Commissioning Agreement Key Milestones and timeframes                                                                   |                                                                               | 2019-20 |  |  |  | 2020-21 |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------|--|--|--|---------|--|--|--|--|--|--|--|
| <b>Delivery of Strategic and Operational Plans</b>                                                                      |                                                                               | →       |  |  |  |         |  |  |  |  |  |  |  |
| <b>Commissioning Agreement Refresh</b>                                                                                  | Develop joint reporting for the Delivery Plans                                | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Amend governance arrangements to reflect three life stages                    | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Further develop joint commissioning levels of ambition                        | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Consider lead commissioner roles                                              | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Consideration of shared savings plans approach, commencing with Starting Well | →       |  |  |  |         |  |  |  |  |  |  |  |
| <b>Place Plan Refresh</b>                                                                                               |                                                                               | →       |  |  |  |         |  |  |  |  |  |  |  |
| <b>Implementation of enablers</b>                                                                                       | Population health management and population segmentation                      | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Asset based community development                                             | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Integrated neighbourhood teams                                                | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Health and social care co-ordinated access                                    | →       |  |  |  |         |  |  |  |  |  |  |  |
|                                                                                                                         | Co-productive workforce                                                       | →       |  |  |  | →       |  |  |  |  |  |  |  |
|                                                                                                                         | Borough wide estates strategy                                                 | →       |  |  |  | →       |  |  |  |  |  |  |  |
|                                                                                                                         | Communication, IT and digital capacity                                        | →       |  |  |  | →       |  |  |  |  |  |  |  |
| <i>Note: The enablers are closely aligned to the Place Plan, and as such cannot be delivered by commissioners alone</i> |                                                                               |         |  |  |  |         |  |  |  |  |  |  |  |







# Doncaster Council

## Report

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**Agenda Item No. 12**  
**Date: 13 June 2019**

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

### **BETTER CARE FUND – BCF – 2018/19 QUARTER 4 UPDATE**

| <b>Relevant Cabinet Member(s)</b> | <b>Wards Affected</b> | <b>Key Decision</b> |
|-----------------------------------|-----------------------|---------------------|
| Cllr Rachael Blake                | All                   | No                  |

### **EXECUTIVE SUMMARY**

- 1.1 This report provides an update on the Quarter Four 2018/19 Statutory Return for the Better Care Fund – BCF. A comprehensive return was submitted with a good understanding of the current position, informed by the review of 42 BCF schemes carried out in Quarter Three and the Adult Social Care Peer Challenge in January 2019.
- 1.2 Partners represented at the Joint Commissioning Operational Group – JCOG - agreed that delivery of Doncaster’s BCF Plan has improved joint working and has had a positive impact on the integration of health and social care.
- 1.3 Key points from the Quarter Four 2018/19 return are that the partnership continues to meet all the national conditions for BCF and was on track to meet the targets in three out of the four national indicators (Reduction in non-elective admissions, Reablement, Delayed transfers of Care), the exception being the Rate of permanent admissions to residential care (65+) which was not on track to meet an ambitious target. *See 5.3d and Appendix 1.*
- 1.4 Doncaster has progressed well in implementing the High Impact Change Model across health and social care, with six out of the eight changes reported as ‘established’ and ‘plans in place’ for the remaining two.
- 1.5 Key successes reported include:

- Improved joint working at the strategic level – reflected in Governance, Joint

[www.doncaster.gov.uk](http://www.doncaster.gov.uk)

- Commissioning Strategy, joint agreements and joint outcomes framework;
- Increased integration at the operational level - two pilots involving multi-disciplinary teams are moving towards mainstream integration (Intermediate Care and Complex Lives);
- Seven Day working - Rapid Response, community and bed based Intermediate Care services accept referrals seven days a week. (The Doncaster Rapid Response Service case study was featured in the new NHS 10 Year Plan and was also recognised as an exemplar service in the 2019 Health Service Journal Value Awards);
- Joint commissioning arrangements have been strengthened - joint lead appointed for Children and Young People and very positive work in joint commissioning of post-diagnostic Dementia Support Services;
- Good prevention offer being delivered through Public Health and Stronger Communities/Wellbeing Team - Affordable Warmth, Move More, Well Doncaster.

1.6 Key challenges identified in project updates in 2018/19 were:

- Discharges creating displacement elsewhere in the system (i.e. in homecare);
- Realigning resources and moving investment to other parts of the system – as pilot projects demonstrate their effectiveness, recurrent funding is required to replace temporary funding;
- Information Governance – obtaining sign-off of information sharing agreements to enable the appropriate sharing of data (e.g. to support the tracking of patient journeys through various pathways to provide improved intelligence on a system-wide basis);
- Supporting the market to develop (A new market position statement is in development);
- Supporting the voluntary sector. (A project is currently underway led by the voluntary sector to design and implement a democratically elected co-ordination function which will enable the sector to connect with each other and Team Doncaster, due to report in September 2019.)

*See Appendix 2 for full narrative provided in the return.*

1.7 The final financial outturn position is summarised below.

*See Appendix 3 for full details.*

| <b>Funding</b>   | <b>Budget<br/>£'000</b> | <b>Outturn<br/>£'000</b> | <b>Variance<br/>£'000</b> |
|------------------|-------------------------|--------------------------|---------------------------|
| BCF - CCG        | 15,457                  | 15,457                   | 0                         |
| BCF - DMBC       | 7,302                   | 7,302                    | 0                         |
| iBCF             | 11,492                  | 11,040                   | -452                      |
| Winter Pressures | 1,510                   | 1,510                    | 0                         |

The £452,000 underspend on iBCF will be carried forward to 2019/20 to help smooth the impact of the reduction in iBCF allocation, in line with the Council's financial strategy.

1.8 The National BCF Policy Framework for 2019-20 has been published but the planning requirements and CCG funding allocations are still awaited. As a result, the final local plan for 2019-20 will not be available for the June meeting of the Health and Wellbeing Board to consider and so arrangements for sign-off will need to be agreed. Nationally, 2019-20 is to be a year of minimal change for BCF and so locally it is proposed to continue existing

schemes.

- 1.9 A new Section 75 agreement for the pooled budget arrangements between the Local Authority and Clinical Commissioning Group is being produced reflecting recent changes to the governance. BCF progress and updates are being reported to the Joint Commissioning Operational Group – JCOG - with recommendations being ratified by Joint Commissioning Management Board – JCMB. Final responsibility for the sign off of the BCF Plan and Quarterly Statutory Return remains with the Health and Wellbeing Board.
- 1.10 National guidance has explained that any major changes to BCF will be from 2020-21 onwards. Existing schemes will be made aware of the potential changes in order that they can review implications for their service and staff, and develop an appropriate exit strategy. A number of schemes have been requested to provide an update on their performance, interdependencies with other projects and exit strategy to JCOG over the next six months, in readiness for funding announcements expected later this year.

## **EXEMPT REPORT**

2. The report does not contain any exempt information.

## **RECOMMENDATIONS**

- 3.1 That the Health and Wellbeing Board notes progress against the BCF national conditions, performance indicators, the final BCF outturn position for 2018/19 and general positive progress towards the integration of health and social care in Doncaster.
- 3.2 That the Board considers the challenges in delivering the Doncaster BCF plan and actions that could be taken to address these at the strategic level.
- 3.3 That the Board notes that a Doncaster BCF plan for 2019-20 and supporting Section 75 Agreement will be finalised as soon as funding allocations and planning guidance are received and agrees sign-off arrangements between Board meetings.
- 3.4 That the Board notes the action that is being taken to prepare for more major changes to the BCF anticipated for 2020-21 onwards.

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

4. The Better Care Fund – BCF – is a key resource to enable health and social care integration and transformation of current services. Doncaster residents should expect to be supported to maintain their independence as long as possible and also see a more integrated, seamless response from health and social care partners. Doncaster residents should be able to plan their care with people who work together to support choice and control and bring together services to achieve the outcomes that are important to the individual.

## **BACKGROUND**

- 5.1 The BCF is a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the

NHS and local authority which is then signed off by the Health and Wellbeing Board. The BCF encompasses a substantial level of funding in order to support health and social care integration. In 2018-19 this comprised:

|                                     |                    |
|-------------------------------------|--------------------|
| Disabled Facilities Grant (Capital) | £2,500,475         |
| Improved Better Care Fund           | £11,491,740        |
| CCG Minimum Fund Contribution       | £22,758,655        |
| <b>Total BCF Pooled Fund</b>        | <b>£36,750,870</b> |

Whilst not formally pooled as part of the Section 75 Agreement, the Winter Pressures Grant of £1,509,880 was also subject to the joint approval conditions outlined below.

