



To: Health and Social Care Scrutiny Board (5)

Date: 22nd April 2015

Subject: Review of Health and Well-being Board in 2014/15

1 Purpose of the Note

- 1.1 To update members of Health and Social Care Scrutiny Board (5) on the work of Coventry's Health and Well-being Board in 2014/15 and to outline on-going priorities for the Health and Well-being Board in 2015/16.

2 Recommendations

- 2.1 Health and Social Care Scrutiny Board (5) is asked to:

- 1) Note the key areas of work carried out by Coventry's Health and Well-being Board and;
- 2) Review the initial priority areas for 2015/16.

3 Background

- 3.1 Coventry's Health and Wellbeing Board was established under the 2012 Health and Social Care Act. The key statutory functions of the board are as follows:
- To prepare a joint strategic needs assessment and joint health and wellbeing strategies
 - To encourage integrated working between health and social care, including providing advice or assistance or other support to encourage section 75 (NHS Act 2006) arrangements around lead commissioning, pooled budgets and/or integrated provision
 - To encourage close working between commissioners of health related services and the board itself.
- The 2012 Act also sets out statutory minimum membership of the Health and Wellbeing Board: the Directors of Public Health, Adult Social Services and Children's Services, at least one elected member, a representative of the local Clinical Commissioning Group, and Healthwatch.

4 Coventry's Board

- 4.1 In Coventry in February 2014, following a peer review by the Local Government Association, changes were made to the membership of the board to include key NHS providers (Coventry & Warwickshire Partnership Trust, University Hospital Coventry and Warwickshire). Coventry's board also includes other organisations who have a contribution to make to improve health and well-being in the City: West Midlands Police, West Midlands Fire Service, Coventry University, University of Warwick, and NHS England. At this time and on the recommendation of the peer review, the responsibilities of Health Overview and Scrutiny Committee and the Health and Wellbeing Board were clarified, creating a clearer separation between the scrutiny function and delivery.

- 4.2 Membership of the board is subject to an annual review locally, to take place in June 2015. The aim of this review is to ensure that membership continues to be fit for purpose locally and reflects national and regional best practice. A regional review of Health and Well-being Boards is currently underway and it is anticipated that the findings of this will inform any future changes to Coventry's board.
- 4.3 Following this review, the frequency of board meetings was also increased to a maximum of 6 meetings a year to build relationships between board members and to implement a rolling programme of work. Provision was also made for informal development sessions to bring together a wider range of stakeholders on specific topics.

5 Key work areas in 2014/15

5.1 The Health and Well-being Board works to an annual work programme. This reflects statutory responsibilities, national requirements and key local priority areas identified in the Health and Well-being Strategy. Many of the individual work areas of the Health and Well-being Board have been reported to Health and Social Care Scrutiny Board (5) over the last year. The key areas of work that the Health and Well-being Board have led in 2014/15 are set out below:

5.2 **Health and Well-being Strategy:** Coventry's Health and Well-being Strategy is a three year strategy which was launched in 2012. Based on an analysis of health and well-being in the city, identified in the joint strategic needs assessment, it identifies four key priority themes for all partners across the city to address to improve health and reduce health inequalities. These themes are:

- Healthy People: early years (pre-natal to two years) and older people
- Healthy Communities, focusing on obesity, mental wellbeing, domestic violence and abuse & sexual violence
- Reducing variation: smoking, alcohol, infectious diseases (TB & HIV)
- Improving outcomes: cancer, variations in primary care, managing lifestyle risks

These four themes are supported by work to promote community engagement, focus on prevention and develop strong partnership working arrangements.

5.3 Specific plans are in place to deliver improvements in these areas, led by a number of partnership groups across the city including the Children's Joint Commissioning Board, Adult Joint Commissioning Board, Police and Crime Board, Coventry & Warwickshire Health Protection Committee as well as the Health and Well-being Board itself, which has oversight of the whole strategy. An update on progress implementing the Health and Wellbeing Strategy is due to go to the Health and Wellbeing Board in June. A revised Health and Well-being Strategy will be produced in 2015/16, supported by an updated Joint Strategic Needs Assessment. This will be informed by 'deep dive' needs assessments including recently completed work on mental health & sexual violence.

