



#### **ANNEX 4**

# Healthier and Stronger Communities Partnership 'Delivering Action' Conference Report - 16<sup>th</sup> July 2010

#### 1. Introduction

- 1.1 This report sets out the main points arising from the presentations and discussion groups at the Healthier and Stronger Communities Partnership Conference held at the Coaver Club, County Hall, Exeter on Friday 16<sup>th</sup> July 2010. Over 60 delegates, who have an interest in or a responsibility for improving the health and wellbeing of local people, attended the conference representing a range of public, voluntary and community sector organisations (see Appendix 1).
- 1.2 The conference was chaired by Dr Virginia Pearson, Joint Director of Public Health, Devon County Council & NHS Devon, who in her introduction stated that the conference was to increase the understanding and awareness of how partners can work most effectively to commission and provide services across a wide range of health and wellbeing outcomes.
- 1.3 Delegates had the opportunity to feedback on how services are currently prioritised and how the existing systems and processes need to adapt to meet future challenges. The timing was particularly opportune as delegates could take the emerging Coalition Government policy documents on health, social care and public health into consideration.

#### 2. Role and remit of the Partnership

#### lan Tearle, Head of Health Policy, NHS Devon

- 2.1 The title and membership of the Devon Healthier and Stronger Communities Partnership acknowledges the contribution that the voluntary and community sector makes to the health and wellbeing agenda in Devon.
- 2.2 The current Terms of Reference reflect the overall accountability for major strategies, delivery plans and performance frameworks, eg the Way Ahead strategy, the Local Area Agreement 2008-11, the strategic implementation groups (SIGs) and the Joint Strategic Needs Assessment (JSNA). The Partnership is one of the four main theme groups reporting to the Devon Strategic Partnership and works through various partnerships and groups across the County, Borough, District and City Council boundaries (see Appendix 2).
- 2.3 Local Democratic Legitimacy is the new concept being promoted by the Coalition and new statutory arrangements for local authorities are being consulted on which would:

establish 'Health and Wellbeing Boards' (or within existing strategic partnerships) - to take on the function of joining up commissioning of local NHS services, social care and health improvement

by

taking a strategic approach and promoting integration across health and adult social care, children's services, including safeguarding and wider local authority agenda.

2.4 A major task for the Healthier and Stronger Communities Partnership in the coming months will be to assess its fitness for purpose in light of further guidance and the forthcoming Public Health White Paper, due in the Autumn 2010.

#### 3. Case Studies

- 3.1 Three case studies where presented which highlighted the multi-agency approaches needed to address complex health and wellbeing issues. The three areas where:
  - Personalisation
  - Alcohol
  - Social Capital
- 3.2 The following table sets out the main points made in each of the presentations:

## Personalisation in adult social care Damian Furniss, Performance Improvement Officer, Devon Adult and Community Services

- priority is to develop capacity of people in their communities and focus on prevention rather than intervention
- use universal services but target them to those most in need
- assess after reablement, not during crisis
- personalised planning about conversation not prescription to give control
- planning within a budget to achieve outcomes
- enabling risk within a safeguarding framework
- range of options to enable control
- market development to provide more choice
- 8,000 people in Devon to have personal budgets by April 2011
- increase provider engagement into the commissioning cycle
- people make the best choices about their lives
- social care reablement to maximise the clients potential for self–care and long-term independence
- accelerate the shift from institutional to community-based support 'the best bed is your bed'

### **Devon Partnership Alcohol Strategy**Kristian Tomblin, Manager, Devon Drug and Alcohol Action Team

- there are 110,000 hazardous and harmful drinkers in Devon aged 16-64 of whom of 15% (16,649) seek treatment in any one year and there are only 660 places therefore only 0.59% of the need met
- only 7.76% of the treatment needs of the 2,832 dependent drinkers seeking help in any one year which is 15% of the 18,883 dependent drinkers in the 16-64 population can be met through the 220 available treatment places
- Devon has a multi-agency alcohol strategy
- there are increasing numbers of people accessing treatment services within three weeks or less
- the rate for alcohol related hospital admissions is below target in Devon
- priorities are to review residential rehab services and issues in relation to safeguarding, mental health and the criminal justice system

