

Item No. 7.	Classification: Open	Date: 19 December 2013	Meeting Name: Health and Wellbeing Board
Report title:		Joint Health and Wellbeing Strategy action plan report back	
Wards or groups affected:		All	
From:		Romi Bowen, Strategic Director of Children's and Adults' Services	

RECOMMENDATIONS

1. The board is requested to:
 - a) Note progress implementing the Joint Health and Wellbeing Strategy action plan
 - b) Agree next steps, including the proposed extension activities as set out in paragraph 9, resource commitments in paragraph 10, and coordination of outreach activity in paragraph 11
 - c) Request that the children's commissioning board, and health and social care partnership board oversee action plan's implementation, reporting back to the board on progress in March 2014, as set out in paragraph 13

EXECUTIVE SUMMARY

2. Following agreement at the October board meeting of the 2013-14 Joint Health and Wellbeing Strategy (JHWS) action plan, this paper outlines progress to date implementing the seven priority actions.

BACKGROUND INFORMATION

3. At its October meeting, the health and wellbeing board agreed to adopt the JHWS action plan as the basis of its work programme for this year, and to nominate a board member as champion/co-champion for each action. The seven actions are:
4. Priority 1:
 - Family fusion
 - Pop-up children's centres
 - Healthy schools
5. Priority 2:
 - Pop-up health checks
 - Pop-up wellbeing shops
6. Priority 3:
 - Silver surfers
 - Southwark Special Sports

KEY ISSUES FOR CONSIDERATION

7. Work has begun to develop the scope, timescales and costs of each action. Underpinning this work is a review of the evidence base and outcomes frameworks to ensure that proposed actions are cost effective and will achieve the outcomes intended. Appendix 1 contains a summary of activity to date taking forward each action.
8. As discussed by members at the October board, some actions are more 'implementation-ready' than others, with the pace of progress varying depending on the amount or complexity of groundwork required. For example, proposals under the healthy schools, pop-up health checks and pop-up children's centre actions are anticipated to launch in the early months of next year. Similarly Southwark special sports is proposed for June/July in line with school calendars. The family fusion, pop-up wellbeing shops and silver surfers actions require further development, with the intention that launches will be in place by Easter, with activity scheduled throughout the year.
9. A theme emerging from the work so far is that there is much potential to align existing work to the actions, and to consider expanding the scope to encompass other partnership work. For example:
 - a) Develop a 'pop-in' children's centres programme alongside the 'pop-up' – such as locating services such as baby and toddler clinics, GP services or housing advisors in children's centres as drop-in sessions or appointment clinics
 - b) Align engagement activity for populations with poor lifestyle/health, for example smokers could be targeted for both health checks and smoking cessation
 - c) Extend or align the health checks programme with cancer screening outreach work or flu immunisations programmes; the health check methodology could also be extended to other key groups such as pregnant women or new mothers, or adolescents
 - d) Expand the special sports day to a week-long holiday scheme, with links through to existing Sports Network and Youth Games programmes
10. The working assumption has been to use existing resources where possible. In considering the proposals, members are asked to review what existing resources or funding streams could be utilised – for example combining communications or engagement resources, committing staff to provide support, or providing resources such as venues for pop-ups. The council's communications team is able to support promotional campaigns within existing resources and media channels.
11. Another common theme is that many of the programmes have an outreach element, with the same population groups – such as young families, or adults with unhealthy lifestyles – being targeted by multiple services. It is proposed that these are reviewed and combined to improve effectiveness and value for money.
12. In addition, activity to date has highlighted the need for multi-agency fora to develop these and other potential service redesign proposals. Members are urged to consider how new and existing partnership arenas can be best utilised in this regard.

13. In order to ensure that progress against objectives is achieved quickly and effectively, it is proposed that the children’s commissioning board and health and social care partnership board are mandated to support the implementation of the JHWS action plan alongside the respective action champion, with champions reporting back to the health and wellbeing board in March.

Policy implications

14. Southwark Council and NHS Southwark Clinical Commissioning Group have a statutory duty under the 2012 Health and Social Act to produce a JHWS for the borough through the health and wellbeing board and to have regard to the strategy when commissioning and planning services. The agreed joint strategy and its supporting action plan have implications for individual partner’s strategies and delivery arrangements, including the Council Plan and clinical commissioning group operating plan among others.

Community impact statement

15. There are substantial health inequalities in Southwark. Those on lower incomes, with disabilities, some ethnic groups and those who are vulnerable and likely to suffer poor health and wellbeing and/or die young. There are also specific inequalities between gender, ethnicity and sexual orientation groups. The JHWS embeds a commitment to reducing these inequalities with a common aim that as a result of the strategy these inequalities are lessened, and the actions set out in this report support this ambition.

Legal implications

16. The board is required to produce and publish a joint health and wellbeing strategy on behalf of the local authority and clinical commissioning group. The actions outlined in this report support the strategy’s implementation.

Financial implications

17. Implementing the actions may have cost implications, and these are being identified through the ongoing work to implement the actions. As outlined in paragraph 10, it is anticipated that agreed actions will be funded from existing resources from across the partnership, including refocusing existing programmes, pooling monies or exploring external funding opportunities.

BACKGROUND PAPERS

Background Papers	Held At	Contact
None		

APPENDICES

No.	Title
Appendix 1	Joint Health and Wellbeing Strategy actions’ implementation plans

AUDIT TRAIL

Lead Officer	Romi Bowen, Strategic Director of Children's and Adults' Services	
Report Author	Elaine Allegretti, Head of Strategy, Planning and Performance, Children's and Adults' Services	
Version	Final	
Dated	9 December 2013	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Director of Legal Services	No	No
Strategic Director of Finance and Corporate Services	No	No
Strategic Director of Children's and Adults' Services	Yes	Yes
Date final report sent to Constitutional Team		9 December 2013