- 5.2 The national conditions that the partnership must meet are:
- a) Plans must be jointly agreed;
  - b) Planned contribution to social care from the CCG minimum contribution is agreed in line with the Planning Requirements;
  - c) Agreement to invest in NHS commissioned out-of-hospital services;
  - d) Managing transfers of care;
  - e) Funds are pooled via a Section 75 pooled budget arrangement;
  - f) Implementation of the High Impact Change Model.
- 5.3 There are four key BCF national indicators which must be monitored. At Q4 these were reported as follows:
- a) **Reduction in non-elective admissions – On track to meet target**  
There have been 4.7% fewer emergency admissions for patients aged 85+ and 6.2% fewer admissions due to falls for patients aged 65+ in April 2018-February 2019 than in 2017-18.
  - b) **Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services - On track to meet target**  
The improvement in 2017-18 has continued in 2018-19. Additional homecare and community based capacity is enabling people to remain at home.
  - c) **Delayed transfers of care – DToC – On track to meet target**  
Collaborative work across the health and social care community has resulted in a significant reduction in DTOCs. For April 2018-January 2019 DTOCs are 24.2% below the BCF target and 31.6% below the corresponding period in 2017-18.
  - d) **Rate of permanent admissions to residential care (65+) – Not on track to meet target**  
Effective residential care resources panel has led to a significant reduction in admissions. However this was an ambitious target and admissions are monitored.
- 5.4 The High Impact Change Model – HICM - consists of eight system changes which have the greatest impact on reducing delayed discharge. Doncaster has progressed well in implementing the HICM across health and social care and the following changes are now established:
- Systems to monitor patient flow

- Multi-disciplinary/multi-agency discharge teams
- Home first/discharge to assess
- Seven-day service
- Focus on choice
- Enhancing health in care homes.

5.5 Two of the High Impact Changes have not progressed at as fast a pace in terms of being embedded within the system and the following are reported as 'Plans in place':

- Early discharge planning - There is currently a need to undertake further work around early discharge planning particularly with primary care to identify those who will require additional support following elective care and unplanned care;
- Trusted Assessors - There is currently limited buy-in from care homes for the Trusted Assessor model and this has resulted in it being challenging to progress. Discussions are taking place with local care homes to support and develop the model further. A Trusted Assessor (reviewer) model is being prototyped with one of our strategic local home care providers to review care packages and step up/step down where appropriate.

Funding has been secured from the Regional BCF Manager to work on these two changes with the Innovation Unit, which is currently providing support for the delivery of the Place Plan. The support includes workshops, deep-dive analysis and a visit to a best practice area.

5.6 **Key successes reported in 2018/19 include:**

- Improved joint working at the strategic level – reflected in Governance, Joint Commissioning Strategy, joint agreements and outcomes framework;
- Increased integration at the operational level - two pilots involving multi-disciplinary teams moving towards mainstream integration (Intermediate Care and Complex Lives);
- 7 Day working - Rapid response, Community and bed based intermediate care services accept referrals 7 days a week;
- Joint commissioning arrangements have been strengthened - a joint lead appointed for Children and Young People and very positive work in joint commissioning of post-diagnostic Dementia support services;
- Good prevention offer being delivered through Public Health and Stronger Communities/Wellbeing Team - Affordable Warmth, Get Doncaster Moving 'Move More', Well Doncaster.

5.7 **Key challenges identified in project updates in 2018/19 were:**

- Discharges creating displacement elsewhere in the system;
- Realigning resources and moving investment to other parts of the system;
- Information Governance – obtaining sign off of information sharing agreements to support the secure, lawful and appropriate sharing of data;
- Supporting the market to develop;
- Supporting the voluntary sector.

5.8 **Planning for BCF in 2019-20**

The Department of Health and Social Care and the Ministry of Housing,

Communities and Local Government published the 2019-20 Better Care Fund Policy Framework on 10 April 2019. 2019-20 is to be a year of minimal change for the Better Care Fund, prior to the outcome of the BCF review and the 2019 Spending Review. Any major changes will be from 2020-21 onwards.

- 5.9 The National Conditions are very similar to those in 2017-19. The national ambition for managing and reducing Delayed Transfers of Care (DToc) will continue. The BCF should continue to support the aim to reduce the number of patients who remain in acute hospitals for an extended period (21 days or more) by continuing to implement and embed the High Impact Change Model.
- 5.10 Expectations for local areas will continue to be set through the BCF and will be confirmed in the Planning Requirements but these have still not been issued. In the absence of the planning requirements, current schemes funded by BCF are being continued. A number of schemes have been targeted to provide an update to JCOG over the next six months on their performance, interdependencies with other projects and exit strategy, in readiness for announcements about BCF for 2020-21 onwards.
- 5.11 As it is anticipated that partners will be given six weeks to prepare plans and they will also go through a local assurance process prior to submission, local plans will not be available for the June meeting of the Health and Wellbeing Board and alternative sign off arrangements will need to be agreed.
- 5.12 Grant allocations to the Local Authority for Disabled Facilities Grant, Improved BCF and Winter Pressures Grant for 2019-20 have been confirmed as follows:

|                                               |                    |
|-----------------------------------------------|--------------------|
| Winter Pressures Grant                        | £1,509,880         |
| Improved Better Care Fund                     | £12,185,089        |
| Additional Improved Better Care Fund          | £2,135,843         |
| Disabled Facilities Grant                     | £2,451,971         |
| <b>Total allocated to the Local Authority</b> | <b>£18,282,783</b> |

- 5.13 **Section 75 Agreement**  
 The existing Section 75 Partnership Agreement between Doncaster Council and Doncaster CCG, which sets out terms to maintain pooled funds relating to BCF and iBCF, expired on 31 March 2019. The refresh of this agreement has started, however the draft requires confirmation of the national funding allocations to the CCG, local plan and governance arrangements.
- 5.14 **Governance**  
 It is proposed that current arrangements continue; BCF progress and updates are reported to the Joint Commissioning Operational Group – JCOG - with recommendations being ratified by Joint Commissioning Management Board – JCMB. Final responsibility for the sign off of the BCF Plan and Quarterly Statutory Return remains with the Health and Wellbeing Board.

## OPTIONS CONSIDERED

6. The delay in issuing national planning guidance and announcing grant amounts has meant that in the timescales available, there is little alternative to continuing existing schemes in 2019/20.

## REASONS FOR RECOMMENDED OPTION

7. The limited timescales available to work with partners and the notice period that would be required to end contracts.

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

|  | <b>Outcomes</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Implications</b>                                                                                                 |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
|  | <p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>                                                                                                                                                                                                       | BCF supports the Well Doncaster project which supports people into employment.                                      |
|  | <p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul> | BCF supports the Get Doncaster Moving 'Move More' project.                                                          |
|  | <p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in Doncaster Schools that are good or</li> </ul>                                                                                                                                                                                                          | BCF supports projects to deliver the outcomes identified in the Doncaster Place Plan for children and young people. |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                               |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p>better</p> <ul style="list-style-type: none"> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                               |
|  | <p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>                                                                                                                                                                                                 | <p>BCF supports projects to deliver the outcomes identified in the Doncaster Place Plan.</p>                                                                                  |
|  | <p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul> | <p>BCF supports projects to build community resilience.</p> <p>BCF is a key resource to enable health and social care integration and transformation of current services.</p> |

## RISKS AND ASSUMPTIONS

- 9.1 National communications and workshops have explained that 2019-20 is to be a year of minimal change for the Better Care Fund. The national amount for BCF is similar to previous years and has been increased in line with average NHS revenue growth. On this basis, existing schemes are being continued for 2019-20 with an uplift for inflation where appropriate.
- 9.2 National guidance has explained that any major changes to BCF will be from 2020-21 onwards. Schemes will be made aware of the potential changes in order that they can review implications for their service and staff, and develop an appropriate exit strategy. A number of schemes have been requested to provide an update on their performance, interdependencies with other projects and exit strategy to JCOG over the next six months, in readiness for announcements later in the year.