5.4 In 2014/15 the Board has overseen a number of new strategies which have identified areas where progress has been made in improving health and set new priorities to accelerate improvement. This has included a new drugs strategy, supporting the alcohol strategy which was revised in 2013, and a new tobacco control strategy which has been developed by Coventry's SmokeFree Alliance, and the Active Citizens, Strong Communities Strategy which is aiming to increase community engagement and develop asset based working locally.

5.5 **Health and Social Care Integration** In 2014/15, this has been a significant area of oversight for the Health and Wellbeing Board, reflecting national policy changes and a stronger drive to improve the integration of health and social care services. This has included overseeing the Better Care Fund which is being implemented jointly.

- 5.6 The Better Care Fund programme supports the Health and Wellbeing Strategy objective of improving outcomes for older people as well as improving the integration of health and social care for young people with complex health and social care needs. It consists of four key programmes: 1) reducing emergency admissions to hospital, 2) improving personalised short-term care to maximise older people's independence, 3) better integration of long-term care and support for people with complex long-term needs (all ages), and 4) improving the care of people with dementia, including better support before and after a formal diagnosis is made. This programme builds on work carried out in 2013/14, including an informal Health and Well-being Board development session on dementia which was co-produced with people living with dementia and their carers. The four Better Care programmes are supported by other shared priorities around improving IT infrastructure and through the piloting of new Integrated Neighbourhood Teams.
- 5.7 The Joint Adult Commissioning Board (Coventry and Rugby Clinical Commissioning Group and the City Council) are responsible for ensuring Better Care Coventry is delivered and that the pooled budget is managed in line with the partnership agreement. The Health and Well-Being Board holds the Joint Adult Commissioning Board to account for the delivery of Better Care Coventry and provides strategic direction.
- 5.8 The Health and Wellbeing Board has also overseen the development and resourcing of Coventry's **Age Friendly City programme**. This is being jointly delivered by Coventry City Council, Coventry University and Age UK and is part of a global network of cities which aim to influence environmental, social and economic factors that affect the health and well-being of older people. This work builds in an important preventative component into the wider programme of work to improve health and social care for older people.
- 5.9 **Female Genital Mutilation.** Following full Council motion to eliminate FGM in Coventry, led by the Cabinet Member, Health and Adult Services (the first of its kind in the country), the Health and Well-being Board has led a programme of work to tackle FGM in the city. This has led to the development of a city-wide pledge to eliminate FGM as well as specific activities designed to raise awareness of FGM with schools and to identify and support women who have been subject in FGM through general practice and midwifery. Reporting rates for FGM in the city are high, giving evidence of both need in the city and demonstrating a high level of awareness amongst health professionals of FGM.
- 5.10 **Primary Care Quality.** Coventry's Local Government Association peer review identified the crucial role that high quality general practice has in improving life expectancy and health outcomes. Reducing variation in primary care was also identified in the Health and Well-being Strategy as an important local priority.
- 5.11 The 2014/15 Director of Public Health Annual Report focused on primary care in the city, identifying the significant progress that has been made in improving primary care and some of the key challenges that remain, including the recruitment and retention of GPs and primary care staff. Developed in conjunction with the Local Medical Committee, Coventry and Rugby Clinical Commissioning Group, NHS England, the Local Pharmaceutical Committee, Healthwatch and local GPs, the actions identified in this report continue to be implemented by a steering group which reports to the Health and Well-being Board. This forms part of a much wider approach to transform primary care in the city, including the new Coventry GP Alliance which has been awarded funding from the Prime Minister's Challenge Fund to develop extended hours in general practice, put in place a primary care frailty team and locate a GP in the Emergency Department at UHCW.
- 5.12 **Active Citizens, Strong Communities.** Jointly led by the Cabinet Member for Health and Adult Services and the Cabinet Member for Community Development, Cooperatives and Social Enterprise, this work has been developed to improve the way we work with local people and build more effectively on the strengths and capabilities in local communities.

This supports the delivery of the Health and Well-being Strategy theme around strengthening community engagement.

