

# HEALTH AND WELLBEING BOARD 19 November 2015

**ITEM 8** 

Report of the Acting Strategic Director - Adults and Health and Acting Director of Public Health

# Health and Wellbeing Policy Update

# SUMMARY

- 1.1 Derby Health and Wellbeing Board has a responsibility to lead and advise on work to improve the health and wellbeing of the population of Derby and specifically to reduce health inequalities. It has a remit to support the development of improved and joined up health and social care services. This briefing provides the Board an overview and update of some of the Government's current health and social care policies to support the Board in delivery of these responsibilities.
- 1.2 The policy areas included in the briefing are:
  - Five Year Forward View;
  - New models of care;
  - Devolution;
  - Consensus Statement on Improving Health and Wellbeing;
  - Health and Social Care (Safety and Quality) Act.
- 1.3 It is important for the Health and Wellbeing Board to remain updated on these key policy areas, in particular new models of care and devolution as it is likely that, dependent on their relative success, they will shape the future health and social care system.

# RECOMMENDATION

- 2.1 To note the health and wellbeing policies detailed in the briefing.
- 2.2 That the Board considers its role and responsibilities in supporting the delivery of the Five Year Forward View.
- 2.3 That the Board seeks assurance that the new duties established within the Health and Social Care (Safety and Quality) Act 2015 are being implemented locally.
- 2.4 To agree the role of the Health and Wellbeing Board in the shaping of any local progression of models of care and health and social care devolution.

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2.5 To agree to locally embed and implement the commitment to integrated working to improve health and wellbeing as set out in the Consensus Statement on Improving Health and Wellbeing.

# **REASONS FOR RECOMMENDATION**

3.1 To support the Health and Wellbeing Board in shaping and leading the local health and social care system.

# SUPPORTING INFORMATION

#### 4.1 **Five Year Forward View**

The Five Year Forward View suggests that if no significant action is taken to tackle the current challenges in the NHS, or if action is just focussed on the short-term, it will lead to three widening gaps:

- The health and wellbeing gap;
- The care and quality gap;
- The funding and efficiency gap.

(Department of Health, 2014, p.7).

The Forward View outlines what the future will look like and proposes two changes:

# 1. A new relationship with patients and communities with a focus on four areas:

- Getting serious about prevention;
- Empowering patients;
- Engaging communities;
- NHS as a social movement.

#### 2. New models of care:

#### 4.2 New models of care

In November 2014, NHS England published the <u>Five Year Forward View</u> which sets out a vision for the future of the NHS. It articulates why change is needed, what that change might look like and how it can be achieved. It describes seven models of care which could be provided in the future:

- Multispecialty Community Providers (MCPs);
- Primary and Acute Care Systems (PACS);
- Urgency and emergency care networks;
- Viable small hospitals;
- Specialised care;
- Modern maternity services;

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• Enhanced health in care homes.

In January 2015, the NHS invited individual organisations and partnerships to apply to become 'vanguard' sites for the new care models programme, one of the first steps towards delivering the Five Year Forward View and supporting improvement and integration of services.

# 4.3 **Devolution**

The devolution of power and responsibility from central government to local authorities and local areas is a key policy drive of the current government. The Cities and Local Government Devolution Bill 2015/16 recently passed its second reading and if introduced will allow Secretaries of State to remove duties and powers from public bodies, including NHS trusts and commissioners, and transfer them to local authorities. It will provide a statutory basis for various elements of the devolution deals agreed to date.

A number of devolution deals have already been agreed, Greater Manchester, Sheffield; West Yorkshire; Cornwall with a further 38 submitted to Government as of 4<sup>th</sup> September, including 'D2N2' – Derbyshire, Derby, Nottinghamshire and Nottingham. These will be considered as part of the upcoming Spending Review Process.

# 4.4 Consensus Statement on Improving Health and Wellbeing

A 'Consensus Statement on Improving Health and Wellbeing' has been agreed between: NHS England; Public Health England; Local Government Association; Chief Fire Officers Association; Age UK.

The statement describes an intention 'to work together to encourage joint strategies for intelligence-led early intervention and prevention; ensuring people with complex needs get the personalised, integrated care and support they need to live full lives, sustain their independence for longer and in doing so reduce preventable hospital admissions and avoidable winter pressures/deaths'.

# 4.5 Health and Social Care (Safety and Quality) Act 2015

The Health and Social Care (Safety and Quality) Act 2015 came into force on 1<sup>st</sup> October 2015. The Act reinforces existing good practice and obligations on health and social care professionals and provides statutory support for the seventh Caldicott principle that – "the duty to share information can be as important as the duty to protect patient confidentiality". It includes two new duties:

- A requirement for health and adult social care organisations to use a consistent identifier (the NHS Number) for sharing data for direct care of a patient;
- A legal duty requiring health and adult social care bodies to share information with each other for the direct care of a patient.

The Information Governance Alliance (IGA) is offering new guidance and a short series of webinars to support the implementation of the new Act - see <u>ICA news</u> <u>website</u>.

4.6 Further detail on each of these policy areas can be found in the attached briefing paper.

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# OTHER OPTIONS CONSIDERED

5.1 None.

#### This report has been approved by the following officers:

Legal officer Financial officer Human Resources officer Estates/Property officer Service Director(s) Other(s)	

For more information contact:	Alison Wynn 01332 643106 alison.wynn@derby.gov.uk
Background papers:	Health and Wellbeing Board: Policy Update
List of appendices:	Appendix 1 – Implications
	Appendix 2 – Health and Wellbeing Board: Policy Update

# IMPLICATIONS

#### Financial and Value for Money

1.1 There is no current financial impact relating to this report.

#### Legal

2.1 The report highlights two new statutory duties in relation to the sharing of information for direct care of a patient.

# Personnel

3.1 None directly arising from this report.

# IT

4.1 None directly arising from this report.

#### **Equalities Impact**

5.1 None directly arising from this report.

# Health and Safety

6.1 None directly arising from this report.

#### **Environmental Sustainability**

7.1 None directly arising from this report.

#### Property and Asset Management

8.1 None directly arising from this report.

#### **Risk Management**

9.1 None directly arising from this report.

# Corporate objectives and priorities for change

10.1 This report supports the Board in maintaining oversight of key policies that could impact on corporate objectives and priorities for change.