#### **Building Social Capital**

John Bunting, Chief Executive, Exeter Council for Voluntary Services

- created from the every day interactions between people
- embodied in such structures as formal voluntary, community and religious groups, family membership and informal community networks
- the stronger these networks and bonds, the stronger the capacity for trust, caring and co-operation
- other impacts can be lower crime figures, better health, higher educational achievement, better economic growth
- therefore social capital is complementary to efforts to address social, economic and environmental determinants of health by:
- developing the skills of individuals, voluntary and community groups, and communities
- enabling community involvement
- supporting volunteering
- key projects are total support, developing third sector capacity and enhancing volunteer support services, community hubs, user engagement and voluntary and community sector representation.

#### 4. Joint Strategic Needs Assessment (JSNA)

Simon Chant, Head of Public Health Intelligence, NHS Devon and Gemma Hobson, Children's Trust Management Information Officer, Devon County Council

4.1 The Joint Strategic Needs Assessment (JSNA) describes a process that identifies current and future health and wellbeing needs in light of existing services, and informs future service planning taking into account evidence of effectiveness (*Department of Health*, 2007).

- 4.2 The Joint Strategic Needs Assessment is not a single document. It is an evolving collaborative process which brings together an increasingly wide range of different data from a variety of sources.
- 4.3 The current Joint Strategic Needs Assessment has six sections:
  - Executive Summary
  - Devon Overview
  - Locality/Town Profiles
  - Care Area Assessments
  - Horizon Scanning
  - Involving and Engaging
- 4.4 Key areas for development are:
  - Broadening the scope
    - Links with Devon County Council Environment directorate
    - ° Links with Police
    - Financial dimension
  - Closer alignment with strategic partnership
  - Improving future projections (linked to the Market Shaping project)
  - Gap analysis
  - Interactive Profiles
- 4.5 The JSNA can be accessed at <a href="www.devon.gov.uk/jsna">www.devon.gov.uk/jsna</a>

#### 5. Setting priorities: feedback from discussion groups

- 5.1 Discussion groups considered three questions:
  - How does the Joint Strategic Needs Assessment (JSNA) currently inform priority setting?
  - How does the JSNA need to be developed to meet future commissioning challenges?
  - How can we best organise ourselves to deliver the priorities?
- 5.2 Key points emerging from the feedback across the ten discussion groups is as follows:

#### How does the JSNA currently inform priority setting?

- informs dialogue about needs and priorities in some areas
- has limited ownership across sectors and partners

 experiences some tensions between countywide versus local and overview versus specific data

#### How does the JSNA need to be developed?

- increase the input from user engagement and user involvement processes by agreeing feedback into the JSNA production
- improve intelligence gathering from the voluntary and community sector
- ensure that all work plans are based on JSNA data
- strengthen the evidence base to identify 'spend to save' interventions for priority outcomes
- support pooled resourcing, service integration and communication of the information and ownership across the sectors
- include qualitative as well as quantitative data as part of needs assessment
- increase the focus on hard to reach, multiple vulnerabilities, the safeguarding children and adults agenda and deprived communities
- rationalise the number of priorities and address issues of rurality
- include a focus on social capital and ways of working with communities to build their strength, capacity and resilience
- be less clinically and intervention focused and less health and social care dominated
- make more 'user friendly' and 'easily accessible'

#### How can we best organise ourselves to deliver the priorities?

- simplify the current complexities of governance and accountability across health and wellbeing partnerships
- ensure NHS locality commissioning processes and GP consortia will be integral to the overall approach to commissioning services to improve health and wellbeing
- enhance the understanding across partners, at the most senior level, of the 'value' of prevention and social inclusion approaches
- implement 'Total Place' methodology at a local level to increase pooled budgeting
- address how town and parish councils and community planning processes contribute to needs assessment
- improve understanding of the evidence of impact for social capital interventions and community development approaches

