

North East Derbyshire District Council

Cabinet

29 June 2015

A Healthy North East Derbyshire – Update Report

Report of Councillor J Lilley, Portfolio Holder with Responsibility for Community Safety, Equality & Diversity and Health

This report is public

Purpose of the Report

- To update Cabinet on the latest developments regarding the Healthy North East Derbyshire Approach.

1 Report Details

- 1.1 At Minute No. 239, Cabinet of 2 September, 2015 approved the Council's Health and Wellbeing Strategy for North East Derbyshire 2015 – 2019 and noted progress on the development of the Healthy North East Derbyshire Partnership, recruitment of the Community Development Worker (Healthy North East Derbyshire) and requested quarterly reports on the Health and Wellbeing Strategy.
- 1.2 At Minute No. 477, Cabinet of 16 December received its first update report on the establishment of the Partnership and its Locality Public Health Action Plan and funding arrangements.
- 1.3 This paper provides an update of activities in the last quarter, particularly on the adoption of the new Partnership Locality Health Action Plan, transfer of funding and commissioning role from Derbyshire County Council to the Council's Partnerships Team and the strategic developments arising from the replacement of the Joint CCG Liaison Group with a new Strategic Health Group.

2. Key Issues

2.1 Health and Wellbeing Strategy 2015-2019 and Action Plan 2015-17

- 2.1.1 Delivery of the Strategy is dependent on partnership approaches to transform the Council's offer in the form of an Action Plan. The Council, through its Partnership Team, has been instrumental in developing the priorities and actions in the newly adopted Partnership Locality Health Action Plan, based on the District's Health and Wellbeing Strategy. The process helped to identify the remaining priority areas and objectives for partners to contribute to and/or resource in future. Nominal budgets have been allocated for each priority. Some existing commitments have been ring-fenced, particularly for those projects where employment of a worker has been commissioned. Other priorities require further evidence base and several Working

Groups have been established to determine commissioning objectives for potential projects. The [Action Plan](#) 2015-17 was approved by the Partnership in 10 February 2016.

2.1.2 Building on the priorities in the Council's Strategy and the Diamond and Silver Communities targeted approach, the Partnership's Locality Public Health Action Plan has the following priorities:

Overarching priority

Older People, long-term conditions and independence in the home (see paragraph 2.5)

Building Healthy Communities

- *Build Social Capital*
- *Improving the quality of life for carers*
- *Reducing the impact of external determinants on health and wellbeing e.g. worklessness, financial exclusion, housing and the environment*

Promoting Healthy Lifestyles

- *Promoting positive mental well-being and reducing social isolation*
- *Support the emotional health and wellbeing of children and young people*
- *Increasing physical activity*

- **Improving Access to Preventative Health and Social Care**
- *Assisting people who live with a limiting long term illness or disability (including reducing frailty)*
- *Support the Integrated Care Agenda*
- *How we can positively reduce the high incidence of hospital stays as a result of self harm and alcohol related harm*

2.1.3 Currently the Council contributes or has been commissioned by the Partnership to deliver the following actions within the plan with potential for others, once commissioning objectives have been determined:

Building Social Capital

- Engaging with the Thriving Communities Initiative in Danesmoor;
- Employment of the Community Development Worker (Healthy NED) in Holmewood and Heath and Shirland (2015-2017).

Reducing the impact of external determinants on health and wellbeing

- Leading a working group to identify commissioning objectives which address homelessness for people discharged from hospital.

Promoting positive mental well-being and reducing social isolation

- Involvement in a Working Group to identify commissioning objectives which address increased care home engagement and social integration.

Increasing Physical Activity

- Delivery of Village Games (2015-2017);
- Management of Physical Inactivity Funded Projects.

Support the Integrated Care Agenda

- Supported a Task and Finish Group to pilot a Push on Falls Early Intervention Project within NED.