## LEGAL IMPLICATIONS

10. No Legal implications have been sought for this update paper.



## **FINANCIAL IMPLICATIONS**

11. No Financial implications have been sought for this update paper.

## **HUMAN RESOURCES IMPLICATIONS**

12. No HR implications have been sought for this update paper.

## **TECHNOLOGY IMPLICATIONS**

13. No Technology implications have been sought for this update paper.

## **HEALTH IMPLICATIONS**

14. No Health implications have been sought for this update paper.

## **EQUALITY IMPLICATIONS**

15. No Equality implications have been sought for this update paper.

## **CONSULTATION**

16. Update papers are reported to Joint Commissioning Operational Group, Joint Commissioning Management Board.

## **BACKGROUND PAPERS**

17. N/A

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### **Name & Title of Lead Officer**

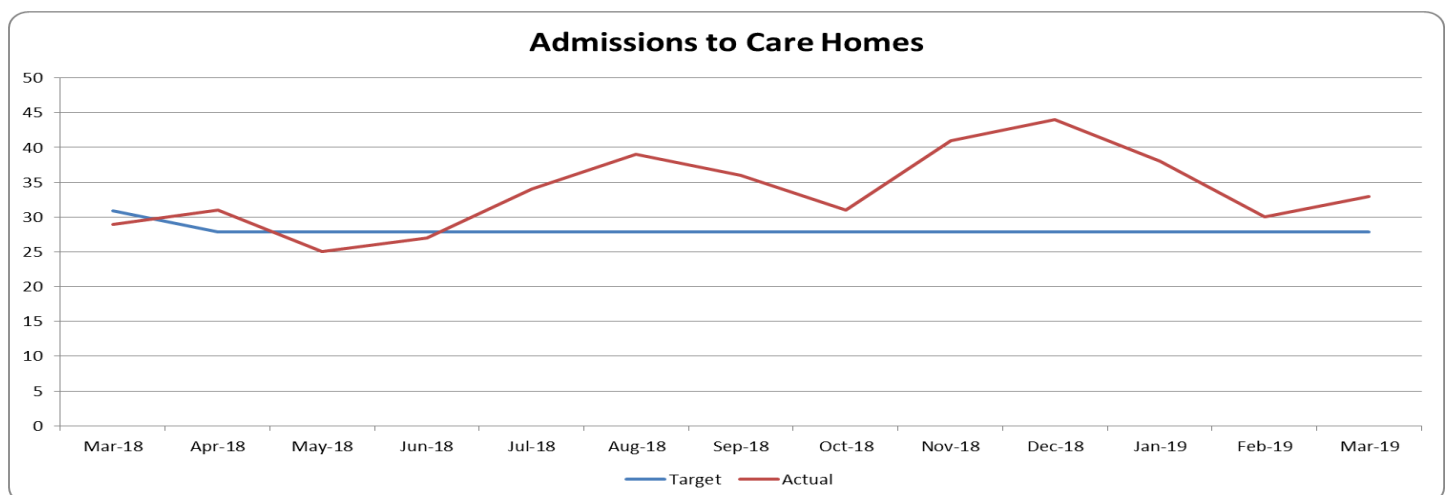
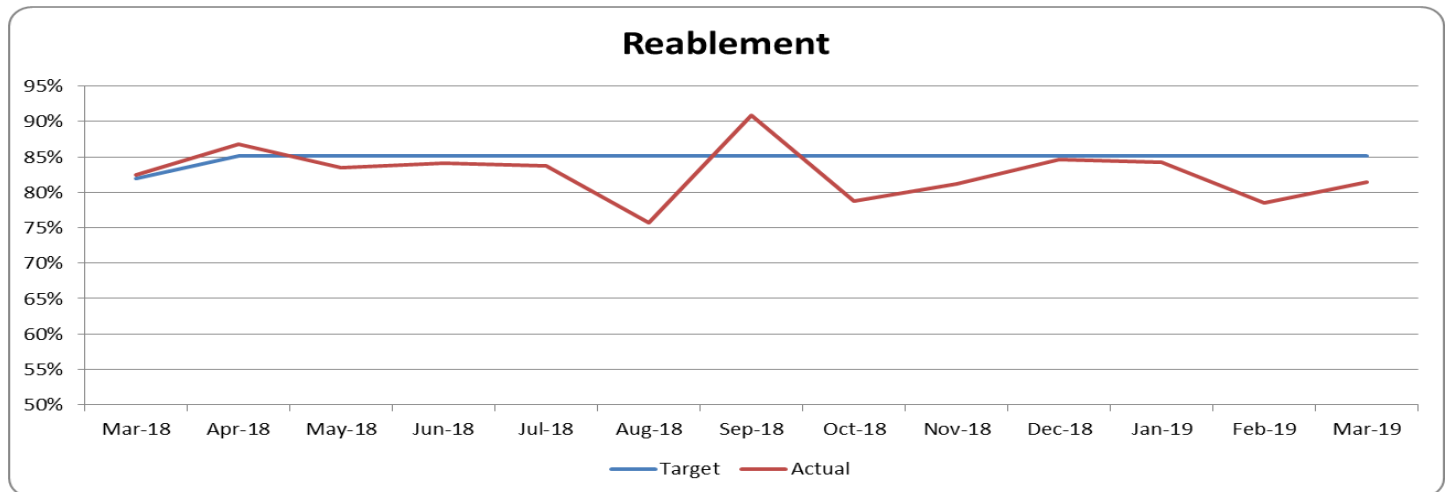
**Dr Rupert Suckling, Director of Public Health**

**BCF National Metrics**

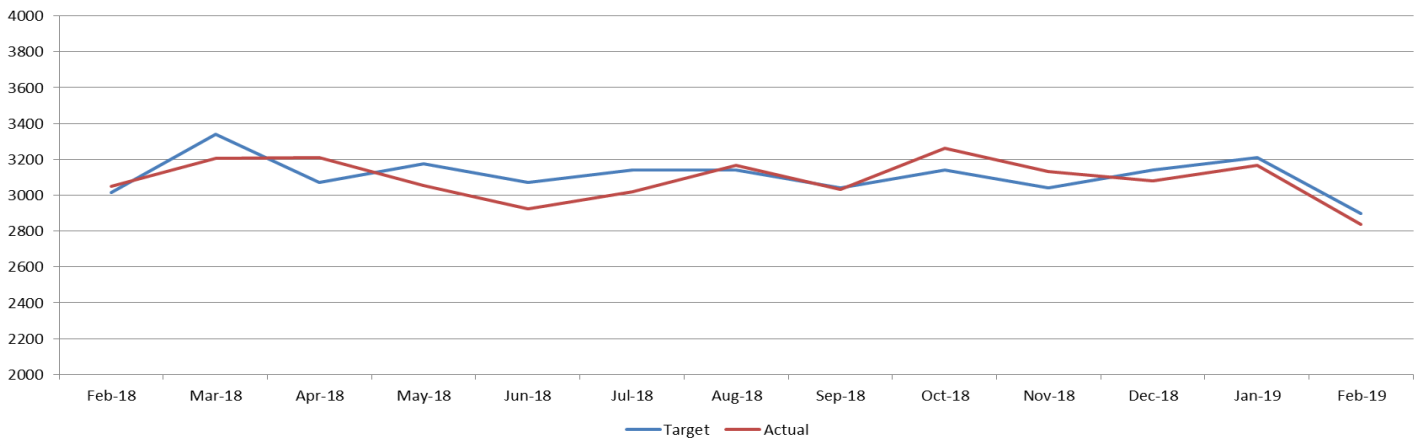
**Year to date performance**

| Metric                   | 2018-19 target | 2018-19 actual | Var.    | 2017-18 | Var.    |
|--------------------------|----------------|----------------|---------|---------|---------|
| Reablement               | 85%            | 82.69%         | -2.94%  | 81.49%  | 1.48%   |
| Admissions to care homes | 334            | 409            | 22.46%  | 403     | 1.49%   |
| Non -elective admissions | 34073          | 33885          | -0.55%  | 34373   | -1.42%  |
| Delayed Transfers        | 5613           | 4629           | -17.53% | 6068    | -23.71% |
| DTOC NHS                 | 2251           | 2637           | 17.15%  | 1944    | 35.65%  |
| DTOC ASC                 | 1852           | 1237           | -33.19% | 2942    | -57.95% |
| DTOC Joint               | 1510           | 755            | -50.01% | 1182    | -36.13% |