#### 6. Health and wellbeing themes for 2011/12

- Analysis of the key points in section 5.2 identifies three priorities that should be addressed by the Devon Healthier and Stronger Communities Partnership (HSCP) over the next 18 months. These are:
  - Enhancing the Joint Strategic Needs Assessment (JSNA)
  - Rationalising the Healthier and Stronger Communities Partnership
  - Developing the 'Social Capital' of local communities
- 6.2 Specific objectives within each priority are:

#### **Enhancing the Joint Strategic Needs Assessment (JSNA)**

- include more local stories and people's experiences to bring a better balance in terms of inclusivity and equality
- link needs to commissioning and strengthening the evidence base to proposed interventions
- improve the 'public face' of the document and make the JSNA more user friendly
- include financial analysis in the data
- quantify outcomes in more detail
- address the urban and rural balance
- emphasise community views more and draw on voluntary and community sector 'intelligence'

#### Rationalising the Healthier and Stronger Communities Partnership

- increase the focus on priorities and outcomes for health improvement across health and social care
- streamline the number of strategy and planning groups
- identify processes for linking in practice based consortia
- assess the fitness for purpose of the existing Healthier and Stronger Communities Partnership against the proposal for a Health and Wellbeing Board in the Local Democratic Legitimacy for Health (Department for Health 2010) document
- agree locality health improvement priorities, including the wider determinants of health and lifestyle risk factors that reflect a life course approach

#### **Developing the 'Social Capital' of local communities**

- raise the profile of social capital
- develop a better understanding of community resilience, the quantification of benefits and links to priority outcomes
- develop a consensus on effective interventions to enhance social capital and appropriate performance indicators to demonstrate value for money

#### 7. Draft Rural Health and Wellbeing Strategy 2010-13

#### Dr Sarah Tickner, Speciality Registrar in Public Health

- 7.1 The draft Rural Health and Wellbeing Strategy 2010-13 is an excellent example of the complexity and breadth of issues that inter-relate to impact on health and wellbeing. It takes a life course approach and sets out priority actions against number of priority areas.
- 7.2 The strategy was put out to a 90 day consultation which closed on 19<sup>th</sup> August 2010. The strategy will be revised in light of the consultation feedback and an action plan produced by the end of September 2010.
- 7.3 The accountability for the implementation of the actions will be held by the Devon Healthier and Stronger Communities Partnership.

#### 8. Summary

- 8.1 Three main priorities arose from the conference that will inform the immediate work of the Devon Healthier and Stronger Communities Partnership. These are:
  - develop the content of the Joint Strategic Needs Assessment and make it more user-friendly and easily accessible
  - rationalise the number and range of strategy and planning groups for health and wellbeing
  - increase the understanding across all partners of the health and wellbeing benefits and impacts of developing 'Social Capital'