2.1.4 The Council's delivery against these priorities will primarily link to Departmental Service Plans and processes to monitor contributions which supplement the existing Service Plan. The Strategy and Action Plan is monitored through the Council's PERFORM System, with partners providing quarterly monitoring reports. As previously agreed, regular update reports will also be made to the Joint Service Managers Forum and new NED Operational Health and Wellbeing Sub Group will be responsible for co-ordinating NEDDC actions and issues that need to be referred to the Healthy NED Partnership for consideration.

2.1.5 A meeting of the Operational Sub Group is planned shortly to update officers on current developments, since the adoption of the Action Plan and to take advantage of any commissioning opportunities and joint working, for example Workplace Health for which the Partnership has received an additional contribution of £5,000.

2.2 Transfer of Funding and Commissioning Responsibilities

2.2.1. The Partnership Team has been in regular contact with DCC to seek funding updates. An Interagency Agreement has been signed for the transfer of the management of funds for 2015/16, with the funding transferred in late 2015 of £94,113 with £4,750 under-spend from 2014/15 also transferred. More recently DCC advised that £5,000 has also been allocated to the Partnership for Workplace Health activities. At this time a new Interagency Agreement is awaited to be forwarded for signature, with the award of a further £94,113 for 2016/17. It is thought that any under-spend from this allocation will be carried over into the next financial year so for projects to continue in the short term, thereby extending the life of the Action Plan, subject to agreement with DCC Public Health.

2.2.2 Service Level Agreements, funding and monitoring arrangements have been a key focus of this quarter's activity for the Partnership Team, with some joint funding and monitoring arrangements being agreed with neighbouring partnerships, particularly Chesterfield and Bolsover. Once the Working Groups have concluded, it will be necessary for the Partnerships Team to adopt our procurement protocols for the formal tendering of new projects.

2.2.3 The development of Service Level Agreements and award of funding for groups has involved detailed negotiation with Public Health and Project Owners to ensure projects are developed, delivered and monitored in accordance with the requirements of the Partnership and Public Health Outcomes Framework.

2.3 Healthy North East Derbyshire Partnership

2.3.1 The Partnership has now met five times on 11 June 2015, 21 July 2015 and 10 November 2015, for 10 February and 11 May 2016, with the focus of developing, delivering and monitoring the new Healthy Communities (Locality) Action Plan for North East Derbyshire. Representation from North East Derbyshire has been provided by Cllr Mrs L Robinson, Portfolio Member for Community Safety and Health, who was elected Vice-Chair of the group, and the Joint Executive Director of

Transformation (or his substitute). In addition Cllr Mrs E Blanshard regularly attends the meeting as representative of the NEDDC Communities Scrutiny Committee. Cllr. Jeff Lilley, as new Portfolio Holder for Community Safety, Equality and Diversity and Health has now replaced Cllr. Robinson and will be proposed to be formally elected as Vice Chair at the next meeting on 20 July, 2016.

2.3.2 The Council's Partnership's Team provides a performance management function on behalf of the Partnership. DCC Public Health provides the Secretariat function. The meetings are chaired by the Public Health Locality Manager, with regular agenda setting meetings attended by the Vice- Chair, Partnerships Team and CCG representative.

2.3.3 A Healthy NED Engagement Forum should meet bi-annually to network, discuss the new plan and opportunities for joint working and commissioning. Because of the delay in adopting the Action Plan and awaiting the conclusion of the Working Groups, it is thought the next meeting will be convened as soon as possible. Members will recall that the first Forum was held at Chesterfield College on 21 July 2015 which consulted with local public and voluntary and community service providers regarding their current priorities, services and opportunities to contribute locally subject to improved partnership working or additional resources. The Forum also gives NEDDC Officers working at operational level a role to network with partners and opportunities for improved collaboration, managed through their own Service Plans, with health and wellbeing accountability co-ordinated by the NED Operational Health and Wellbeing Sub Group of the Joint Service Managers Forum.