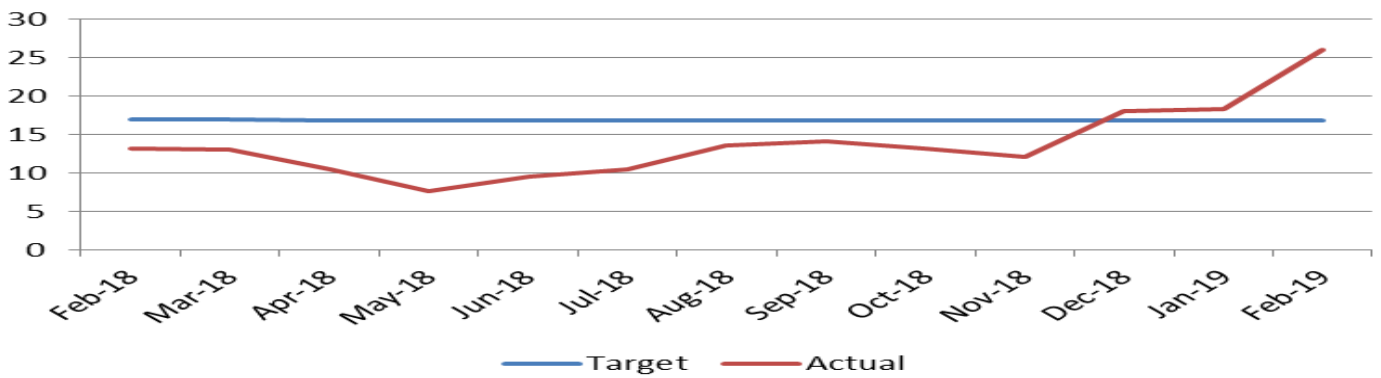
**Monthly performance**



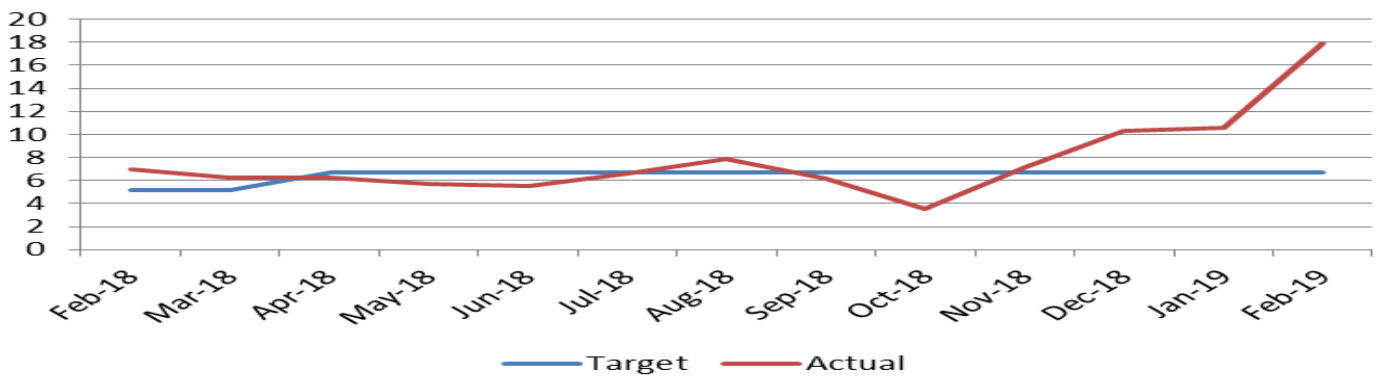
### Non-elective admissions



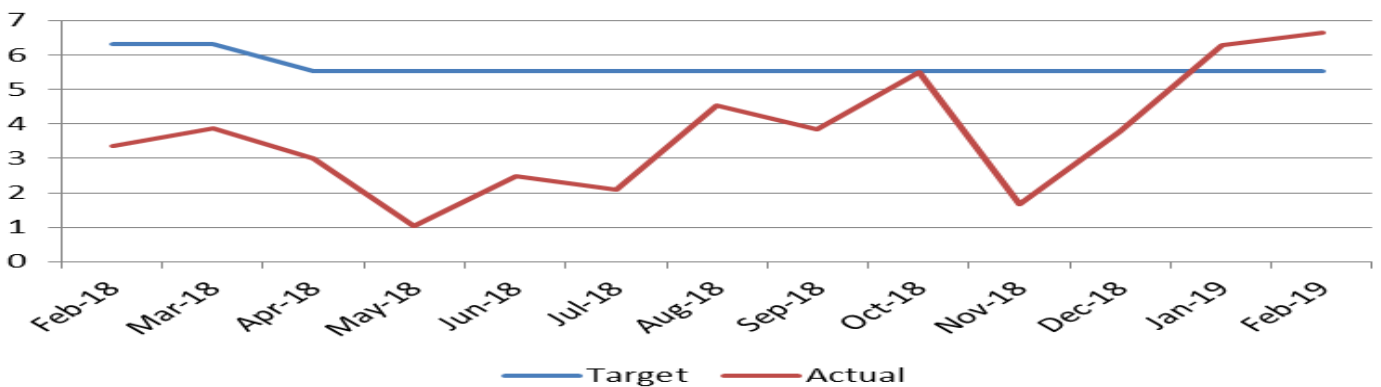
### Total delayed transfers of care



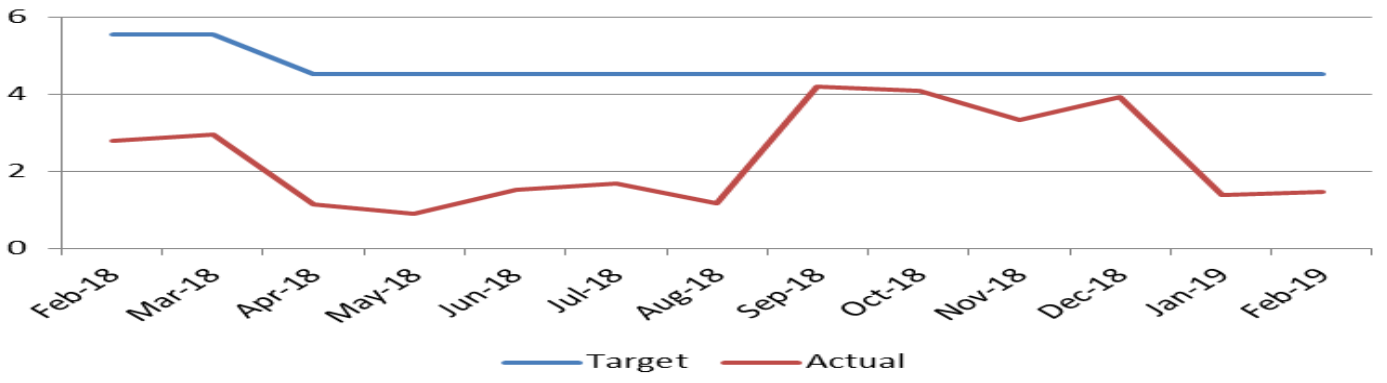
### NHS attributable delayed transfers



### Social Care attributable delayed transfers



## Jointly attributable delayed transfers



**BCF 2018-19 Annual Update**

**Appendix 2**

**Delivery of the Better Care Fund**

|   | Statement                                                                                                 | Response                                                                                                             | Comment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | The overall delivery of the BCF has improved joint working between health and social care in our locality | <p>Strongly agree</p> <p><b>Agree</b></p> <p>Neither agree nor disagree</p> <p>Disagree</p> <p>Strongly disagree</p> | <p>Partnership governance is in place to deliver the Caring theme of the Borough Strategy, delivered through the Place Plan. The Doncaster Integrated Care Partnership Board leads the strategic development of the partnership, bringing together all Local Authority, housing and NHS organisations in Doncaster.</p> <p>The Joint Commissioning Management Board oversees delivery of the Joint Commissioning Strategy (CCG, Public Health, Children and Young People’s and Adult social care) which is a major enabler of joint working. This is underpinned by a legally binding Joint Commissioning Agreement.</p> <p>A Provider Collaborative Agreement is also in place, delivered through the Provider Alliance overseen by the Provider Executive Group.</p> <p>The Health and Wellbeing Board oversee an integrated outcomes framework, delivered through Joint Commissioning and the Place Plan.</p> <p>Projects are working across numerous partners including Doncaster Council, Doncaster CCG, Rotherham Doncaster and South Humber NHS Trust, Doncaster and Bassetlaw Teaching Hospital NHS Trust, Primary Care, Doncaster Children’s Services Trust, Yorkshire Ambulance Service and voluntary sector.</p> <p>Good examples of multi-disciplinary teams and what a collaborative approach can achieve are Intermediate Care Rapid Response and Complex Lives (also recognised by a recent Peer Challenge and</p> |