- 5.13 Endorsed by the Health and Well-being Board, this work recognises that strong, cohesive and active communities have improved health and well-being. The work is being jointly delivered by a multi-agency group, chaired by West Midlands Police. This includes Coventry City Council, Whitefriars Housing, Voluntary Action Coventry, Grapevine, Coventry Law Centre and Coventry & Rugby Clinical Commissioning Group. Specific projects which are in train include the development of social prescribing in general practice (led by Coventry & Rugby CCG & Public Health), testing out community-led approaches to developing local areas using section 106 funding, developing a community directory (led by the City Council) and the development of Places of Welcome (accessible community facilities which provide informal advice and welcome) (led by Whitefriars). This work has been developed with input from Communities and Neighbourhoods Scrutiny Board 4. In addition, the Council and other partners have worked with Coventry Law Centre to secure £1.5 million funding over 5 years to work with local people to embed early intervention and prevention into children's services and social housing in two areas of the city.
- 5.14 **Reducing health inequalities: Coventry as a 'Marmot' City.** The Health and Well-being Board has oversight of the Marmot programme which is a comprehensive, city-wide programme to reduce health inequalities, including tackling the wider determinants of health. This programme has just finished its first two years and held a large conference to showcase its work in March 2015. There has been a commitment made to continue this programme for a further period.
- 5.15 **Safeguarding.** Although the prime responsibility for assuring effective multi-agency safeguarding sits with the Adults and Children's Joint Safeguarding Boards, the Health and Well-being Board has an annual discussion of safeguarding locally and receives the annual reports of both safeguarding boards.
- 5.16 **Local commissioning priorities.** In 2014/15 the Health and Well-being Board has also contributed to the oversight of local NHS commissioning plans, helping to ensure that these reflect local priorities outlined in the Health and Well-being Strategy. This has included reviewing draft commissioning plans for Coventry & Rugby Clinical Commissioning Group (CCG) and the CCG's 5 Year Vision.
- 5.17 **Health Protection.** In 2014, the Health and Well-being Board were briefed on Ebola, recognising that dealing with major health incidents requires effective joint working across all agencies. The Board also received updates from Coventry and Warwickshire's Health Protection Committee on local health protection issues, including our local responses to TB, HIV and other infectious diseases.

6 Public engagement

- 6.1 In 2014/15 the Health and Wellbeing Board has continued to develop its engagement with patients, the public and wider stakeholders. New webpages have been developed giving more information about the board and how it works and a new health and well-being e-newsletter and social media presence has been developed to share information about key areas of work more widely. Healthwatch have two allocated places on the Health and Well-being Board and have led specific pieces of work to increase patient and public input into key areas of work, including feedback on patients' views of primary care.
- 6.2 Older people have been directly involved in the development of the Age Friendly City Programme through the older people's partnership. In February 2015, the Board hosted a stakeholder conference at UHCW, which was attended by patients, carers, voluntary sector partners and staff from across health and social care to share plans to improve the integration of health and social care.

- 6.3 The work around female genital mutilation has also been driven by people with direct experience of FGM and Voluntary Action Coventry supported a workshop to consult with men about FGM.
- 6.4 Developing effective public and wider stakeholder engagement will continue to be an important priority in 2015/16, including in the development of the next Health and Well-being Strategy.
- 6.5 **Coordination with other boards.** Arrangements have been put in place to strengthen the coordination between the Health and Well-being Board and other key strategic boards, including the Children's and Adults' Joint Commissioning Board, Safeguarding Boards and Police and Crime Board. These include sharing forward plans for the boards and ensuring that there is effective sharing of areas of mutual interest, reduced duplication between boards and clarity around governance of specific areas of work. In 2014/15 this has included a joint meeting between Board Chairs. In addition, in 2014 Coventry hosted a joint development session for Coventry and Warwickshire's Health and Well-being Boards to share priorities and identify potential areas of shared interest.
- 6.6 **Developing priorities for 2015/16.** Key priorities for 2015/16 will be agreed with the Health and Well-being Board and Chair at its first meeting of the new municipal year but it is proposed that these include:
- Continued oversight of health and social care integration, including dementia, and the implementation of Better Care Coventry
 - Oversight of the JSNA and Health and Well-being Strategy including the development of the next three-year strategy.
 - Continued implementation of this year's priorities. This will include Coventry as a Marmot City, Age Friendly City, Active Citizens, Tackling Female Genital Mutilation and other key areas of work included in the current Health and Well-being Strategy.

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