Agenda Item No. 11

	Health and Wellbeing Board 2 December 2015		
Report title	Updated Health and Wellbeing Board Priorities		
Cabinet member with lead responsibility	Councillor Sandra Samuels Health and Wellbeing		
Wards affected	All		
Accountable director	Linda Sanders, Community		
Originating service	Communities/Health, Wellbeing and Disability		
Accountable employee(s)	Viv Griffin Tel Email	Service Director Disability and Mental Health 01902 55(5370) Vivienne.Griffin@wolverhampton.gov.uk	

Recommendation(s) for action or decision:

The Health and Wellbeing Board is recommended to:

- 1. Consider and comment on the updated priorities of the Wolverhampton Joint Health and Wellbeing Strategy 2013-2018 developed at the Health and Wellbeing Board "Away Day" on 7 October 2015 (see paragraph 3.2).
- 2. Consider and comment on the need for an overarching mission statement.

1.0 Purpose

1.1 The purpose of this report is to review the priorities of the Wolverhampton Joint Health and Wellbeing Strategy – 2013-2018 and consider the need for changing these priorities.

2.0 Background

- 2.1 The Health and Wellbeing Board previously agreed the priorities for the Board and its sub-groups for 2013/14. The Health and Wellbeing Strategy is based on the following five key priorities:
 - Wider Determinants of Health
 - Alcohol and Drugs
 - Dementia (early diagnosis)
 - Mental Health (Diagnosis and Early Intervention)
 - Urgent Care (Improving and Simplifying)
- 2.2 The progress on the above priorities has been reviewed and a summary was presented to the Board at its "Away Day", by the lead officers. In summary progress highlights are shown below:

Wider Determinants of Health and Alcohol and Drugs:

- A Multi-Agency City Wide Infant Mortality Steering Group has been established which developed a three year action plan to reduce the number of infant death with particular focus on reducing the number of woman who smoke during pregnancy; and supporting healthy maternal and infant nutrition and safe home environments for babies. There has been a large degree of progress for instance the use of carbon monoxide monitors by midwives and health visitors and the use of universal healthy start vitamins.
- The Obesity Call to Action launched in 2014 has many strands. The Health and Wellbeing Board endorsed the first obesity action plan for the city. There has been much media interest in some of the new programmes and campaigns such as the Million Miles, The Member Champions and 5 Star Families Programme. Some firm foundations have been laid for this crucial piece of work.
- The Wolverhampton Alcohol Strategy came to its natural conclusion this year and has achieved many positive outcomes. Particularly in relation to supporting a strong night time economy and reducing the crime and disorders associated with alcohol misuse. The strong partnership that is evolved over the past five years has formed the Wolverhampton Tobacco and Substance Misuse Alliance which is in the progress of setting fresh priorities for the coming 12 months.

Dementia:

- Dementia plans are currently being revised.
- Dementia Friends training sessions are being held for all members of staff within the Science Park.
- Wolverhampton has achieved a diagnosis rate of Dementia above the set target.

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Mental Health:

- Wolverhampton has included mental health in its Better Care Fund programme.
- The Mental Health Strategy and the National Crisis Concordat has been updated.
- A Street Triage Service has been established jointly by the Clinical Commissioning Group and Black Country Partnership Foundation Trust.
- The Psychiatric Outreach Service has been reviewed and enhanced.
- The Headstart Programme is progressing well.

Urgent Care:

- A Joint Urgent Care Strategy has been developed across stakeholders. Its implementation is being managed via the Health Economy wide Systems Resilience Group.
- A new primary care led Urgent Care Centre will be opened in April 2016 providing a 24/7 service for urgent but non-accident and emergency patients. It will incorporate the Walk In Centre currently housed at Showell Park, the GP Out of Hours service and will be integrated with NHS 111.

3.0 Progress, options, discussion, etc.

- 3.1 The progress on the identified priorities has been reviewed and an "Away Day" was held to reconsider the priorities in order to sustain progress.
- 3.2 The following key priorities have been identified as a result of the "Away Day":
 - Childhood Obesity
 - Children and Adolescent Mental Health
 - Integration
 - Care closer to home
 - o Dementia
- 3.3 It should be noted that if these new priorities are adopted the following priorities would be dropped from the Health and Wellbeing Strategy:
 - Infant mortality
 - Urgent care
 - Alcohol and Drugs

With regard to infant mortality a Health Scrutiny Review was undertaken from July 2014 to March 2015. A key element of the scrutiny review was the city-wide Infant Mortality Action Plan that was approved by the Health and Wellbeing Board on the 4 March 2015. The recommendations from the scrutiny review were also adopted at the meeting of the Health and Wellbeing Board on 7 October 2015. The Action Plan is driving a positive change in infant mortality.

The Health and Wellbeing Board is recommended to consider and comment on the priority for urgent care and whether it should be included in the refreshed

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Wolverhampton Joint Health and Wellbeing Strategy – 2013-2018. Urgent care was not fully represented on the "Away Day".

3.4 The following chart represents the key principles, priorities and the related outcomes and long term goals.

Principles and Values Prevention Health Inequalities 				
Theme and Priority	Tools	Outcomes	Long-term Goals	
Childhood Obesity	Power of the Board	Improved quality of life	↓ Obesity	
Children and Adolescent Mental Health	Knowing who / where / what	Improved school performance	 ↑ Life expectancy ↑ Quality of life 	
 Integration Care closer to home Dementia 	Prevention focus evidence-base experimental	Improved access and community re-space Dementia friendly	↑ School performance	
	Work stream interventions	status Reduction in self-harm		
Safeguarding (cross cutting theme)				

4.0 Financial implications

4.1 There are no anticipated financial implications related to this report. [GS/12112015/X]

5.0 Legal implications

5.1 There are no anticipated legal implications to this report. [TS/13112015/H]

6.0 Equalities implications

6.1 An equality analysis has been completed for the Joint Health and Well Being Strategy 2013-2018. An initial equality analysis has been undertaken related to this report. If the priorities are accepted a full equality analysis will be undertaken.

7.0 Environmental implications

7.1 There are no environmental implications related to this report.

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8.0 Human resources implications

8.1 There are no anticipated human resource implications related to this report.

9.0 Corporate landlord implications

9.1 This report does not have any implications for the Council's property portfolio.

10.0 Schedule of background papers

10.1 Wolverhampton Joint Health and Wellbeing Strategy 2013-2018 Wolverhampton Joint Strategic Needs Assessment 2012