|   |                                                                                                                             |                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|   |                                                                                                                             |                                                                                               | highlighted elsewhere in this return.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 2 | Our BCF schemes were implemented as planned in 2018/19                                                                      | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | Two pilots are now moving to mainstream provision and being used as proof of concept for multi-disciplinary teams, to be replicated in other areas.<br><br>An in depth review of 42 schemes funded by BCF has been undertaken. A programme of scheme reviews has been developed to inform future integration initiatives.                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 3 | The delivery of our BCF plan in 2018/19 had a positive impact on the integration of health and social care in our locality. | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | Integrated, neighbourhood-based multi-disciplinary teams are being established, with prototypes around older people with frailty (Thorne) and early help for children and young people and their families (Denaby and Hexthorpe).<br><br>The integrated Digital Care Record has helped enable joined up assessment and care planning and to support better decision making and manage risk as professionals can see who is involved in a person's care.<br><br>Separate contracts for Dementia services have been brought together under one contract and specification. Providers have moved from a competitive to a more collaborative approach. A joint learning disability and autism strategy across the Council and CCG is also nearing completion. |
| 4 | The delivery of our BCF plan in 2018/19 has contributed positively to managing the levels of Non-Elective Admissions        | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | The BCF continues to provide support to the health and social care integration in Doncaster.<br>4.7% fewer emergency admissions for patients aged 85+ and 6.2% fewer admissions due to falls for patients aged 65+ Apr 2018-Feb 2019 than in 2017-18.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 5 | The delivery of our BCF plan in 2018/19 has contributed positively to managing the levels of Delayed Transfers of Care      | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | Collaborative work across the health and social care community has resulted in a significant reduction in DTOCs. For Apr 2018-Jan 2019 DTOCs are 24.2% below the BCF target and 31.6% below the corresponding period in 2017-18.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

|   |                                                                                                                                                                                                                                       |                                                                                               |                                                                                                                                                                                                                                                                               |
|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6 | The delivery of our BCF plan in 2018/19 has contributed positively to managing the proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | The improvement in 2017-18 has continued so far in 2018-19.<br><br>The development of integrated intermediate care services, and integrated neighbourhood delivery will ensure that this continues to be strengthened and supports a decrease in DTOCs.                       |
| 7 | The delivery of our BCF plan in 2018/19 has contributed positively to managing the rate of residential and nursing care home admissions for older people (aged 65 and over)                                                           | Strongly agree<br><b>Agree</b><br>Neither agree nor disagree<br>Disagree<br>Strongly disagree | Effective residential care resources panel has led to a significant reduction in admissions (18% fewer in 2017-18 than 2015-16).<br><br>The emerging new care model to support people with frailty more proactively will also have an impact on admissions to permanent care. |

### Success and Challenges

|                    | Enabler                                                                            | Response (detail your greatest success/challenge)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Success 1</b>   | Integrated electronic records and sharing across the system and with service users | The integrated Digital Care Record allows professionals to view what is happening with their patients. It has helped to change decision making and manage risk as professionals can see who is involved in a person's care.                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Success 2</b>   | Strong, system-wide governance and systems leadership                              | Joint commissioning arrangements include the Council, CCG and Public Health. Commissioning for Children and Young People has a jointly appointed lead. Integration of children and young people's commissioning teams has been agreed for 3 test areas. Very positive work has taken place in joint commissioning of post-diagnostic Dementia support services. Joint Commissioning Agreements and Provider Agreements are in place. A joint Commissioning Strategy has been agreed by the CCG and Doncaster Council for 2019-2021; this is supported by jointly agreed delivery plans.<br><br>Doncaster Integrated Care Partnership Board oversees whole system health and care strategy for Doncaster. |
| <b>Challenge 1</b> | Pooled or aligned resources                                                        | Some pilots have been tested, evaluated and implemented over a number of phases to prove concept, however it is proving difficult to realign resources and move investment to different parts of the system.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Challenge 2</b> | Integrated workforce: joint approach to training and upskilling of workforce       | Staff recruitment and retention, which affects the capacity to take on more referrals, and staff skills gaps are highlighted as a challenge for a number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

|  |  |                                                                                                                                                                                          |
|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  |  | <p>of interconnected projects.</p> <p>A Strategic Workforce and Education Committee is now in place to lead the development and implementation of a cross-system workforce strategy.</p> |
|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**1 Progress against local plan for integration of health and social care (Significant milestones met, any agreed variations to plan, any challenges)**

**Adult Social Care Peer Challenge January 2019**

The recent Peer Challenge found there are good links with Public Health, the Police and other agencies; a strong neighbourhood focus and information sharing systems with Health. There is a Partnership Agreement in place and work is driven by a Joint Committee. CCG colleagues were particularly impressed with DMBC colleagues using the Place Plan to inform change to their work. The Peer Challenge also noted good use of external expertise to guide Doncaster on the improvement journey, e.g. Cormac Russell (Asset Based Community Development) and Professor John Bolton (managing demand).

**Joint Commissioning**

Joint commissioning arrangements have been strengthened through a formal joint commissioning agreement, which sets out clear expectations, roles and responsibilities across the whole system. Workshops have been held over the past 12 months which led to the development of the 'life stage' commissioning approach (Starting Well, Living Well and Ageing Well) which moves the commissioning partnership into a population health management approach. Joint commissioning arrangements include the Council, CCG and Public Health. Joint Commissioning Agreements and Provider Agreements are in place and a Joint Commissioning Strategy has been produced.

Commissioning for Children and Young People has a jointly appointed lead. Integration of children and young people's commissioning teams has been agreed for three test areas; First 1001 Days, Vulnerable Adolescents and Children with additional needs.

Very positive work has taken place in joint commissioning of post-diagnostic Dementia support services. All organisations have separate contracting arrangements, however they are all brought together under one overarching service specification for Post Diagnostic Services. Four additional contracts which deliver a Dementia Family Support Service will transfer to the CCG from 1 April 2019 and become part of the Accountable Care Partnership. Since 1 April 2018 partners have focused on developing partnership working and addressing cultural differences. Considerable progress has been made in terms of development of the model and also with the encouraging of partnership cohesion. Providers have moved from a competitive to a more collaborative approach. Partners have confirmed that they agree to a proportionate cost reduction to their contract values with no impact to current service provision.

**Areas of Opportunity**

Business cases for integrated models of care have been developed for *First 1001 days* and *Vulnerable adolescents*

Two pilots (*Intermediate Care Rapid Response* and *Complex Lives*) have tested new models of delivery and are now moving to mainstream provision. These approaches are being used as proof of concept for multi-disciplinary teams to be replicated in other areas. (See Integration Success Story below)



*Learning Disability*

A new Learning Disability and Autism strategy is in final draft ready to go through CCG and Council governance.

**Dermatology**

Clinical model endorsed by Clinical Reference Group.

**Urgent and Emergency Care**

- Good partnership and engagement work is moving forward
- Discharge: HomeFirst proposal further developed and costed
- Integrated Urgent Care (IUC 111) implementation is underway
- Work completed by RDaSH on the mental health pathway template to ensure that people can access the right local service first time
- System Perfect focussed around mental health delivered
- Development of Doncaster UEC Strategy and model underway
- Hospital/home interface workstream is being scoped

**Prevention**

A good prevention offer is being delivered through Public Health and Stronger Communities/Wellbeing Team. Well Doncaster is a pilot site for Well North, a strategic collaboration between local areas, Public Health England and Manchester University. In Well North Denaby, a local steering group is in place which includes local organisations that are set up to improve the wellbeing and health of people living in a former coal mining village. This scheme included “micro-grants” given out via Healthwatch to help people to become more active. 2018/19 has focused on moving the programme into four additional communities. Strategic and community partners have been engaged and community action plans developed for each area. Well Doncaster has supported and influenced partners’ integrated area based working agenda and fed in to the delivery of Community Led Support and Social Prescribing projects. The project is also working in partnership with Sport England’s Local Delivery Partnership and developing a community based approach to understanding physical activity to inform whole system change.

**Neighbourhood Delivery**

Joint locality multi-disciplinary teams are being established of professionals and non-professionals working together from a single location. This enables information sharing between disciplines and teams to deliver strengths-based and solution focused advice and interventions. Integrated Neighbourhood Developments are starting with an initial focus on the people who are frail and for children and young people and their families who can be directed to community-led support.

21 Community Led conversation points have been set up, operating at different times in our four localities, following the identification of “hot spot” locations.

