



Committee and date

Shadow Health and Wellbeing Board

23 January 2013

9.30am

Item

5

Public

Health and Wellbeing Executive Report to the Board

Responsible Officer Rod Thomson

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1. Summary

1.1 Where appropriate the Health and Wellbeing Executive implements decisions, actions and the HWB Strategy as required by the Health and Wellbeing Board. This report aims to highlight issues raised at the Executive either for information, endorsement or decision.

1.2 For Information:

1.2.1 **Personal Health Budgets (PHBs)** –The Health and Wellbeing Executive has discussed the introduction of Personal Health Budgets (PHBs), in particular the feedback from pilot areas and the planned roll out to the rest of the NHS. PHBs will raise many issues, as well as opportunities, for joint working and collaborative commissioning, and the Health and Wellbeing Executive will explore this in more detail before reporting to the Health and Wellbeing Board.

1.3 For Endorsement:

1.3.1 **Adult Social Care Commissioning** report was presented by Stephen Chandler and highlighted the Adult Social Care Peer Review and action plan that was presented to Safe and Confident and Healthy Scrutiny Committee on the 5th of Dec. The action plan emphasises improved commissioning arrangements and will provide an excellent vehicle for joining up services within Shropshire Council and also across organisations to include the CCG, other Health Services and stakeholders.

The Adult Social Care Peer review and separately commissioned independent review have established that more needs to be done to improve collaborative work across agencies to deliver Adult Social Care.

Integration between health and social care is the main purpose of the Health and Wellbeing Board and governance arrangements.

Plans to take this forward include investigating areas for joint working and collaboration, using the JSNA, demography and demand profiling to provide the evidence and action planning.

Potential areas for early collaboration include (but not limited to); **assistive technologies and telehealth/care, Reablement, Dementia Services.**

Further consideration and development work needs to be undertaken by officers, however currently it is proposed to develop a sub-group of the Health and Wellbeing Executive to drive this work forward; and to further develop the JSNA highlighting the needs around Adult Social Care.

1.3.2 Recently published **NHS Planning Guidance** (papers available on the Shropshire Council's Committee website - Everyone Counts and CCG Operating Principles) mandates the NHS to improve to achieve high standards of quality in the following four measures:

- Potential years of life lost from causes considered amendable to healthcare;
- Avoidable emergency admissions (a composite of four NHS Outcome Framework indicators);
- The Friends and Family Tests; and
- Incidence of healthcare associated infections (MRSA and Clostridium difficile)

The guidance also requires the CCGs to 'identify and agree three locally identified measures', with consideration of the NHS Commissioning Board and with consideration by the Health and Wellbeing Boards and key stakeholders (especially patients and local community representatives).

The CCG have considered the local measures taking into account the Health and Wellbeing Strategy, their own commissioning intentions, priorities and requirements. The CCG have not yet approved the proposed measures, however the CCG and the Partnership would like to present the following **possible** measures to the Stakeholder event on January 31st:

- Maternal smoking at delivery
- Estimated diagnosis rate for people with dementia
- Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services
- People who have had a stroke who are admitted to an acute stroke unit within four hours of arrival to hospital
- A measure around the delivery and take up of assistive technology (to be determined)
- Improving the health of people with a disability - Measuring the number of people with learning disabilities who take up their Health check

Further information and clarity on the CCG measures and indicators and how they fit within the context of the HWBB will be delivered at the next HWB Board.

1.4 For Decision

1.4.1 Inequalities Strategy – Separate Agenda Item – Caron Morton

2. Recommendations

2.1 That the Board:

1. Accept and provide any comment on section **1.2 Personal Health Budgets** - For information
2. Endorse the development work taking place with **1.3.1 Adult Social Care Commissioning** and provide comment on the proposed mechanism for delivery
3. Endorse the proposal for the development of local measures **1.3.2 NHS Planning Guidance**. The final proposed measures will come back to the HWB Board for approval.
4. **1.4 Inequalities Strategy** – See separate report/ agenda item

REPORT

3. Risk Assessment and Opportunities Appraisal

(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

- 3.1 There are numerous opportunities and risks that arise from partnership working; below are a few highlights that will need to be considered as organisations work together.

Risks Personal Health Budgets (PHBs)	Impact	Mitigation
Increasing rather than reducing Health Inequalities due to processes and systems needed to manage personal health budgets	There is a medium chance of this occurring as implementing PHBs is complex, the negative impact on some could high . Mitigation is crucial.	Careful consideration and working across organisations to determine how PHBs can be implemented to provide a benefit for all.
Risks Adult Social Care Commissioning	Impact	Mitigation
Not engaging in joint working and	Low likelihood of occurring as organisations and officers	Delivery of joined up services in a considered approach, as

collaboration is the largest risk for Adult Social Care. Budget reductions require organisations to join up services.	are committed to delivery however, not engaging in joint working would have a high impact on adults requiring social care services	part of the HWB Board, will provide a sound platform of support.
Risks Adult NHS Planning Guidance	Impact	Mitigation
Shropshire not being able to deliver on agreed measures.	The measures currently being considered will have a direct impact on the Health and Wellbeing Strategy. Not delivering on these measures will likely have a high impact on the some parts of the HWB Strategy and improvements in the delivery of health and social care in Shropshire.	Joint working and collaboration to ensure delivery of the measures and the HWB Strategy
Opportunities	Impact	Action
Joint working and Collaborative commissioning across statutory agencies in the HWBB	Potential high positive impact and reduction of total spend across agencies	Joint working and collaboration to determine best areas for closer working and commissioning

3.2 It is anticipated that all Human Rights, Equalities, Community and Environmental consequences are the responsibility of individual organisation, and no issues are anticipated to arise from directly from this report.

4. Financial Implications

4.1 There are no immediate financial implications. However, setting up Shropshire's Health and Wellbeing Board with good governance and collaboration will in the future require consideration of financial resources and their distribution.

5. Background

5.1 As the Health and Wellbeing Board and Executive develop their governance arrangements and to ensure good communication, this report will highlight key pieces of work for both groups to consider.

6. Additional Information

6.1 None at this time.

7. Conclusions

7.1 As above.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

CCG Outcome Indicator Pack – on the website

Everyone Counts – on the website

Cabinet Member (Portfolio Holder)

Ann Hartley

Local Member

N/A

Appendices

None