2.4 Community Development Worker (Healthy NED)

2.4.1 The Community Development Worker funded through the current Locality Plan (£25,000 for two years) commenced on 3 August 2015. Based with, and managed by, the Partnership Team, the Worker is working in collaboration with the Public Health Team and local partners/communities to deliver projects in the target communities of Holmewood and Heath and Shirland, particularly to develop community health champions to help to address local health issues alongside services. A Public Health Service Specification has been agreed with KPIs and targets agreed in the Work Plan. This post will provide the eyes and ears on the ground and act as an enabler for communities to improve their own health. £10,500 has been received from Public Health towards the recruitment and management costs of the post. £25,000 for year one salary has been received so far.

2.4.2 Following the resignation of the original post-holder in March 2016, a new replacement has started in post in May 2016.

2.4.3 At least 10 Community Health Champions are currently helping to signpost positive health messages in Holmewood and Heath and a fully constituted Group has been established, chaired by a Community Health Champion, to co-ordinate local activities, supported in her role by the Council's Health and Wellbeing Development Officer.

2.5 North East Derbyshire Healthy Communities Network Application

2.5.1 Work commenced on the application once the Action Plan had been developed and was submitted on 25 May 2016, with the Declaration formally signed by the Council

leader, Cllr. Graham Baxter, MBE. The application will enable the Council, on behalf of the Partnership to become an Associate Member of the Healthy Communities Network. At the time of writing this report, a Steering Group is considering our application and it is hoped to have a decision in time for the meeting.

2.5.2 Members will recall DCC Healthy Communities Workshop was held on 30 June 2015, attended by senior NEDDC officers and is the County's model for ensuring that best practice from the Healthy Cities/Communities Network will link closely to the Healthy NED Partnership. Since the Workshop, DCC have issued "A Call for Action" for each locality to identify a key priority for each area which will be monitored countywide and act as a vehicle to share best practice and coverage of successful projects countrywide. The Partnership agreed at its meeting in February 2016 to adopt an overarching priority of "Older People, long-term conditions and Independence" to reflect the profile of our District and the issues identified through the Council's Silver Communities Approach. With priority issues concerning people with limiting long term illness, including frailty and unpaid carers, it is likely that projects in North East Derbyshire could provide a benchmark for country wide activity and co-commissioning in future.

2.6 Strategic Health Group

2.6.1 Following a meeting between the Chief Executive Officers of the Bolsover/North East Derbyshire District Council's Strategic Alliance and both Clinical Commissioning Groups (Hardwick and North Derbyshire CCGs), it has been decided that the Joint Local Authorities/CCGs Liaison Group be replaced by a Strategic Health Group that will focus on health and spatial planning issues to that can better facilitate the future joint approach to 21st Century Care.

2.6.2 The primary focus of the Strategic Health Group held on 18 May 2016 was on three key strategic issues:

- Ensuring that primary care (GP practices) harness opportunities from Section 106 monies when local developments were proceeding, which enabled them to extend the services provided. Examples of missed opportunities were noted and actions on how to mitigate this were discussed;
- Considering how partners could co-operate to reduce health and disability barriers to employment;
- And understanding the local CCGs challenge to review their budgets and deliver services in different ways through the NHS' five year Sustainability Transformation Plan.

2.6.3 In addition, focus was given to partnership approaches between providers who work to improve the health, wellbeing and care of local residents. This included the Healthy Cities Network (see 2.5), developments of the Slips/Trips/Falls pilot and the recent "Social Capital in Derbyshire" report which identified approaches which could be taken by statutory providers to support community groups to achieve these aims in a sustainable way.

3 Conclusions and Reasons for Recommendation

- 3.1 Having a NEDDC Health and Wellbeing Strategy and delivery/reporting infrastructure which follows the Values and Aims of the Corporate Plan, whilst linking to the priorities and plans of the Derbyshire Health and Wellbeing Strategy will ensure that the Council is best placed to both lead on local health improvement activity whilst contributing to the wider partnership agenda through representation and administration of funding of the Healthy North East Derbyshire Partnership.
- 3.2 Lessons have been learnt on the effectiveness of the performance management arrangements of the last NEDDC Health and Wellbeing Strategy and clear links have now been established with the Service Manager's Forum, supplemented by an Operational Health and Wellbeing Sub Group chaired by the Joint Executive Director of Transformation to performance manage quarterly activity from NEDDC, now the Public Health Locality Plan is operational and further commissioning objectives have been determined.