Wellbeing Officer roles have been created to support the delivery of the Integrated Support and Assessment Team – ISAT. These roles are being used to enhance the ISAT model and provide a completely innovative new service with a 72 hour response, focused on:

- Prevention, diversion and targeted interventions to promote independence
- Developing knowledge, understanding and culture within customer services and ISAT around community offer and signposting opportunities
- Providing high quality, accessible and easy to understand information, advice and guidance
- Encouraging and supporting people to find their own independent solutions, making best use of all available local resources
- Provision of a 72 hour response, to identify “pinch” points in health and care delivery and to deliver quick low level interventions to prevent access to crisis/service or to enable a managed escalation into appropriate services, without crisis.

### **Building Community Capacity**

Consultation has taken place with citizen leaders, practitioners, business and faith leaders and commissioners to embed Asset Based Community Development in communities across Doncaster. Five initiatives have been identified:

- Community builders: investment in small scale (not necessarily Third Sector Organisations) local community activities.
- Matching funds with effort/time in local communities
- Organisational development and training
- Assessment and case management systems that support an asset-based approach
- Asset mapping of local communities.

### **Equipment and Adaptations**

Demand for use of assistive technology is on the rise. Installations of telecare equipment have increased 35% from the same period last year. Software has been upgraded to improve the quality of data going into the system and also enable mobile working for team members. An awareness campaign has taken place encouraging people to purchase equipment for themselves.

### **Discharges**

A Discharge Passport is given to patients throughout the acute hospital when they arrive on the ward to consider plans for their discharge; work is underway to review how this can be used system wide. The protocol for making housing applications has been refreshed and updated by all partners and has been circulated to all staff to raise awareness of the pathway. Housing meetings have been established with key housing leads to progress housing issues. The Home First proposal has been further developed and costed. The High Impact Change Model is being implemented across the partnership.

## Enablers

**Doncaster Innovates (Innovation Academy)** - The Innovation Unit and FutureGov have been commissioned to support Place Plan partners in Doncaster to develop their capacity and capability in the use of innovation techniques, delivered through a programme of action learning called Doncaster Innovates. This will provide challenge and support to services and organisations by bringing on board innovation frameworks and modern methods to support the integration of health and social care. The team has spent three months researching what innovation looks like in Doncaster now. Over the next three years, Innovation Unit and FutureGov will be providing coaching support to teams delivering innovation across Doncaster. Initially this is with teams developing approaches to early help and demand management in children and young people's services and in developing a best practice new care model to optimise care at home for people with frailty.

**Estates** – Initial programme scoping has commenced and the partnership will be developing a whole system strategy to optimise the estate across the partnership and to enable integrated neighbourhood delivery.

**Digital and IT** – The integrated Doncaster Care Record – iDCR - has helped to join up records to support integrated assessment, care management and delivery, also supporting better risk management as professionals can see who is involved in a person's care. A strategic lead is in post and scoping priorities with partners. Healthtrak is being used as a population health management tool to support whole system analysis. A number of benefits have been identified including the ability to track patient journeys through various pathways.

**Whole system costing** – A financial baseline and modelling tool has been developed to understand where costs lie across the health and social care system, divided into eight 'cost buckets' e.g. prevention, wellbeing, emergency care. This will enable future modelling of the impact of system changes across the integrated care partnership and give an indication of where investment needs to be made. It will provide a baseline to enable the Finance Working Group to set target savings for delivery. This will also provide a baseline to review any future service/business plans.

**Workforce planning and OD** – A Strategic Workforce and Education Committee has been established and will be supported by a partnership lead to develop the capability and capacity to deliver and embed the new model of care. They will:

- Develop a single Doncaster health and care workforce, OD and education strategy and delivery plan to support the delivery of the Place Plan, including the shared approach to:
  - Deep engagement of the workforce
  - Development of new models of leadership
  - Organisational development support
  - New roles and ways of working
  - Evaluation of impact and workforce implications
  - Workforce models and training for non-qualified staff
- Workforce and education representative at the Integrated Care System, Local Workforce Action Board and similar for Doncaster

- Development of capacity and demand tools across the health and care system to more accurately predict workforce requirements
- Work with local schools and colleges to develop apprenticeships and similar training opportunities locally
- Development of Integrated Care Partnership-wide training, education, development and career pathways opportunities to support staff to acquire new skills required to operate within the new care model for Doncaster, e.g. rotations across hospital and community services, NHS and social care settings

**Business intelligence** - The Council and CCG have developed shared reporting, use of shared systems and the ability to work across respective sites. The teams have also been integral to developing the outcomes for the life stages plans and the profiles for the integrated neighbourhood work.

**Communications** - CCG and Council Communication leads have been working closely to develop a joint communications strategy to support the joint commissioning arrangements. The joint approach to communications and engagement ensures a more co-ordinated and straightforward message to the public.

**Challenges:**

- Moving resources to invest in other parts of the system
- Acute bed pressures and number of patients requiring support for discharge
- Whilst admissions to long term residential care have reduced, this has created a displacement elsewhere (i.e. in homecare)
- Staffing pressures
- Information governance and delays in signing information sharing agreements
- Supporting the market to develop
- Convincing the workforce of the adaptability and safety of using digital solutions
- Uncertainty around the future of BCF funding and number of staff on fixed term/temporary contracts

**Integration success story highlight over the past quarter (Nature of the service or scheme and the related impact)**

**Intermediate Care Rapid Response**

The Intermediate Care Rapid Response Team has developed an extended pathway and access route. Any professional can refer to the service for any individual to prevent a hospital admission. A Multi-Disciplinary Team is providing support into Care Homes to assess and treat individuals who would otherwise have gone to the Emergency Department in an ambulance.

The Frailty Team is an MDT proactive approach to falls prevention. The service is Mental Health led due to the number of residents living with Dementia and mental health related conditions.

Over the past 12 months partners have continued to work together to test and begin to implement elements of the model with existing teams, preparing staff for transition and further involvement of patients and the public in refining the model. A number of test projects have been scoped by providers in response

to a series of challenges set by commissioners to encourage collaboration and test some of the aspiration around integration in the Doncaster place plan. These have included;

1. Simplifying access- Bringing together more access points in preparation for a place based Single Point of Access
2. Rapid Response and short term interventions - Delivering a multi-agency rapid response. Evaluation completed
3. Integrated rehab and reablement - Developing and testing an integrated reablement and rehabilitation pathway in preparation for transition to a single health and social care service model
4. Shared competency framework, carrying out a workforce audit and developing a joint workforce development plan
5. Integrated Doncaster Care Record - Proof of Concept
6. Integrated health and social care dashboard for intermediate care
7. Developing and testing a new integrated approach to commissioning, contracting and delivery.

#### Positive Steps – Social Care Assessment Unit

- The introduction of a dedicated Nurse from Rotherham Doncaster and South Humber NHS Trust, 5 days a week, to support with the complex issues , who links with the new GP surgery which is providing the staff and individuals with support to manage the health needs effectively and more efficiently. This intervention improves the outcomes for the individual, provides value for money, is more sustainable, and integrates further with health to improve services for older and disabled people. This also offers greater opportunities for individuals to be able to go back home and to increase their independence.
- The service has secured a permanent Physiotherapist from Doncaster and Bassetlaw Teaching Hospital NHS Trust who has added value to the team.
- Positive Steps is completing the falls assessment tool, which is a partnership tiered falls assessment to provide a standardised approach to assessing falls, and enables all levels to assess some level of risk and cause of falls. This form has been agreed as a single holistic tool for all partners to use in the community and bed based services.
- Positive Steps is about to commence the ARC (Achieving Reliable Care) project which is the first social care assessment unit to take part. It is a daily method of Multi-Disciplinary Team working which is purported to reduce length of stay by 20% and significantly reduce DTOC figures.
- Work with the Older People’s Mental Health nurse to mentor and train staff to gain more insight and knowledge on mental health conditions and behaviours to alleviate the need for a contracted MH nurse presence

An options appraisal has been completed to redirect the resources from 20 beds into community services.

An evaluation of the Rapid response has been completed, which identifies:

Year on year services are experiencing increased referrals, due to the aging population and the increase of patients with long term conditions. Evaluation of the data collection has been considered against the number of Yorkshire Ambulance Service conveyances into the Doncaster Emergency Department. It is clear there is a direct correlation between the two. When the number of conveyances into ED increases, the number of referrals into the Rapid Response

pathway decreases. This is also true in reverse which suggests that where a conveyance to ED can be avoided by utilising the pathway the impact is an appropriate referral. This also suggests the early clinical conversation is effective by avoiding unnecessary conveyances where possible.