Dr Virginia Pearson
JOINT DIRECTOR OF PUBLIC HEALTH
DEVON COUNTY COUNCIL AND NHS DEVON

September 2010

### Healthier and Stronger Communities Partnership 'Delivering Action' Conference

#### 1. List of delegates

Name	Title/Organisation
Alison Boyd	Locality Development Officer, Devon County Council
Alison Eastland	Locality Development Officer, Devon County Council
Alison Golby	Strategic Commissioning Manager (Housing), Devon County Council
Dr Anna Richards	Specialty Registrar in Public Health, NHS Devon
Becky Carmichael	Head of Health Improvement (Children & Young People/Vulnerable Groups), NHS Devon
Bev Riach	PA to Ian Tearle, Head of Health Policy, NHS Devon
Beverly Jones	Programme Manager, Total Support, Teignbridge CVS
Bruce Thompson	Head of Transport Co-ordination Service, Devon County Council
Caroline Lee	Community Engagement Worker & Work Plan Co-ordinator, Link Devon
Chris Cruise	Head of Strategic Development, NHS Devon
Councillor Richard Westlake	Chair, Health & Adult Services Scrutiny Committee, Devon County Council
Damian Furniss	Performance Improvement, Adult & Community Services, Devon County Council
Diana Crump	Chief Executive, Living Options
Dillon Hughes	Interim Assistant Director, Devon Integrated Youth Support Service
Dr Suaad Genem-George	Senior Development Community Worker,
	Plymouth & Devon Racial Equality Council
Dr Virginia Pearson	Chair & Joint Director of Public Health, NHS Devon & Devon County Council
Gemma Hobson	Children & Young People's Services, Devon County Council
Gill Unstead	Social Inclusion & Prison Lead, Devon Drug & Alcohol Action Team
Graham Varley	Personalisation Lead, Adult & Community Services, Devon County Council
lain Lang	Consultant in Public Health, NHS Devon
lain Mellis	Head of Public Health Partnerships, NHS Devon
Ian Hobbs	Community Strategy Officer, Devon County Council
Ian Pearson	Joint Commissioning Manager - Adult Mental Health, NHS Devon
Ian Tearle	Head of Health Policy, NHS Devon
Jaine Keable	Consortia Lead on Health & Wellbeing South West, Well UK
Janine Gassmann	Overview & Scrutiny Committee, Devon County Council
Jennie Stephens	Interim Executive Director, Adult & Community Services, Devon County Council
Jenny Richards	Joint Strategic Commissioning Manager (Older People), Strategic Commissioning, Devon County Council
Jill Davies	Chief Officer, South Hams CVS
John Bunting	Chief Executive, Exeter Council for Voluntary Services
Julia Page	Head of Health Improvement (North), NHS Devon
Karen Nolan	Chief Executive, West Devon Community & Voluntary Services
Kristian Tomblin	Team Manager, Devon Drug & Alcohol Action Team
Lucie Spiers	Service Review & Development Officer, Devon Supporting People
Lucy O'Loughlin	Head of Health Improvement (East & Mid), NHS Devon
Lynn Thornton	Rural & Community Travel Adviser, Devon County Council
Marguerite Shapland	Non Executive Director, NHS Devon
Mark Goodman	Manager, Voluntary Youth Services Devon
Mary Nisbett	Chief Executive, Westbank Healthy Living Centre, Exminster
IVIGITY TVISDCLL	Gind Excoding, westbank ricality Living Gentle, Eximister

Matt Edmunds	Public Health Information Analyst, NHS Devon
Matthew Byrne	Carers Link Development Manager, Devon Carers Link, Westbank
Melanie Burke	Assistant Management Information Officer, Adult & Community Services
Neil McNeill	Assistant Director Special Projects, Devon Provider Services
Nick Hill	Adult Mental Health Strategic Planning Group
Patricia Duplock	Representation Support Worker (Torridge CVS)
Patsy Temple	Head of Health Improvement (Exeter), NHS Devon
Paul Collinge	Joint Commissioning Manager - Older People, Adult & Community Services
Paul Grimsey	Head of Safeguarding, Adult & Community Services, Devon County Council
Peter Dunning	Chairman, Community Council of Devon
Peter Jeffs	Corporate Director, East Devon District Council
Polly Randall-Johnson	Inspector, Devon & Cornwall Constabulary
Rebecca Keeling	Policy & Contract Co-ordinator, Link Devon
Robert Hawken	Chair, Learning Disability Partnership
Sally O'Donnell	Co-Chair, Learning Disability Partnership
Dr Sarah Tickner	Specialty Registrar in Public Health, NHS Devon
Simon Chant	Head of Public Health Intelligence, NHS Devon
Stephanie Long	Independent Chair, Safeguarding Adults Board
Sue Craythorne	County Community Strategy Officer, Devon County Council
Sue Howell-Richardson	Operational Support Manager, Age Concern Devon
Tim Morgan	Service User & Carer Lead, Devon Drug & Alcohol Action Team
Tim Tod	Chief Executive, Young Devon
Tina Henry	Head of Health Improvement (Teignbridge, South & West Devon), NHS Devon
Tracy Smith	Personal Assistant, SOS Global, The Innovation Centre, University of Exeter
Yvonne Christopher	Local Services Co-ordinator, Tiverton Children's Centre
Yvonne Wardrop	Chair, Senior Council for Devon
-	<del></del>

