
REPORT TO:	Housing and Community Service Committee	AGENDA ITEM: 10
DATE OF MEETING:	19th April 2012	CATEGORY: Delegated
REPORT FROM:	Mark Alflat Director of Community Services	OPEN:
MEMBERS' CONTACT POINT:	Vicky Smyth 01283 595776 vicky.smyth@south-derbys.gov.uk	DOC:
SUBJECT:	Derbyshire Health and Wellbeing Strategy Consultation	REF:
WARD(S) AFFECTED:	ALL	TERMS OF REFERENCE: HCS

1.0 Recommendations

1.1 Members approve the South Derbyshire District Council response to the Derbyshire Health and Wellbeing Strategy consultation.

2.0 Purpose of Report

2.1 To inform members about the current Derbyshire Health and Wellbeing Strategy consultation on the new proposed high-level priorities.

2.2 To enable members to contribute towards a combined SDDC response to the consultation document.

3.0 Detail

3.1 Changes in the NHS will see public health functions transferring to County Councils from April 2013.

3.2 Derbyshire County Council has set up the Health and Wellbeing board as part of these national health reforms. It is made up of representatives from a range of organisations including local Councils, the NHS and patients groups to ensure health services are co-ordinated and delivered effectively across Derbyshire.

3.3 One of the key tasks of the group is to develop a Health and Wellbeing strategy for Derbyshire that will guide its work, and that of many other organisations over the next few years. Key priorities for Derbyshire will be set, focusing on improving local health outcomes.

- 3.4 Key priority areas have been developed and the board is inviting feedback to ensure that the themes are on the right track.
- 3.5 Deadline for feedback is the 22nd April, from which a full strategy will be developed. Comments on the full strategy will be invited again in May/June before the final plan is published in the summer.
- 3.6 The proposed five high-level priorities are:
- **Improve health and wellbeing in early years**
Focus on 'early identification and intervention of vulnerable children and families (including children with disabilities)'
 - Suggest the following SDDC comments are feed back via the consultation documents:
 - Emphasise the need for partnership working to achieve targets.
 - States working with vulnerable children, suggest we should apply this work to all children so that a healthy lifestyle and positive well-being is achievable for all.
 - Consider more targeted work for vulnerable families via MATs. GPs. Health and Social care and schools.
 - Communication between services key to gaining positive results.
 - **Promote healthy lifestyles**
Focus on 'preventing and reducing alcohol misuse, obesity and physical inactivity'.
 - Suggest the following SDDC comments are feed back via the consultation documents:
 - Need to prioritise services locally (District level) to meet identified local health needs.
 - Also prioritise work in deprived areas and/or with targeted communities.
 - Increase the level of early interventions. (Currently 95% of NHS money goes into treatment with only 5% for prevention).
 - Share best practice across areas as there is lots of good work going on at a District level in Derbyshire.
 - Cross agency working is key.
 - **Helping people with long term conditions and their carers**
Focus on 'community based support, self-care and care close to home, including increased use of evidence-based telehealth and telecare'.
 - Suggest the following SDDC comments are feed back via the consultation documents:
 - Make sure support services are mapped and that information is clearly disseminated to community services that support older people.
 - Targets in this section are the same as the 'Promoting Healthy Lifestyles' part of the consultation – is this correct?

- **Improving emotional and mental health**

Focus on 'improving access to the full range of evidence-based psychological therapies (services that offer treatments for depression and anxiety disorders and other complex health problems)'.

- Suggest the following SDDC comments are feed back via the consultation documents:
 - Main focus is very clinical. It refers to psychological therapies only. Suggest this is expanded to 'psychological therapies *and community based initiatives that promote good mental health.*' (as many community based activities have an evidence based positive impact on good mental wellbeing e.g. Walking For Health)
 - Again in main focus - reword so that it promotes 'recovery' rather than 'treatment'.
 - In the what can be done section suggest the following are also considered:
 - Signposting to appropriate services in the community.
 - Ensure Voluntary Sector services are mapped and supported.
 - 'Hard to reach' communities are supported adequately.
 - Support to carers is included.
 - There is equality of services across the County. (Some mental health services don't reach certain areas in the County)
 - Does this priority only relate to adults? Real need to provide services for Children and Young people too. Make more explicit in the wording.
 - Positive promotion to reduce the negative stigmatisation of mental health issues.

- **Improving older people's health and wellbeing**

Focus on 'strengthening integrated working between health and social care providers and housing-related support services'.

- Suggest the following SDDC comments are feed back via the consultation documents:
 - In the what can be done section suggest the following are also considered:
 - The targets only refer to 'care agencies'. Not all older people access care agencies, we shouldn't exclude those who don't. This needs expanding to include other services that provide support to older people.
 - This could include Countryside Services, Sport and Health teams, Housing, Library Services, Community Adult Education, etc.
 - Also need to ensure that the role of the Voluntary Sector is included as they support many activities for older people.
 - Include support for carers.
 - Invest more in prevention activities such as physical activity, culture (library services and arts) and other community activity.
 - Ensure a robust education and referral system for health professionals who visit patients in their homes - to enable them to identify and report housing related issues to housing services (therefore preventing accidents and hospital admissions).

- 3.7 Consider approving the five priorities listed above as overarching key areas.
- 3.8 Consider suggesting an additional priority that refers to 'Housing', that acknowledges the links between health and housing and the need for a more integrated approach to supporting vulnerable people. The priorities do not appear to recognise the link between poor health and poor housing conditions. It is often the case that housing professionals receive referrals after an incident rather than a proactive response to consider a preventative measure. Although Housing could be integrated into the other priorities it is felt that it should be a priority in it's own right due to the huge negative health impact that poor housing can have on the individuals involved. Suggest that Housing becomes a 6th priority area.

4.0 Financial Implications

- 4.1 Much of actual 'on the ground' public health work in Derbyshire is delivered at District, rather than County levels. Therefore it is imperative that District priorities are included in the new Health and Wellbeing strategy to ensure that NHS money continues to filter to a District level.
- 4.2 NHS contracts in South Derbyshire currently total £120,270 (2012/2013)

5.0 Corporate Implications

- 5.1 The Health and Wellbeing Strategy proposals cuts across many corporate agenda's and these are shown below: -
- Sustainable Growth and Opportunity
 - Promotion of The National Forest and opportunities available in it e.g. Walking For Health
 - Services offered at low cost to ensure good access for all
 - Services delivered in different areas around the district
 - Links to affordable housing initiatives such as reducing fuel poverty
 - Lifestyle Choices
 - Promotes and supports the development of a healthier lifestyle, including increased participation in physical activity
 - Value for Money
 - Increasing efficiency by partnership working
 - Meeting community needs

6.0 Community Implications

- 6.1 The high-level priorities selected will have a significant impact on improving the health and wellbeing of South Derbyshire residents.

7.0 Conclusions

- 7.1 The new Health and Wellbeing Strategy for Derbyshire will direct Public Health work in the future. District Councils need to ensure their views are heard and where

possible included in future plans, to ensure that local services continue to be delivered to South Derbyshire residents.

8.0 **Background Papers**

Health and Wellbeing priorities consultation document.