As the Rapid Response pathway has now been expanded into General Practitioners the numbers of referrals to avoid a hospital admission have increased but not all were appropriate for this pathway. Signposting of these referrals to the correct pathway has also increased but has allowed patients to receive care from the right pathway regardless of their entry point into the service.

For over 1000 referrals in to the Rapid Response service, 76% of people accepted were supported at home and 67% were still at home after 30 days. On average, unplanned acute admissions for people aged 65 and over have been lower in 2018-19 than in the previous two years. Conveyances to A&E, following a 999 response, for this group of people are higher than previous years, but those due to a fall are significantly lower.

The Doncaster Rapid Response Service case study was featured in the new NHS 10 year plan and has also been recognised as an exemplar service in the 2019 Health Service Journal Value Awards.

### **Complex Lives**

Complex Lives is one of the areas of opportunity in the Place Plan, established to develop integration of health and social care services. It aims to provide wrap-around support for people who have become locked in a cycle of homelessness, rough sleeping, addiction, offending behaviour, poor physical and mental health – often underpinned by deep trauma. A joint agency agreement has been developed for homelessness and rough sleeping.

In Autumn 2018 it was reported that there were 110 cases on the Complex Lives cohort and that rough sleepers had spiked to around 67 in the summer, mostly in the town centre, although with very impressive intensive work of the Complex Lives Team and wider Alliance, this has now reduced to around 16.

The Complex Lives Team has created capacity to enable management of more complex cases. This has proved an important resource as existing services are not set up to deal with the complexity of issues involved. In the last six months the team has become more integrated and effective through:-

- Co-location with the Complex Lives team of St Leger Homelessness Single Point of Access;
- CCG/RDaSH commitment to appoint and embed a specialist Mental Health Nurse to Complex Lives team;
- DMBC Mental Health Social Worker aligned to team.
- DMBC Housing Benefits Officer seconded to team
- NACRO worker (offender support) seconded to team
- Doncaster Rape and Sexual Abuse Counselling Service trauma worker commissioned for one day per week

The housing protocol for homeless people has been refreshed and updated by all partners to ensure awareness is raised of the process and reduce delays in discharge.

| BETTER CARE FUND SUMMARY - OUTTURN UPDATE 2018/19 |                            |                    |                                                                                |                    |                       |                        |                                                                  |
|---------------------------------------------------|----------------------------|--------------------|--------------------------------------------------------------------------------|--------------------|-----------------------|------------------------|------------------------------------------------------------------|
| Project No.                                       | Project Lead               | Commissioning Lead | BCF Workstream                                                                 | Plan 2018/19 £'000 | Outturn 2018/19 £'000 | Variance 2018/19 £'000 | Comments on Variances                                            |
| 1                                                 | Anthony Fitzgerald         | CCG                | Community Aids and Adaptations                                                 | 2,349              | 2,349                 | 0                      |                                                                  |
| 2                                                 | Anthony Fitzgerald         | CCG                | Carers Support Services & Breaks                                               | 844                | 844                   | 0                      |                                                                  |
| 3                                                 | Anthony Fitzgerald         | CCG                | COPD Early Supported Discharge (RDASH)                                         | 40                 | 40                    | 0                      |                                                                  |
| 4                                                 | Anthony Fitzgerald         | CCG                | Dementia Services (RDASH)                                                      | 2,019              | 2,019                 | 0                      |                                                                  |
| 5                                                 | Anthony Fitzgerald         | CCG                | Liaison Schemes (RDASH)                                                        | 260                | 260                   | 0                      |                                                                  |
| 6                                                 | Anthony Fitzgerald         | CCG                | Care Home Liaison (RDASH)                                                      | 244                | 244                   | 0                      |                                                                  |
| 7                                                 | Anthony Fitzgerald         | CCG                | Other Schemes ie Alzheimers & S256 contracts                                   | 205                | 205                   | 0                      |                                                                  |
| 8                                                 | Anthony Fitzgerald         | CCG                | Clinical Services Review Community based services - Mex Mont re-design (RDASH) | 1,144              | 1,144                 | 0                      |                                                                  |
| 9                                                 | Anthony Fitzgerald         | CCG                | Assessment Unit Health Staffing                                                | 302                | 302                   | 0                      |                                                                  |
| 10                                                | Anthony Fitzgerald         | CCG                | Single Point of Access                                                         | 473                | 473                   | 0                      |                                                                  |
| 11                                                | Anthony Fitzgerald         | CCG                | Respite Services (RDASH)                                                       | 1,302              | 1,302                 | 0                      |                                                                  |
| 12                                                | Anthony Fitzgerald         | CCG                | Discharge Schemes inc Early Supported Discharge                                | 834                | 834                   | 0                      |                                                                  |
| 13                                                | Anthony Fitzgerald         | CCG                | Bed Based Intermediate Care (RDASH)                                            | 3,419              | 3,419                 | 0                      |                                                                  |
| 14                                                | Anthony Fitzgerald         | CCG                | Mental Health Crisis Services (RDASH)                                          | 2,022              | 2,022                 | 0                      |                                                                  |
| <b>Total CCG share</b>                            |                            |                    |                                                                                | <b>15,457</b>      | <b>15,457</b>         | <b>0</b>               |                                                                  |
| 1                                                 | Clare Henry                | DMBC               | Falls Development Programme (Age UK)                                           | 50                 | 50                    | 0                      |                                                                  |
| 2                                                 | Lisa Swainston             | DMBC               | Round 2 Innovation Fund (Having a Good Day)                                    | 0                  | 0                     | 0                      |                                                                  |
| 3                                                 | Fay Wood                   | DMBC               | Community capacity and well- being support / social prescribing                | 240                | 240                   | 0                      |                                                                  |
| 4                                                 | Nick Germain               | DMBC               | Well North Project                                                             | 167                | 167                   | 0                      |                                                                  |
| 5                                                 | Fay Wood                   | DMBC               | Community mobile day service / borough wide                                    | 125                | 126                   | 1                      |                                                                  |
| 6                                                 | Fay Wood                   | DMBC               | Dementia mobile day services                                                   | 45                 | 45                    | 0                      |                                                                  |
| 7                                                 | Vanessa Powell Hoyland     | DMBC               | Winter Warm                                                                    | 85                 | 79                    | -6                     |                                                                  |
| 8                                                 | David Eckersley            | DMBC               | Phase 1 Review officers                                                        | 0                  | 0                     | 0                      |                                                                  |
| 9                                                 | Rosemary Leek              | DMBC               | Dementia Friendly Communities programme                                        | 0                  | 0                     | 0                      |                                                                  |
| 10                                                | Rosemary Leek              | CCG                | Enhancement of Dementia support services (Alzheimers dementia café's )         | 77                 | 77                    | 0                      |                                                                  |
| 11                                                | Rosemary Leek              | DMBC               | The Admiral service (making space)                                             | 88                 | 88                    | 0                      |                                                                  |
| 12                                                | Louise Shore               | DMBC               | Hospital based Social Workers                                                  | 213                | 176                   | -37                    |                                                                  |
| 13                                                | Fay Wood                   | DMBC               | Home from Hospital (Age UK)                                                    | 70                 | 70                    | 0                      |                                                                  |
| 14                                                | Collette Taylor            | DMBC               | Direct Payment Support Unit and Business Support Unit temporary staffing       | 118                | 47                    | -71                    |                                                                  |
| 15                                                | Alan Wiltshire             | DMBC               | Integrated health and social care information management systems - (Caretrak)  | 50                 | 50                    | 0                      |                                                                  |
| 16                                                | Rosemary Leek              | DMBC               | Dementia Advisor (Peer Support pilot)                                          | 0                  | 0                     | 0                      |                                                                  |
| 17                                                | Sarah Sansoa               | DMBC               | Telecare Strategy                                                              | 150                | 127                   | -23                    |                                                                  |
| 18                                                | Rachael Thompson           | DMBC               | HEART                                                                          | 542                | 494                   | -48                    |                                                                  |
| 19                                                | Rosemary Leek              | DMBC               | Dementia ccg post fully BCF funded                                             | 0                  | 0                     | 0                      |                                                                  |
| 20                                                | Rosemary Leek              | DMBC               | Dementia Advisor (Age uk)                                                      | 32                 | 0                     | -32                    |                                                                  |
| 21                                                | Rachael Thompson           | DMBC               | STEPS / OT service                                                             | 1,510              | 1,377                 | -133                   |                                                                  |
| 22                                                | Louise Shore               | DMBC               | RAPT                                                                           | 110                | 85                    | -25                    |                                                                  |
| 23                                                | Rachael Thompson           | DMBC               | (Positive Steps) Social care Assessment Unit                                   | 1,724              | 1,962                 | 238                    | Used BCF instead of £155k NR BCF (EMR) for DTOC additional posts |
| 24                                                | Louise Shore               | DMBC               | Hospital Discharge Worker                                                      | 28                 | 19                    | -9                     |                                                                  |
| 25                                                | Rachael Thompson           | DMBC               | SPOC/One Point 1                                                               | 92                 | 66                    | -26                    |                                                                  |
| 26                                                | Debbie John-Lewis          | CCG                | Intermediate Care and support strategy                                         | 170                | 170                   | 0                      |                                                                  |
| 27                                                | Fay Wood                   | DMBC               | Mental Health - Doncaster Mind                                                 | 245                | 222                   | -23                    |                                                                  |
| 28                                                | Fay Wood                   | DMBC               | Mental Health - Changing Lives                                                 | 0                  | 0                     | 0                      |                                                                  |
| 29                                                | Patrick Birch              | DMBC               | PMO (Programme Management Office and Development)                              | 181                | 169                   | -12                    |                                                                  |
| 30                                                | Andy Collins               | DMBC               | Alcohol Safe Haven                                                             | 0                  | 0                     | 0                      |                                                                  |
| 31                                                | Karen Tooley/ Ian Campbell | CCG                | Doncaster Intermediate Health & Social Care – Phase 3- testing the model       | 0                  | 0                     | 0                      |                                                                  |