4 Consultation and Equality Impact

- 4.1 The Health and Wellbeing Strategy for North East Derbyshire 2015-2019 has been informed through analysis of recognised statistical data and through consultation with NEDDC departments at a Special Service Managers Forum held on 25 June 2015 and with other public and voluntary and community service providers on 21 July 2015 at the Healthy NED Engagement Forum. Targeted questions were also asked within the June 2015 Citizen's Panel.
- 4.2 The draft Health and Wellbeing Strategy for North East Derbyshire 2015-2019 has been consulted with Members, SAMT, DCC Public Health, Rykneld Homes Ltd., the two local Clinical Commissioning Groups and other members of the Healthy NED Partnership via direct communication, with an opportunity given to the wider community via the NEDDC website. All comments were analysed for inclusion in the final document submitted to Cabinet on 2 September 2015.
- 4.3 An Equality Impact Assessment has been completed. The Healthy Communities (Locality) Action Plan will also be subject to this process on completion, although it is acknowledged that the main priority of the Strategy and Action Plan is to reduce inequalities in health.
- 4.4 Consultation will continue in the form of the Engagement Forum and through the work of the Partnership as the need arises, through its Task and Finish Groups. Healthwatch Derbyshire now attends the meetings to ensure the service user perspective is high on the agenda.

5 Alternative Options and Reasons for Rejection

- 5.1 Alternative options were covered in the paper discussed 15 May 2015.

6 Implications

6.1 Finance and Risk Implications

6.1.1 The Partnership Team oversees the management of the Healthy Communities (Locality) Action Plan funding on behalf of the Healthy NED Partnership. They will ensure that all commissioned projects adhere to the expectations established in the DCC Inter Agency Agreement. Funding for the Community Development Worker post and management of that worker (through funding one day per week of the Partnership Development Officer) has been provided by DCC through the Public Health Locality Action Plan.

6.2 Legal Implications including Data Protection

6.2.1 There are no legal implications from the Strategy, which will supplement the Corporate Plan. Implications relating to the Locality Plan monies have previously been covered in paper discussed 15 May 2015.

6.3 Human Resources Implications

6.3.1 It is expected that contributions towards the delivery of the Strategy by NEDDC staff will primarily be made through existing workplans which meet respective Service Plan objectives. Should additional staff focus be required, this will usually be identified by the departments/officers in question and relate to opportunity to maximise external funding or partnership working opportunities which will increase the service experience of the recipient.

6.3.2 The contracts for the Community Development Worker and NEDDC line management is for 21 months, funded by DCC for the same term although there is flexibility to extend the contract subject to DCC funding.

7 Recommendations

7.1 That Cabinet notes the following progress in the second quarter since approval of the Health and Wellbeing Strategy for North East Derbyshire 2015-2019:

- the adoption of the new Partnership Locality Health Action Plan;
- transfer of funding and commissioning role from Derbyshire County Council to the Council's Partnerships Team;
- the progress of the Healthy NED Partnership;
- submission of Healthy Cities Network application and;
- the strategic developments arising from the replacement of the Joint CCG Liaison Group with a new Strategic Health Group.

8 Decision Information

Is the decision a Key Decision? (A Key Decision is an executive decision which results in income or expenditure to the Council of £50,000 or more or which has a significant impact on two or more District wards)	No
Is the decision subject to Call-In? (Only Key Decisions are subject to Call-In)	No
District Wards Affected	All
Links to Corporate Plan priorities or Policy Framework	All

9 Document Information

Appendix No	Title
Background Papers (These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Cabinet (NEDDC) or Executive (BDC) you must provide copies of the background papers)	
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