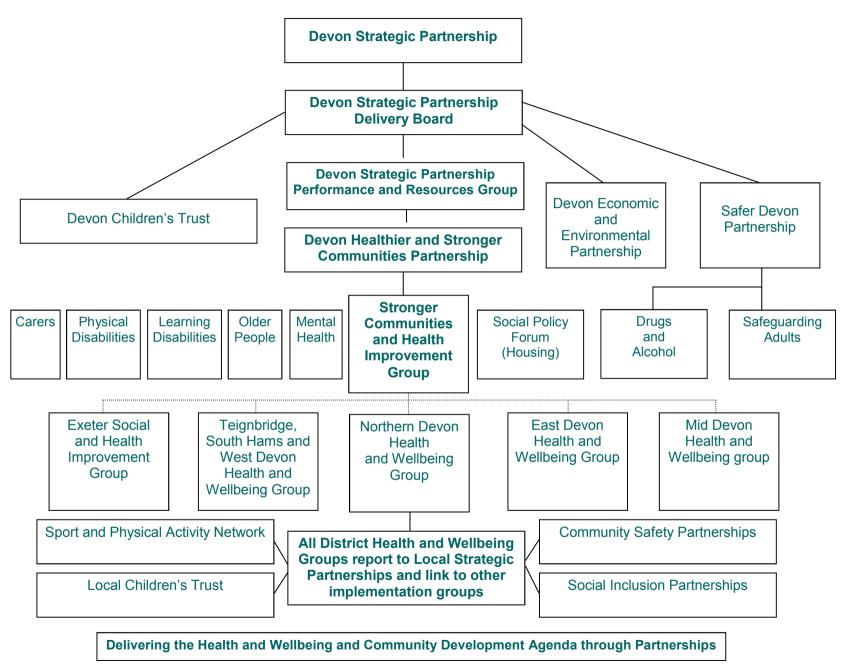
# Healthier and Stronger Communities Partnership Vision and Terms of Reference

#### 1. Vision

1.1 Everyone in Devon has the opportunity to live in a healthy community which has the following characteristics; learning, fair and just, active and empowered, influential, economically strong, caring, green, safe, welcoming and lasting. People will also have their physical, social and emotional needs met, through enabling individuals, families and communities to access the support they need. The combined impact will be to reduce the health inequalities that exist across the County.

#### 2. Terms of Reference

- to have delegated authority from the Devon Strategic Partnership to sign off the delivery plans of the Strategic Implementation Groups (SIGs)
- to maintain an awareness of national policy developments and to interpret these into the local context
- to co-ordinate and assure performance against Devon Local Area Agreement 2008 -2011 targets ensuring delivery plans and recovery plans where performance is off target are in place reporting to the Devon Strategic Partnership Delivery Board
- to co-ordinate and assure performance against the Way Ahead action plan
- to understand the needs of Devon's diverse communities through the Joint Strategic Needs Assessment (JSNA) process drawing on various sources of local intelligence
- to identify effective interventions to address those needs
- to co-ordinate the work programme across the Strategic Planning groups and promote appropriate collaboration to ensure coherence with the Way Forward strategy and Local Area Agreement 2008 – 2011 targets
- to commission task and finish groups to provide expert advice



Page 11 of 11