|    |                        |      |                                                                                                                                                         |     |     |     |  |
|----|------------------------|------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|--|
| 32 | Patrick Birch          | DMBC | Procurement of a strategic partner to support DMBC and partners across the Doncaster Health and Social Care sector to deliver the Doncaster Place Plan. | 0   | 0   | 0   |  |
| 33 | Fay Wood               | DMBC | Information and advice kiosks                                                                                                                           | 0   | 0   | 0   |  |
| 34 | Vanessa Powell Hoyland | DMBC | Healthy homes healthy people                                                                                                                            | 0   | 0   | 0   |  |
| 35 | Fay Wood               | DMBC | Disabled Go                                                                                                                                             | 8   | 8   | 0   |  |
| 36 | Lisa Swainston         | DMBC | Dev & Enhancement of vibrant provider market                                                                                                            | 0   | 0   | 0   |  |
| 37 | Simon Marsh            | CCG  | Integrated Digital Care Record Pilot – Consultancy Support                                                                                              | 0   |     | 0   |  |
| 38 | Griff Jones            | DMBC | Adults Health and Wellbeing – Creative Options for Learning Disability service users                                                                    | 673 | 780 | 107 |  |
| 39 | Griff Jones            | DMBC | CLS Community lead support                                                                                                                              | 500 | 608 | 108 |  |
| 40 |                        |      | UNALLOCATED                                                                                                                                             | 10  | 0   | -10 |  |

**Total - DMBC share** 7,302 7,302 0

**Minimum CCG Contribution TOTAL** 22,759 22,759 0

|   |                |            |                                              |       |       |   |  |
|---|----------------|------------|----------------------------------------------|-------|-------|---|--|
| 1 | Keith Sinclair | DMBC - DFG | Disabled Facilities Grants - capital funding | 2,500 | 2,500 | 0 |  |
|---|----------------|------------|----------------------------------------------|-------|-------|---|--|

**IBCF SUMMARY UPDATE - OUTTURN 2018/19**

| Project No.                     |  | Commissioning Lead | BCF Workstream                                      | Plan 2018/19 £'000 | Outturn 2018/19 £'000 | Variance 2018/19 £'000 |                                                                                                                  |
|---------------------------------|--|--------------------|-----------------------------------------------------|--------------------|-----------------------|------------------------|------------------------------------------------------------------------------------------------------------------|
|                                 |  |                    | <b>Meeting Adult Social Care Need:</b>              |                    |                       |                        |                                                                                                                  |
| 1                               |  | DMBC               | Increased Demands                                   | 3,509              | 3,500                 | -9                     |                                                                                                                  |
| 2                               |  | DMBC               | Residential Short Stay                              | 600                | 600                   | 0                      |                                                                                                                  |
| 3                               |  | DMBC               | Reducing Savings                                    | 1,115              | 1,115                 | 0                      |                                                                                                                  |
| 4                               |  | DMBC               | Extra Care                                          | 200                | 0                     | -200                   |                                                                                                                  |
| 5                               |  | DMBC               | Money Management & DoLs/Safeguarding                | 258                | 188                   | -70                    |                                                                                                                  |
|                                 |  |                    | <b>Reducing pressure on NHS:</b>                    |                    |                       |                        |                                                                                                                  |
| 7                               |  | DMBC               | BCF Projects - Transformation Programme             | 1,409              | 638                   | -771                   | Slippage                                                                                                         |
| 8                               |  | DMBC               | Community Equipment                                 | 123                | 0                     | -123                   |                                                                                                                  |
|                                 |  |                    | <b>Ensuring local supplier market is supported:</b> |                    |                       |                        |                                                                                                                  |
| 13                              |  | DMBC               | Contract Increases                                  | 4,279              | 4,999                 | 720                    | Revised costings                                                                                                 |
| <b>Grand Total of iBCF Plan</b> |  |                    |                                                     | <b>11,492</b>      | <b>11,040</b>         | <b>-452</b>            | It is planned to carry forward funding to 2019/20 to help smooth the impact of the reduction in iBCF allocation. |
| <b>Total iBCF</b>               |  |                    |                                                     | <b>11492</b>       | <b>11492</b>          | <b>0</b>               |                                                                                                                  |
| <b>Balance b/f</b>              |  |                    |                                                     | <b>1,322</b>       | <b>1,322</b>          | <b>0</b>               |                                                                                                                  |
| <b>Balance c/f</b>              |  |                    |                                                     | <b>1,322</b>       | <b>1,774</b>          | <b>452</b>             |                                                                                                                  |

**NEW WINTER PRESSURES FUNDING PLAN**

|                                                                                 | Plan 2018/19 £'000 |
|---------------------------------------------------------------------------------|--------------------|
| New Adult Social Care Winter Pressures Funding                                  |                    |
| Single Point of Access Team - additional social work capacity at the front door | 61                 |
| STEPS - additional social work and OT capacity                                  | 4                  |
| Dom Care Contract - price increase to match employment competitors              | 210                |
| Short Stay/Respite                                                              | 136                |
| General Use of Social Care Funding                                              | 1,099              |
| <b>Total</b>                                                                    | <b>1,510</b>       |

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## Doncaster Council

**Doncaster  
Health and Wellbeing Board**

**Date: 13<sup>th</sup> June 2019**

**Subject: Autism Self -Assessment Framework 2018**

**Presented by:** Jayne Gilmour, Interim Strategic Lead

| <b>Purpose of bringing this report to the Board</b> |     |
|-----------------------------------------------------|-----|
| Decision                                            |     |
| Recommendation to Full Council                      |     |
| Endorsement                                         |     |
| Information                                         | Yes |

| <b>Implications</b>                                                                                                                                         |                                      | <b>Applicable Yes/No</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------|
| DHWB Strategy Areas of Focus                                                                                                                                | Substance Misuse (Drugs and Alcohol) | No                       |
|                                                                                                                                                             | Mental Health                        | Yes                      |
|                                                                                                                                                             | Dementia                             | No                       |
|                                                                                                                                                             | Obesity                              | No                       |
|                                                                                                                                                             | Children and Families                | Yes                      |
| Joint Strategic Needs Assessment                                                                                                                            |                                      | Yes                      |
| Finance                                                                                                                                                     |                                      | Yes (longer term)        |
| Legal                                                                                                                                                       |                                      | Yes                      |
| Equalities                                                                                                                                                  |                                      | Yes                      |
| Other Implications (please list). There may be implications relating to some of the areas marked no, but we currently have insufficient information on need |                                      |                          |

| <b>How will this contribute to improving health and wellbeing in Doncaster?</b>                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Understanding the needs of people with autism in Doncaster and ensuring they have access to the services and support they need will contribute to improving their health and wellbeing |

| <b>Recommendations</b>                                                                                                                                                                                                                                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>The Board is asked to:-</p> <ol style="list-style-type: none"> <li>1) Note the findings of the Autism Self- Assessment (2018) and areas of work required within the new Learning Disability and Autism Strategy (2019-2024).</li> <li>2) Ensure that the needs of people with autism are included in the JSNA</li> <li>3) Take a role in ensuring the priorities within the strategy are delivered</li> </ol> |

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